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

Zantac 300

RANITIDINE

The sooner the better

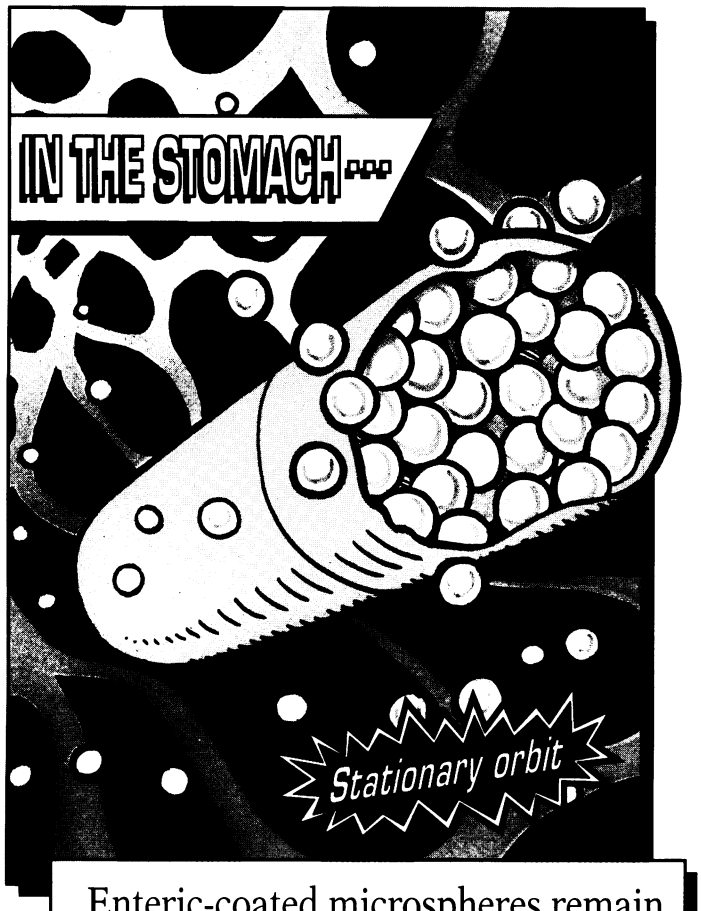
PRESCRIBING INFORMATION: INDICATIONS: Duodenal ulcer, benign gastric ulcer, ulcers associated with non-steroidal anti-inflammatory drugs (NSAIDs), oesophageal reflux disease, severe oesophagitis, chronic episodic dyspepsia. **DOSAGE:** *Adults:* Duodenal ulceration and gastric ulceration: A single 300mg 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 H_2-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

Creon arrives rather than travelling in hope



Enteric-coated microspheres remain protected against gastric acid whilst mixing thoroughly with food ...

Rising pH rapidly releases active pancreatin for thorough digestion and control of steatorrhoea

creon®

Microspheres

pancreatin

Superior control of steatorrhoea†

†Compared with standard enteric-coated tablets in pancreatic insufficiency[1,2]

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, or 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.

