Prescribing information Klaricid 500

Presentation: Yellow ovaloid film coated tablets containing 500mg of clarithromycin. Each tablet is engraved with a on one side. Indications: Klaricid in the presence of acid suppression effected by omeprazole is indicated for the eradication of H. pylori in patients with duodenal ulcers. **Dosage and Administration:** Adults: Clarithromycin 500mg t.d.s. for 14 days plus oral omeprazole 40mg o.d. The pivotal study was carried out with omeprazole 40mg o.d. for 28 days, whilst supportive studies were carried out with omeprazole 40mg o.d. for 14 days. See omeprazole data sheet for further information on omeprazole dosing. Contraindications, Warnings etc: Contraindications: Known hypersensitivity to macrolide drugs. Do not administer with ergot derivatives. Precautions: Caution in adults with impaired hepatic and renal function. Do not administer to paediatric patients with hepatic or renal failure. Prolonged or repeated use of clarithromycin may result in an overgrowth of non-susceptible bacteria or fungi. If superinfection occurs, clarithromycin should be discontinued and appropriate therapy instituted. Caution in patients taking drugs metabolised by the cytochrome P450 system as there may be elevations in their serum levels. H. pylori organisms may develop resistance to clarithromycin in a small number of patients. Interactions: Potentiation of terfenadine, astemizole, theophylline, digoxin, warfarin and carbamazepine. Interaction of Klaricid tablets with simultaneously administered zidovudine in adults. No interaction with oral contraceptives. Side-effects: Klaricid is generally well tolerated. Side-effects include nausea, vomiting, diarrhoea and rarely pseudomembranous colitis, abdominal pain, headache, taste perversion, reversible tongue discolouration, glossitis and stomatitis. Allergic reactions including anaphylaxis and Stevens-Johnson syndrome, and transient central nervous system side-effects have been reported. Hepatic dysfunction has also been reported. Use in Pregnancy and Lactation: The safety of Klaricid during pregnancy and breast feeding has not been established, and therefore if a patient becomes pregnant Klaricid should only be used if benefits outweigh risks. Clarithromycin has been found in the milk of lactating animals and humans. Overdose: Should be treated with gastric lavage and supportive measures. Basic NHS Price: £4.82 per day. Legal Category: POM. Marketing Authorisation Number: PL 0037/0254: 42 tablet calendar blister pack. Further information is available on request from Abbott Laboratories Ltd., Norden Road, Maidenhead, Berkshire SL6 4XE. Date of Preparation December 1995.



OUR WORLD

IS CHANGING FOR GOOD.

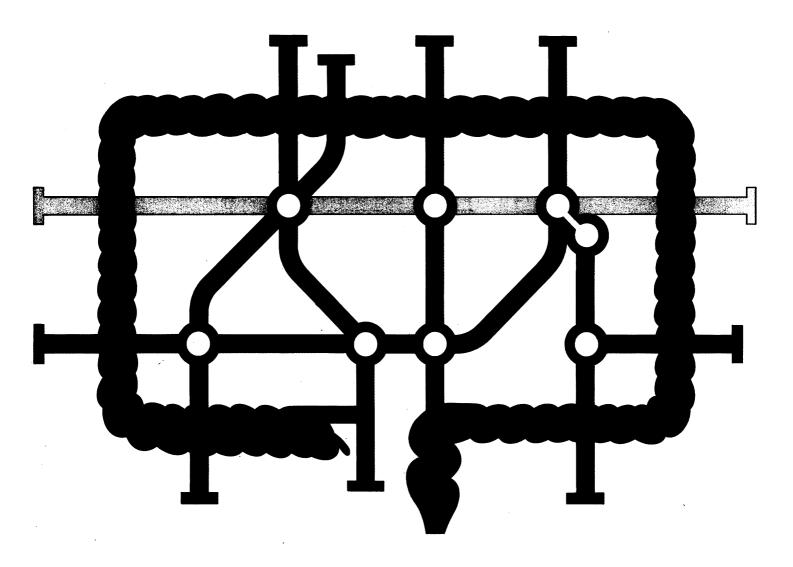
ULCER TREATMENT

IS CHANGING FOR GOOD.



CONSISTENTLY HIGH ERADICATION OF *H. PYLORI.**

* Klaricid 500mg t.d.s. plus omeprazole 40mg o.d.



COLIFOAM 10% but recent is one a central

FIRST CLASS TREATMENT WHICH TRAVELS TO WORK

- Colifoam is highly effective for distal ulcerative colitis. (1)
- The retrograde spread of Colifoam increases with the extent of disease. (2)
- Colifoam is easier to retain than liquid enemas and causes less interference with social, sexual and occupational activities. (1,3)

PRESCRIBED WITH CONFIDENCE FOR OVER 20 YEARS.

