

**“Marvellous”**

**History:**  
vague chest pains and belching of a great deal of wind 'off and on for some time'.

**X-ray:**  
barium meal showed a large irreducible hiatus hernia and gastric reflux. Stomach and duodenum appeared normal.

**Treatment:**  
Pyrogastrone tabs 1 p.c./t.d.s. + 2 tabs nocte.

**Results:**  
symptom-free within 3 weeks. To quote the patient's own words—"Marvellous".

**PYROGASTRONE**  
carbenoxolone/magnesium trisilicate/  
dried aluminium hydroxide gel

**positive healing power in  
oesophagitis**

history on file with Winthrop.

**Pyrogastrone** (PL 0071/0138). For the treatment of oesophageal inflammation, erosions and ulcers due to hiatus hernia or other conditions causing gastric reflux and for the relief of heartburn, flatulence and other symptoms associated with reflux oesophagitis. Each tablet contains: carbenoxolone sodium B.P. 20mg, magnesium trisilicate B.P. 60mg, dried aluminium hydroxide gel B.P. 240mg, in a base containing sodium bicarbonate B.P. 210 mg and alginate acid B.P.C. 600 mg. Cartons of 100. **Adult Dosage.** One to be chewed immediately after meals, three times a day and two to be chewed at bedtime. **Basic N.H.S. Cost:** One day's treatment 56p (5 tablets). **Contraindications:** Severe cardiac, renal or hepatic failure. Patients on digitalis therapy unless serum electrolyte levels are monitored weekly to detect promptly the development of hypokalaemia. **Precautions:** Special care should be exercised with patients predisposed to sodium and water retention, potassium loss and hypertension (e.g. the elderly and those with cardiac, renal or hepatic disease) since the carbenoxolone content of Pyrogastrone can induce similar changes. Regular monitoring of weight and blood pressure which should indicate the development of such effects is advisable for all patients. A thiazide diuretic should be administered if oedema or hypertension occurs. (Spironolactone should not be used because it hinders the therapeutic action of carbenoxolone). Potassium loss should be corrected by the administration of oral supplements. No teratogenic effects have been reported with carbenoxolone sodium, but careful consideration should be given before prescribing Pyrogastrone for women who may become pregnant. Pyrogastrone is a registered trade mark. Made under licence from Biorex Laboratories Brit. Pat. No. 1390683. Further information available from:—

**Winthrop Laboratories**, Surbiton-upon-Thames, Surrey KT6 4PH.

**WINTHROP**

# Unique for Ulcerative



Colifoam is a unique therapy for ulcerative colitis, being a topical anti-inflammatory with exceptional benefits over the rectal enema in terms of simplicity and convenience.

Gamma photography studies<sup>1,2</sup> have shown that a single dose of Colifoam remains in contact with the rectal mucosa for several hours. In one of these studies<sup>1</sup> the foam was seen to reach the sigmoid colon in most patients. The second study<sup>2</sup>, using a different protocol which included healthy subjects, did not confirm this finding but the authors concluded:

“Unquestionably, however, the foam is more comfortable and easier to retain

# n Colitis



than a retention enema, and since the patient need not be immobilised, the foam obviously has a place in outpatient practice for patients with proctitis and distal ulcerative colitis."

Colifoam: hydrocortisone acetate foam supplied in a metered dose dispenser, delivering approximately 5 ml. of Colifoam rectal foam containing 10% hydrocortisone acetate.

## Colifoam

hydrocortisone acetate foam

comfort and convenience  
in ulcerative colitis



### References

1. *British Medical Journal* (1979) 2:822.
2. *ibid.* (1979) 1:1751.

### Presentation

White, odourless aerosol foam containing hydrocortisone acetate 10%, with inert propellants.

### Uses

Anti-inflammatory corticosteroid therapy for the topical treatment of 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 in each pack). One applicatorful of Colifoam provides a dose of approximately 90-110mg of hydrocortisone, similar to that used in a retention enema for the treatment of ulcerative colitis, sigmoiditis and proctitis. Satisfactory response usually occurs within five to seven days.

