

You don't have to go this far to treat acid reflux effectively



Zantac 300

RANITIDINE

The sooner the better

PRESCRIBING INFORMATION: INDICATIONS: Duodenal ulcer, benign gastric ulcer, ulcers associated with non-steroidal anti-inflammatory drugs (NSAIDs), oesophageal reflux disease, severe oesophagitis, chronic episodic dyspepsia. **DOSAGE: Adults:** Duodenal ulceration and gastric ulceration: A single 300mg dose at bedtime or 150mg twice daily in the morning and evening for four weeks. Alternatively, in duodenal ulcers, 300mg in the morning and evening for four weeks to achieve optimal healing. Continued maintenance treatment of 150mg at bedtime is recommended for patients with a history of recurrent ulceration. Ulcers following non-steroidal anti-inflammatory drug therapy or associated with continued non-steroidal anti-inflammatory drugs: 150mg twice daily for up to eight weeks. Chronic episodic dyspepsia: 150mg twice daily for six weeks, investigate early relapsers and non-responders. Oesophageal reflux disease: 300mg at bedtime or 150mg twice daily for up to eight weeks. Severe oesophagitis: 300mg four times daily for up to eight weeks (see data sheet for full dosage instructions). **CONTRA-INDICATIONS:** Patients with known hypersensitivity to ranitidine. **PRECAUTIONS:** Exclude the possibility of malignancy in gastric ulcer before instituting therapy, especially in middle-aged patients with new or recently changed dyspeptic symptoms. Regular supervision of patients with peptic ulcer and on NSAID therapy is recommended especially if elderly. Reduce dosage in the presence of severe renal failure (see

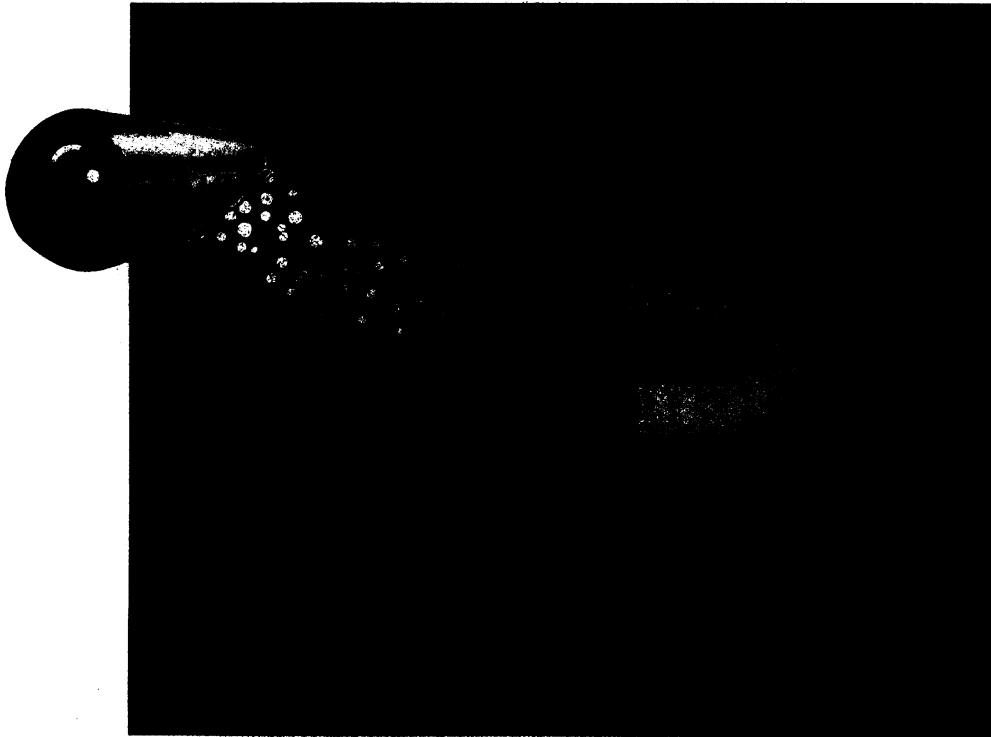
data sheet). Like other drugs, use during pregnancy and lactation only if strictly necessary. **SIDE EFFECTS:** Headache, dizziness, skin rash, occasional hepatitis. Rarely, reversible mental confusion states, usually in very ill or elderly patients. Rare cases of leucopenia and thrombocytopenia, usually reversible, agranulocytosis and pancytopenia. Hypersensitivity reactions, anaphylactic shock. Rare cases of breast symptoms in men. As with other H₂-receptor antagonists rare cases of bradycardia, A-V block and asystole (see data sheet). **PRESENTATIONS:** Zantac 150 Tablets each containing 150mg ranitidine (Product Licence number 0004/0279, 60 tablets £29.76); Zantac 300 Tablets each containing 300mg ranitidine (Product Licence number 0004/0302, 30 tablets £27.43); Zantac Dispersible Tablets each containing 150mg ranitidine (Product Licence number 0004/0298, 60 tablets £31.25); Zantac Syrup each 10ml dose containing 150mg ranitidine (Product Licence number 0004/0310, 300ml bottle £22.32). **PRODUCT LICENCE HOLDER:** Glaxo Operations U.K. Limited, Greenford, Middlesex UB6 0HE.

Zantac is a Glaxo trade mark
Further information is available on request from:
Glaxo Laboratories Limited, Greenford, Middlesex UB6 0HE.
Tel: 081-422 3434

Glaxo 

PROGRESS

In The Control Of Pancreatic Insufficiency



creon[®] 
pancreatin

RIGHT ON TARGET – RIGHT FROM THE START

Prescribing Information – Presentation: Brown-yellow capsules containing enteric coated granules of pancreatin equivalent to: 9,000 BP units of amylase, 8,000 BP units of lipase, 210 BP units of protease. Available in packs of 100. Basic NHS price £13.33. **Indication:** Pancreatic exocrine insufficiency. **Dosage and administration:** Adults and children: Initially one or two capsules with meals, then adjust according to response. The capsules can be swallowed whole, or for ease of administration they may be opened and the granules taken with fluid or soft food, but without chewing. If the granules are mixed with food, it is important that they are taken immediately, otherwise dissolution of the enteric coating may result.

Contra-indications, Warnings, etc: Contra-indications: Substitution with pancreatic enzymes is contra-indicated in the early stages of acute pancreatitis. **Warnings:** Use in pregnancy: There is inadequate evidence of safety in use during pregnancy. The product is of porcine origin. Rarely cases of hyper-uricosuria and hyper-uricaemia have been reported with high doses of pancreatin. Overdosage could precipitate meconium ileus equivalent. Perianal irritation could occur, and, rarely, inflammation when large doses are used. **Product Licence Number:** 5727/0001. **Name and address of Licence Holder:** Kali Chemie Pharma GmbH, Postfach 220, D-3000, Hannover 1, West Germany.

duphar Further information is available from:
Duphar Laboratories Limited, Gaters Hill, West End, Southampton SO3 3JD. Tel: 0703 472281.