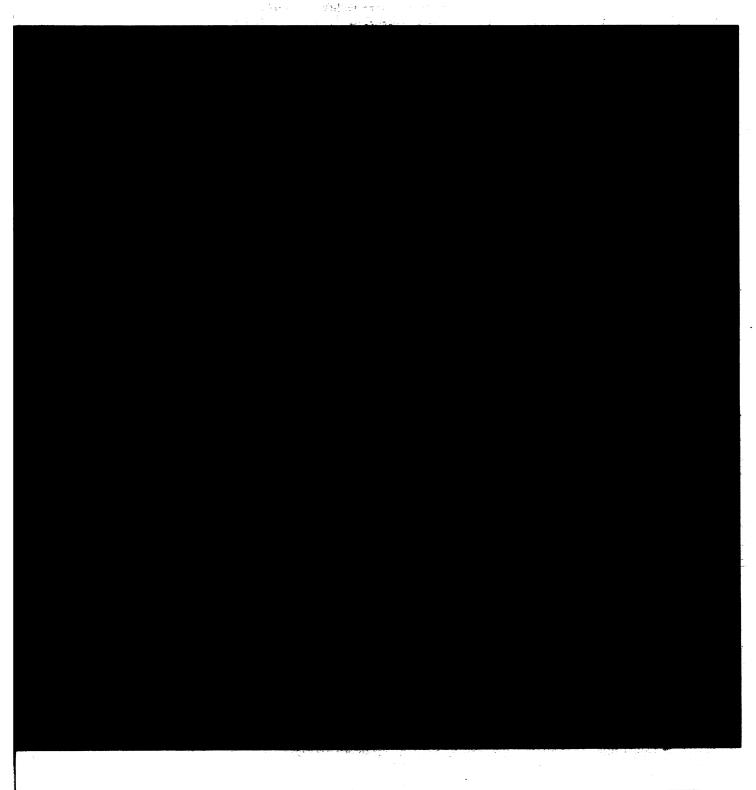
PRESCRIBING INFORMATION: Presentation: White odourless aerosol containing hydrocortisone acetate PhEur 10% w/w. Uses: Ulcerative colitis, proctosigmoiditis and granular proctitis. Dosage and administration: One applicatorful inserted into the rectum once or twice daily for two or three weeks and every 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. Although uncommon at this dosage, local irritation may occur. **Pharmaceutical precautions:** Pressurised container containing flammable propellant. Protect from sunlight and do not expose to temperatures above 50°C. Keep away from sources of ignition. Do not pierce or burn even after use. Do not refrigerate, store below 25°C. Keep out of reach of children. For external use only. **Legal category:** POM. **Package quantity & basic NHS cost:** 20.8g canister plus applicator, £7.07. Provides approximately 14 doses. **Product Licence no:** 0036/0021. **References:** 1. Somerville KW *et al.* BMJ 1985;291:866. 2. Farthing MJG *et al.* BMJ 1979;2:822-824. 3. Ruddell WSJ *et al.* Gut 1980;21:885-889. Further information is available on request from Stafford-Miller Ltd., Broadwater Road, Welwyn Garden City, Herts. AL7 3SP. **Code:** DO2665.

KEEP ACID WHERE IT WORKS NOT WHEREIT HURTS

Sometimes it's easy to see the damage that acid can cause. But rather than argue that acid should no longer be produced, why not just stop it getting into the environment?

Gaviscon does this by keeping acid where it works, not where it hurts. It forms a soothing alginate barrier which prevents acid from rising into the oesophagus, bringing rapid relief to 4 out of 5 reflux patients.^{1,2,3}



In fact, it's just what you need to put stomach acid in its place.



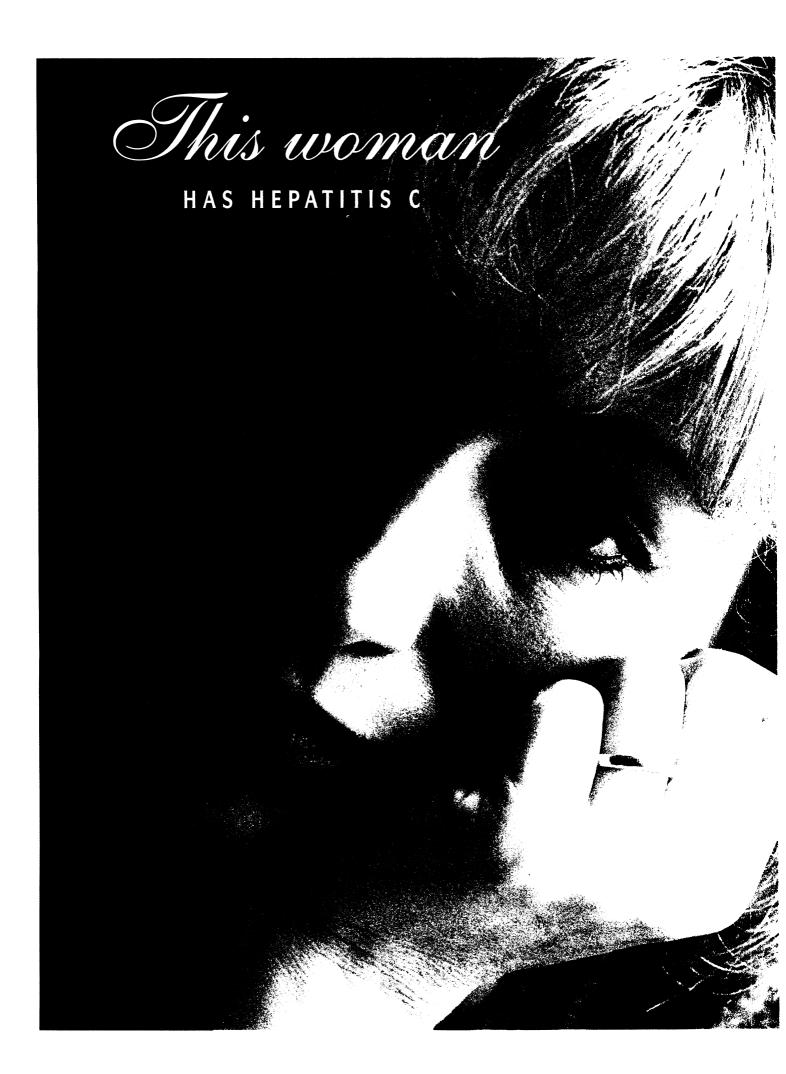
liquid: sodium alginate BP, sodium bicarbonate Ph.Eur., calcium carbonate Ph.Eur. tablets: alginic acid BP, sodium bicarbonate Ph.Eur., aluminium hydroxide BP, magnesium trisilicate Ph. Eur.

Keeps acid in its natural environment

None known. **Dosage and Administration:** Adults and children over 12: 1 or 2 tablets after meals and at bedtime. Children 6-12: 1 tablet after meals and at bedtime. **Note:** 1 tablet contains 2.1mmol odium. Tablets should be thoroughly chewed. Basic NHS Cost: 60 tablets £2.25. PL: 0063/0033 Gaviscon Tablets, 0063/0029 Gaviscon Tablets Lemon Flavour. Legal Category: GSL. (PO). Holder of product licences: Reckitt & Colman Products Limited, Dansom Lane, Hull, HU8 7DS. Gaviscon and the sword and circle symbol are registered trademarks. Date of preparation: 27/7/95.