### Contra-indications and Warnings etc.

Local contra-indications to the use of intrarectal steroids include obstruction, abscess, perforation, peritonitis, fresh intestinal anastomoses and extensive fistulas. 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 diseases because of their predisposition to perforation of the bowel wall. Safety during pregnancy has not been fully established.

### Pharmaceutical Precautions

Do not refrigerate, incinerate or puncture the aerosol can. Shake vigorously before use. Keep out of reach of children.

### Package Quantities

Aerosol canister containing 20g (14 applications) plus a plastic applicator and illustrated leaflet.

### Basic NHS Cost

£6.90.

### Product Licence No.

0036/0021

Further information is available on request from:

**Stafford-Miller Limited,**  
Professional Relations Division, Hatfield,  
Herts. AL10 0NZ.



# The Cidex solution.

It has long been recognised that different hospitals have different disinfection and sterilization requirements.

These differences, of course, arise from the degree of contamination present, the type of equipment and rate of throughput, and the cleaning/drying procedures used.

What hasn't been recognised sufficiently up till now is that these factors combine to have a cumulative effect on the use-life of cold disinfectant solutions—creating a need for solutions with different use-lives.

To meet this need there are now two solutions.

—CIDEX\* Activated Glutaraldehyde Solution with a use-life of up to 14 days.

—CIDEX\* Long-Life Activated Glutaraldehyde Solution with a use-life of up to 28 days.

New CIDEX\* Long-Life Solution has all the trusted and well-proven benefits of 14 day CIDEX\* Solution but has an effective life of 28 days where usage factors permit.

A fresh peppermint odour and blue colour differentiate CIDEX\* Long-Life from green 14 day CIDEX\* Solution.

### WHICH CIDEX\* SOLUTION TO USE

While the effects of dilution and gross protein contamination are always present, these can be minimal due to low throughput.

Under these circumstances, new CIDEX\* Long-Life Solution is much more convenient and can offer substantial cost savings.

In a busy unit, however, where pressures generally do not permit drying, protein contamination and dilution can build up over a period—particularly with

bulky items, such as anaesthetic tubing, which have a high carry-over of water.

In situations such as this, 14 day CIDEX\* Solution offers complete assurance of its efficacy, assurance which has been confirmed repeatedly all over the world.

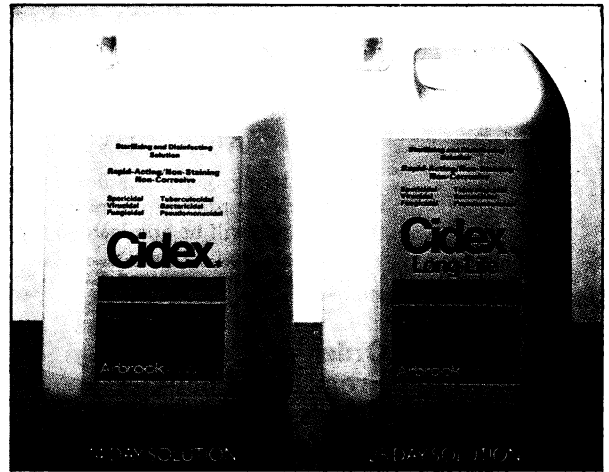
### CIDEX\* SOLUTIONS. NOT ONLY A CHOICE BUT A BETTER CHOICE

Both solutions have the complete range of cidal activity which has made CIDEX\* Solution the prime agent of choice for disinfection and sterilization of heat sensitive and delicate equipment.

Both have the remarkable non-corrosive properties which in laboratory tests have proven them to be less corrosive than deionised water.

14 day CIDEX\* Solution in the green container. 28 day CIDEX\* Long-Life Solution in the blue container.

Whatever your choice, you can be confident that CIDEX\* is the safest, most cost-effective solution to your disinfecting or sterilizing problem.



**A choice of CIDEX\* solutions from Arbrook—now you can choose wisely.**

# Arbrook\*

# HOW TO DO IT

Every doctor knows the sinking sensation induced by waiting one's turn for an examination viva and the social anxieties of changing jobs. The misery of first night nerves does not, however, disappear with time: each decade brings new challenges. On these occasions—chairing a committee, giving evidence in court, appearing on television—practical tips can be enormously helpful. The same is true of the many skills not taught in medical school—how to lecture, referee papers, edit, or use a library. All these and many more nuggets of down-to-earth advice have been collected from past issues of the *BMJ* to form a compendium for the novice—whatever his or her age or seniority.

