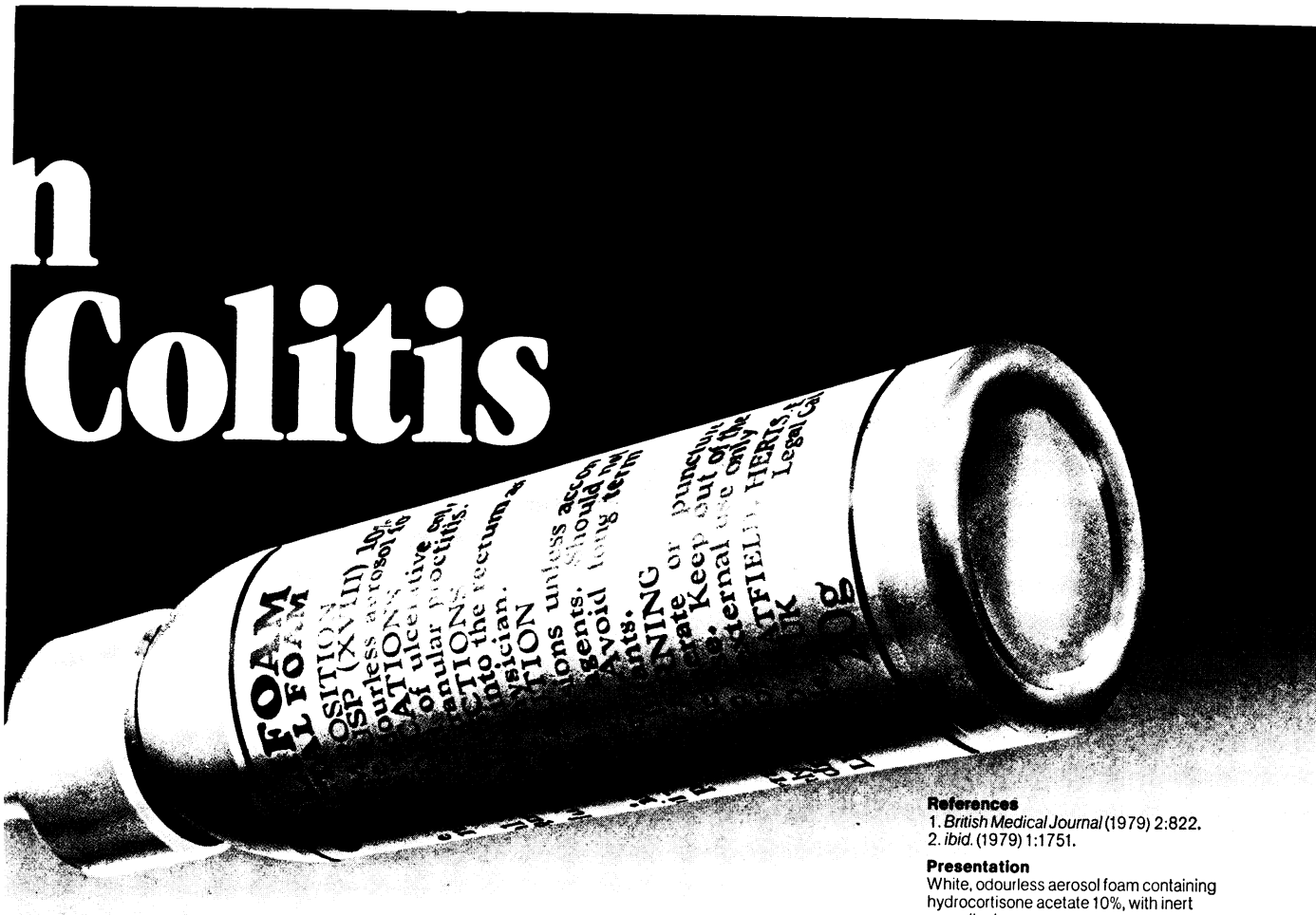
Unique
Ulcerative

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[1-2] have shown that a single dose of Colifoam remains in contact with the rectal mucosa for several hours. In one of these studies[1] the foam was seen to reach the sigmoid colon in most patients. The second study,[2] 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.