- Chevrel B. (1980) J. Int. Med. Res. 8: 300.
 Ward A.E. (1989) Br. J. Clin. Prac. 43 (2) Suppl. 66: 52.
 Williams D.L. et al. (1979) J. Int. Med. Res. 7: 551.





Do you tell here IT COULD BE FATAL?

85,000 people in the UK have chronic HCV*



50,000 of them will develop cirrhosis*



10,000 will develop liver cancer*



Many will die prematurely



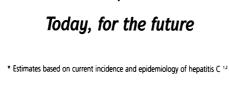
She could be one of them

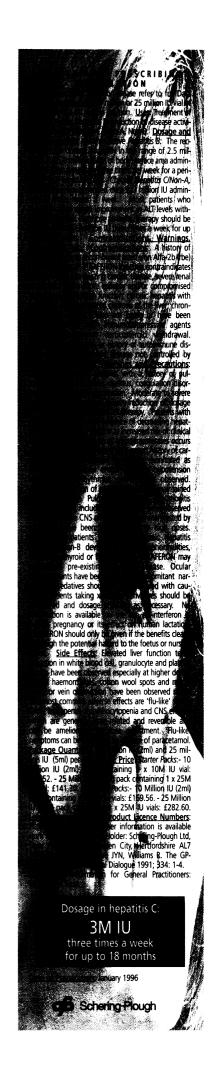


Viraferon is not a vaccine, nor a miracle cure.

But should this patient develop chronic HCV it could save her life.







STAY HEALED



NOW APPROVED IN MAINTENANCE

Lansoprazole

[†] Up to 87% remission rate in reflux oesophagitis after 1 year. (Range 69-87%)¹⁻⁴

ZOTON* ▼ Lansoprazole: Abbreviated Prescribing Information Presentation: Two tone lilac/purple hard gelatin capsule containing 30 mg lansoprazole, yellow hard gelatin capsule containing 15 mg lansoprazole as enteric coated granules. Indications: Healing and maintenance of duodenal ulcer, and gastro-oesophageal reflux disease (GORD), healing of benign gastric ulcer, and reflux oesophagitis. Also benign peptic lesions including reflux oesophagitis unresponsive to H2 receptor antagonists. Dosage and Administration: Lansoprazole should be administered once daily. Duodenal ulcer: 30 mg daily for 4-8 weeks, then 15 mg for maintenance dose. Reflux oesophagitis: 30 mg daily for 4-8 weeks, then 15 mg for maintenance dose. Benign gastric ulcer: 30 mg daily for 8 weeks. The maintenance dose in GORD can be increased to 30 mg depending on patient response. Do not chew or crush capsules. Swallow whole. No dosage adjustment is necessary in the elderly, or patients with renal or hepatic impairment. There is no experience with Lansoprazole in children. Contra-indications: No known contraindications to Lansoprazole, Precautions: As with other antiulcer therapies the possibility of malignancy should be excluded when gastric ulcer is suspected. Pregnancy and Lactation: There is no experience with the use of lansoprazole in pregnancy, and its use should be avoided. Animal studies indicate Lansoprazole is excreted into breast milk, there is no information on secretion into breast milk in humans. Breast feeding should be discontinued if the use of Lansoprazole is considered essential. Side effects: Generally transient and self limiting, including gastro-intestinal disturbances, headache, dizziness, dry mouth, fatigue, rashes, depression and increases in liver function tests. Arthralgia, peripheral oedema, and haematological changes have been reported rarely. Legal Category: POM. Package Quantities: 30mg capsules: Blister packs of 56, 28, 14 and 7 (hospital starter pack) capsules. 15mg capsules: Blister packs of 56, and 28. Product Licence No: PL 0095/0264 30mg capsules. PL 0095/0302 15mg capsules. Cost: 30mg capsules. 7 £9.09 (hospital starter pack), 14 £18.18, 28 £33.36, 56 £66.72. 15mg capsules: 28 £18.80, 56 £37.60. Full prescribing information is available on request. Product Licence Holder: Cyanamid of Great Britain Ltd, Fareham Road, Gosport, Hants P013 0AS. Date of preparation; Jan 1996
REFERENCES: 1. Gough, A.L., Gut. 1994, 35 (Suppl 5) (101756) 2.
Hatlebakk, J.G., and Berstad, A., Gastroenterol, 1995, 108 (4), A111 (10290) 3. Poynard, T. et al., Gastroenterol, 1995, 108 (4), A195 (102907) 4. Robinson, M., and Lanza F. et al, Gastroenterol, 1994, 106 (4), Pt 2 (101495).

Full prescribing information is available on request.

* Trademark of Takeda Chemical Industries Ltd

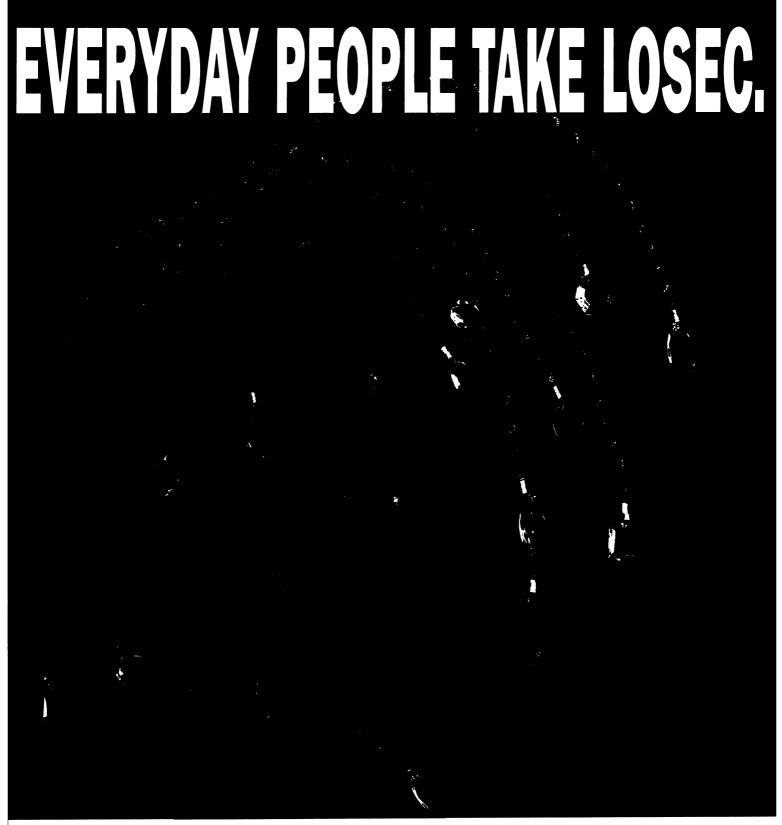


Under Licence agreement with Takeda Chemical Industries Ltd, Japan.



