

THE END OF THE RETENTION ENEMA IN ULCERATIVE COLITIS THERAPY

New

hydrocortisone acetate rectal foam

Retention enemas are messy to administer, uncomfortable and difficult for the patient to retain.

Now Colifoam offers a better alternative in the treatment of ulcerative colitis and proctitis. It presents effective topical steroid therapy as an aerosol foam. Colifoam has several practical advantages: the patient can instil a dose (only 5 ml.) in less than half a minute; the foam is easily retained without leakage problems, and the compact pack with applicator is easy to carry around. Yet Colifoam is no more expensive than a retention enema.

And Colifoam works at least as well as the older method. Trials have shown that with Colifoam there is an improvement in mucosal conditions throughout the colon, with prompt relief of tenesmus^{1,2,3} Extensive trial use through hospitals has established a high level of patient acceptance.

Further information and data sheet available on request.

Professional Relations Division
Stafford-Miller Limited, Hatfield, Herts.

Stafford-Miller



Alternative dosage regimen of Caved-S produces impressive results in chronic duodenal ulcer

Endoscopic examination proved chronic duodenal ulceration in 32 male patients, whose clinical histories ranged from 2 to 30 years.¹

ADEQUATE DOSAGE

2 Caved-S tablets 5 times daily for up to 24 weeks

"... the daily dose selected was the median of that advised in a series of patients treated with deglycyrrhizinized liquorice tablets who had failed to respond to other measures and had been referred for surgery . . ."¹

THOROUGH CHEWING OF THE TABLETS

mixed Caved-S with the saliva appears to play an important role.

"Saliva may have a role of its own or a synergistic action with constituent of the liquorice extract. Work in India (Malhotra *et al.*, 1965) has suggested that eating foods which do not require chewing results in an increased incidence of duodenal ulceration and that saliva exerts a protective action in peptic ulceration (Malhotra 1967; Malhotra, 1967)."¹

SWALLOWING ON AN EMPTY STOMACH

allows the bolus of Caved-S and saliva to reach the prepyloric area of the stomach, where maximum demulcent effect and healing occur.

"The advice that the agent should be taken on an empty stomach in the ambulant patient could be crucial. Simple studies on patients presenting for barium-meal examination have shown that if a small sip of barium is taken while in an upright position when the stomach is empty the bolus of barium rapidly travels down the lesser curve of the stomach and comes to rest in the prepyloric region. This may effectively produce a 'positioned release' preparation, and the bolus of mixed saliva and deglycyrrhizinized liquorice would appear to be strategically placed to exert maximum demulcent or healing effect."¹