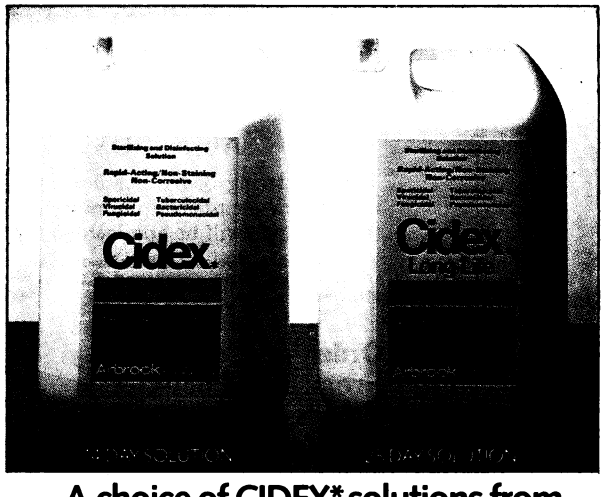
CIDEX* SOLUTIONS. NOT ONLY A CHOICE BUT A BETTER CHOICE

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*

Acta Gastro-Enterologica Belgica

SOMMAIRE DU FASCICULE 9-10

Bibliographie

Acta Gastro-enterologica Belgica. Prix de l'abonnement: 1·800 Fr. b.
Prix du fascicule isolé: 250 Fr. b.
Abonnements: A.S.SM.B. rue des Champs Elysees. 43. B 1050. Bruxelles. Belgium.

Maxolon protects the gastric mucosa from over-long exposure to gastric acid[1] by promoting normal peristalsis and gastric emptying[2,3]. This action contrasts with that of antacids.

By restoring the stomach's normal control, symptoms described by the patient as fullness, pain, heartburn and discomfort can be effectively treated and their recurrence prevented[4].

To the patient, Maxolon is the simple and convenient therapy to replace his repetitive 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,** Brentford, 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.

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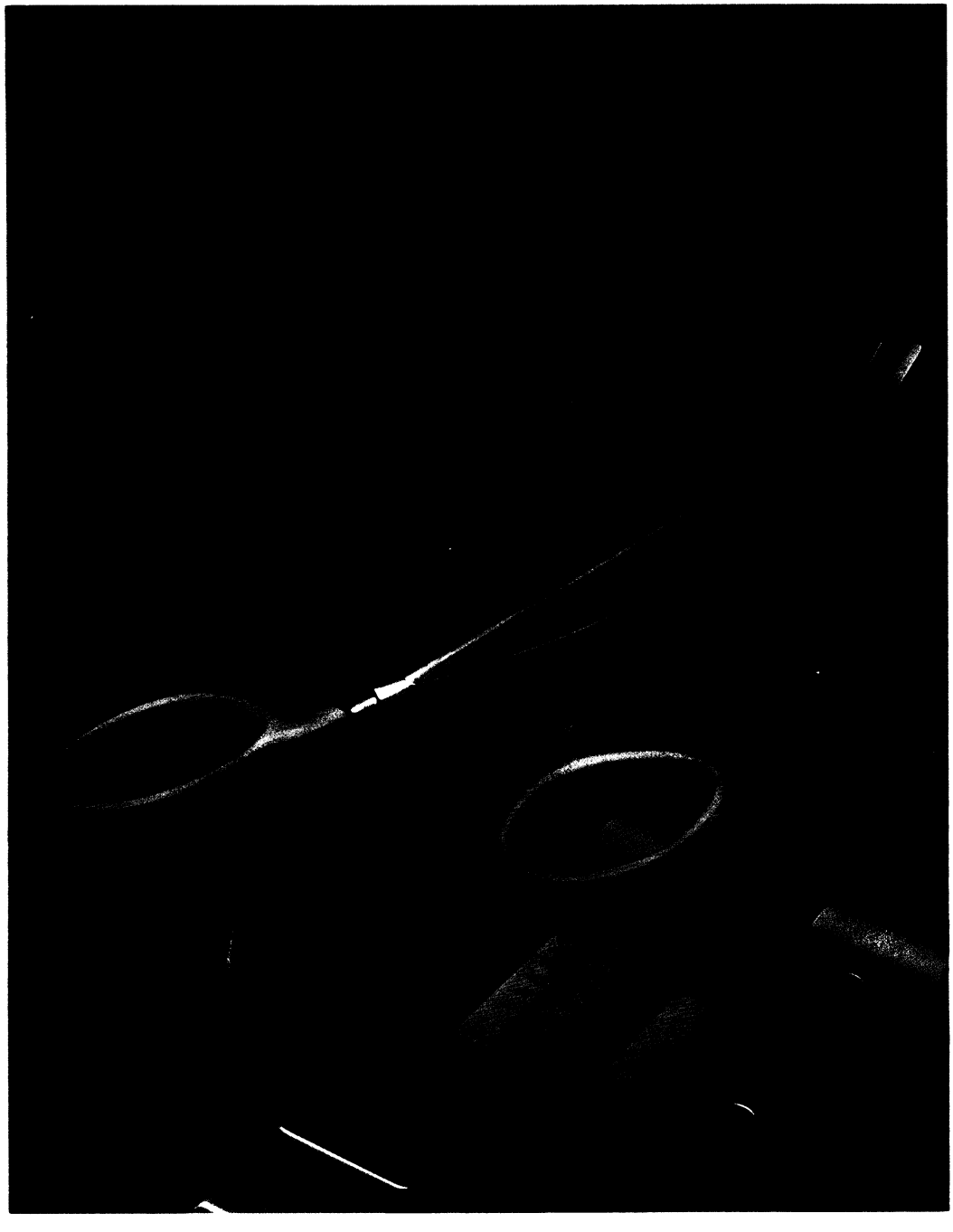