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## HOW TO DO IT

Chair a committee.  
Be a dictator.  
Take an examination.  
Organise an international paper.  
Talk to a reporter.  
Improve a student conference.  
Give a library.  
Survive as an examiner.  
Use a reference.  
Construct an audit.  
Give a programme.  
Attend an inquest.  
Take a clinical examination.  
Apply for a research grant.  
Use an overhead projector.  
Plan a research project.  
Write a paper.

# **Carbenoxolone can heal gastric and duodenal ulcer**

“Carbenoxolone...acts, in healing these ulcers, by restoring the gastric physiology to normal – rather than by creating a non-physiological artifice, such as that produced by antacids and H<sub>2</sub>-receptor antagonists...”<sup>1</sup>

---

## **2** IMPORTANT ACTIONS

1. EXTENDS LIFE-SPAN OF EPITHELIAL CELLS<sup>2</sup>

2. INCREASES MUCUS PRODUCTION<sup>3</sup>

---

## **2** IMPORTANT PRODUCTS

### **BIOGASTRONE**

carbenoxolone

tablets for gastric ulcer

---

### **DUOGASTRONE**

carbenoxolone

positioned-release capsules for duodenal ulcer

---

1. In "Peptic Ulcer Healing. Recent Studies on Carbenoxolone." 1978. Lancaster, MTP Press Ltd., p.1. 2. *ibid.*, pp. 9-20.

3. In 4th Symposium on Carbenoxolone. 1975. London, Butterworths, p. 161.

Biogastrone and Duogastrone are registered trade marks.

Made under licence from Biorex Laboratories. Brit. Pat. Nos. 843133 and 1093286.

Further information available from Winthrop Laboratories, Surbiton-upon-Thames, Surrey.

# Acta Gastro-Enterologica Belgica

## SOMMAIRE DU FASCICULE 9-10

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*Acta Gastro-enterologica Belgica*. Prix de l'abonnement: 1·800 Fr. b.

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**.....in the later years**

**INOLAXINE**

**98% Sterculia - sugar free**

Helps to:

Lower intra-colonic pressure. Reduce distension and relieve discomfort. Restore normal bowel action.

*Prescribing information:*

Side effects: occasional flatulence and discomfort      Dosage: 1-2 heaped teaspoonfuls once or twice daily

**Basic NHS cost £1.40 per 175g**

*Full product information available on request*

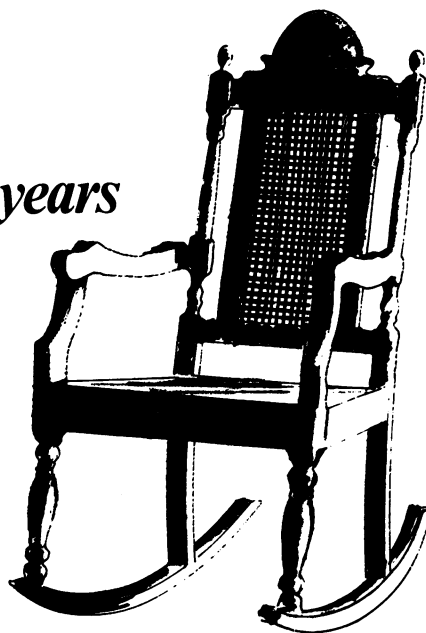


**Dales Pharmaceuticals Limited**

Barrows Lane, Steeton, Keighley, Yorkshire BD20 6PP

(Steeton 53222)

PL 0123/0009



## Key Books for the Gastroenterologist

### Immunology of the Gastrointestinal Tract

Edited by *Peter Asquith*

1979 384 pages illustrated hardback £23.00

Authoritative account of the role played by immunological mechanisms, both in the normal and diseased gastrointestinal tract. Written by an international team of recognised experts.