References

1. Stead RJ et al. *Thorax* 1987;**42**:533-537. 2. Beverley DW et al. *Arch Dis Child* 1987;**62**:564-568.

duphar

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

® Registered Trade Mark

CRE/PI/Ad/91

CLOCKWORK ORANGE

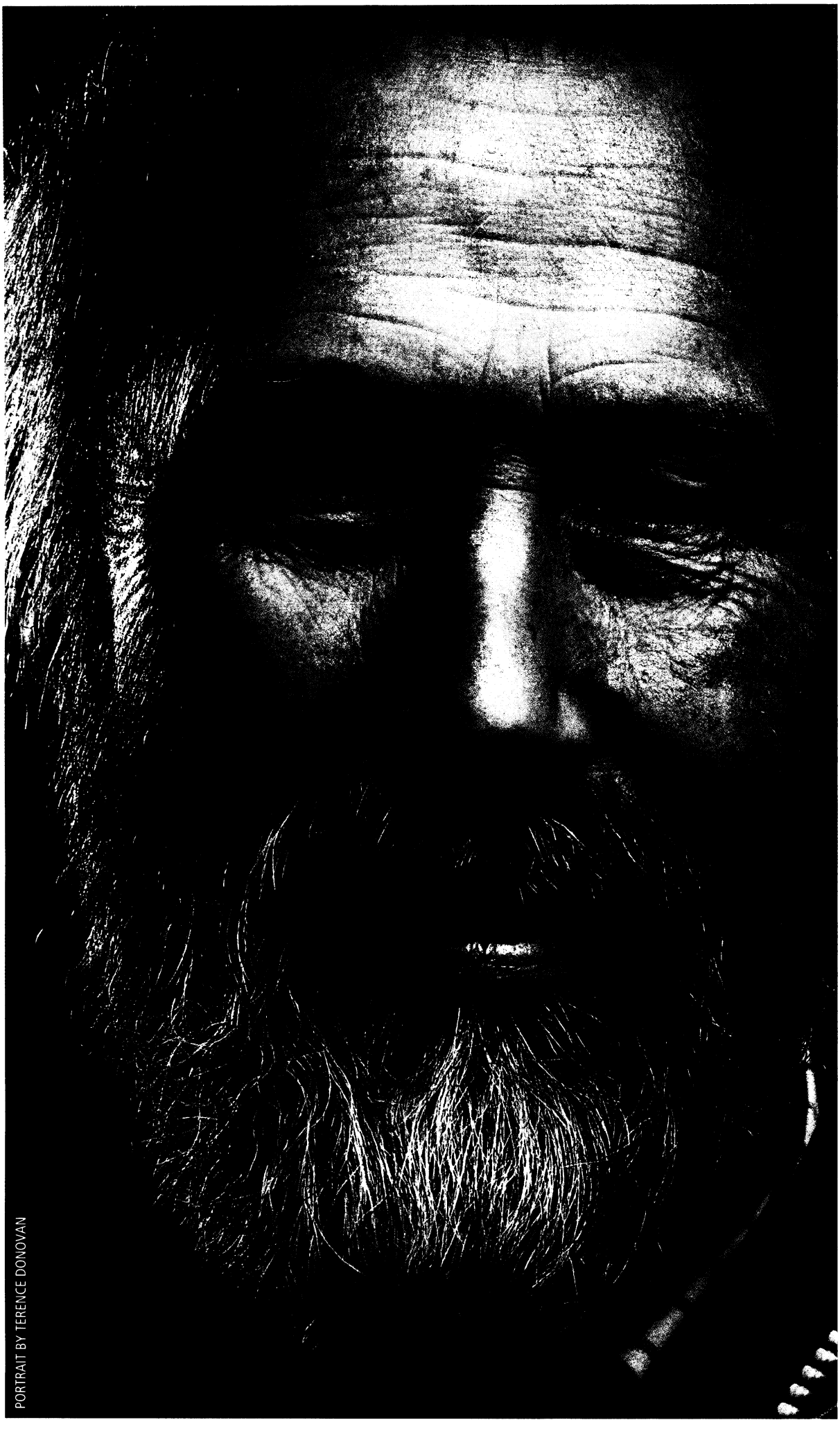
Fybogel Orange contains natural fibre
and can be trusted to relieve constipation quickly
and maintain regularity.[1]

®

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** 27/2/1, Fybogel Orange 44/0068, Irish PA 27/2/2. **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.