CRA/PEI/1/89

CLOCKWORK ORANGE



Fybogel Orange

Ispaghula Husk **BP**
REGULAR AS CLOCKWORK

FYBOGEL PRESCRIBING INFORMATION Indications: Conditions requiring a high-fibre regimen. **Dosage and Administration:** (To be taken in water) Adults and children over 12: One sachet morning and evening. Children 6-12 years: Half to one level 5ml spoonful depending on age and size, morning and evening. Children under 6 years: To be taken only on medical advice. **Contra-indications, Warnings, etc.:** Fybogel is contra-indicated in cases of intestinal obstruction and colonic atony. Each sachet contains 3.5g Ispaghula husk BP. **Basic NHS Price:** At May '90 60 sachets £4.24, Eire: 60 sachets IR £4.92. **PL No.:** Fybogel 44/0041, Irish PA 27/21, Fybogel Orange 44/0068, Irish PA 27/22. **Reference:** 1. Data on file, 394 Patient Study, Reckitt and Colman Pharmaceuticals, 1988. Fybogel is a trade mark of Reckitt & Colman Products Ltd. Further information is available from Reckitt & Colman Pharmaceuticals, Hull HU8 7DS.





References 1. Difference in cost between once-nightly four week courses of 'Tagamet' and the least expensive alternative H₂-antagonist brand if 90% of patients currently receiving other brands were prescribed 'Tagamet' (prices from MIMS, January 1991). 2. Medicalfocus (1990). Produced by Taylor Nelson Healthcare using data derived from the VAMP Research Bank. 3. Data on File Smith Kline & French Laboratories. 4. Scriptcount: MAT 21.12.90.

Prescribing Information. Presentation 'Tagamet Tiltab' Tablets, PL 0002/0128, each containing 800 mg cimetidine. 30 (2 calendar strips of 15 tablets), £17.76. 'Tagamet' Tablets, PL 0002/0092, each containing 400 mg cimetidine. 60 (4 calendar strips of 15 tablets), £18.69. 'Tagamet Tiltab' Tablets, PL 0002/0063R, each containing 200 mg cimetidine. 120 (4 blister strips of 30 tablets), £17.80. 'Tagamet' Effervescent Tablets, PL 0002/0206, each containing 400 mg cimetidine. 60 (3 tubes of 20 tablets) £18.69. 'Tagamet' Syrup, PL 0002/0073R, containing 200 mg cimetidine per 5 ml. 600 ml, £25.90.

Uses Duodenal and benign gastric ulceration, including that associated with NSAIDs, recurrent and stomal ulceration, oesophageal reflux disease. Other conditions where reduction of gastric acid by 'Tagamet' is beneficial: persistent dyspeptic symptoms, particularly meal-related, including such symptoms associated with NSAIDs; prophylaxis of stress-induced gastrointestinal haemorrhage and of acid aspiration (Mendelson's) syndrome; malabsorption and fluid loss in short bowel syndrome; to reduce degradation of pancreatic enzyme supplements; Zollinger-Ellison syndrome.

Dosage Usual maximum, 2.4 g/day. For full dosage instructions see Data Sheet. **Adults:**

Oral: In duodenal ulcer or benign gastric ulcer, 800 mg once a day at bedtime. Otherwise usual dosage, 400 mg b.d. with breakfast and at bedtime. Alternatively 200 mg t.d.s with meals and 400 mg at bedtime (1.0 g/day) or if inadequate, 400 mg q.d.s. with meals and at bedtime (1.6 g/day). Treat for at least 4 weeks (6 weeks in benign gastric ulcer, 8 weeks in ulcer associated with continued NSAIDs). For continued treatment, 400 mg at bedtime or else 400 mg morning and at bedtime. To prevent relapse of peptic ulcer, usually 400 mg at bedtime or else 400 mg morning and at bedtime. **Oesophageal reflux disease:** 400 mg q.d.s. with meals and at bedtime (1.6 g/day) for 4 to 8 weeks.

Prophylaxis of stress-induced gastrointestinal haemorrhage, 200-400 mg every 4-6 hours.

Prophylaxis of acid aspiration syndrome, 400 mg 90-120 minutes before induction of general anaesthesia or at start of labour; up to 400 mg repeated (parenterally if appropriate) at 4-hourly intervals while risk persists. Do not use 'Tagamet' Syrup.

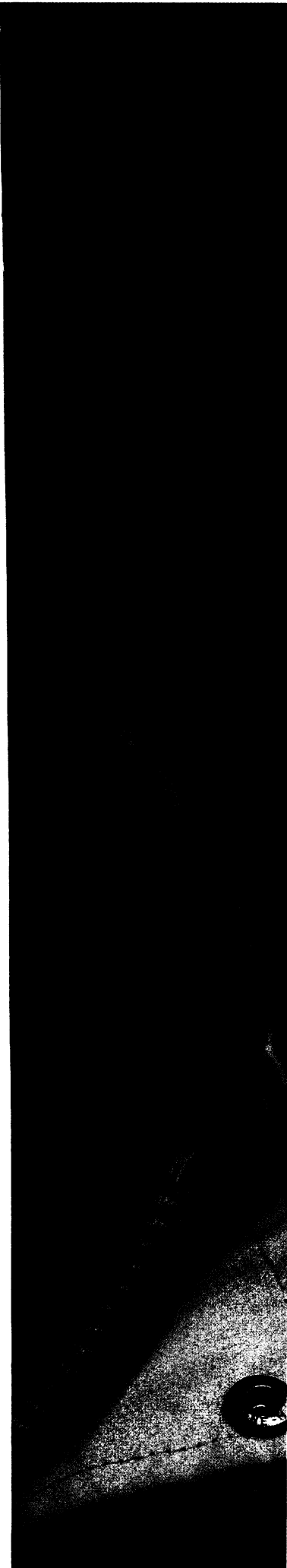
Zollinger-Ellison syndrome, 400 mg q.d.s. or more a day. To reduce degradation of pancreatic enzyme supplements, 800-1600 mg in 4 divided doses one to one and a half hours before meals. Dissolve effervescent tablets in a glass of water. **Children:** Over 1 year: 25-30 mg/kg/day, divided.

Contraindication Hypersensitivity to cimetidine. **Precautions** Impaired renal function: reduce dosage (see Data Sheet). Potentiation of oral anticoagulants, phenytoin, theophylline and intravenous lignocaine (see Data Sheet).

Prolonged treatment: observe patients regularly. Potential delay in diagnosis of gastric cancer (see Data Sheet). Regularly observe patients with a history of peptic ulcer and on NSAIDs, especially if elderly. Care in patients with compromised bone marrow (see Data Sheet). Avoid during pregnancy and lactation. **Adverse reactions** Diarrhoea, dizziness, rash, tiredness. Gynaecomastia, occasional reversible liver damage, confusional states (usually in the elderly or very ill). Very rarely interstitial nephritis, acute pancreatitis, thrombocytopenia, agranulocytosis, headache, myalgia, arthralgia, sinus bradycardia, tachycardia, heart block, aplastic anaemia; very rare reports of alopecia, reversible impotence but no causal relationship established at usual therapeutic doses. Legal category POM.

8.2.91 Smith Kline & French Laboratories, Welwyn Garden City, Hertfordshire AL7 1EY 'Tagamet', 'Tiltab' and the appearance of the tablets are trade marks. © 1991 Smith Kline & French Laboratories. TG:AD/1/003

SK&F



**"I USED TO THINK ULCERS
WERE CAUSED BY
CITY LIFE,
THEN I TRIED CLIMBING
EVEREST – THE HARD WAY"**

It would be hard to find a mountaineer who could outperform Chris Bonington.

