PYROGASTRONE

carbenoxolone/magnesium trisilicate/dried aluminium hydroxide gel

positive healing power

Complete oesophageal healing

- Pyrogastrone exerts a unique direct healing action on the oesophagus.
- resolves mucosal inflammation, erosion and ulceration.
- gives exceptionally high rates of endoscopic healing.[1,2]

Prompt symptom relief

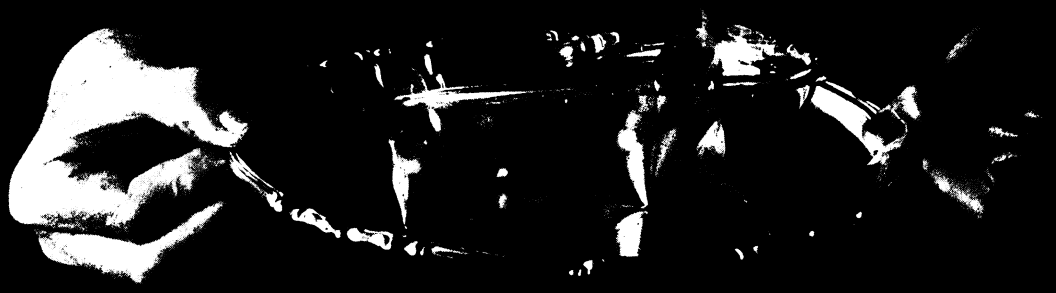
- Pyrogastrone quickly soothes the sensitive mucosa.
- suppresses gastro-oesophageal reflux and protects against further acid/bile attack.
- relieves heartburn, dyspepsia, dysphagia, regurgitation and retrosternal pain.[1,2]

For the treatment of oesophageal inflammation, erosions and ulcers due to hiatus hernia or other conditions causing reflux and for the relief of heartburn, flatulence and other symptoms associated with reflux oesophagitis. Each tablet contains:– Carbenoxolone Sodium B.P. 20 mg Magnesium Trisilicate B.P. 60 mg Dried Aluminium Hydroxide Gel B.P. 240 mg in a base containing Sodium Bicarbonate B.P. 210 mg and Alginic Acid B.P.C. 600 mg. Adult Dosage. One to be chewed immediately after meals, three times a day and two to be chewed at bedtime. Supplied in cartons of 100. PL 0071/0138 Basic N.H.S. Cost: One day's treatment 64p. (5 tablets). Pyrogastrone should not be prescribed for patients suffering from severe cardiac, renal or hepatic failure. It should not be given to patients on digitalis therapy unless serum electrolyte levels are monitored weekly and measures taken to prevent the development of hypokalaemia. Special care should be exercised with patients pre-disposed 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 adminstered 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, Bit. Pat. No. 1390683.

Further information available from:– Winthrop Laboratories Surbiton- upon-Thames Surrey KT6 4PH.

WINTHROP

The Old Retainer.



Time to say Goodbye?

Presentation White odourless aerosol foam containing hydrocortisone acetate 10%. **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). 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

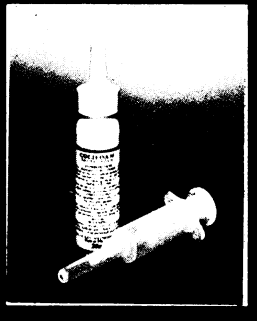
For many years the retention enema has been the best way to get topical steroid therapy into the rectum and distal colon to relieve inflammatory bowel disease. Thousands of colitis sufferers are familiar with its benefits – and also its drawbacks, mainly the sheer inconvenience and discomfort of administering it.

Now there is an alternative to the retention enema – another form of topical therapy, comparable in efficacy but far easier for the patient to use. Colifoam: a unique foam presentation of hydrocortisone which is easily administered using a simple plastic applicator.

More acceptable than steroid enema

Clark* reported on a clinical trial of Colifoam in 20 patients with inflammatory bowel disease. Proctitic symptoms were controlled in 17, and 11 out of 12 patients who had previously been treated with prednisolone enemas, found Colifoam "... easier and more convenient to use". Three of these patients found Colifoam the more effective treatment and the others thought there was no difference in efficacy between Colifoam and steroid enemas.

N.B. A dose of Colifoam costs far less than a dose of a proprietary prednisolone retention enema.



Colifoam

hydrocortisone acetate foam

a welcome alternative to the retention enema for distal inflammatory bowel disease

the bowel wall. Safety during pregnancy has not been fully established. **Pharmaceutical precautions** Do not refrigerate. Do not 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. One applicatorful of Colifoam provides a dose of approximately 90–110mg 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. **Basic NHS Cost** £7.58. *Clark ML. Practitioner 1977; 219:103.