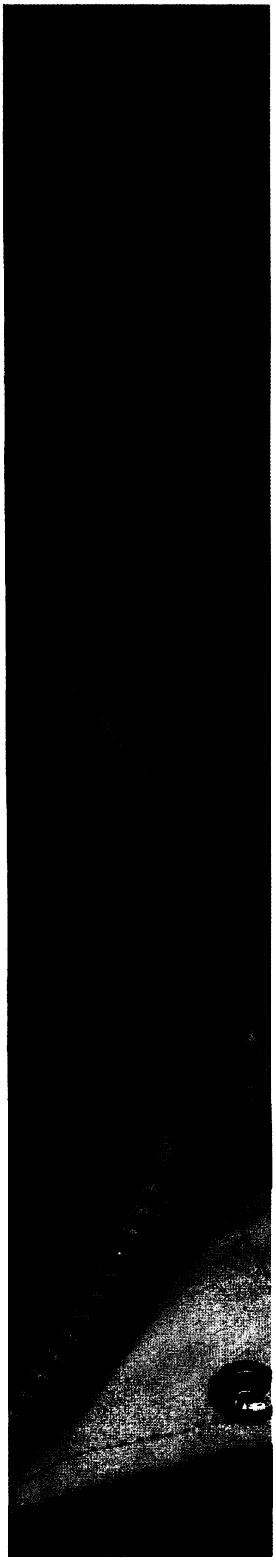


PORTRAIT BY TERENCE DONOVAN

References 1. Difference in cost between once-nightly four week courses of 'Tagamet' and the least expensive alternative H_2-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. **Contra-indication** 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. 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 H_2-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 H_2-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]

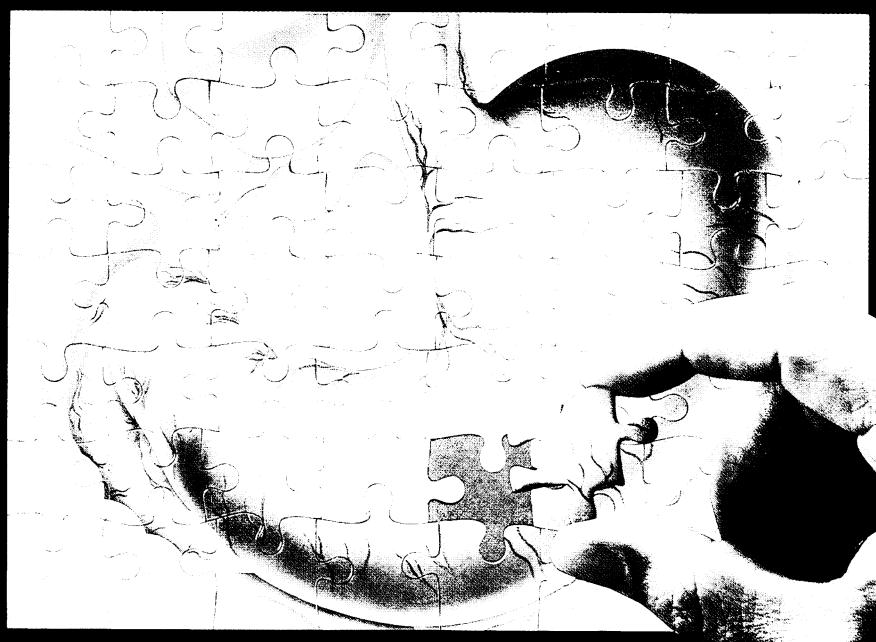
And that's quite a performance, isn't it?

TAGAMET

CIMETIDINE

GREAT BRITISH PERFORMER

Unlike H_2-antagonists, Cytotec puts back the G.I. prostaglandins NSAIDs take out.



NSAIDs cause ulcers by depleting mucosal protective prostaglandins.

Cytotec, a prostaglandin analogue, restores this protection.

Unlike H_2-antagonists[1], Cytotec not only inhibits acid secretion, but also stimulates bicarbonate secretion[2], increases mucus secretion[1] and enhances gastric mucosal blood flow[3].

Consequently Cytotec prevents ulceration in the majority of patients taking NSAIDs.[4,5]