And it would be hard to find an H₂-antagonist that could outperform 'Tagamet' in clinical use.

Today, 'Tagamet' continues to produce a great performance for your patients, and for your practice.

With rapid healing of duodenal ulcer and lasting protection from ulcer relapse, 'Tagamet' puts patients back on their feet fast, and then helps keep them ulcer-free.

What's more, 'Tagamet' can add real value to your practice. By using 'Tagamet' as your first-choice H₂-antagonist, a General Practitioner with a list of 2,000 patients could retain over £1,000 extra each year within the practice budget.^{1,2}

Added to this, 'Tagamet' is backed by the evidence of 16,000 publications and the experience of over 2 million patient years in the UK alone.³

Plus the trust and confidence of more than 5,000 prescriptions dispensed in the UK every day.⁴

And that's quite a performance, isn't it?

TAGAMET
CIMETIDINE
GREAT BRITISH PERFORMER

CYTOTEC

Abbreviated Prescribing Information

Presentation: Tablet containing misoprostol 200 micrograms.

Uses: Healing of duodenal and gastric ulcer induced by non-steroidal anti-inflammatory drugs (NSAID) in arthritic patients at risk, whilst continuing NSAID therapy. Prophylaxis of NSAID-induced ulcers. Healing of duodenal and gastric ulcer.

Dosage: Adults including the elderly. Healing of duodenal and gastric ulcer: 800 micrograms daily in two or four divided doses taken with breakfast and/or each main meal and at bedtime.

Prophylaxis of NSAID-induced ulcer:

200 micrograms twice daily, three times daily or four times daily. Refer to data sheet for additional information.

Contraindications: Pregnant women, women planning a pregnancy, patients allergic to prostaglandins.

Warnings: Pre-menopausal women should use effective contraception and be advised of the risks of taking Cytotec if pregnant.

Precautions: Cytotec does not produce hypotension in clinical studies at ulcer-healing doses, nevertheless exercise caution in disease states where hypotension might precipitate severe complications. Cytotec should not be administered during breast feeding.

Adverse effects: Diarrhoea, abdominal pain, dyspepsia, flatulence, nausea, vomiting, dizziness, skin rashes.

Common - menorrhagia, menstrual bleeding.

is available in the UK.

References

1. Wilson DE, Quadros E, Rajapaksa T, Adams A, Noar M. Dig Dis Sci 1986; 31 (suppl): 126s-129s.
2. Isenberg JL, Hogan DL, Koss MA, Selling JA. Gastroenterology 1986; 91: 370-378.
3. Sato N, Kawano S, Fukuda M, Tsuji S, Kamada T. Am J Med 1987; 83 (suppl 1A): 15-21.

SEARLE
GOLD
CROSS

G.D. Searle & Co. Ltd.,
P.O. Box 53, Lane End Road,
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Soften the impact of NSAIDs on the stomach with prostaglandins

Cytotec is a prostaglandin analogue and therefore replaces G.I. prostaglandins depleted by NSAIDs.

Unlike H₂ receptor antagonists, Cytotec not only inhibits gastric acid secretion¹ but also protects the gastric mucosa by stimulating bicarbonate secretion² increasing mucus secretion¹ and enhancing gastric mucosal blood flow.³

ONLY

CYTOTEC[®]
misoprostol



Consider an ulcer extinct at your patient's peril

Zantac

RANITIDINE

For the lifetime of the disease

PRESCRIBING INFORMATION: **INDICATIONS:** DUODENAL ULCER, BENIGN GASTRIC ULCER, ULCERS ASSOCIATED WITH NON-STEROIDAL ANTI-INFLAMMATORY DRUGS (NSAID), REFLUX OESOPHAGITIS, CHRONIC EPISODIC DYSPEPSIA. **DOSEAGE:** ADULTS: THE USUAL DOSAGE IS 150MG TWICE DAILY IN THE MORNING AND EVENING. ALTERNATIVELY, PATIENTS WITH DUODENAL ULCERATION, GASTRIC ULCERATION OR REFLUX OESOPHAGITIS MAY BE TREATED WITH A SINGLE BEDTIME DOSE OF 300MG. IN ULCERS FOLLOWING NON-STEROIDAL ANTI-INFLAMMATORY DRUG THERAPY, OR ASSOCIATED WITH CONTINUED NON-STEROIDAL ANTI-INFLAMMATORY DRUGS OR IN THE MANAGEMENT OF REFLUX OESOPHAGITIS UP TO EIGHT WEEKS' TREATMENT MAY BE NECESSARY. CHRONIC EPISODIC DYSPEPSIA: 150MG TWICE DAILY FOR SIX WEEKS. INVESTIGATE EARLY RELAPERS AND NON-RESPONDERS. (SEE DATA SHEET FOR FULL DOSAGE INSTRUCTIONS.) **CONTRA-INDICATIONS:** PATIENTS WITH KNOWN HYPERSENSITIVITY TO RANITIDINE. **PRECAUTIONS:** EXCLUDE THE POSSIBILITY OF MALIGNANCY IN GASTRIC ULCER BEFORE INSTITUTING THERAPY, ESPECIALLY IN MIDDLE-AGED PATIENTS WITH RECENTLY CHANGED DYSPEPTIC SYMPTOMS. SUPERVISION OF PATIENTS WITH PEPTIC ULCERS AND ON NSAID THERAPY IS RECOMMENDED ESPECIALLY IF ELDERLY. REDUCE DOSAGE IN THE PRESENCE OF SEVERE RENAL FAILURE (SEE DATA SHEET). LIKE OTHER DRUGS, USE DURING PREGNANCY AND LACTATION ONLY IF STRICTLY NECESSARY.

SIDE EFFECTS: HEADACHE, DIZZINESS, SKIN RASH, OCCASIONAL HEPATITIS. RARELY, REVERSIBLE MENTAL CONFUSION STATES, USUALLY IN VERY ILL OR ELDERLY PATIENTS. RARE CASES OF LEUCOPENIA AND THROMBOCYTOPENIA, USUALLY REVERSIBLE, AGRANULOCYTOSIS AND PANCYTOPENIA. HYPERSENSITIVITY REACTIONS, ANAPHYLACTIC SHOCK. RARE CASES OF BREAST SYMPTOMS IN MEN. AS WITH OTHER H₂-RECEPTOR ANTAGONISTS RARE CASES OF BRADYCARDIA AND AV BLOCK (SEE DATA SHEET). **PRESENTATIONS:** ZANTAC 150 TABLETS EACH CONTAINING 150MG RANITIDINE (PRODUCT LICENCE NUMBER 00040279, 60 TABLETS £29-76); ZANTAC 300 TABLETS EACH CONTAINING 300MG RANITIDINE (PRODUCT LICENCE NUMBER 00040302, 30 TABLETS £27-43); ZANTAC DISPERSIBLE TABLETS EACH CONTAINING 150MG RANITIDINE (PRODUCT LICENCE NUMBER 00040298, 60 TABLETS £31-25); ZANTAC SYRUP EACH 10ML DOSE CONTAINING 150MG RANITIDINE (PRODUCT LICENCE NUMBER 00040310, 300ML BOTTLE £22-32). **PRODUCT LICENCE HOLDER:** GLAXO OPERATIONS U.K. LIMITED, GREENFORD, MIDDLESEX UB6 0HE ZANTAC IS A GLAXO TRADE MARK
FURTHER INFORMATION IS AVAILABLE ON REQUEST FROM:
GLAXO LABORATORIES LIMITED
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Glaxo 



Rapid relief for patients gripped by IBS

Colofac rapidly relieves the symptoms of Irritable Bowel Syndrome by a direct action on colonic smooth muscle.