RESULTS

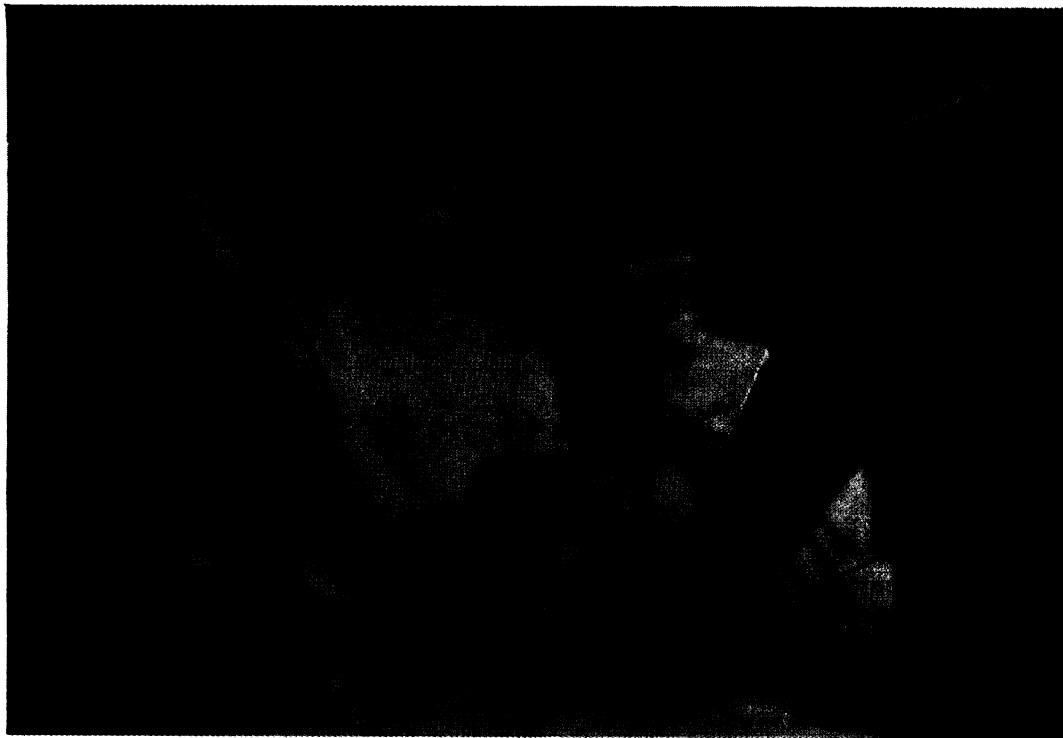
Endoscopic examination showed that Caved-S had healed the ulceration in ALL 32 patients and in most the mucosa appeared normal.

¹A Retrospective Endoscopic Survey of 32 patients. *The Practitioner*, (1975).

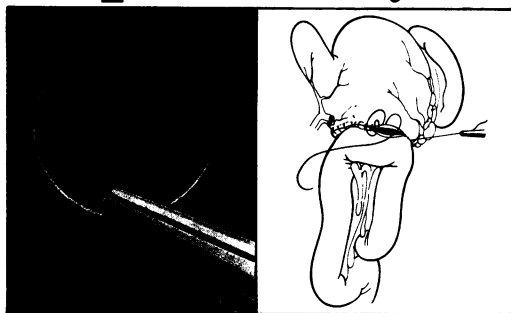
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**Tillotts Laboratories, Unit 24,
Henlow Trading Estate, Henlow, Beds.**

Monofilament Smooth



ETHICON* Surgical Gut is kind to the patient, easy for the surgeon.



The inner haemostatic layer of the anastomosis in this procedure is performed with 3 Metric surgical gut swaged to a Super Smooth Intestinal needle.

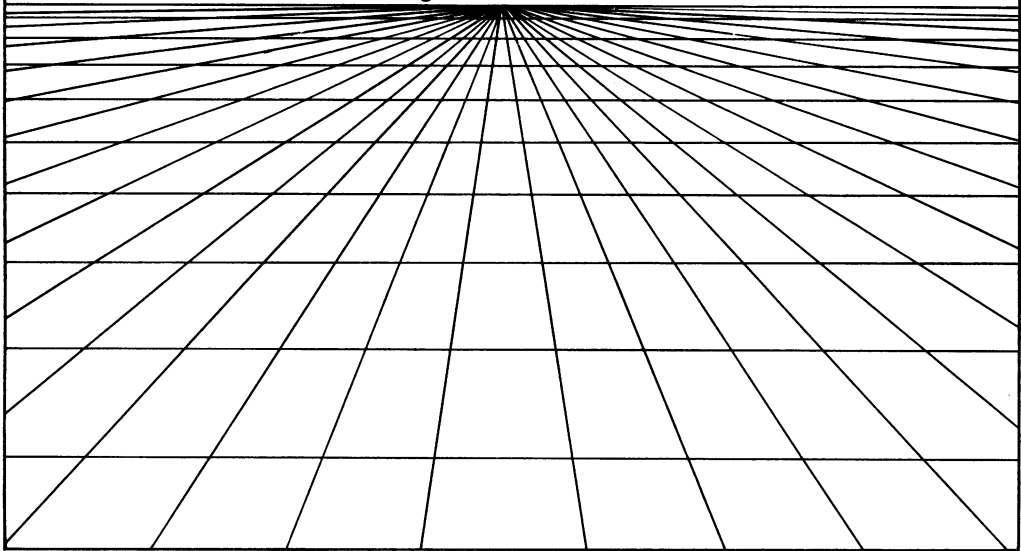
For use on soft delicate tissue, ETHICON monofilament smooth surgical gut is now swaged to a super-smooth stainless steel intestinal needle with a re-designed point profile. This profile permits easier flow through tissue, a vital factor in surgery of the gastrointestinal tract.