CYTOTEC®
misoprostol

Soften the impact of NSAIDs on the stomach

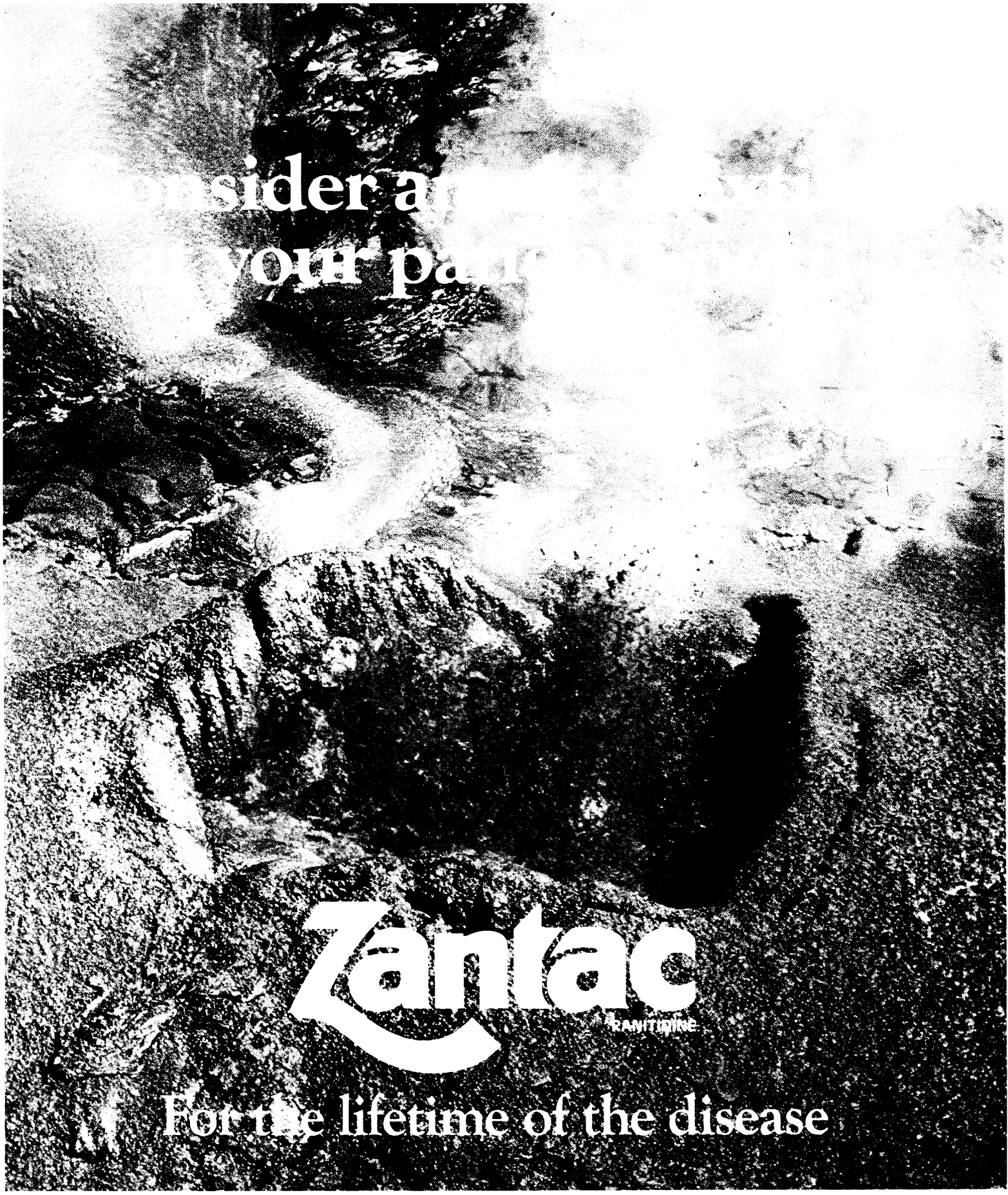
CYTOTEC Abbreviated Prescribing Information. Presentation: Tablet containing misoprostol 200 micrograms. **Uses:** Healing of duodenal and gastric ulcer induced by non-steroidal anti-inflammatory drugs (NSAID) in arthritic patients at risk, whilst continuing NSAID therapy. Prophylaxis of NSAID-induced ulcers. Healing of duodenal and gastric ulcer. **Dosage: Adults including the elderly. Healing of duodenal and gastric ulcer:** 800 micrograms daily in 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. In women – menorrhagia, intermenstrual bleeding, vaginal bleeding. **Basic NHS Price:** £13/56 tablets. **Product Licence Number:** 0020/0115.

References: 1. Wilson DE, Quadros E, Rajapaksa T, Adams A, Noar M. Dig Dis Sci 1986; 37 (suppl 1): 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. **4.** Graham DY, Agrawal NM, Roth SH. Lancet 1988; ii: 1277-1280. **5.** Searle Data on file.