Colofac eliminates spasm without the anti-cholinergic side effects that can prove troublesome to the patient.

colofac[®]



mebeverine

loosens the grip of IBS

Prescribing Information

Presentation: White, sugar-coated tablets each containing 135mg mebeverine hydrochloride. Available in packs of 100. Basic NHS price £8.35.
Yellow, banana-flavoured sugar-free suspension containing mebeverine pamoate equivalent to 50mg mebeverine hydrochloride per 5ml. Available in bottles of 300ml: Basic NHS price £3.50.
Indications: 1. Irritable bowel syndrome. 2. Gastro-

intestinal spasm secondary to organic diseases.
Dosage and Administration: Tablets: Adults and children ten years and over: One tablet three times a day, preferably 20 minutes before meals. Suspension: Adults and children ten years and over: 15ml (150mg) three times a day, preferably 20 minutes before meals. **Contra-indications, warnings, etc:** Animal experiments have failed to show any terato-

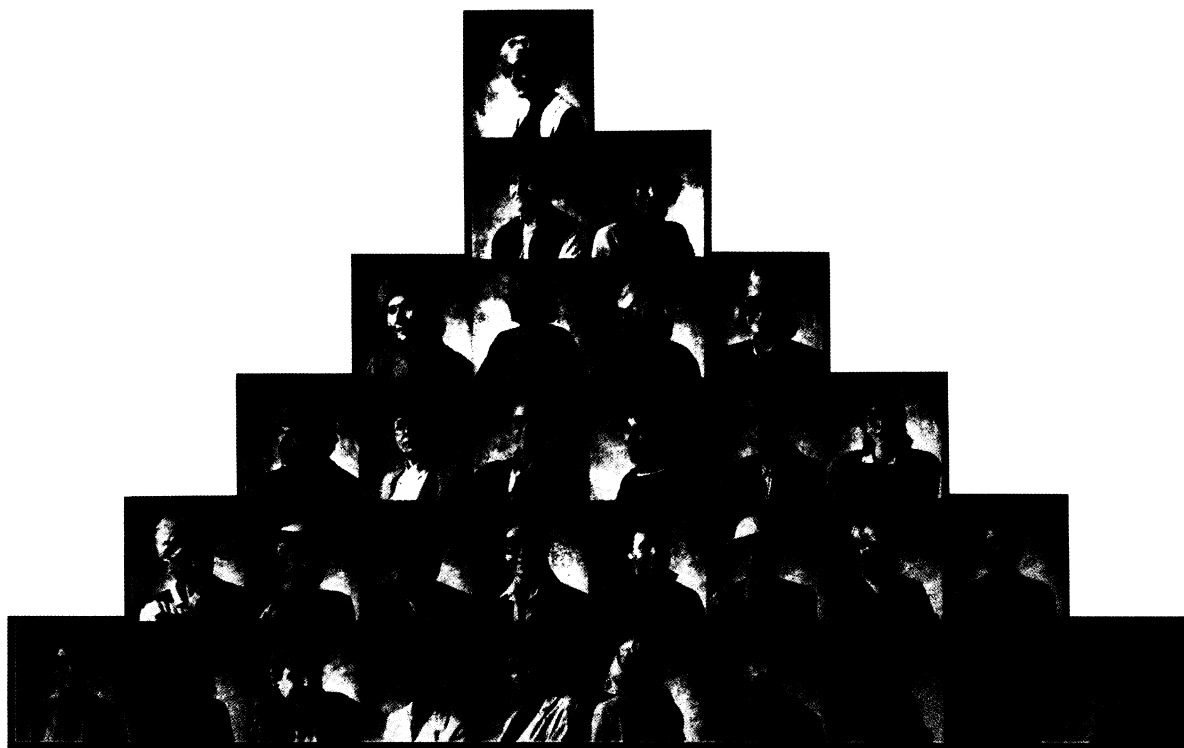
genic effects. However, the usual precautions concerning the administration of any drug during pregnancy should be observed. **Product Licence Number:** Tablets: 0512/0044; Suspension: 0512/0061. Further information is available on request to the Company. Duphar Laboratories Limited, Gaters Hill, West End, Southampton, SO3 3JD. Telephone: 0703 472281

duphar

C/Hosp Ad/1/88

In 4 weeks
 ranitidine 150mg bd can heal 31% of patients
 with erosive oesophagitis.¹

That's good...

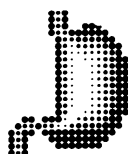


... or is it?

Abbreviated Prescribing Information.

Presentation: Losec capsules containing 20mg omeprazole. **Indications:** Healing of erosive reflux oesophagitis. Symptom relief is rapid, and the majority of patients are healed after 4 weeks. **Dosage:** *Adults* (including elderly). 20mg once daily, given for 4 weeks. For those patients not fully healed after the initial course, healing usually occurs during a further 4 weeks' treatment. Losec has also been used in a dose of 40mg once daily in patients with reflux oesophagitis refractory to other therapy. Healing usually occurred within 8 weeks. Long-term maintenance treatment with Losec is not recommended. *Children:* There is no experience of the use of Losec in children. **Impaired renal or hepatic function:** Adjustment is not required. Patients with severe liver disease should not require more than 20mg Losec daily. **Contra-indications, Warnings, etc:** No known contra-indications to the use of Losec. When gastric ulcer is suspected, the possibility of malignancy should be excluded before treatment with Losec is instituted, as treatment may alleviate symptoms and delay diagnosis. Avoid in pregnancy unless there is no safer alternative. Breast feeding should be discontinued if the use of Losec is considered essential. Losec is well tolerated. Nausea, headache, diarrhoea, constipation and flatulence have been reported but are rare. Skin rashes have occurred in a few patients. These events have usually been mild and transient and there has been no consistent relationship with treatment. Losec can delay the elimination of diazepam, phenytoin and warfarin. Monitoring of patients receiving warfarin or phenytoin is recommended and a reduction of warfarin or phenytoin dose may be necessary when omeprazole is

added to treatment. No evidence of an interaction with theophylline, propranolol or antacids. **Animal Toxicology:** Gastric ECL-cell hyperplasia and carcinoids, localised to the oxyntic mucosa, have been observed in life-long studies in rats. These changes have been related to sustained hypergastrinaemia. No treatment related mucosal changes have been observed in patients treated continuously for periods up to 4 years. **Pharmaceutical Precautions:** Use within one month of opening. Replace cap firmly after use. Dispense in original containers. **Legal Category:** POM. **Package Quantities and Basic NHS Cost:** Bottles of 5 capsules, £6.49; Bottles of 28 capsules, £36.36. **Product Licence Number:** PL0017/0238. **Product Licence Holder:** Astra Pharmaceuticals Ltd., Home Park, Kings Langley, Herts WD4 8DH. **Reference:** 1. Sandmark S et al. Scand. J Gastroenterol. 1988; 23 : 625-32