### The Liver and Biliary Tract in Infants and Children

Edited by R. K. Chandra

1979 360 pages illustrated hardback £23.00

A complete treatise on the subject, written by twenty-four authorities in the field from many countries.

### Cimetidine The Westminster Hospital Symposium

Edited by *Christopher Wastell* and *Peter Lance*

1979 322 pages illustrated hardback £15.00

### Scheduled for May publication

#### Recent Advances in Gastroenterology—4

Edited by *Ian A. D. Bouchier*

1980 352 pages approx. illustrated hardback

#### Gastrointestinal Blood Flow

Edited by *L. P. Fielding*

1980 248 pages approx. hardback

**Churchill Livingstone**



Robert Stevenson House, 1-3 Baxter's Place, Leith Walk, Edinburgh EH1 3AF

The antacid

In dyspepsia, antacids only cloud the issue.

**Maxolon**  
metoclopramide  
clears it.



Maxolon protects the gastric mucosa from over-long exposure to gastric acid<sup>1</sup> by promoting normal peristalsis and gastric emptying<sup>2-5</sup>. This action contrasts with that of antacids.

By restoring the stomach's normal contractile symptoms described by the patient, i.e. epigastric pain, heartburn and distension, can be effectively treated and their recurrence prevented.

To the patient Maxolon is the simple and convenient therapy to reduce his dependence on antacid prescriptions.

**Prescribing Information**

**Indications**  
Dyspepsia, heartburn and flatulence associated with the following conditions e.g., Reflux oesophagitis, Gastritis, Hiatus hernia, Peptic ulcer.

**Adult Dosage (oral)**  
Adults 10mg  
1 tablet or 10ml syrup 3 times a day.  
Young adults (15-20 years) 5-10mg  
½-1 tablet or 5-10ml syrup 3 times a day commencing at the lower dosage.

**Note:** Total daily dosage of Maxolon, especially for children and young adults should not normally exceed 0.5mg/kg body-weight.

**Side-effects and Precautions**

There are no absolute contra-indications to the use of Maxolon.

Various extra-pyramidal reactions to Maxolon, usually of the dystonic type, have been reported. The incidence of these reactions in children and young adults may be increased if daily dosages higher than 0.5mg/kg body-weight are administered. The majority of reactions occur within 36 hours of starting treatment and the effects usually disappear within 24 hours of withdrawal of the drug. Should treatment of a reaction be required, an anticholinergic anti-Parkinsonian drug e.g. benapryzine, or a benzodiazepine may be used. Since extra-pyramidal symptoms may occur with both

Maxolon and phenothiazines, care should be exercised in the event of both drugs being prescribed concurrently.

Raised serum prolactin levels have been observed during metoclopramide therapy; this effect is similar to that noted with many other compounds.

Maxolon's action on the gastro-intestinal tract is antagonised by anticholinergics. Although animal tests in several mammalian species have shown no teratogenic effects, treatment with Maxolon is not advised during the first trimester of pregnancy.

Following operations such as pyloroplasty or gut anastomosis Maxolon therapy should be withheld for three or four days as

vigorous muscular contractions may not help healing.

**Availability and NHS Prices**  
Tablets 10mg (£5.84 per 100).  
Syrup 5mg/ 5ml (£2.42 for 200ml).

A paediatric liquid presentation and ampoules for injection are also available.

Average daily cost of Maxolon tablets (ex. 500 pack) 17p. Prices correct at January 1979. Further information is available on request to the company.

Maxolon (metoclopramide) is a product of Beecham Research Laboratories, Brantford, England. A branch of Beecham Group Limited.

Maxolon, BRL, and the Company logo are registered trade marks.

1. Gut, (1969), 10, 678-680. 2. Postgrad. med. J., (1973), 49, (Suppl), 29. 3. Gut, (1974), 15, 462-467. 4. Brit. med. J., (1971), 2, 25.



# ETHICON

ETHICON Ltd., P.O. Box 408, Bankhead Avenue, Edinburgh EH11 4HE, Scotland.

Br. Pat No. 1 345 394 PRINTED IN GREAT BRITAIN

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LIGACLIP\* Ligating Clips and Appliers.