SEARLE
GOLD CROSS

G.D. Searle & Co. Ltd.,
P.O. Box 53, Lane End Road, High Wycombe, Bucks. HP12 4HL.

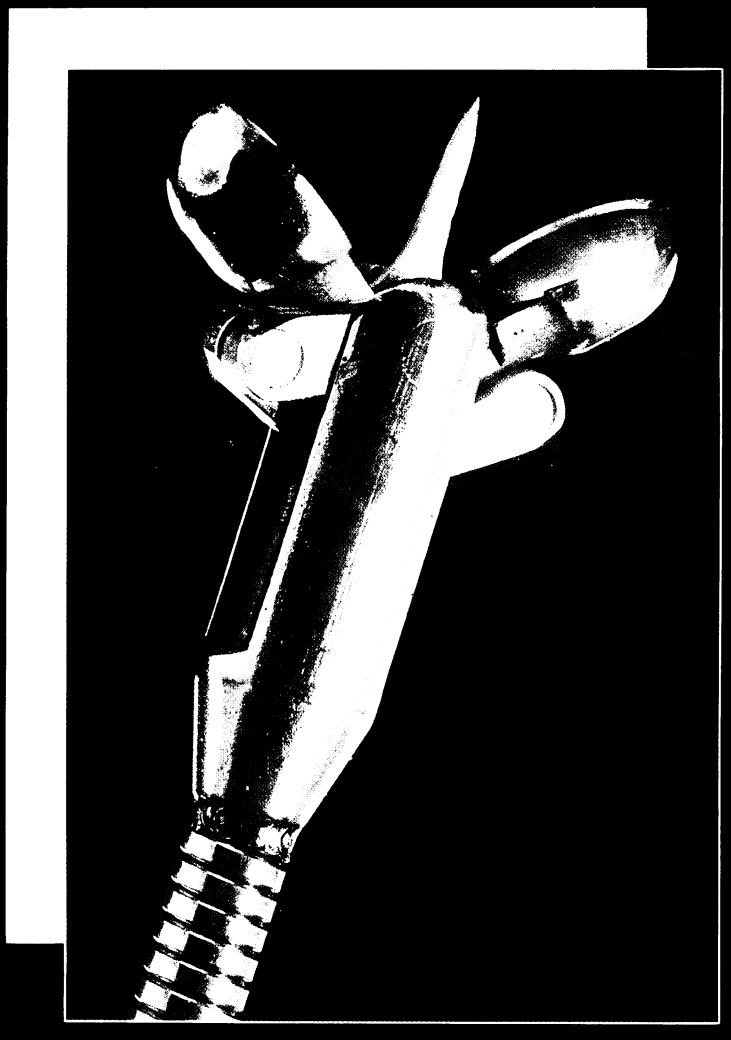
Data sheet with full prescribing information is available on request.



PRESCRIBING INFORMATION: INDICATIONS: DUODENAL ULCER, BENIGN GASTRIC ULCER, ULCERS ASSOCIATED WITH NON-STEROIDAL ANTI-INFLAMMATORY DRUGS (NSAIDs), REFLUX OESOPHAGITIS, CHRONIC EPISODIC DYSPEPSIA. **DOSAGE:** 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 RELAPSERS 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 H_2-RECEPTOR ANTAGONISTS RARE CASES OF BRADYCARDIA AND A-V BLOCK (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: 01-422 3434

Glaxo

THINK ENDOSCOPY



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It is easy to misconstrue endoscopy as a process of observing, monitoring and diagnosing. However, as endoscopists are aware, it is increasingly a means of delivering specialised diagnostic and therapeutic accessories to effect a variety of minimally invasive techniques. KeyMed supplies the comprehensive Olympus range of flexible accessories for all routine and specialised applications. Most accessories are fully autoclavable for convenience and to assist your infection control policy. We are always pleased to visit and demonstrate the range of accessory instrumentation. When you think of endoscopic accessories, think KeyMed.

Stock Road, Southend-on-Sea, Essex SS2 5QH. Telex: 995283. Facsimile: (0702) 465677. Telephone: (0702) 616333 (24 lines).

