

THIS WAY UP

# **Ulcerative Colitis?**

# dispose of a problem..

- • How Predfoam helps solve the problems currently associated with local therapy:
  - DISPOSABLE APPLICATORS
    - Clean and simple to use
  - UNIQUE METERED DOSE AEROSOL
    - Ensures dosage uniformity
  - PREDNISOLONE METASULPHOBENZOATE
    - High local tissue levels' 10-100 times those produced by enema formulations of prednisolone?

# PREDFOAM®

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# PREDFDAM

# **PREDFOAM**

# PREDNISOLONE METASULPHOBENZOATE

# Prescribing Information

Presentation: A white mucoadherent aerosol foam containing prednisolone metasulphobenzoate sodium equivalent to 20mg prednisolone per metered dose

Uses: Treatment of proctitis and ulcerative colitis.

Dosage and Administration: One metered dose inserted rectally once or twice daily for two weeks, extending treatment for a further two weeks when a good response is obtained.

Contra-indications, warnings, etc.

Contra-indications: Local conditions where infection might be masked or healing impaired e.g. peritonitis, fistulae, intestinal obstruction, perforation of the bowel.

Side effects: The consequences of systemic absorption should be considered with extensive use over prolonged periods. As with all rectal corticosteroids, prolonged continuous use is undesirable.

There is inadequate evidence of safety in human pregnancy

Topical administration of corticosteroids to pregnant animals can cause abnormalities of foetal development including cleft palate and intra-uterine growth retardation. There may therefore be a very small risk of such effects in the human foetus. Overdosage by this route is unlikely.

Legal Category : POM PL 0108/0101

Pack and basic NHS price: Box containing 1 fourteen-dose canister, 14 disposable nozzles and 14 plastic bags £7.00

Registered Trade Mark

References: (1) McIntyre, P.B. et al. (1985) GUT **26** 822-824 (2) Rodrigues, C. et al. (1987) Lancet, June 27th, 1497.

Full information is available on request



PHARMAX LIMITED
Bourne Road, Bexley, Kent. DA5 1N)
Telephone 0322 91321



# SPECIFICALLY DEVELOPED

# THE IMPORTANCE OF NIGHT-TIME COVER

An important factor in the causation of duodenal ulcer is nocturnal intragastric acidity.<sup>1,2</sup> During the day, production of gastric acid is desirable for natural digestion and as protection against unwanted ingested bacteria.

'Pepcid' PM, the first H<sub>2</sub>-receptor antagonist indicated solely for once-nightly use.

'Pepcid' PM, when administered at night, effectively controls nocturnal acidity in most duodenal-ulcer patients, providing rapid healing and swift relief of pain. 'Pepcid' PM has been shown to achieve up to 91% (124) of 136 patients) healing of duodenal ulcers within six weeks4 and up to 81% (62 of 77 patients) of gastric ulcers within eight weeks.5

That's 'Pepcid' PM. A small, once-nightly 40 mg tablet supplied in a convenient 28-day calendar pack to help maximise compliance.

# ABRIDGED PRODUCT INFORMATION

Full prescribing information is available and should be consulted 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.

Special reporting to the CSM required.

Issued January 1988.

TM denotes trademark

## References

- 1. Gledhill, T., et al., Gut, 1983, 24, 904. 2. Ireland, A., et al., Lancet, 1984, il, 274. 3. Santana, I. A., et al., Postgrad. med. J., 1986, 62 (Suppl. 2), 39. 4. Mann, S. G., Cottrell, J., Ital. J. Gastroenterol., 1987, 19 (Suppl. 3), 68. 5. Data on file, Merck Sharp & Dohme Research Laboratories.

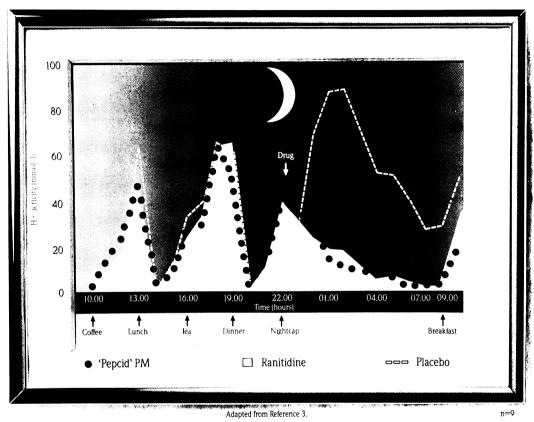


Thomas Morson Pharmaceuticals
Hertford Road, Hoddesdon, Hertfordshire
Division of Merck Sharp & Dohme Limited