ASTRA

For further information please contact.
 Astra Pharmaceuticals Ltd
 Telephone: (0923) 266191

Losec is registered trade mark

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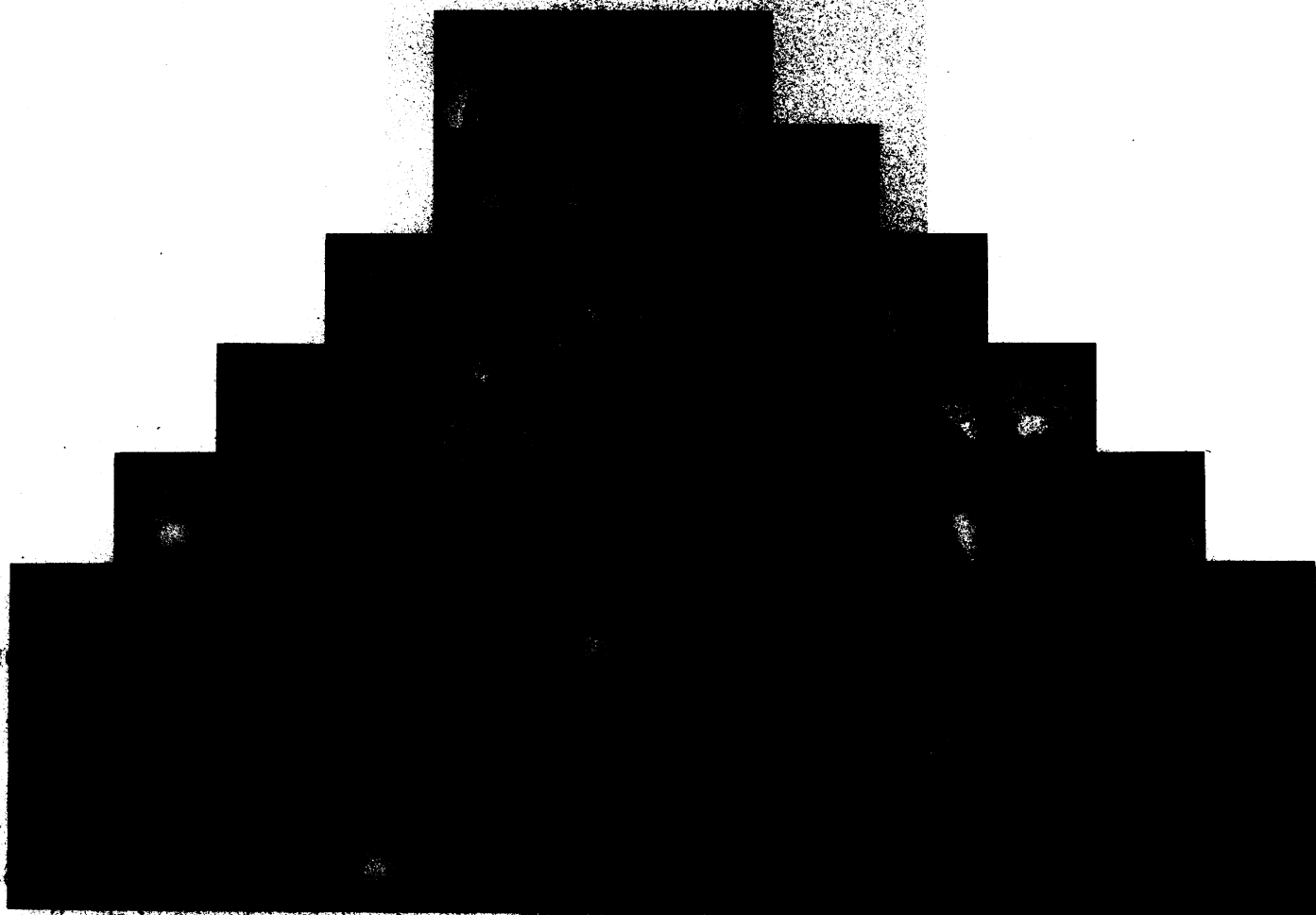
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In 4 weeks
LOSEC can heal 67% of patients
with erosive oesophagitis.¹

That's twice as good!*

* Losec 20mg once daily compared with ranitidine 150mg bd



LOSEC[®]
omeprazole-Astra


20 mg once a day

Abbreviated Prescribing Information.

Presentations: Losec capsules containing 20mg omeprazole. **Indications:** Healing of erosive reflux oesophagitis. Symptom relief is rapid, and the majority of patients are healed after 4 weeks. **Dosage:** **Adults** (including elderly). 20mg once daily, given for 4 weeks. For those patients not fully healed after the initial course, healing usually occurs during a further 4 weeks' treatment. Losec has also been used in a dose of 40mg once daily in patients with reflux oesophagitis refractory to other therapy. Healing usually occurred within 8 weeks. Long-term maintenance treatment with Losec is not recommended. **Children:** There is no experience of the use of Losec in children. **Impaired renal or hepatic function:** Adjustment is not required. Patients with severe liver disease should not require more than 20mg Losec daily. **Contra-indications, Warnings, etc:** No known contra-indications to the use of Losec. When gastric ulcer is suspected, the possibility of malignancy should be excluded before treatment with Losec is instituted, as treatment may alleviate symptoms and delay diagnosis. Avoid in pregnancy unless there is no safer alternative. Breast feeding should be discontinued if the use of Losec is considered essential. Losec is well tolerated. Nausea, headache, diarrhoea, constipation and flatulence have been reported but are rare. Skin rashes have occurred in a few patients. These events have usually been mild and transient and there has been no consistent relationship with treatment. Losec can delay the elimination of diazepam, phenytoin and warfarin. Monitoring of patients receiving warfarin or phenytoin is recommended and a reduction of warfarin or phenytoin dose may be necessary when omeprazole is

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* Losec 20mg once daily compared with ranitidine 150mg bd



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Unique among foam treatments, Colifoam has over 12 years of proven efficacy and safety in clinical practice.