**ETHICON**

#### Indications

Intravenous sedative cover before and during unpleasant surgical and medical procedures.

#### Dosage

0.2 mg/kg body-weight. The usual adult dose is 10-20 mg but more may be needed on occasions. In elderly patients half the usual adult dose.

#### Administration

With the patient in the supine position, the injection should be given slowly (0.5 ml Valium Roche ampoule solution per half-minute) into a large vein of the antecubital fossa until the patient becomes drowsy, his speech becomes slurred and there is ptosis. He should still be able to respond to requests. Provided these conditions for administration are adhered to the rare possibility of hypotension or apnoea occurring will be greatly diminished. A second person should be present and resuscitation facilities should be available.

#### Precautions and side-effects

Patients should not be allowed to leave the surgery until one hour at least has elapsed from the time of injection and should always be accompanied by a responsible adult, with a warning not to drive or operate machinery for the rest of the day and to avoid alcohol. In patients with organic cerebral changes or with cardiorespiratory insufficiency IV injections of Valium Roche should not be employed unless in an emergency or in hospital if indicated and then should be given slowly and in reduced dosage.

The possibility of intensified sedative effects and severe respiratory and cardiovascular depression should be considered if central depressant drugs are given, particularly by parenteral route, in conjunction with Valium Roche for Injection. Valium Roche should not be given in early pregnancy unless absolutely indicated. Intravenous injection may be associated with local reactions, including thrombophlebitis.

#### Presentation

Ampoules containing 10 mg diazepam in 2 ml and 20 mg in 4 ml, in packings of 10.

#### Product Licence Numbers

0031/0068 (ampoules 10 mg)  
0031/5128 (ampoules 20 mg)

#### Basic NHS Cost

Ampoules 10 mg x 10 £2.22,  
20 mg x 10 £3.28.

#### References

- 1 Brit. med. J. 1976, 2, 20
- 2 Brit. J. Hosp. Med. 1976, 16, 7
- 3 Scand. J. Gastroent. 1979, 14, 747
- 4 Scand. J. Gastroent. 1978, 13, 33
- 5 Gut. 1976, 17, 655
- 6 Brit. J. Hosp. Med. 1971, 6 (Suppl.), 52
- 7 Amer. J. Gastroent. 1976, 66, 523
- 8 Amer. J. Med. Sci. 1974, 267, 151
- 9 Gut. 1976, 17, 975
10. Advanced Medicine, 1978, No. 14, p19

# Intravenous Valium Roche



## the preferred sedative for gastro-intestinal endoscopy

Vast would be an apt description of the experience with intravenous Valium Roche in gastro-intestinal endoscopy – an experience which covers the range of procedures and patients of all age groups.\* Endoscopy without premedication is for many patients an unpleasant experience.† Intravenous Valium Roche sedation improves patient acceptance without impairing their ability to co-operate. Keeping medication to a minimum is particularly important for out-patients‡ and avoidance of analgesics leads to faster recovery times.‡ In certain circumstances where prolonged intubation is required or pain from an operative procedure likely, the addition of a narcotic analgesic such as pethidine may be desirable.‡ Neuroleptanalgesia has also been used to good effect with intravenous Valium Roche.‡ The amnesic effect of intravenous Valium Roche undoubtedly contributes to the excellent acceptance by patients and their willingness to undergo repeat procedures:‡ The shortness of the amnesic effect is a boon for the operator too when treating out-patients. Age is no barrier to intravenous Valium Roche sedation for gastro-intestinal endoscopy.\* Whether the patient is six weeks or 103-years-old favourable results have been obtained.‡ This is true also for many poor-risk patients including those with liver disease in whom intravenous Valium Roche has been extensively used.‡ The dosage must, of course, be adjusted to the patient's needs and the necessary precautions observed.

\*Annotated bibliography of references available on request

# Intravenous Valium Roche

diazepam

where experience  
counts



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# NEW OP-SITE SKIN CLOSURE. AN OUTSTANDINGLY SIMPLE, NON-INVASIVE TECHNIQUE.

Op-Site Skin Closures represent a major new advance in surgical wound closure and have been designed to produce significant advantages over existing methods.