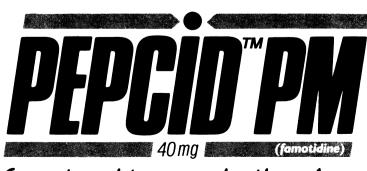


# FOR ONCE-NIGHTLY USE

# NIGHT-TIME COVER FROM A SINGLE DOSE<sup>3</sup>



Mean hourly intragastric H+ activity in healthy subjects taking one dose of either famotidine 40 mg, ranitidine 300 mg or placebo.<sup>3</sup>



One at night can make their day



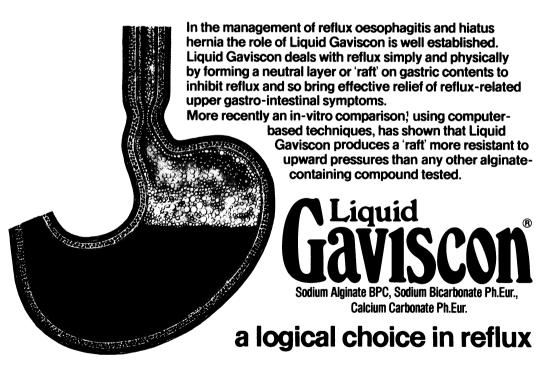


# The proven choice in distal inflammatory bowel disease

1. Ruddell WSJ et al. Gut 1980; 21: 885-889 2. Somerville KW et al. British Medical Journal 1985; 291: 866

PRESCRIBING INFORMATION: Presentation: White odourless aerosol containing hydrocortisone acetate PhEur 10%. <u>Uses</u>: Ulcerative colitis, proctosigmoiditis and granular proctitis. <u>Dosage and administration</u>: 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). <u>Contra-indications, warnings etc.</u>: 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, Pharmaceurical precautions: Pressurized containiner. 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. <u>Legal category</u>: POM. <u>Package Quantity & Basic NHS cost</u>: 25g canister plus applicator, £7.25. <u>Further Information</u>: 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. <u>Product Licence No.</u>: 0336/0021. Further information is available on request. <u>Stafford-Miller Ltd.</u>, Professional Relations Division, Hafrield, Herts. AL 10 0NZ.

# STRENGTH AGAINST REFLUX



# Prescribing Information

Active Ingredients: Sodium Alginate BPC 500mg, Sodium Bicarbonate Ph. Eur. 267mg per 10ml; Calcium Carbonate 160mg per 10ml dose. Indications: Heartburn, including heartburn of pregnancy, dyspepsia associated with gastric reflux, hiatus hernia and reflux oesophagitis. Contra-indications: None known. Dosage and Administration: Adults, children over 12: 10-20ml liquid after meals and at bedtime. Children under 12: 5-10ml liquid after meals and at bedtime.

Note: 10ml liquid contains 6.2mmol sodium. Basic NHS Cost: As at Jan. 1988: 500ml liquid £2.88, Irish Price IR £3.72. PL: 44/0058. Irish P.A. No.: 27/12/1.

# Reference

Washington, N. et al., Int. J. Pharmaceut. (1986) 28, 139-143
 Further information is available on request.
 Reckitt & Colman Pharmaceutical Division,
 Hull HU8 7DS.
 \*Registered trade mark.

# 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.



# 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.

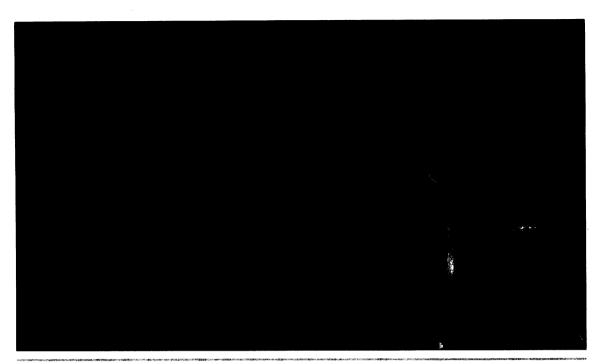
Indications: 1. Irritable bowel syndrome. 2. Gastro-

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 teratogenic 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,

duphar

Gaters Hill, West End, Southampton. SO3 3JD. Telephone: 0703 472281

C/Hosp Ad/1/88



# Lets ulcers heal by night and the stomach work by day

A single evening dose of Axid suppresses acid production only during the night<sup>1</sup> when mucosal damage may occur.

Because of its short half-life, Axid then produces minimal suppression of daytime gastric acid.

Axid produces effective ulcer healing<sup>2-4</sup> whilst allowing the stomach to work virtually normally during the day.