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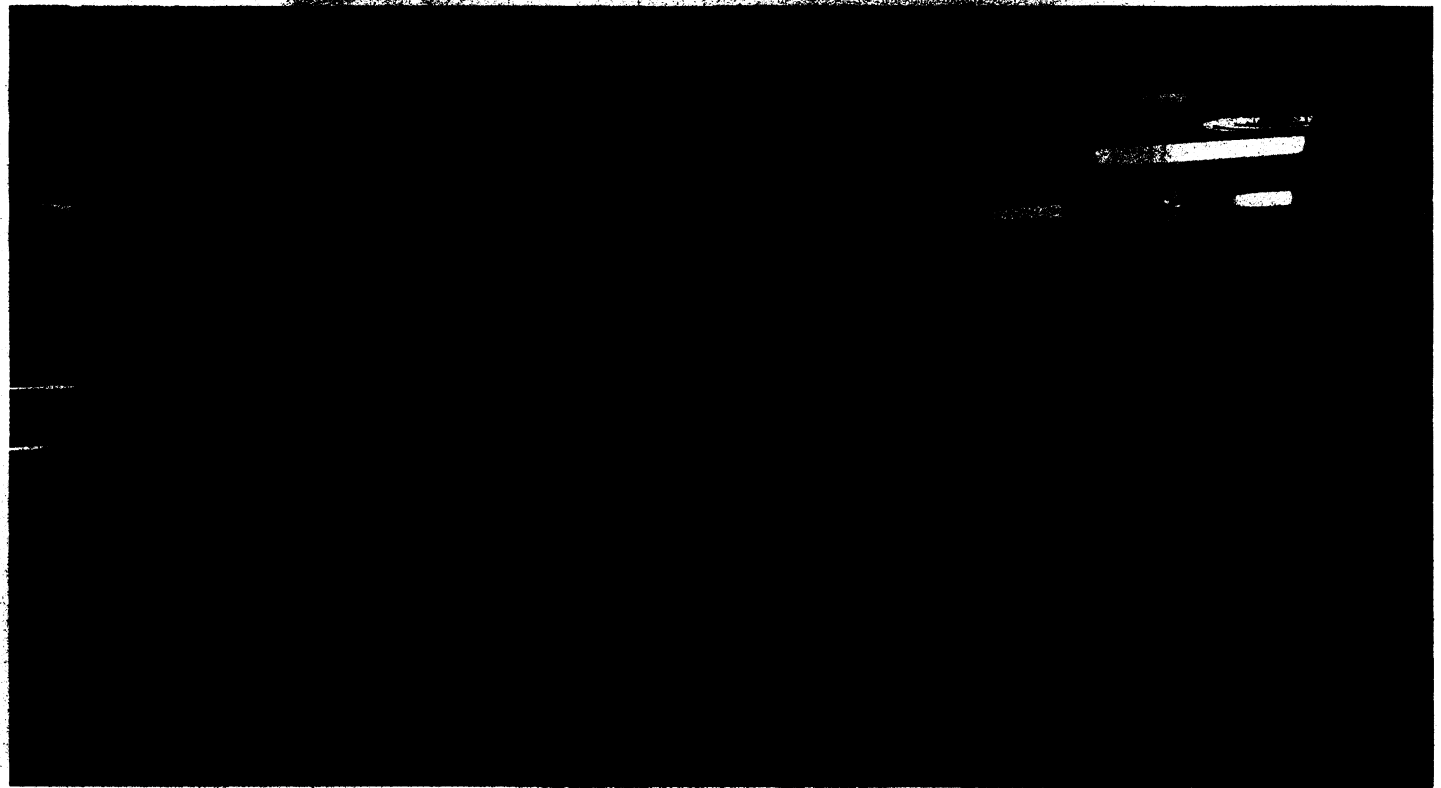
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COLIFOAM
10% Hydrocortisone acetate foam.

The leading topical treatment for ulcerative colitis.

PRESCRIBING INFORMATION: Presentation: White odourless aerosol containing hydrocortisone acetate PhEur 10%. Uses: Ulcerative colitis, proctosigmoiditis and granular proctitis. Dosage and administration: One applicatorful inserted into the rectum once or twice daily for two or three weeks and every second day thereafter. Shake can vigorously before use (illustrated instructions are enclosed with pack). Contra-indications, warnings etc.: Local contra-indications to the use of intrarectal steroids include obstruction, abscess, perforation, peritonitis, fresh intestinal anastomoses and extensive fistulae. General precautions common to all corticosteroid therapy should be observed during treatment with Colifoam. Treatment should be administered with caution in patients with severe ulcerative disease because of their predisposition to perforation of the bowel wall. Safety during pregnancy has not been fully established. Pharmaceutical precautions: Pressurized container. Protect from sunlight and do not expose to temperatures above 50°C. Do not pierce or burn even after use. Do not refrigerate. Keep out of reach of children. For external use only. Legal category: POM. Package Quantity & Basic NHS cost: 25g canister plus applicator, £7.25. Further Information: One applicatorful of Colifoam provides a dose of approximately 125mg of hydrocortisone acetate, similar to that used in a retention enema, for the treatment of ulcerative colitis, sigmoiditis and proctitis. Product Licence No.: 0036/0021. References: 1. Somerville KW et al. British Medical Journal 1985; 291:866. 2. Ruddell WSJ et al. Gut 1980; 21:885-889. 3. Independent Research Audit. Data on File. Further information is available on request. Stafford-Miller Ltd., Professional Relations Division, Broadwater Road, Welwyn Garden City, Herts. AL7 3SP.

FAST WORKER



PEPCID[®] PM 40
(famotidine) mg

ONE AT NIGHT CAN MAKE THEIR DAY

Abridged Product Information

Refer to Data Sheet before prescribing.

INDICATIONS Duodenal ulcer; prevention of relapses of duodenal ulceration; benign gastric ulcer; hypersecretory conditions such as Zollinger-Ellison syndrome.

DOSAGE In duodenal and benign gastric ulcer, 40 mg at night for four to eight weeks. For prevention of duodenal ulcer recurrence, 20 mg at night. Initiate antisecretory therapy of Zollinger-Ellison syndrome with 20 mg every six hours and adjust to individual response. The maximum dosage used for up to one year was 480 mg daily.

CONTRA-INDICATION Hypersensitivity.

PRECAUTIONS Exclude any likelihood of gastric carcinoma before using 'Pepcid' PM. Consider reducing the daily dose if creatinine clearance falls to or below 30 ml/min. 'Pepcid' PM is not recommended in pregnancy, nursing mothers or children.

SIDE EFFECTS Rarely, headache, dizziness, constipation, diarrhoea. Less frequently, dry mouth, nausea, vomiting, rash, abdominal discomfort, anorexia, fatigue.

BASIC NHS COST 20 mg tablets, £14.00 for 28-day calendar pack and £25.00 for bottles of 50.

40 mg tablets, £26.60 for 28-day calendar pack and £47.50 for bottles of 50.

Product Licence Numbers:
20 mg tablets, 0025/0215; 40 mg tablets, 0025/0216.

Issued December 1989

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Thomas Morson Pharmaceuticals
Division of Merck Sharp & Dohme Limited
Hertford Road, Hoddesdon, Herts, EN11 9BU



**SPECIFICALLY DEVELOPED
FOR THE SUPPRESSION OF
NOCTURNAL ACID**

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Sustained-release peppermint oil capsules

Break the strangleholds of pain and bloating

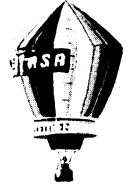
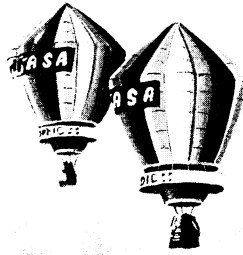
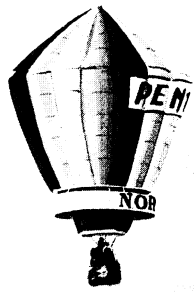


COLPERMIN™ DUAL ACTION RELIEF

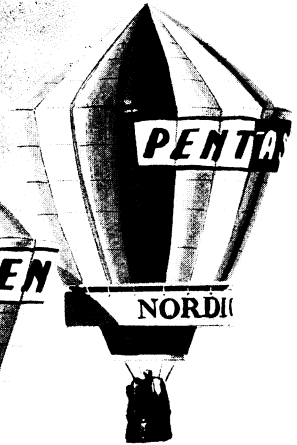
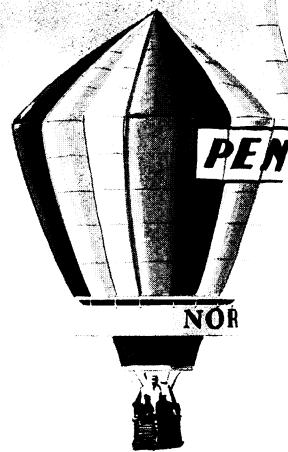
Prescribing Information