Further information can be obtained from: Wyeth Laboratories, Huntercombe Lane South, Taplow, Maidenhead, Berks SL6 0PH

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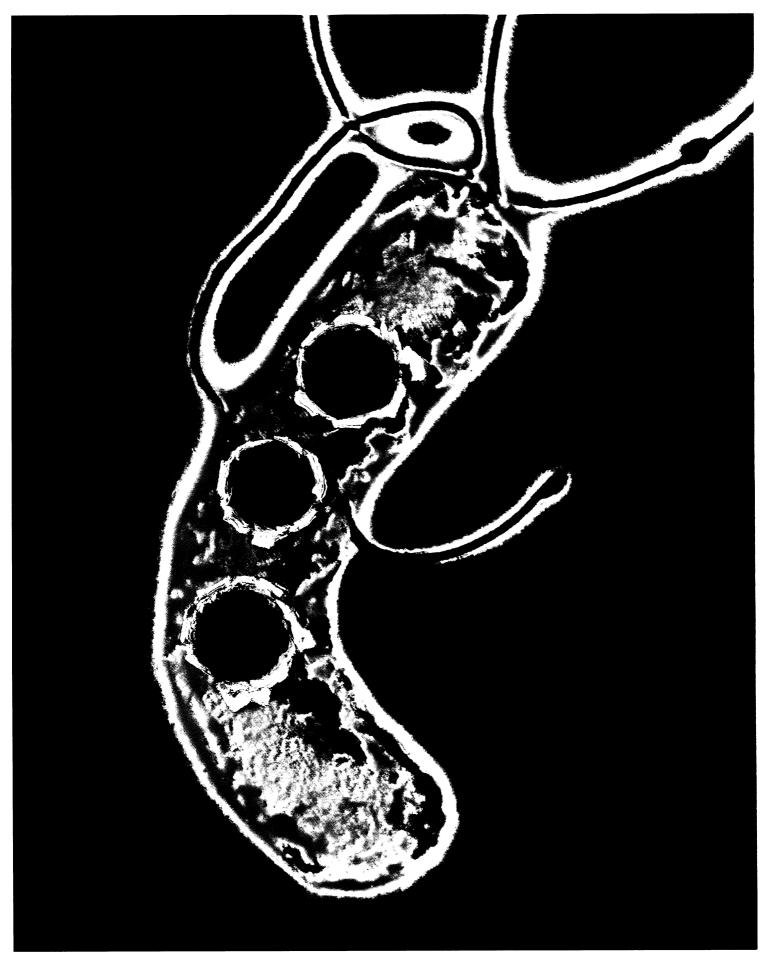
LOSEC® CAPSULES (omeprozole) ABBREVIATED PRESCRIBING

INFORMATION (refer to full data sheet before prescribing) PRESENTATION: LOSEC Capsules containing 10mg, 20mg or 40mg omeprazole (O) as enteric coated granules with an aqueous based coating. USES: Oesophageal reflux disease. Duodenal and benign gastric ulcers (including NSAID-induced). Helicobacter pylori eradication: Relief of associated dyspeptic symptoms in combination treatment with antibiotics. Prophylaxis of acid aspiration. Zollinger-Ellison syndrome. DOSAGE & ADMINISTRATION: Adults (including the elderly): The usual dose in oesophageal reflux disease and peptic ulcer is 20mg once daily, increasing to 40mg once daily in severe or refractory cases, if required. Oesophageal reflux disease: Healing: 20mg daily for 4 weeks. Continue for further 4-8 weeks if required. Maintenance in acid reflux disease: LOSEC 10mg daily. Increase to 20mg daily if symptoms return. Duodenal ulcer (DU): Healing: 20mg daily for 4 weeks. DU maintenance: LOSEC 10mg daily increasing to 20mg daily if symptoms return. Benign Gastric Ulcer: 20mg daily for 8 weeks. Helicobacter pylori eradication: DU disease: Triple therapies: LOSEC 40mg daily with amoxycillin (A) 500mg and metronidazole (M) 400mg, both three times a day for 1 wee clarithromycin (C) 250mg and metronidazole 400mg (or tinidazole 500mg) both bd for 1 week. Or amoxycillin 1g and clarithromycin 500mg both bd for 1 week. Dual therapies: LOSEC 40mg daily