ETHICON

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

Br. Pat No. 1345 394 PRINTED IN GREAT BRITAIN

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.[1] 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[2] and avoidance of analgesics leads to faster recovery times.[3] 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.[4] Neuroleptanalgesia has also been used to good effect with intravenous Valium Roche.[5] The amnesic effect of intravenous Valium Roche undoubtedly contributes to the excellent acceptance by patients and their willingness to undergo repeat procedures.[6] 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.[7] This is true also for many poor-risk patients including those with liver disease in whom intravenous Valium Roche has been extensively used.[8-10] The dosage must, of course, be adjusted to the patient's needs and the necessary precautions observed.

**Annotated bibliography of references available on request.*

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

Dosage
0·2mg/kg body-weight. The usual adult dose is 10-20mg 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* (0·5ml 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 10mg diazepam in 2ml and 20mg in 4ml, in packings of 10.

Product Licence Numbers
0031/0068 (ampoules 10mg)
0031/5128 (ampoules 20mg)

Basic NHS Cost
Ampoules 10mg x 10 £2·22,
20mg 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

diazepam

where experience counts

ROCHE

Roche Products Limited
PO Box 8, Welwyn Garden City
Hertfordshire AL7 3AY

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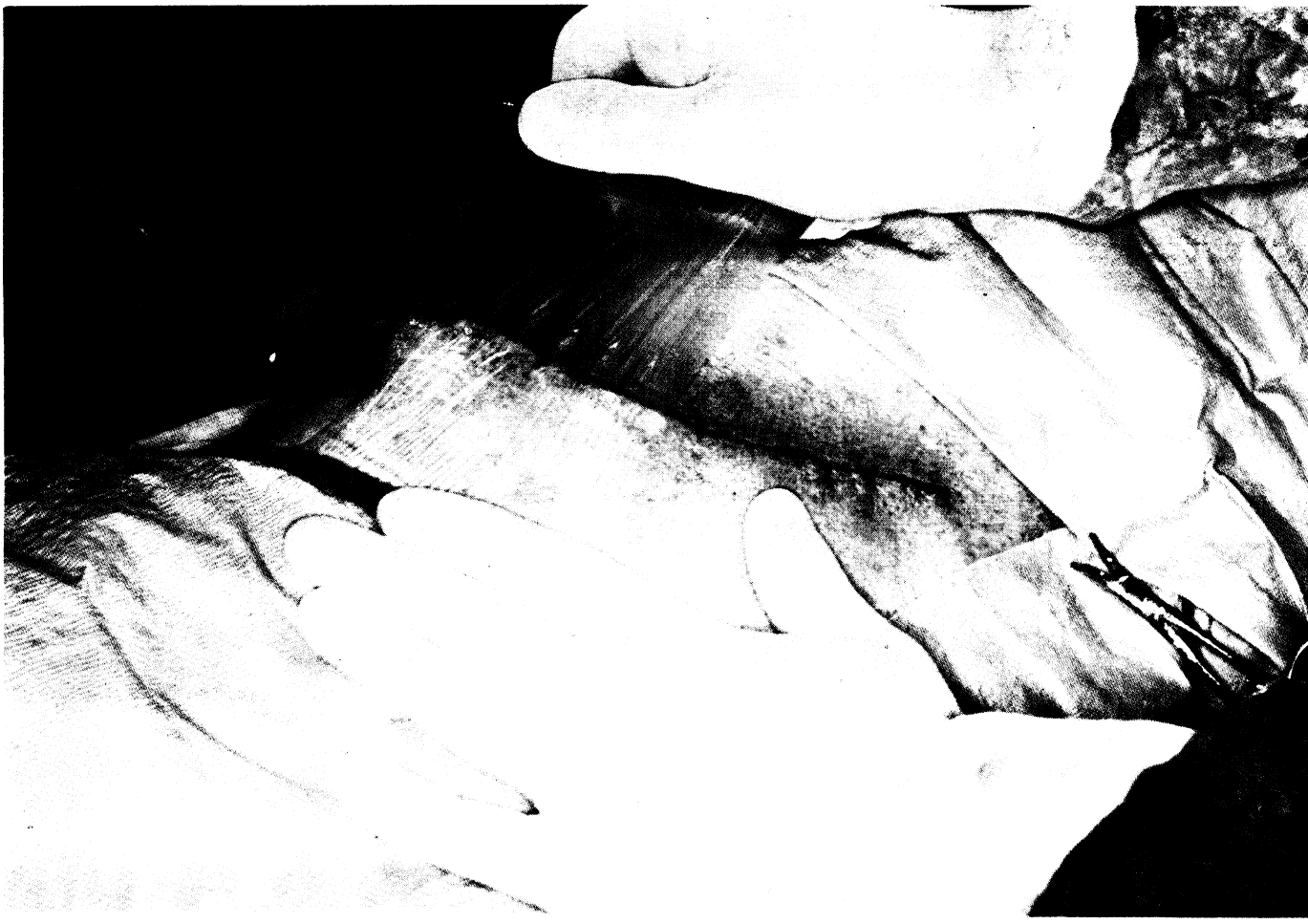


NEW OP-SITE SKIN CLOSURE. AN OUTSTANDINGLY SIMPLE, NON-INVASIVE TECHNIQUE.

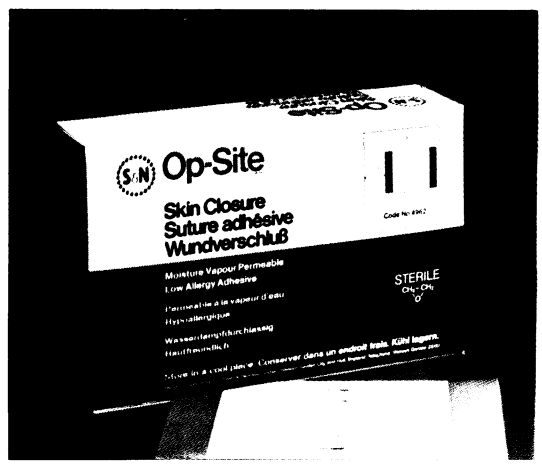
Op-Site Skin Closures represent a major new advance in surgical wound closure and have been designed to produce significant advantages over existing methods.

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 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[1]. They were infection free and enjoyed a *superior* cosmetic effect.

Contact Smith & Nephew Medical now for more details.

Smith & Nephew Medical

WELWYN GARDEN CITY, HERTFORDSHIRE
TELEPHONE (07073) 25151

1. [illegible]