Presentation: A light blue/dark blue enteric-coated capsule with a green band between cap and body. Each capsule contains a sustained release gel of 0.2ml peppermint oil B.P. **Uses:** For the treatment of symptoms of discomfort and of abdominal colic and distension experienced by patients with irritable bowel syndrome. **Dosage and Administration:** Adult dose: 1-2 capsules three times a day, 30 minutes to one hour before food, and taken with a small quantity of water. The capsules should not be taken immediately after food. The capsules should be taken until symptoms resolve, usually within one or two weeks. At times when symptoms are more persistent, the capsules can be continued for longer periods of between 2 to 3 months. There is no experience in the use of capsules in children under the age of 15 years. **Contra-indications, warnings, etc** Precautions: The capsules should not be broken

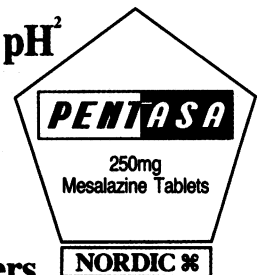
or chewed because this would release the peppermint oil prematurely, possibly causing local irritation of the mouth or oesophagus. Patients who already suffer from heartburn sometimes experience an exacerbation of these symptoms when taking the capsule. Treatment should be discontinued in these patients. Do not take indigestion remedies at the same time of day as this treatment. **Adverse effects:** Heartburn; sensitivity reactions to menthol, which are rare and include erythematous skin rash, headache, bradycardia, muscle tremor and ataxia. **Pharmaceutical Precautions:** Store in a cool place. Avoid direct sunlight. **Legal Category:** P. **Product Licence:** PL 0424/0009. **Product Authorisation:** PA 360/17/1. **Product Licence/Product Authorisation Holder:** Tillotts Laboratories. **Basic NHS Cost:** £12.15 per 100. **Date of issue:** January 1991. Colpermin is a Trade Mark.



**In Ulcerative Colitis
New Pentasa Slow Release Tablets
Predictable Release
in Unpredictable Conditions**



- Predictable Release in Unpredictable Intestinal Transit^{1,2}
- Predictable Release in Unpredictable Intestinal pH²
- Predictable Release in Unpredictable Patients

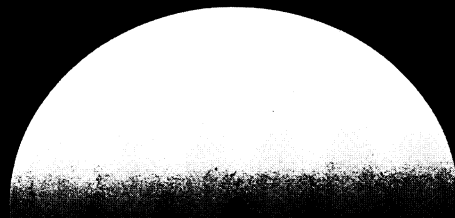


Pentasa....Mesalazine, when and where it matters

Abridged Prescribing Information

Name of Product: PENTASA Slow Release Tablets. **Presentation:** Round, white to light grey mottled tablets with a break line on one side. Each tablet contains 250mg mesalazine in a slow release presentation. **Uses:** For the maintenance of remission in mild to moderate ulcerative colitis. **Dosage and administration:** Adults: The usual dose is two tablets, three times daily. **Contra-indications:** Children under the age of 15 years. Known sensitivity to salicylates. **Precautions, warnings etc:** PENTASA is not recommended in patients with renal impairment. Patients with raised blood urea or proteinuria should be treated with caution. PENTASA should be used with caution during pregnancy and lactation. Headache, diarrhoea and dyspepsia may occur in a small proportion of patients. Exacerbation of the symptoms of colitis may arise in patients who have previously had this problem with sulphasalazine. **Packing quantity:** Bottles containing 200 tablets. **Product Licence:** PL 3194/0043 Basic NHS Price: 200 x 250 mg tablets £32.28. **Product Licence Holder:** Ferring Pharmaceuticals Ltd, 11 Mount Road, Feltham, Middlesex. TW13 6JG. **Date of preparation:** March 1990. **Reference:** 1. Brit. J. Clin. Pharmac. (1987), 23: 365-369. 2. Gastroenterol. Int. (1988); 1/Suppl.1 : A859. PENTASA is a registered trademark.

Further information is available from: Nordic Pharmaceuticals, 11 Mount Road, FELTHAM, Middlesex. TW13 6JG. **NORDIC** ☼



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Dipentum[®]

olsalazine

in Ulcerative Colitis

Delivers
5-ASA
to the
colon...

... not to
the kidneys

Prescribing information

Presentation. Caramel coloured capsules containing 250mg olsalazine sodium.

Uses. Oral treatment of acute mild ulcerative colitis and the maintenance of remission.

Olsalazine consists of two molecules of 5-amino-salicylic acid (5-ASA) joined through an azo-bond. The systemic absorption of olsalazine is minimal. 99% of an oral dose will reach the colon. Olsalazine is activated in the colon where it is converted into 5-ASA. The release of 5-ASA is neither pH nor time dependent. 5-ASA acts topically on the colonic mucosa and local colonic concentrations of 5-ASA

are more than 1000 times that found in the serum.

Dosage and Administration.

Acute Mild Disease. Adults Including the Elderly. Commence on 1g daily in divided doses and, depending upon the patient response, titrate the dose upwards to a maximum of 3g daily over 1 week. A single dose should not exceed 1g. Olsalazine should be taken with food.

Remission Adults Including the Elderly. 2 capsules (0.5g) twice daily taken with food.

Contra-Indications, Warnings, etc. Contra-indications. Hypersensitivity to salicylates. There is no experience of the use

of olsalazine in patients with significant renal impairment. Olsalazine is contra-indicated in patients with significant renal impairment. **Pregnancy.** Comprehensive animal reproductive toxicity studies have not been performed. There is no experience with olsalazine treatment during pregnancy. Olsalazine is contra-indicated in pregnancy. **Lactation.** There are no data on the excretion of olsalazine in breast milk.

Adverse Reactions. Watery diarrhoea has been recorded in 15% of patients treated. In half of these patients the diarrhoea was either transient or overcome by

dose reduction. In patients who do not respond to dose reduction the drug should be stopped. As with sulphasalazine and mesalazine gastrointestinal side-effects are the most common. The most frequently reported adverse reactions are diarrhoea, abdominal cramps, headache, nausea, dyspepsia, arthralgia and rash.

Treatment of Overdosage. There is no specific antidote to olsalazine. Treatment should be supportive.

Pharmaceutical Precautions. Store at room temperature in a dry place.

Legal Category. POM.

Package Quantities. Containers of 100 capsules.

Further Information. Olsalazine has been used concomitantly with glucocorticosteroids.

UK Product Licence Number.

0009/0069.

Product Authorisation Number

(Ireland):

PA 107/14/1.

Dipentum is a Trade Mark. Basic

NHS Price: 100 Capsules £23.90.

Distributed in the Republic of Ireland by:
United Drug Limited,
7, Lower Fitzwilliam Street,
Dublin.