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®

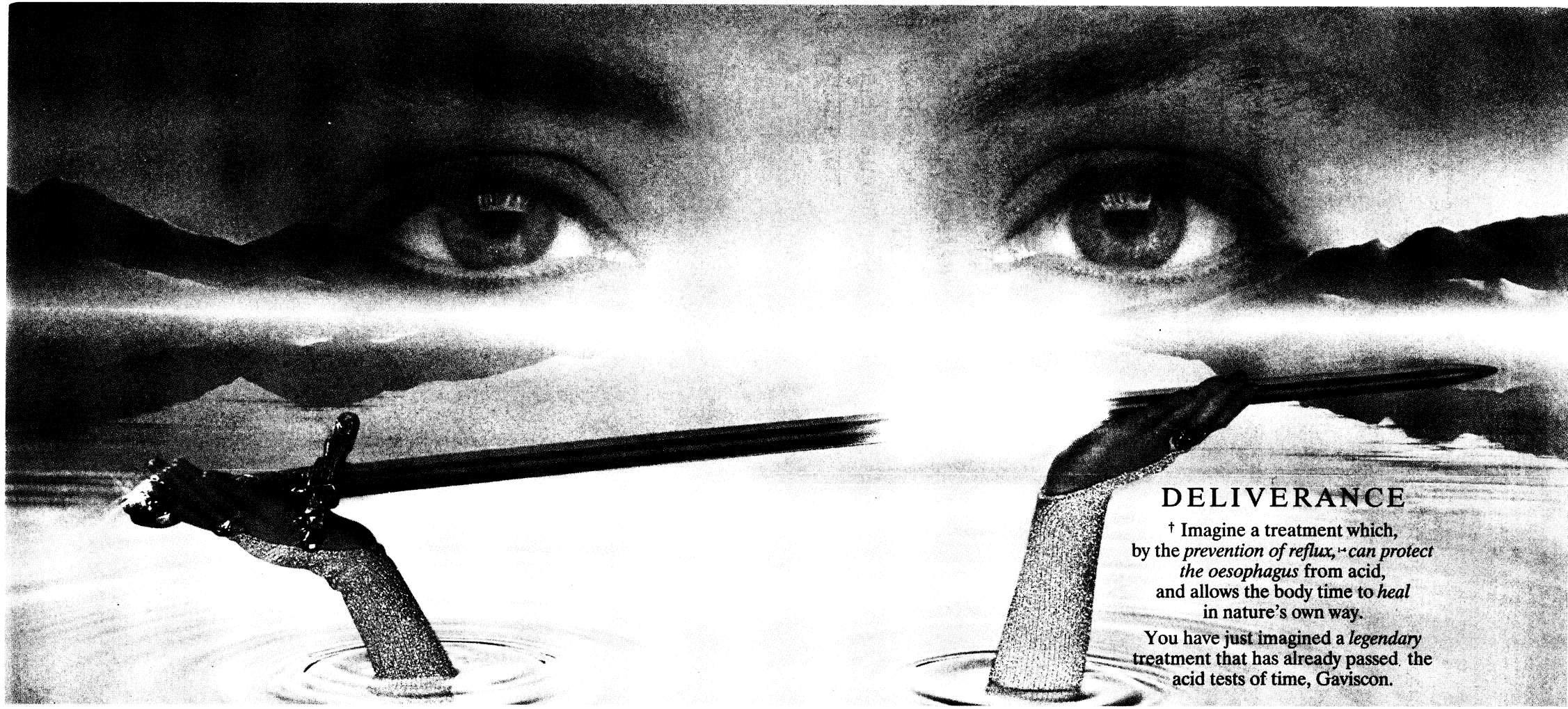
mebeverine

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. Gastrointestinal 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 Duphar Laboratories Limited, Gaters Hill, West End, Southampton, SO3 3JD. Telephone: 0703 472281

C/Hosp Ad/1/88



liquid: **sodium alginate BP, sodium bicarbonate Ph.Eur., calcium carbonate Ph.Eur.** tablets: **alginic acid BP, sodium bicarbonate Ph.Eur., aluminium hydroxide BP, magnesium trisilicate Ph.Eur.**