▼ ABBREVIATED PRESCRIBING INFORMATION. Presentation: Capsules containing 150mg or 300mg nizatidine INN. Uses: For the treatment of duodenal and bening asstriculer, and prevention of duodenal ulcer recurrence. Dosage and Administration: (For full information, see data sheet). Axid is administered orally. Adults: For duodenal and bening asstriculcer, the recommended daily dose is 300mg in the evening for 4 or, if necessary. 8 weeks: For prevention of duodenal ulcer recurrence, the recommended daily dose is

150mg in the evening. The elderly: Normally dosage modification is not required except in patients who have moderate to severe renal impairment. Children: Not recommended. Patients with impaired renal function: Moderate renal impairment (creatinine clearance less than 50ml/min), the dose should be reduced by 50% to 150mg in the evening. Severe renal impairment (creatinine clearance less than 20ml/min), the dose should be reduced by 75%, to 150mg on alternate days. Prevention of duodenal ulcer recurrence in moderate renal impairment (creatinine clearance less than 50ml/min), the dose may be reduced to

TSOmg on alternate days. Severe renal impairment (creatinine clearance less than 20ml/min), the dose may be reduced to 150mg every third day. Contra-indication: Known hypersensitivity to H<sub>2</sub>-receptor antagonists. Warnings. Usage in pregnancy: The safety of nizatidine for use during pregnancy has not been established. Usage in lactation: Administer to nursing mothers only if considered absolutely necessary. Drug interactions:

No interaction has been observed between nizatidine and aminophylline, theophylline, chlordiazepoxide, diazepam, metoprolol, warfarin or lorazepam. Nizatidine does not inhibit the hepatic cytochrome P450-linked drug metabolising enzyme system. Precautions: Patients with impaired liver or kidney function should be treated with caution (see data sheet). Side-effects: Possible side-effects include headache, asthenia, chest pain, myalgia, abnormal dreams, somnolence, rhinitis, pharyngitis, cough, pruritus,

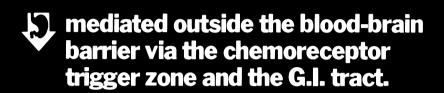
sweating and reversible, asymptomatic elevations of transaminases.

Overdosage: There is no experience of overdose in humans. Tested at very high doses in animals, nizatidine has been shown to be relatively non-toxic. Treatment: Symptomatic and supportive therapy is recommended. Activated charcoal may reduce nizatidine absorption an haemodialysis may remove absorbed nizatidine. Legal Category: POM Product Licence Numbers: Capsules 150mg 0006/0230. Capsules 300mg 0006/0231. Basic NHS Cost: Per 28 day calendar pack – 150mg capsules £13.44;300mg capsules £25.76. Date of Preparation: August 1987. Full prescribing information is available from: Eli Lilly &

1987. Full prescribing information is available from: Eti Lilly & Company Limited, Dextra Court, Chapel Hill, Basingstoke, Hampshire RG21 25Y. Telephone: (0256) 473241. References: 1. Dammann HG et al., Scand J Gastroenterol 1987; 22: 56. 2. Simon B et al, Ibid 61. 3. Naccaratto R et al, Ibid 71. 4. Cerulli MA et al, Ibid 79. AXID is a Lilly trademark.

# domperidone







🖍 resolves gastric stasis, accelerates emptying.



relieves dyspeptic nausea more effectively than metoclopramide.1,2



# Evoxin

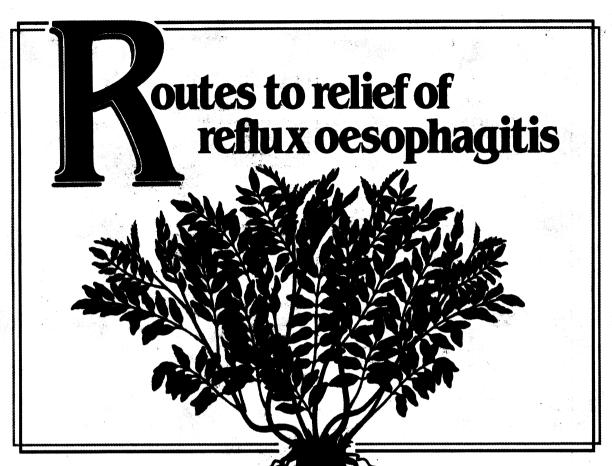
a move in the right direction for relief of dyspeptic nausea

Adults: symptomatic relief of acute nausea and vomiting from any cause (Not for chronic use). Also in Parkinson's Disease for up to 12 weeks' treatment of nausea and vorniting caused by L-dopa and bromocriptine. **Evexin Tablets:** (domperidone 10rng), Cartons of 30 in blister strips of 10. Basic NHS cost 30 Tablets: £3.26. Pt. 0071/0287.