with amoxycillin 750mg to 1g bd or clarithromycin 500mg tid, both for 2 weeks. GU disease: LOSEC 40mg daily with amoxycillin 750mg to 1g bd for 2 weeks. Prophylaxis of acid aspiration: LOSEC 40mg on the evening before surgery followed by LOSEC 40mg on the morning of surgery. Zollinger-Ellison Syndrome: 60mg daily as long as clinically indicated. Individually adjust within range 20-120mg daily. If in excess of 80mg daily give in 2 equal divided doses. Renal impairment: No dose adjustment needed. Hepatic impairment: Adjust dose (maximum daily dose 20mg). Children: No experience of use. CONTRA-INDICATIONS, WARNINGS, etc: No known contra-indications. In gastric ulcer, exclude malignancy before starting therapy. Avoid in pregnancy unless no safer alternative. Discontinue breast feeding if LOSEC is considered essential. Side effects: LOSEC is well tolerated. Adverse reactions are generally mild and reversible (relationship to LOSEC not established in many cases). They include diarrhoea, headaches, skin disorders and in isolated cases, angioedema, musculoskeletal disorders, fatigue, insomnia, dizziness, blurred vision, dry mouth, vertigo, paraesthesia, liver enzyme and haema-tological changes. <u>Interactions</u>: LOSEC can delay the elimination of diazepam, phenytoin and warfarin. Plasma concentrations of omeprazole and clarithromycin are increased when used concomitantly. Simultaneous treatment with omegrazole and digoxin may increase the bioavailability of digoxin. PHARMACEUTICAL PRECAUTIONS: Use within three months of opening. Store below 30°C. Replace cap firmly after use. Dispense in original container. LEGAL CATEGORY: POM. FURTHER INFORMATION: Helicobacter pylori (Hp) is associated with acid peptic and ulcer disease, contributing to gastritis and ulcer recurrence. Eradication of Hp with omeprazole and antibiotics gives rapid symptom relief, high healing rates and long-term remission of ulcer disease. Quality of life. In recent clinical data, in patients with acute peptic ulcer disease, omeprazole Hp eradication therapy improved patients' quality of life. PACKAGE QUANTITIES: 10mg: bottles of 7° capsules £4.99, bottles of 28 capsules £19.95. 20mg: bottles of 7° capsules, £8.86, bottles of 28 capsules, £35.45; 40mg: bottles of 7° capsules £17.72, bottles of 14 capsules £35.45. ("Hospital pack only). MARKETING AUTHORIZATION NO: PL 0017/0337. LOSEC Capsules 10mg. PL 0017/0238 – LOSEC Capsules 20mg. PL 0017/0320 – LOSEC Capsules 40mg.

ASTRA

For further information contact the MARKETING AUTHORIZA-TION HOLDER: Astra Pharmaceuticals Ltd, Home Park, Kings Langley, Herts WD4 8DH. Tel: (01923) 266191. LOSEC is a registered trademark of Astra Pharmaceuticals Ltd. Date of preparation: January 1996. LOS/ADV 847



${\bf Pylorid\ Prescribing\ Information}.$

Indications Treatment of duodenal and benign gastric ulcer. H. pylori eradication and prevention of duodenal ulcer relapse when given with clarithromycin or amoxycillin. **Dosage** Adults: duodenal ulcer 400mg twice daily for four weeks. Treatment may

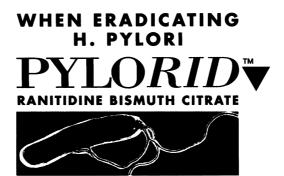
Glaxo Pharmaceuticals UK Limited

be extended for further four weeks. Benign gastric ulcer 400mg twice daily for eight weeks. *H. pylori*-associated duodenal ulcer 400mg twice daily with amoxycillin 500mg four times daily (2g) or clarithronycin 250mg four times daily or 500mg three times daily (1g-1.5g) for first two weeks of treatment then Pylorid 400mg twice daily for further two weeks. *Children*: Not currently recommended. **Contra-indications** Known hypersensitivity to any

of the ingredients. **Precautions** In gastric ulcer exclude malignancy before treatment. Plasma levels increased in renal impairment and elderly. Avoid use in extreme renal impairment (see data sheet). Avoid in patients with history of acute porphyria. As contains bismuth not recommended for maintenance use or more than 16 weeks in a year. See prescribing information for amoxycillin or clarithromycin before

"ANY LAST REQUESTS H. PYLORI?"

Combine new Pylorid with clarithromycin and you've a powerful weapon against H. pylori. And, when H. pylori is eradicated, duodenal ulcers are unlikely to return.

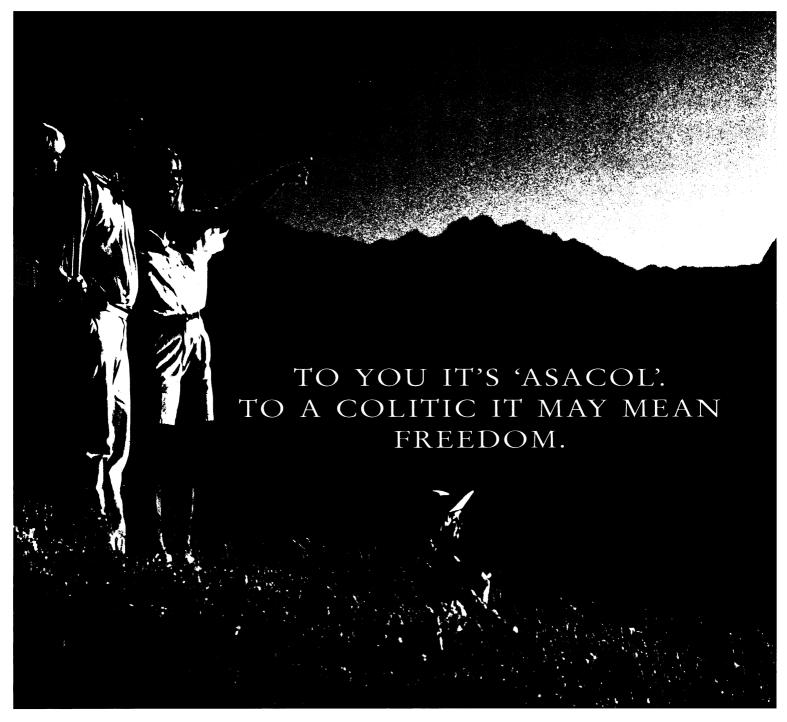


PRESCRIBE WITH CLARITHROMYCIN

o-prescribing. Side Effects Blackening of tongue and stools. carely hypersensitivity reactions including pruritus, skin rash, inaphylaxis. Gastrointestinal upsets including diarrhoea, ibdominal discomfort, gastric pain. Headache. Transient changes in liver enzymes SGPT (ALT), SGOT (AST). Mild anaemia. tanitidine-related side-effects (relevance to use of Pylorid inknown): Dizziness. Rarely, reversible mental confusion usually

in ill or elderly patients. Occasional hepatitis. Rarely, acute pancreatitis, arthralgia, myalgia. Rare cases of leucopenia, thrombocytopenia, usually reversible. Agranulocytosis and pancytopenia. Rare cases of erythema multiforme. Rare reports of breast symptoms in men. As with other H₂-receptor antagonists rare cases of bradycardia, A-V block and asystole. **Presentations** Pylorid tablets each containing 400mg of ranitidine bismuth

citrate. (Product licence number 14213/0001). 28 Tablets £26.00. 56 Tablets £52.00. Product licence holders Glaxo Group Ltd, Greenford Road, Greenford UB6 OHE. POM Pylorid is a Glaxo trade mark. Further information is available on request from: Glaxo Pharmaceuticals UK Ltd, Stockley Park West, Uxbridge, Middlesex UB11 1BT. Telephone 0181-990 9444. Date of preparation: August 1995.



