

DUOGASTRONE®

direct healing of duodenal ulcer

Trials suggest*

- radiological disappearance of ulcer crater
- relief of symptoms within a few days
- superiority over antacid or anticholinergic therapy
- patients can lead a normal life
- special diets are unnecessary
- even chronic cases, with a long history of symptoms, respond

Unique 'positioned release' capsules deliver the active ingredient (50 mg carbenoxolone sodium) into the duodenum.

* Further trials are in progress to study the effects of DUOGASTRONE in long-term therapy

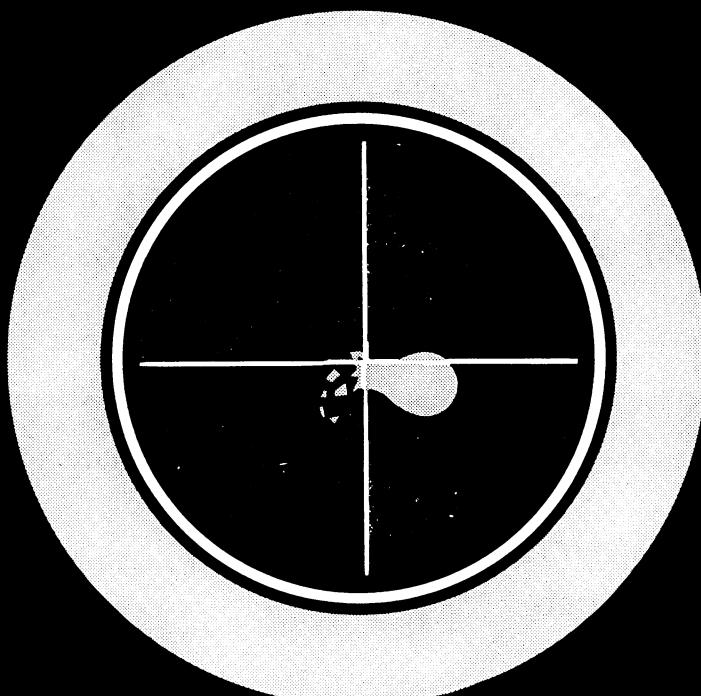


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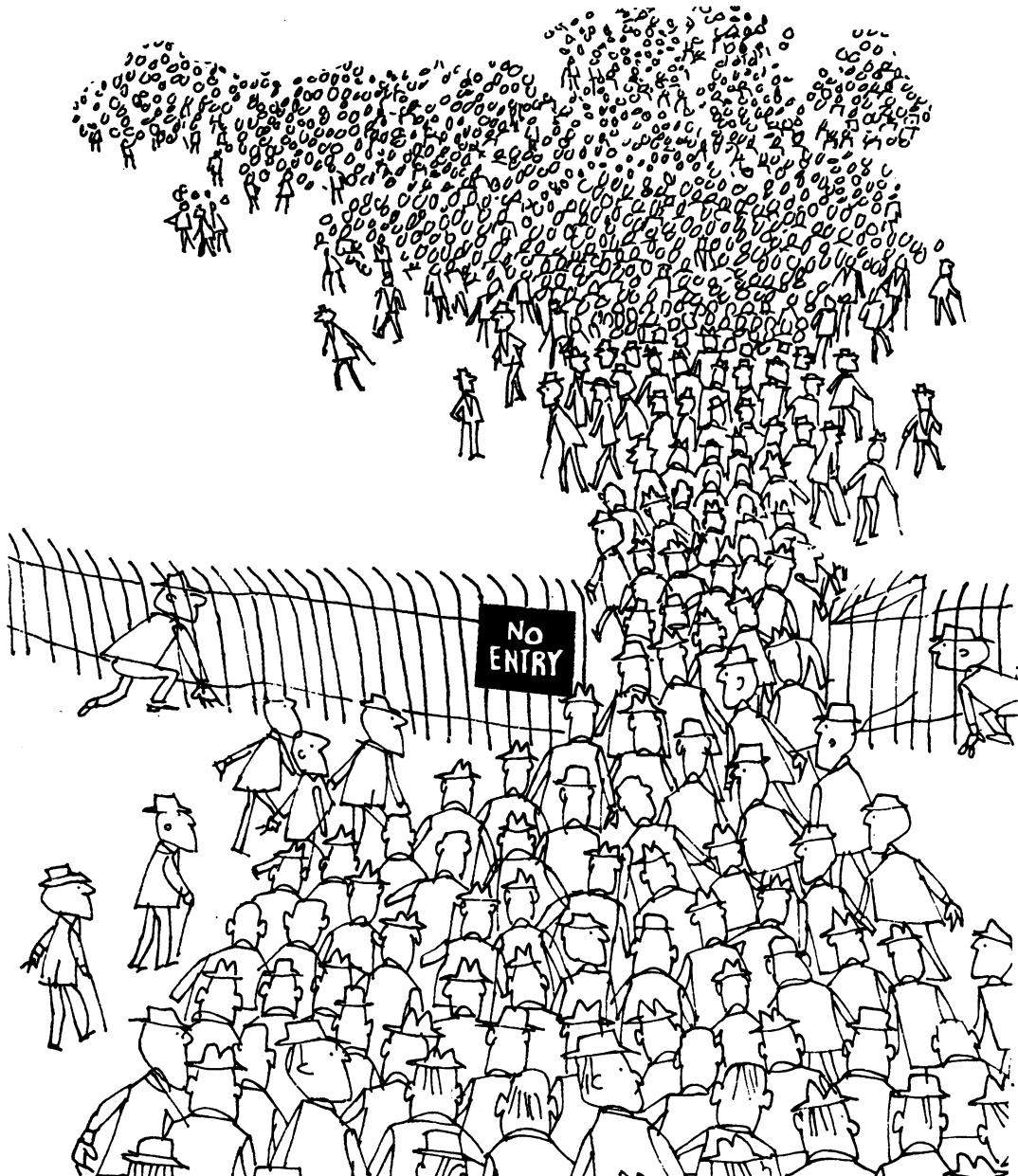
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® Regd. Trade Mark