STOP REFLUX. PREVENT OESOPHAGITIS.†

Prescribing Information. Liquid Gaviscon. Active Ingredients: Sodium alginate BP 500mg, sodium bicarbonate Ph.Eur. 267mg and calcium carbonate Ph.Eur. 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:** 500ml liquid £2.70. **PL:** 44/0058. **Gaviscon Tablets. Active Ingredients:** Alginic acid BP 500mg, sodium bicarbonate Ph.Eur. 170mg, dried aluminium hydroxide gel BP 100mg, magnesium trisilicate Ph.Eur. 25mg per tablet. In a sugar free peppermint flavoured base containing calcium carbonate (40mg) and saccharin. **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: 1 or 2 tablets after meals and at bedtime. Children under 12: 1 tablet after meals and at bedtime. **Note:** 1 tablet contains 2.1mmol sodium. Tablets should be thoroughly chewed. **Basic NHS Cost:** 60 tablets £2.25. **PL:** 44/0021. **References:** 1. Washington N. (1990) *Drug Invest.* **2**(1) 23-30. 2. Stanciu C. & Bennett J.R. (1974) *Lancet* 109-111. 3. Bortolotti M. et al (1985) *In Esophageal Disorders, Pathophysiology and Therapy,* ed. De Meester & Skinner, Raven Press 613-616. 4. Branicki F.J. et al (1988) *J.Ambulat. Monitoring* **1**(1) 61-72. Further information is available on request. Reckitt & Colman Products, Dansom Lane, Kingston-Upon-Hull, HU8 7DS. * GAVISCON is a registered trademark GI/91

RECKITT & COLMAN PRODUCTS

THE QUALITIES OF LEADERSHIP

Experience

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

Trust

Equally as effective as steroid enemas,[1,2] Colifoam is well documented and is the most prescribed topical treatment[3] for ulcerative colitis.

Confidence

Colifoam's simplicity and effectiveness has transformed the lives of thousands of patients, enabling them to pursue active social and working lives.[1]

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.

When your patients need Mesalazine ...they really need

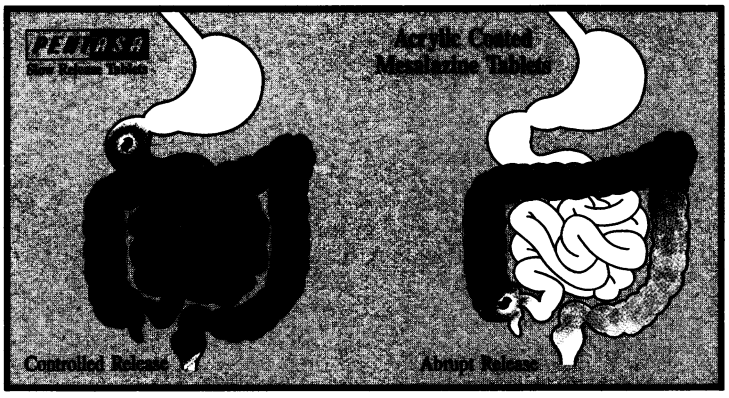
PENTASA

Slow Release Tablets

HERE ARE JUST 3 REASONS WHY

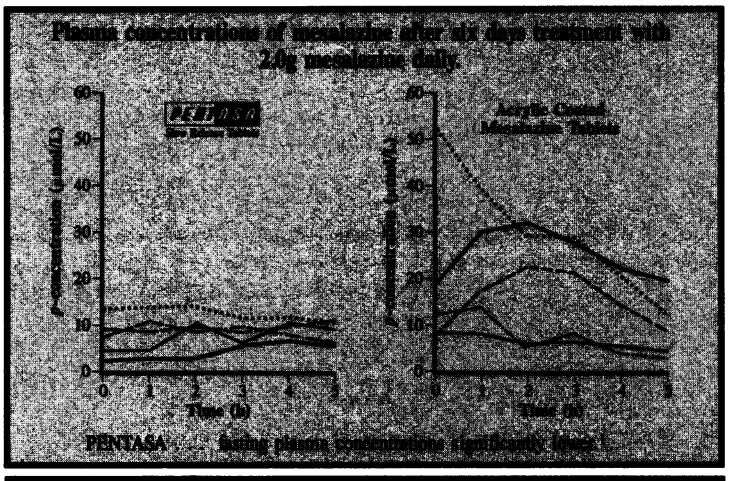
1. CONTROLLED SLOW RELEASE THROUGHOUT THE GI TRACT