Prescribing Information: Presentation 'Asacol' Tablets, PL 0002/0173, each rescribing 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 (12 × 10), 839.62 'Asacol' Suppositories 250 mg, PL 0002/0158, each containing 250 mg mesalazine. 20, £6.50. 'Asacol' Suppositories 500 mg, PL 0002/0195, each containing 500 mg mesalazine. 10, £6.50. 'Asacol' Foam Enema, PL 0002/0222, 1 g mesalazine per metered dose. Carton containing can of 14 metered doses, 14 disposable applicators and 14 disposable plastic bags. £39.60. Uses: For the treatment of mild to moderate acute exacerbations of ulcerative colitis. Tablets and Suppositories for the maintenance of remission of ulcerative colitis. The suppositories and foam enema are particularly appropriate in patients with distal disease. Dosage and administration: Adults: *Tablets: Acute disease:* Six tablets a day in divided doses, with concomitant corticosteroid therapy where clinically indicated. Maintenance therapy: Three to six tablets a day in divided doses Suppositories: 250 mg suppositories: Three to six suppositories a day, in divided doses, with the last dose at bedtime. 500 mg suppositories: A maximum of three suppositories a day, in divided doses, with the last dose at bedtime. Foam Enema: For disease affecting the rectosigmoid region, one metered dose 1 g a day for 4-6 weeks; for disease involving the descending colon, two metered doses 2 g once a day for 4-6 weeks. Children: There is no dosage recommendation. Contra-indications: A history of sensitivity to salicylates or renal sensitivity to sulphasalazine. Severe renal impairment (GFR <20 ml/min). Children under 2 years of age. Precautions: Renal disorder: mesalazine is excreted rapidly by the kidney, mainly as its metabolite, N-acetyl-5-aminosalicylic acid. In rats, large doses of mesalazine injected intravenously produce tubular and glomerular toxicity. 'Asacol' is best avoided in patients with established renal impairment but, if necessary, it should be used with caution. Serious blood dyscrasias have been reported very rarely with mesalazine. Haematological investigations should be performed if the patient develops unexplained bleeding, bruising, purpura, anaemia, fever or sore throat. Treatment should be stopped if there is suspicion or evidence of blood dyscrasia. 'Asacol' Tablets

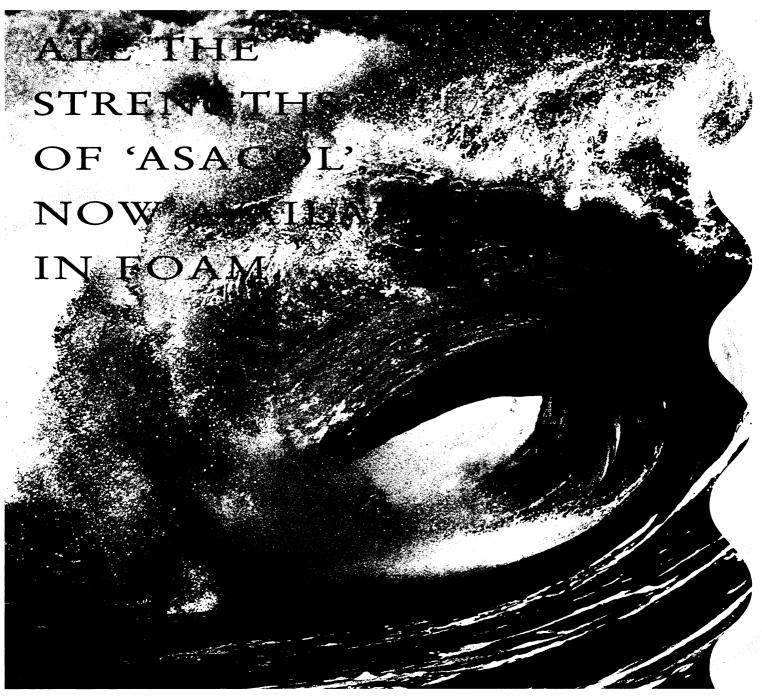
SmrthKline Beecham
Pharmaceuticals
Healthy Alliance
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evidence of blood dyscrasia. 'Asacol' Tablets should not be given with lactulose or similar preparations which lower stool pH and may prevent release of mesalazine. Use in pregnancy and lactation: No information

is available with regard to teratogenicity; however, negligible quantities of mesalazine are transferred across the placenta and are excreted in breast milk following sulphasalazine therapy. Use of 'Asacol' during pregnancy should be with caution, and only if, in the opinion of the physician, the potential benefits of treatment are greater than the possible hazards. 'Asacol' should, unless essential, be avoided by nursing mothers. Elderly: Use in the elderly should be cautious and subject to patients having a normal renal function (see Precautions). Adverse reactions: The side effects are predominantly gastrointestinal, including nausea, diarrhoea and abdominal pain. Headache has also been reported. Mesalazine may be associated with an exacerbation of the symptoms of colitis in those patients who have previously had such problems with sulphasalazine. There have been rare reports of leucopenia, neutropenia, agranulocytosis, aplastic anaemia and thrombocytopenia, pancreatitis, hepatitis, allergic lung reactions, lupus erythematosus-like reactions and rash (including urticaria), interstitial nephritis and nephrotic syndrome with oral mesalazine treatment, usually reversible on withdrawal. Renal failure has been reported. Mesalazine-induced nephrotoxicity should be suspected in patients developing renal dysfunction during treatment. Other side effects observed with sulphasalazine such as depression of sperm count and function, have not been reported with 'Asacol'. Treatment of overdosage: Following tablet ingestion, gastric lavage and intravenous transfusion of electrolytes to promote diuresis. There is no specific antidote. Legal category: POM. Further information: Whilst mesalazine is known to be the active component of sulphasalazine, sulphapyridine, is thought to be responsible for the majority of side effects. 24.6.95.