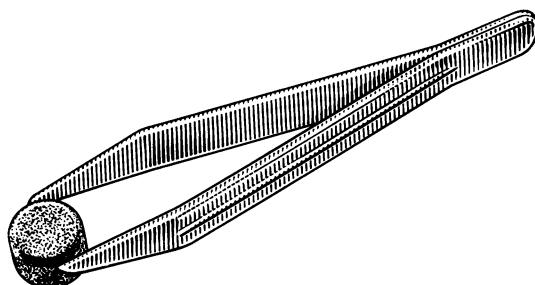
An inadequate barrier is no protection



Prolonged clinical evaluation has shown NOXYFLEX to be singularly effective against the intrusion of bacteria.
NOXYFLEX literature outlines its proven uses in detail. Have you a copy?

Protection: NOXYFLEX 2.5G. Noxytiolin and 10 mgm. Amethocaine HC1
Geistlich Chester

This little tablet takes such a lot of trouble



out of amylose testing

First of the Pharmacia diagnostic reagents for the determination of biologically active substances is the Phadebas amylose *tablet* test.

Phadebas® Amylase Test

- No tedious preparation of reagents.
- Standardization—from tablet to tablet and bottle to bottle, reproducibility is certain. (Standard curve supplied).
- Accuracy ensured by entirely new type of starch substrate.
- Stability—no refrigeration required.
- Simplicity—less apparatus required.
- Rapidity of result.
- Highly sensitive.
- Highly precise.
- Wide range.
- Suitable for all body fluids.

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Pharmacia



How do you treat a cannibal?

'Endogenous cannibalism'... metabolism of the body's own tissues resulting from clinical calorie and protein starvation. Where it is impossible to provide minimal requirements of fat and protein by mouth or gastric tube, then the supply of intravenous nutrients becomes mandatory.

By the use of AMINOSOL solutions and the fat emulsion INTRALIPID it is now possible to cover the total body requirements of protein, fat and carbohydrate by the intravenous route, in complete safety and, if necessary, for long periods of time.

*(1967) Postgrad Med J. 43, 498, p. 337

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AMINOSOL



Maxolon

a powerful anti-emetic... which also restores gastric motility

Maxolon is of proven value in nausea and vomiting...

Maxolon acts centrally on the chemoreceptor trigger zone, and also acts locally on the afferent nerves of the pylorus and duodenum leading to the vomiting centre. Maxolon is remarkably effective in the treatment of nausea and vomiting from a wide range of gastric disorders. In a clinical trial (1) Maxolon achieved an 80% reduction score in nausea and 87% in vomiting.

...Maxolon also restores gastric motility

This makes it unique among products used in the alimentary tract. Spasm where present is relieved and stasis gives way

to normal peristalsis. This action is of great importance in the treatment of nausea and vomiting but also leads to a consideration of further therapeutic applications. Among these are its known value in the treatment of post vagotomy symptoms, post operative gastric hypotonia, duodenal intubation and diagnostic radiology.

Maxolon has a good safety record. It does not sedate the patient, nor affect gastric or salivary secretion.

Maxolon is a unique compound—with a well proven clinical record.

Are you finding in practice how much more there is to Maxolon?