Being a sutureless technique, they produce no localised tension or ischaemia at the wound edge. They eliminate foreign body reactions and the risk of infection at the puncture site.

Produced from a transparent, adhesive, polyurethane membrane, Op-Site Skin Closures are easy to apply, strong and conform readily to body contours. The fenestrations along their length allow for correct appositioning of the wound.

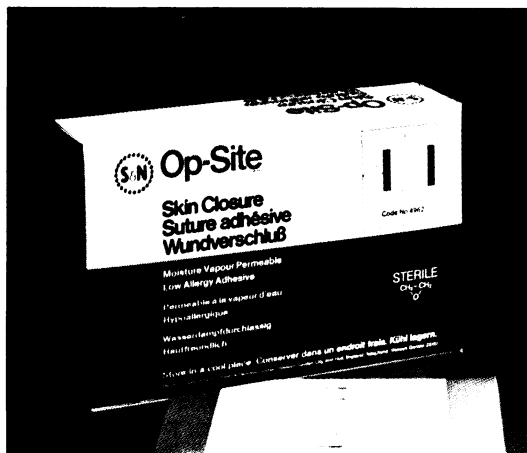
Op-Site Skin Closures are comfortable and can stay in place for up to 14 days. This, together with the non-invasive technique

employed, greatly enhances the final cosmetic effect.

Removal is painless - relieving patients, particularly children, of the anxiety normally associated with suture removal.

In clinical trials, 94 out of 100 patients were satisfactorily treated<sup>(1)</sup>. They were infection free and enjoyed a superior cosmetic effect.

Contact Smith & Nephew Medical now for more details.



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Medical**

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1. J. Wintley BSc, Mr BS, FRCS. The results of a clinical trial published in 'Current Medical Literature' April 1982, p. 1049. Copyright © Smith & Nephew.

# New for Urostomy!

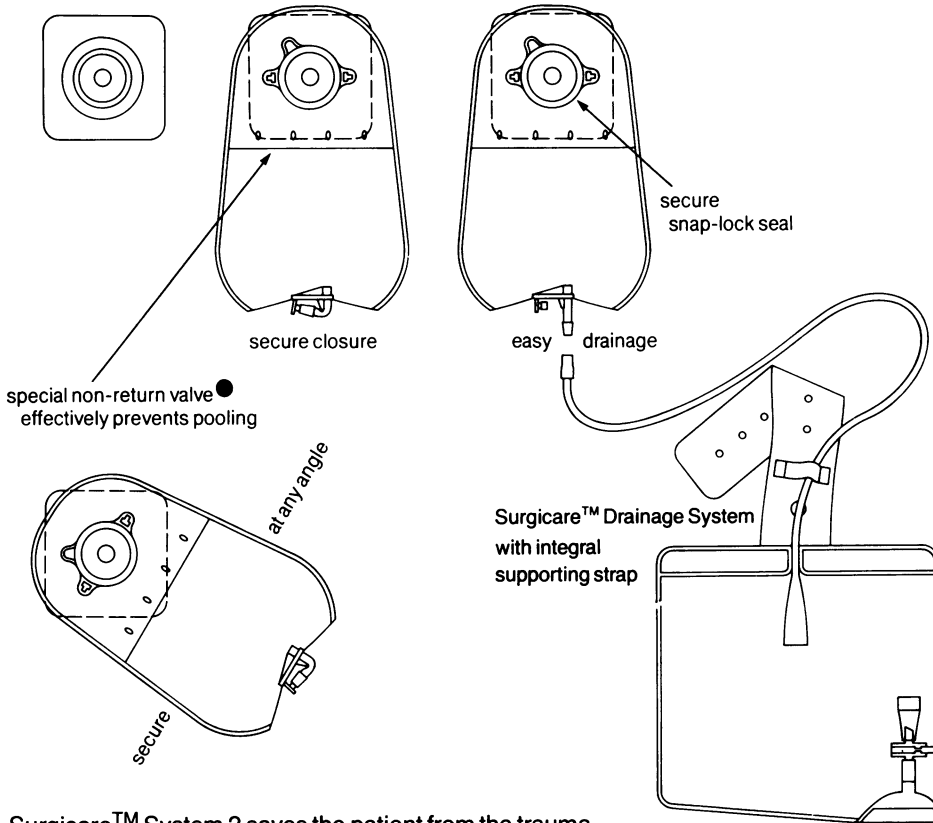
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Urostomy pouches simply snap onto the Stomahesive™ Flange