Smith Kline & French Laboratories, Welwyn Garden City, Hertfordshire AL7 1EY. Authorised user of the trade mark 'Asacol' in the UK. ©1995 Smith Kline & French Laboratories. "Mesalazine is the British approved name of 5-aminosalicylic acid.





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 (12 × 10), £39.62 'Asacol' Suppositories 250 mg, PL 0002/0158, each containing 250 mg mesalazine. 20, £6.50. 'Asacol' Suppositories 500 mg, PL 0002/0195, each containing 500 mg mesalazine. 10, £6.50. 'Asacol' Foam Enema, PL 0002/0222, 1 g mesalazine per metered dose. Carton containing can of 14 metered doses, 14 disposable applicators and 14 disposable plastic bags. £39.60. Uses: For the treatment of mild to moderate acute exacerbations of ulcerative colitis. Tablets and Suppositories for the maintenance of remission of ulcerative colitis. The suppositories and foam enema are particularly appropriate in patients with distal disease. Dosage and administration: Adults: Tablets: Acute disease: Six tablets a day in divided doses, with concomitant corticosteroid therapy where clinically indicated. Maintenance therapy: Three to six tablets a day in divided doses. Suppositories: 250 mg suppositories: Three to six suppositories a day, in divided doses. Suppositories: Three to six suppositories a day, in divided doses, with the last dose at bedtime. Foam Enema: For disease affecting the rectosigmoid region, one metered dose 1 g a day for 4-6 weeks. Children: There is no dosage recommendation. Contra-indications: A history of sensitivity to salicylates or renal sensitivity to sulphasalazine. Severe renal impairment (GFR <20 ml/min). Children under 2 years of age. Precautions: Renal disorder: mesalazine is excreted rapidly by the kidney, mainly as its metabolite, N-acetyl-5-aminosalicylic acid. In rats, large doses of mesalazine injected intravenously produce tubular and glomerular toxicity. 'Asacol' is best avoided in patients with established renal impairment but, if necessary, it should be used with caution. Serious blood dyscrasias have

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Pharmaceuticals
Healthy Alliance
Partnership beyond prescription

during pregnancy should be with caution, and only if, in the opinion of the physician, the potential benefits of treatment are greater than the possible hazards. 'Asacol' should, unless essential, be avoided by nursing mothers. Elderly: Use in the elderly should be cautious and subject to patients

having a normal renal function (see Precautions). Adverse reactions: The side effects are predominantly gastrointestinal, including nausea, diarrhoea and abdominal pain. Headache has also been reported. Mesalazine may be associated with an exacerbation of the symptoms of colitis in those patients who have previously had such problems with sulphasalazine. There have been rare reports of leucopenia, neutropenia, agranulocytosis, aplastic anaemia and thrombocytopenia, pancreatitis, hepatitis, allergic lung reactions, lupus erythematosus-like reactions and rash (including urticaria), interstitial nephritis and nephrotic syndrome with oral mesalazine treatment, usually reversible on withdrawal. Renal failure has been reported. Mesalazine-induced nephrotoxicity should be suspected in patients developing renal dysfunction during treatment. Other side effects observed with sulphasalazine such as depression of sperm count and function, have not been reported with 'Asacol'. Treatment of overdosage: Following tablet ingestion, gastric lavage and intravenous transfusion of electrolytes to promote diuresis. There is no specific antidote. Legal category: POM. Further information: Whilst mesalazine is known to be the active component of sulphasalazine in the treatment of ulcerative colitis, the other component of sulphasalazine in the treatment of ulcerative colitis, the other component of sulphasalazine, sulphapyridine, is thought to be responsible for the majority of side effects. 24.6.95. Smith Kline & French Laboratories, Welwyn Garden City, Hertfordshire AL7 IEY. Authorised user of the trade mark 'Asacol' in the UK. ©1995 Smith Kline & French Laboratories.

ASACOL
MESALAZINE* (5-AMINOSALICYLIC ACID)

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

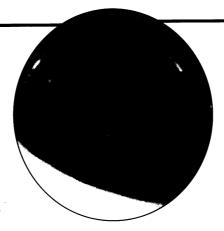


FIVE STAR, 5-ASA COLITIS CONTROL

Trials show cleaner than Phospho-soda

"Phospho-soda was graded as 'excellent' or 'good' in 86% of 21 cases for the quality of mechanical bowel preparation, compared with 63% of 19 cases for sodium picosulphate"

"Overall, endoscopists scored sodium phosphate as 'excellent' or 'good' in 90% vs. 68% after the polyethylene glycol lavage."2



Fleet Phospho-soda gives you a thoroughly effective way to clean the colon before colonoscopy examination, radiological procedures or surgery.

Fleet Phospho-soda is an oral saline laxative, increasing fluid accumulation in the lumen by osmosis to give bowel movements in $\frac{1}{2}$ - 6 hours.

Under clinical conditions, not only did Fleet Phospho-soda outperform sodium picosulphate in bowel cleansing, it was also associated with less abdominal pain in the patients taking it. In addition, with a total dosage of only 90ml, patients found it easier to complete the course when compared with other bowel cleansing preparations.

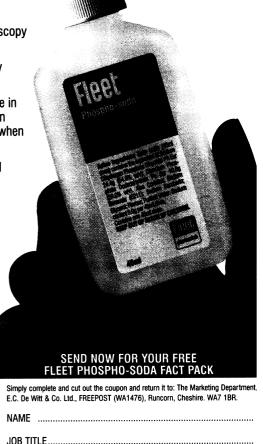
The trials tell the story again and again - when you require a really clean bowel for medical procedures, you want nothing less than Fleet Phospho-soda.