Contra-Indications/warnings etc: No specific contra-indications. In common with other dopamine blocking agents Evoxin produces a rise in serum prolactin which may be associated with galactorrhoea, and less commonly gynaecomastia. Safety of Evoxin in pregnancy has not yet been established. Evoxin is a trade mark. Further information available from Sterling Research Laboratories, Onslow Street, Guildford,

oc. Med. Int. Cong. Symp. Series 1981, No. 36: 77-79. atherapeutica 1979; 2(3): 140-146.





Iginate protection

Designed to protect the oesophagus by impeding gastro-oesophageal reflux, the alginate component of Pyrogastrone is derived from the knotted wrack seaweed (Ascophyllum nodosum).

Buffering antacids are added for symptom relief.

Active healing

Added to an alginate antacid, low-dose carbenoxolone can enhance the rate of symptom relief and significantly increase healing of oesophagitis. This active healing component of Pyrogastrone is synthesised from glycyrrhizic acid, a constituent of liquorice root.

# Pyrogastrone

carbenoxolone, aluminium hydroxide and magnesium trisilicate in an alginate base

merging the routes to relief

# A B B R E V I A T E D P R E S C R I B I N G I N F O R M A T I O N

Presentation: Yellow elliptical convex film-coated tablets, containing 0.5g sulphasalazine (USP) with Pharmacia logo on one side Uses: 1 Induction and maintenance of remission of Ulcerative Colitis. 2. The treatment of active Crohn's disease. Dosage and Administration: Salazopyrin EN-tabs should not be broken or crushed. A. ULCERATIVE COLITIS Adults Severe: 2-4 tablets four times a day given in conjunction with steroids as part of an intensive management regime. The nighttime interval between doses should not exceed eight hours. In severe disease rapid passage of the tablets may reduce the effect of the drug. Mild moderate: 2-4 tablets four times a day given in conjunction with steroids. Maintenance: With induction of remission reduce the dose gradually to four tablets ner day in divided doses. This dosage should be continued indefinitely, since discontinuance even several years after an acute attack has been shown to be associated with a four fold increase in the risk of relapse. Children: The dose is reduced in proportion to body weight. Severe: 40-60mg/kg per day. Mild-Moderate: 40-60mg/kg per day. Maintenance: 20-30mg/kg per day. B. CROHN'S DISEASE In active Crohn's disease Salazopyrin EN-tabs should be administered as for severe ulcerative colitis Contra-indications: Sensitivity to sulphonamides and salicylates. Infants under 2 years of one Precautions - Blood checks and LFTs should be carried out monthly for 3 months. Care in renal or hepatic disease, in glucose 6 phosphate dehydrogenase deficiency and porphyria. Adverse Effects: The most commonly encountered reactions are nausea, headache, rash, loss of appetite and raised temperature. The following adverse reactions have been reported: Haematological: Heinz body anaemia, methaemoglobinaemia, hypoprothromb inaemia, haemolytic anaemia, leucopenia agranulocytosis, aplastic anaemia, megaloblastic anaemia, thrombocytopenia. Hypersensitivity reactions: Generalised skin eruptions Stevens Johnson syndrome. exfoliative dermatitis, epidermal necrolysis pruritus, urticaria, photosensitisation, anaphylaxis, serum sickness, drug fever. periorbital oedema, conjunctival and scleral injection, arthralgia, allergic myocarditis, polyarteritis nodosa, LE phenomenon and lung complications with dyspnoea, fever, cough, eosinophilia, fibrosing alveolitis. Gastro-intestinal reactions: Stomatitis, parotitis, pancreatitis, hepatitis CNS reactions: Vertigo, tinnitus, peripheral neuropathy, ataxia, convulsions, insomnia, mental depression and hallucinations. Fertility: Oligospermia reversible on discontinuance of drug. Renal reactions: Crystalluria, haematuria, proteinuria and nephrotic syndrome. Pregnancy and Lactation: Long term clinical usage and experimental studies have failed to reveal any teratogenic or icteric hazards. Amounts of drug in milk should not present a risk to a healthy infant. Basic NHS Cost: EN-tabs 125 £12.75. Legal Status: POM Product Licence Number:



PL 0009/5007R. Issued June 1988

Pharmacia Ltd., Pharmacia House, Midsummer Boulevard, Milton Keynes, MK9 3HP. Salazopyrin and EN tabs are trade mark. 026/6/88.

Further information available from:

# IF ANYONE TELLS YOU THERE IS AN ALTERNATIVE FIRST-LINE REMISSION THERAPY FOR ULCERATIVE COLITIS SHOULD YOU BELIEVE THEM?



# Salazopyrin® EN=tabs enteric coated sulphasalazine

REMEMBER. THERE IS ONLY ONE FIRST-LINE REMISSION THERAPY FOR ULCERATIVE COLITIS.