Surgicare™ System 2 saves the patient from the trauma of peeling off adhesive bags. The Stomahesive™ Flange can be left on the skin undisturbed for several days whilst the pouches are replaced as often as necessary. It makes possible a leak-free attachment of appliances to the skin thereby providing a unique degree of comfort free of irritation and soreness often associated with ordinary adhesives. Surgicare™ System 2 takes full advantage of these benefits which are particularly evident in the management of urostomies.

● The non-return valve permits easy access of urine to the lower part of the pouch and efficiently prevents the return of urine to pool in the area of the stoma thus the Stomahesive™ wafer is protected from the breakdown effects of urine and remains secure and leak-free for several days.

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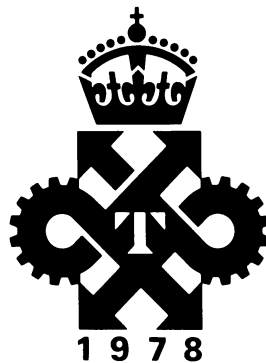
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# A Mark of Recognition



Two years ago, Smith Kline and French Research Institute received the Queen's Award for Technological Achievement resulting from H<sub>2</sub> receptor antagonist research and the development of cimetidine.

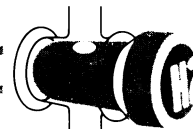
Since it became generally available over three years ago, 'Tagamet', by its unique action in reducing gastric acid, has revolutionised the treatment of disorders such as duodenal ulcer, benign

gastric ulcer and reflux oesophagitis, where acid plays a part.

For many patients it has brought a new standard of pain relief and healing. In the United Kingdom alone 'Tagamet' has been prescribed for an estimated one million patients.

## Tagamet

cimetidine



#### PRESCRIBING INFORMATION

##### Presentations

Tagamet Tablets P10002/0063 each containing 200 mg cimetidine (100, 133, 22, 300, 264 %).

Tagamet Syrup P10002/0073 containing 200 mg cimetidine per 5 ml syrup, 200 ml, 176.29.

##### Indications

Duodenal ulcer, benign gastric ulcer, reflux oesophagitis.

##### Dosage

Duodenal ulcer: Adults, 200 mg tds with meals and 400 mg at bedtime; 10 g/day for at least 4 weeks for full instructions see Data Sheet. In prevent relapse, 400 mg at bedtime or 400 mg morning and evening for at least 6 months.

Benign gastric ulcer: Adults, 200 mg tds with meals and 400 mg at bedtime; 10 g/day for at least 4 weeks for full instructions see Data Sheet.

Reflux oesophagitis: Adults, 400 mg tds with meals and 400 mg at bedtime; 10 g/day for 4 to 8 weeks.

##### Cautions

Impaired renal function, reduce dosage; see Data Sheet. Potentiation of oral anticoagulants; see Data Sheet. Prolonged treatment; observe patients periodically. Malignant gastric ulcer may respond symptomatically. Avoid during pregnancy and lactation.

##### Adverse reactions

Diarhoea, dizziness, rash, tiredness. Rarely, mild gynaecomastia, reversible liver damage, conjunctival states, usually in the elderly or very ill, interstitial nephritis.

Full prescribing information is available from

**SK&F**  
a SmithKline company

Smith Kline & French Laboratories Limited  
Welwyn Garden City, Hertfordshire AL7 1HJ  
Telephone: Welwyn Garden 25111  
Tagamet is a trade mark  
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# PHARMACIA, THE MANUFACTURERS OF SALAZOPYRIN, WISH TO DRAW THE ATTENTION OF ALL PRACTISING PHYSICIANS AND SURGEONS TO SOME IMPORTANT NEW INFORMATION.