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no file, E.C. De Witt & Co. Ltd. 1995.

on S M et al. Prissnective, Randomised, Endoscopic-blinded Trial comparing Precolonoscopy Bowel Cleansing Methods. Dis. Colon Rectum, July 1994, 37, No.7, 689-696.



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PRESCRIBING INFORMATION:

Indications Duodenal ulcer (including those associated with H. pylori infection), benign gastric ulcer, postoperative ulcer, oesophageal reflux disease, Zollinger Ellison Syndrome, prophylaxis of gastrointestinal haemorrhage from stress ulcer, recurrent haemorrhage from bleeding peptic ulcer, acid aspiration (Mendelson's Syndrome). Tablets, Syrup, Effervescent Tablets only, ulcers associated with non-steroidal anti-inflammatory drugs (NSAIDs), prevention of NSAIDassociated duodenal ulcer, chronic episodic dyspepsia, severe oesophagitis, longterm management of healed oesophagitis. 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. In duodenal ulcer, 300mg twice daily produces higher healing rates at four weeks. Continued maintenance treatment of 150mg at bedtime is recommended for patients with a history of recurrent ulceration. Duodenal ulcers associated with H. pylori, 300mg at bedtime or 150mg twice daily with oral amoxycillin 750mg three times daily and metronidazole 500mg three times daily for 2 weeks. Zantac therapy then continued for a further 2 weeks. Ulcers following non-steroidal anti-inflammatory drugs: 150mg twice daily for up to eight weeks. Prevention of NSAID-associated duodenal ulcer: 150mg twice daily concomitantly with NSAID therapy. Chronic episodic dyspepsia: 150mg twice daily for six weeks, investigate early relapsers and nonresponders. Oesophageal reflux disease: 300mg at bedtime or 150mg twice daily for up to eight weeks. Moderate to severe oesophagitis: 150mg four times daily for up to twelve weeks. Long-term treatment of healed oesophagitis: 150mg twice daily. Obstetric patients at commencement of labour; oral dose of 150mg may be followed by 150mg at six-hourly intervals (see data sheet). Those at risk of acid aspiration syndrome; oral dose of 150mg two hours before induction of general anaesthesia with preferably 150mg the previous evening. Alternatively, Zantac Injection 50mg intramuscularly or by slow intravenous injection 45 to 60 minutes before general anaesthesia. Zantac Injection may be given every six to eight hours either as slow (over a period of at least two minutes) intravenous injection of 50mg, after dilution to a volume of 20ml per 50mg dose, or as intermittent intravenous infusion at a rate of 25mg per hour for two hours; alternatively, as intramuscular injection of 50mg (2ml) every six to eight hours. Prophylaxis of haemorrhage from stress ulceration or from bleeding peptic ulceration: parenteral administration may be continued until oral feeding commences. If still at risk, Zantac Tablets or Syrup 150mg may be given twice daily. Prophylaxis of haemorrhage from stress ulceration: priming dose of 50mg as a slow intravenous injection followed by continuous intravenous infusion of 0.125 to 0.250mg/kg/hr

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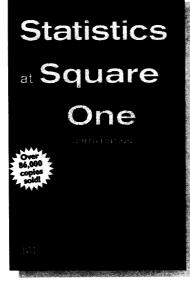
nay be preferred. Children: Oral dose for peptic ulcer: 2mg/kg to 4mg/kg, twice aily to a maximum of 300mg per day. Contra-indications Patients with known ypersensitivity to ranitidine. Precautions Caution when using Effervescent ablets in sodium-restricted patients. Exclude malignancy in gastric ulcer before nstituting therapy, especially in middle-aged patients with new or recently hanged dyspeptic symptoms. Regular supervision of patients taking NSAIDs oncomitantly with Zantac recommended, especially if elderly. Protects against JSAID-associated ulceration in duodenum and not in stomach. Reduce dosage in he presence of severe renal failure (see data sheet). Avoid in patients with history f porphyria. Effervescent Tablets contain aspartame, use with caution in patients vith phenylketonuria. Rapid administration of injection may rarely cause radycardia; recommended rates of administration should not be exceeded. ike other drugs, use during pregnancy and lactation only if strictly necessary. ide effects Headache, dizziness, skin rash, occasional hepatitis, rarely arthralgia, nyalgia, and with antibiotics, diarrhoea. Rarely, reversible mental confusion states, isually in very ill or elderly patients. Rare cases of leucopenia and hrombocytopenia, usually reversible, agranulocytosis and pancytopenia. lypersensitivity reactions, anaphylactic shock, rare cases of breast symptoms in nen. 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 HCl, (Product licence number 10949/0042, 60 tablets £27·89); Zantac 300 Tablets each containing 300mg ranitidine HCl (Product licence number 10949/0043, 30 tablets £27·43); Zantac Effervescent Tablets each containing 150mg ranitidine HCl and 14·3mEq sodium, (Product licence number 10949/0137, 60 tablets £27·89); Zantac Effervescent Tablets each containing 300mg ranitidine HCl and 20·8mEq sodium (Product licence number 10949/0138, 30 tablets £27·43); Zantac Syrup each 10ml dose containing 150mg ranitidine HCl (Product licence number 10949/0108, 300ml bottle £22·32); Zantac Injection each 2ml dose containing 50mg ranitidine HCl (product licence number 10949/0109, 5 x 2ml £3·21). Product licence holders Glaxo Pharmaceuticals UK Limited, Stockley Park West, Uxbridge, Middlesex UB11 1BT. POM Zantac is a Glaxo trade mark. Further information is available on request

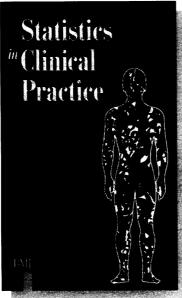
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1. Data on file. Glaxo Pharmaceuticals UK Limited 1995.









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