PENTASA releases mesalazine gradually throughout the large and small intestine.[1] This avoids unduly high local concentrations, incomplete metabolism to acetyl mesalazine and undesirably high systemic absorption of mesalazine itself. The plasma concentration peaks of drug and metabolite during treatment with acrylic coated mesalazine suggest a more abrupt release of mesalazine from these preparations compared with PENTASA.[1]



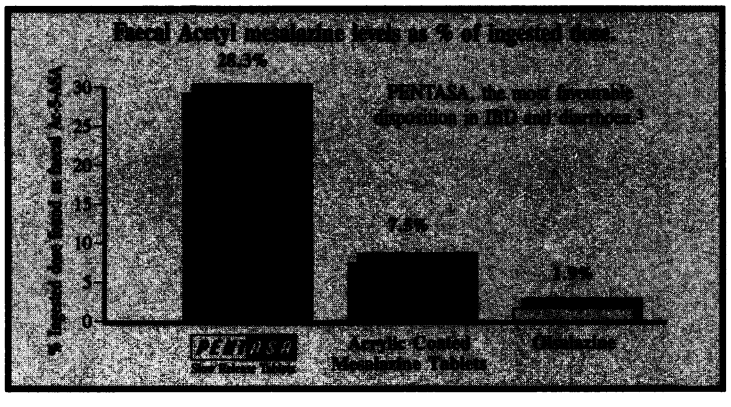
2. MINIMAL POTENTIAL FOR KIDNEY DAMAGE

With PENTASA there is virtually complete metabolism to acetyl mesalazine which gives low plasma concentrations of mesalazine[2] and reduces the likelihood of nephrotoxicity.



3. CLINICALLY EFFECTIVE CONCENTRATIONS IN THE GUT LUMEN

The controlled slow release from PENTASA results in clinically effective concentrations in the gut. In patients with inflammatory bowel disease and diarrhoea the disposition of PENTASA is superior to both acrylic coated mesalazine and olsalazine.[3]



PENTASA Mesalazine... when and where it's needed

Slow Release Tablets for the maintenance of remission in mild to moderate ulcerative colitis.

References: 1) Christensen LA et al (1990) Aliment. Pharmacol. Therap 4:523-533 2) Fallingborg J et al (1988) Falk Symposium No 49 3) Rijk MCM et al (1990) Abstract – Spring Meeting of Dutch Gastroenterologists

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. **Package 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 6AR. **Date of preparation:** April 1991. PENTASA is a registered trademark.

Further information is available from:
Ferring Pharmaceuticals Ltd., 11 Mount Road, FELTHAM, Middlesex. TW13 6AR.

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Proven clinical efficacy[4,5]

Easy to use disposable applicators – clean and convenient for patients at home or at work

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Prescribing Information
Predfoam Prednisolone metasulphobenzoate sodium equivalent to 20mg prednisolone per metered dose. **Uses:** Treatment of proctitis and ulcerative colitis. **Dosage and administration:** Adults and elderly patients: 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. Use should be discontinued at the discretion of the physician once the disease is stable and under control. Children: Not recommended. **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. **Precautions:** The product should be used with extreme caution in the presence of severe ulcerative colitis. The possible occurrence of masking of local or systemic infection should be borne in mind when using this product. For rectal use only. **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. **Use in pregnancy and lactation:** 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:** Overdosage by this route is unlikely. **Pharmaceutical Precautions:** Pressurised container. Protect from sunlight and do not expose to temperatures above 50°C. Do not pierce or burn even after use. Shake before use. **Product Licence Number** 0108/0101. **Product Authorisation Number** 100/40/1.

References
1. Data on file, Pharmax. 2. K.W. Somerville, et al (1985) BMJ, 291-866. 3. W.S.J. Ruddell, et al (1980) Gut, 885-889. 4. C. Rodrigues, et al (1987), The Lancet, i, 1497. 5. Data on file, Pharmax.

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The future for your ulcerative colitis patients

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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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