## Crohn's Disease

Various clinical trials and publications<sup>1,2,3,4,5</sup> have now demonstrated that the benefits of Salazopyrin may be successfully extended to the management of active Crohn's Disease.

## Ulcerative Colitis

Recent work has stressed that the ideal maintenance dose in ulcerative colitis is 2g per day<sup>6</sup> and that such maintenance should be extended indefinitely to minimise the risk of relapse.<sup>7</sup> Cessation of therapy increases relapse risk four-fold regardless of time<sup>7,8</sup> since the acute attack, or whether placebo<sup>7</sup> or high fibre diet<sup>9</sup> are substituted.

# Salazopyrin

## sulphasalazine

### 36 years of therapeutic management.

#### Prescribing Information

##### Dosage and Administration

**Plain or EN Tablets:** In acute/moderate attacks 2-4 tablets 4 times a day. In severe attacks steroids should also be given. After 2-3 weeks the dose may gradually be reduced to the maintenance level of 3-4 tablets daily which should be given indefinitely.

**Suppositories:** Two inserted morning and night, the dose being gradually reduced after 3 weeks as improvement occurs.

**Children:** Reduce the adult dose on the basis of body weight.

##### Contra-Indications, Warnings etc.

**Contra-Indications:** Contra-indicated in sensitivity to salicylates and sulphonamides. Infants under 2 years.

**Adverse Reaction:** Side effects common to salicylates or sulphonamides may occur. Most commonly these are nausea, loss of appetite and raised temperature which may be relieved on reduction of dose, use of EN tablets or

suppositories. If serious reactions occur the drug should be discontinued.

Rarely the following adverse reactions have been reported.

**Haematological:** eg. Heinz body anaemia, haemolytic anaemia, agranulocytosis, aplastic anaemia and aplastic anaemia.

**Hypersensitivity:** eg. Rash, fever.

**Gastrointestinal:** eg. Impaired folate uptake, stomatitis.

**C.N.S.:** eg. Headache, peripheral neuropathy.

**Renal:** eg. Proteinuria, crystalluria.

**A.S.O.:** Stevens-Johnson syndrome and lung complications, eg. Pilonidal abscess.

##### Precautions

Care in cases of porphyria, allergic, renal or hepatic disease, glucose 6-PD deficiency. Blood checks should be made initially and periodically.

##### Pregnancy

The benefit to risk ratio must be carefully evaluated when the drug is given during pregnancy.

#### References

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#### Pharmacia

Salazopyrin (read) sulphasalazine, is a product of Pharmacia (Great Britain) Ltd., Prince Regent Road, Hounslow, Middlesex TW3 1NE. Telephone: 01-872 7321. Further information is available on request to the company.

# STATISTICS AT SQUARE ONE

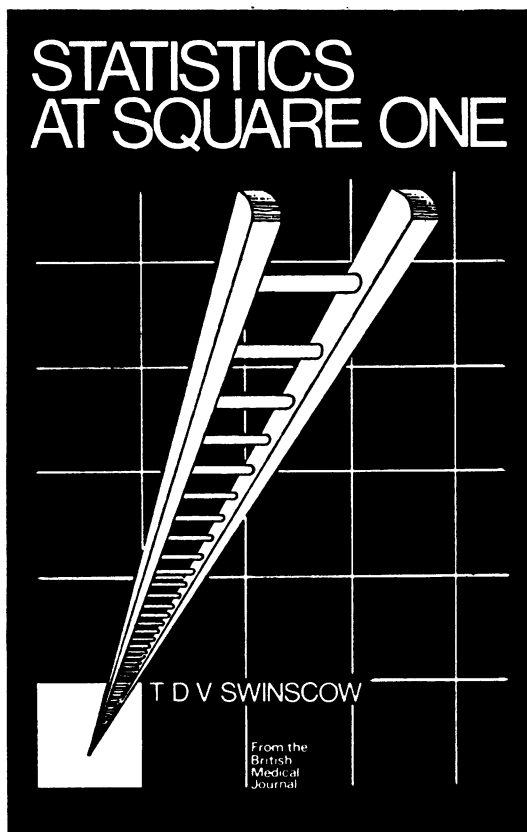
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