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Trials suggest*

- radiological disappearance of ulcer crater
- relief of symptoms within a few days
- superiority over antacid or anticholinergic therapy

R) Read. Trade Mark

- patients can lead a normal life
- special diets are unnecessary
- even chronic cases, with a long history of symptoms, respond

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

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



Full information available on request from

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Maureen is no surgeon

Although her personal experience of hospitals is limited, Maureen holds in her hands the final quality characteristics of ETHICON+ catgut, which are so vital to surgery.

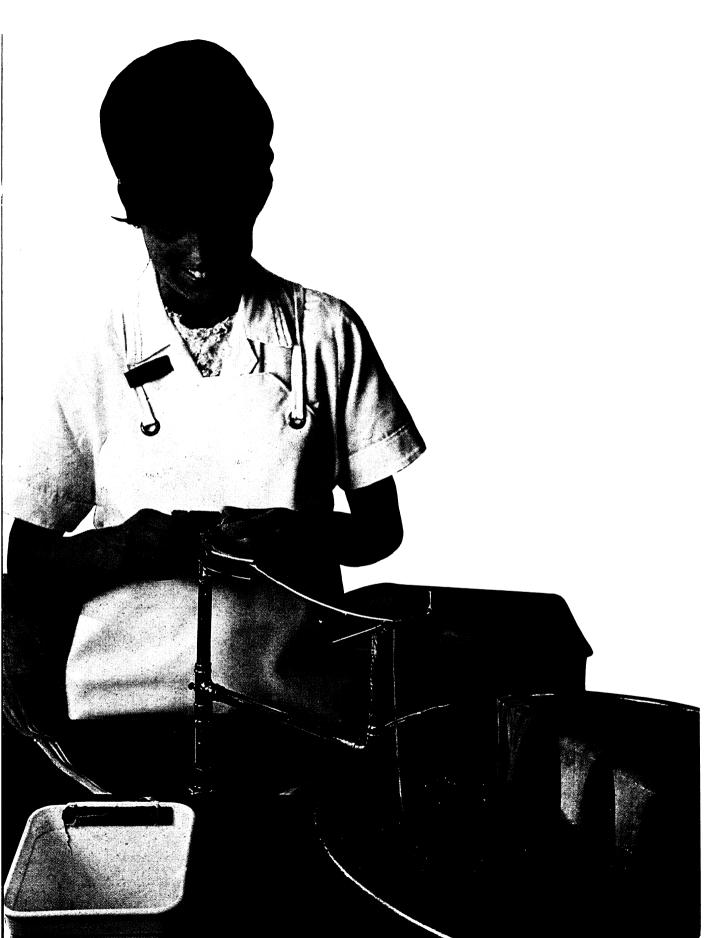
Maureen takes catgut in its original form. With dexterity and patience, she skilfully parts the sheep intestine in the first stage of catgut production.

With practised skill, the ribbons Maureen produces are an invaluable beginning to the production of sutures of consistently high quality.

'As the surgeon serves mankind, so ETHICON serves the surgeon'



ETHICO N, LTD. Edinburgh *Trade Mark

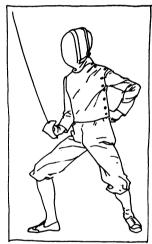


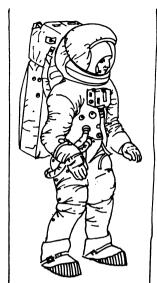
















2.5G. Noxytiolin and 10 mgm. Amethocaine HC1



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CAVED-(S) is the most economical Peptic Ulcer therapy*

CAVED-(S) has proved the winner in healing Gastric

Ulcers1 and being statistically effective in treating Duodenal Ulcers²⁻³

There are other runners in the treatment of the Ulcer Handicap but success is evident with CAVED-(S)

CAVED-(S) IS THE WINNER

With peace of mind you can make CAVED-(S) number one FOR GASTRIC AND DUODENAL ULCERS

*N.H.S. cost 6/9d per week, average treatment 4 weeks

Formula: Cedona Block Liquorice, Bism. Ref.: 1. GUT 1969 10.299.4.

 Gastroenterology, 1968 55.436.4.
 GUT 1968 9.48.1. Subnit., Alum. Hydrox., Magnes. Carb. Levis., Sod. Bicarb. Frangula.

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NEW PRODUCT ANNOUNCEMENT

Duphalac ends the **laxative era**

Most doctors are reluctant to prescribe laxatives for habitual constipation. because they not only fail to cure the condition, but are likely to perpetuate it by making the patient depend on them. In the words of a current authoritative text book "... it is impossible to re-establish the normal rhythm of defaecation as long as the use of laxatives and enemas is continued."

H. L. Gastroenterology W. B. Saunders Co., Philadelphia and London: 2nd Edition (reprinted 1966) Vol. II P.761

Now there is Duphalac - a non-laxative treatment for habitual constipation. Unlike many traditional laxatives, which goad the bowel musculature into fitful action, non-laxative Duphalac has no direct effect either on the smooth muscle or its innervation. Duphalac changes the environment within the colon to achieve normal bowel movement and a softening of the stool.

How does it work?

Duphalac is a synthetic disaccharide which is not appreciably absorbed after oral ingestion. It reaches the colon unchanged and serves as a nutrient for saccharolytic bacteria. Their increased activity causes a change of the colonic environment and a lowered pH in the colon. The clinical result is that normal defaecation is restored

The clinician's verdict

One double-blind comparison of Duphalac with placebo involved 52 "truly constipated" patients. The success rate was 80% for Duphalac against 33% for placebo. "The difference in success rate is highly significant (P < 0.01)". The author described Duphalac as "a completely harmless substance" (Gut, 1968, 9:84)

Duphalac is presented as a syrup containing lactulose 50% w/w, lactose 5% w/w, galactose 8% w/w, in bottles of 200 ml. and 2 litres. Further information will be supplied on request.

Duphalac non-laxative treatment for habitual constipation

Maxolon a powerful anti-emetic and so much more...

Maxolon functions in three specific ways as an anti-emetic. It acts both centrally and locally, and restores normal gastric motility relieving spasm and stasis in the stomach.

Maxolon's action on the stomach is unique, taking anti-emetic therapy a stage further. Maxolon's success has been proved in clinical practice. In the indications for which it is recommended, Maxolon has achieved an 87% success rate, (1) and an 87% symptom reduction score in vomiting (2).

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Maxolon is a unique compound —with a well-proven clinical record. You will, find that Maxolon is much more than an anti-emetic.

(1) N.Z. med. J. (1968) 68, 388.

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

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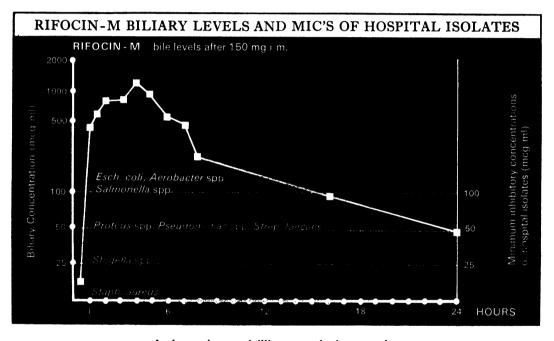


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in BILIARY TRACT INFECTIONS

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* Active against penicillinase-producing organisms.

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* Dose: 150 mg intramuscularly every 8-12 hours.

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

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Nicholson House, High Street, Maidenhead, Berks. Tel: Maidenhead 32277

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The Practitioner, 1969, 202, 402.

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