ETHICON

*Trademark

When the difference is between being sure and being absolutely certain.

Salazopyrin ad infinitum!



"It is concluded that maintenance treatment of ulcerative colitis with sulphasalazine (salazopyrin) should be continued indefinitely unless contraindicated by side effects."¹

The results of the above controlled trial carried out at the Nuffield Department of Clinical Medicine, Radcliffe Infirmary, Oxford are all the more welcome as earlier trials of cortisone² and prednisone³ at standard dosages have shown them to be ineffective in reducing the number of recurrences of ulcerative colitis.

"Fortunately, Sulphasalazine tablets, 0.5 grams 4 times a day will prevent relapses in the majority

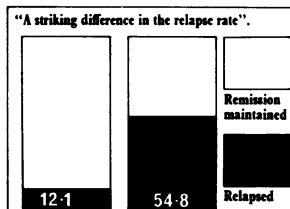
of patients with colitis, and only a few patients cannot tolerate this relatively small dose, which can be continued indefinitely since we do not know when, if ever, it can be safely stopped".⁴

Salazopyrin (sulphasazine) is available as the plain 0.5g. tablet, 0.5g. EN-tab and as an 0.5g. suppository.

Literature and detailed information on Salazopyrin are available on request.

"The patients who received dummy tablets had more than four times the relapse rate of those receiving sulphasalazine".¹ (Salazopyrin).

Salazopyrin is a registered trade mark.



Both groups of patients had been satisfactorily maintained for 1-5 years on Salazopyrin prior to the study, in which they took Salazopyrin or placebo for 6 months.

1. Gut (1973) 14 923 - 926
2. Brit. med. J. (1959) 1 387 - 394
3. Lancet (1965) i 188 - 189
4. General Practitioner (1972) April 7 p11

Further information on request from:-
Pharmacia (Great Britain) Ltd.
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75 Uxbridge Road,
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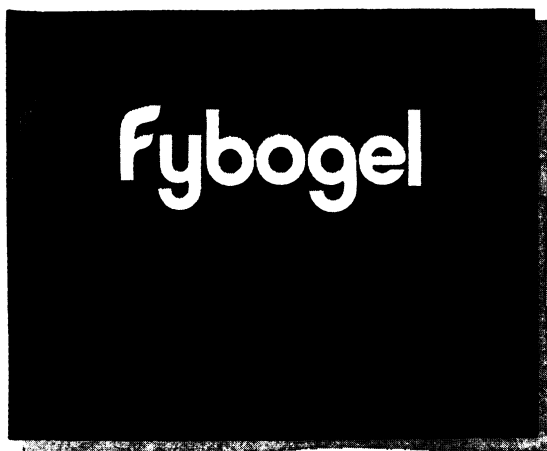


Pharmacia

In haemorrhoids Fybogel complements topical therapy, by raising the level of natural fibre in the diet.

Fybogel produces softer, well-formed stools. And that reduces straining—a principal cause of haemorrhoids. By complementing topical therapy Fybogel helps to provide a complete treatment for haemorrhoids.

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SOMMAIRE du FASCICULE 3-4

Bibliographie

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SOMMAIRE du FASCICULE 5-6

Bibliographie

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