(1) Brit. J. clin. Pract. 1967, 21, 457

Further information is available on request

Maxolon

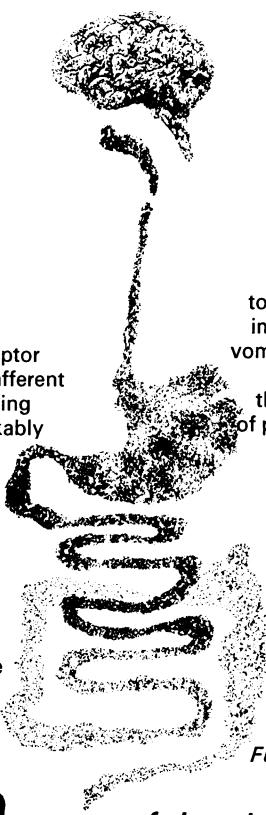
a powerful anti-emetic and so much more



Maxolon* (metoclopramide) is a product of
Beecham Research Laboratories, Brentford, England.



*regd.



GASTRIC ULCER PATIENTS STILL FILLING YOUR BEDS?

For practical purposes conventional inpatient care of a gastric ulcer carries no ultimate advantage over ambulant therapy with carbenoxolone.

The Practitioner, 1969, 202, 402.

BIOGASTRONE®

carbenoxolone sodium.

frees beds and liberates the patient

Full information available on request.



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RIFOCIN®-M

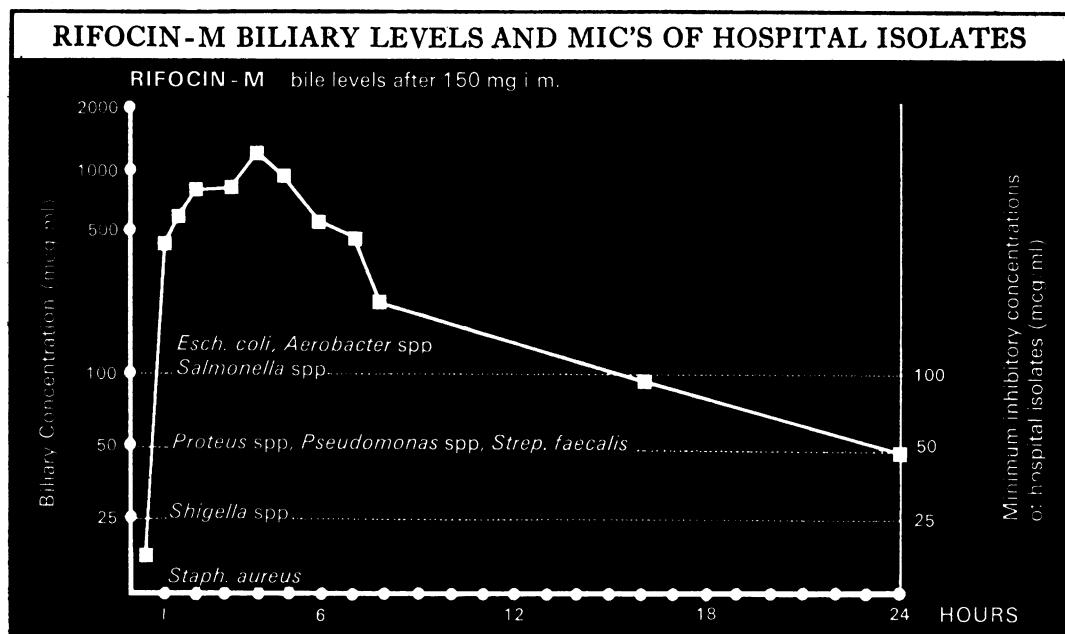
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in BILIARY TRACT INFECTIONS

"... it is unique in its action in acute cholecystitis and other bacterial diseases of the biliary tract, for which it is the only specific antibiotic."¹

"A much higher proportion of the organisms found in cholangitis would be expected to be inhibited by this drug than by other antibiotics that achieve effective bile levels ..."²



- * Active against penicillinase-producing organisms.
- * No cross-resistance or cross-allergenicity with other antibiotics has been demonstrated.
- * Well tolerated. No toxic reactions have been reported.
- * Dose: 150 mg intramuscularly every 8-12 hours.

RIFOCIN-M (rifamide) is a member of the RIFAMYCINS—a new group of antibiotics discovered and developed in the Research Laboratories of LEPETIT.

References: 1. *Med. J. Aust.*, 1966, 1, 1-7. 2. *Brit. J. Pharmacol.*, 1967, 31, 506-512.

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ACTA GASTRO-ENTEROLOGICA BELGICA

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