Further information available from:
Pharmacia Ltd.,
Pharmacia House,
Midsummer Boulevard,
Milton Keynes, MK9 3HP



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MIRROR OF MEDICINE

A HISTORY OF THE BMJ

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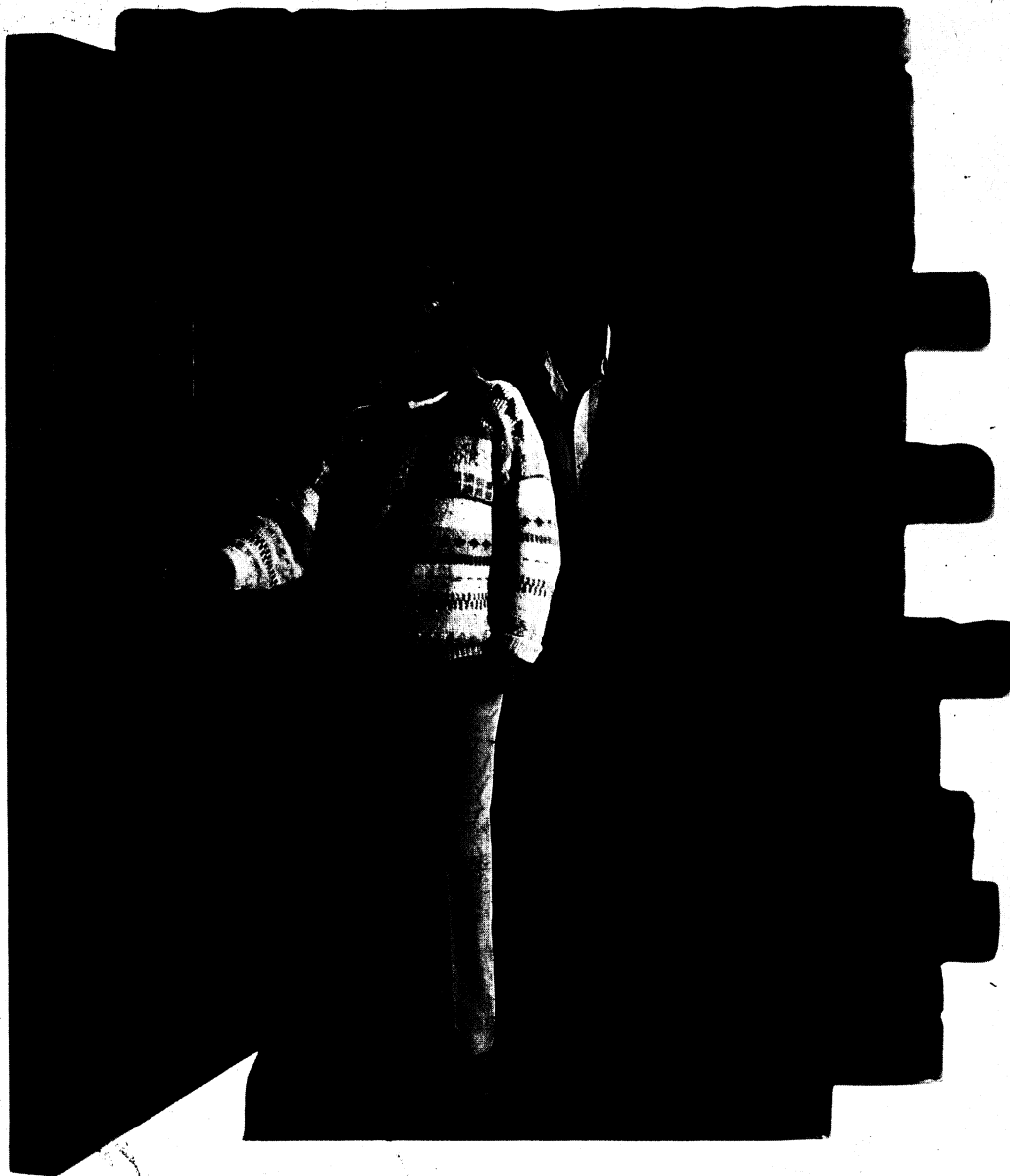
1840-1990

The *BMJ*'s 150 year history has taken it from small beginnings in Worcester as the *Provincial Medical and Surgical Journal* to its current position as a major international medical journal. On the way there have been rows, editors' dismissals, and battles with the BMA and royal colleges as well as growing success and authority. In *Mirror of Medicine* the historian P W J Bartrip provides a shrewd and perceptive commentary on the *BMJ*'s progress, placing its history in the context of contemporary events and examining its treatment of many key themes in medical science and society, including public health, military medicine, quackery, sex, and the birth of the NHS. He also provides pen portraits of some of its most outstanding editors, among them the charismatic Ernest Hart, his successor Dawson Williams, and the doughty Hugh Clegg. The *BMJ*'s present editor, Stephen Lock, provides a postscript on the state of the *BMJ* today.

352 pp., illus., Clarendon Press/BMJ, September 1990

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- Effective acute and maintenance therapy^{1,4}
- Available as tablets and suppositories
- Free from sulphapyridine-associated side effects

ASACOL

Mesalazine* (5-aminosalicylic acid)

Helps free your ulcerative colitis patients

Prescribing Information: **Presentation:** 'Asacol' Tablets, PL 0002/0173, each containing 400 mg mesalazine (5-aminosalicylic acid) coated with a pH-dependent acrylic based resin (Eudragit S) formulated to release the active ingredient in the terminal ileum and colon. Blister packs of 120 (6x20), £28.58. 'Asacol' Suppositories 250 mg, PL0002/0158, each containing 250 mg mesalazine. 20, £6.50. 'Asacol' Suppositories 500 mg, PL0002/0195, each containing 500 mg mesalazine. 10, £6.50. **Uses:** Treatment of mild to moderate acute exacerbations of ulcerative colitis. Maintenance of remission of ulcerative colitis. Suppositories particularly appropriate for distal disease. **Dosage and administration:** Adults: Tablets: Acute disease: 6 tablets a day, in divided doses, with concomitant corticosteroid therapy where clinically indicated. Maintenance therapy: 3 to 6 tablets a day, in divided doses. 250 mg suppositories: 3 to 6 a day, in divided doses, with the last dose at bedtime. 500 mg suppositories: A maximum of 3 a day, in divided doses, with the last dose at bedtime. Children: No dose recommendation. **Contra-indications:** A history of sensitivity to salicylates. Severe

renal impairment (GFR < 20 ml/min). Children under 2 years of age. **Precautions:** Not recommended in patients with renal impairment. Caution in patients with a raised blood urea or proteinuria. Avoid during pregnancy and lactation. Caution in elderly and only where renal function is normal. Do not give tablets with lactulose or similar preparations which lower stool pH. **Adverse reactions:** Nausea, diarrhoea, abdominal pain, headache. Exacerbation of symptoms of colitis. Rarely, reversible pancreatitis. **Legal category:** POM. 20.4.90.

- References:** 1. Riley SA et al. Gut 1988;29:669-74.
2. Campieri M et al. Scand J Gastroenterol 1990;25:663-8.
3. Riley SA et al. Gastroenterology 1988;94:1383-9.
4. Williams CN et al. Digestive Diseases and Sciences 1987;32 (Suppl):71S-75S.

*Mesalazine is the British approved name of 5-aminosalicylic acid

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