Further information is available on request.

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

Acta Gastro-Enterologica Belgica

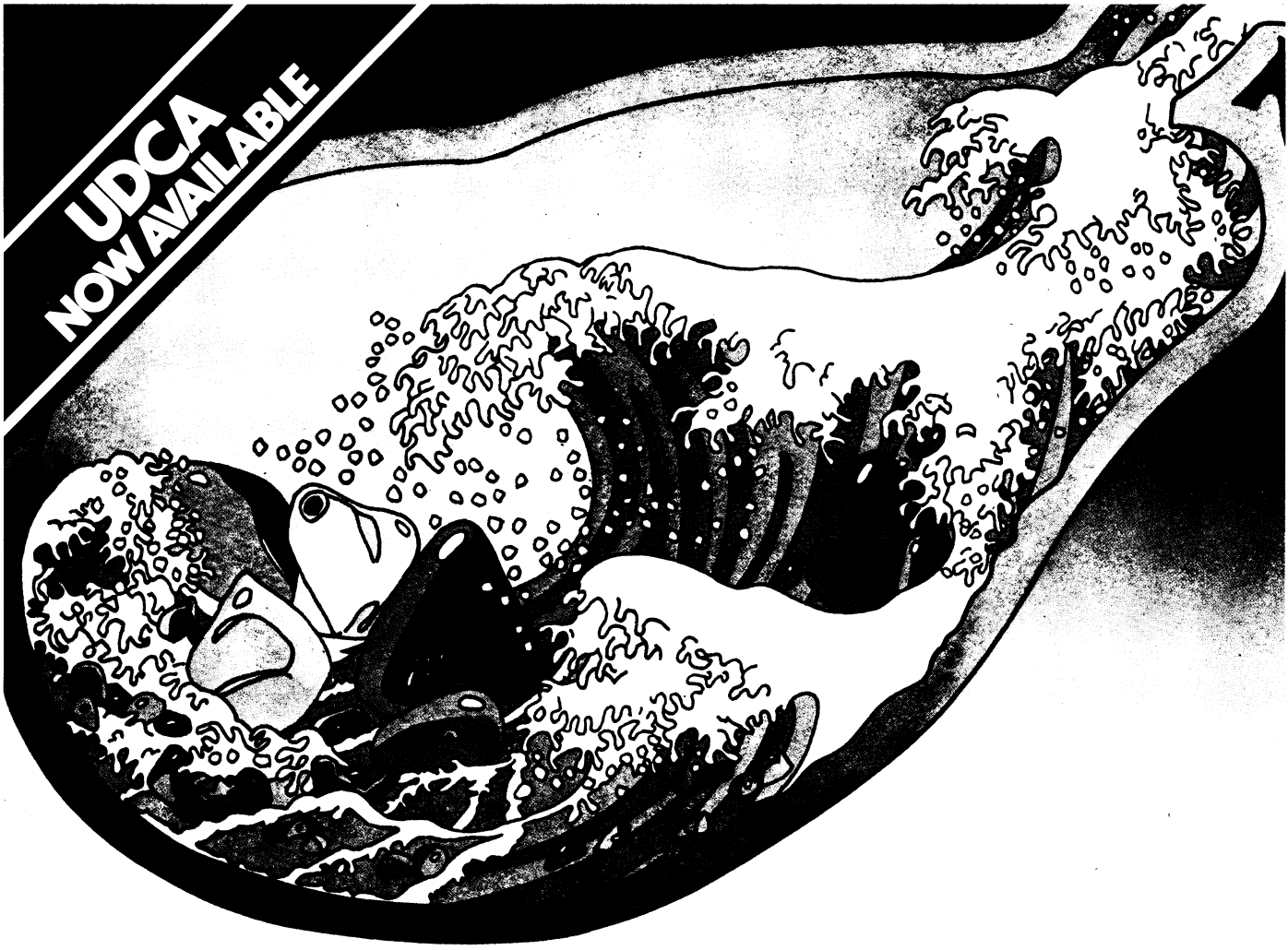
SOMMAIRE DU FASCICULE 9–10

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.



THE NEW WAVE IN GALLSTONE DISSOLUTION.

Destolit – ursodeoxycholic acid – a naturally occurring bile acid.

Indicated for use with cholesterol gallstones, the different chemical structure of Destolit enables you to use an effective therapy that causes no cathartic side effect.

- ✱ For the dissolution of cholesterol stones in a functioning gall bladder.
- ✱ Reported effective in up to 80% of appropriate patients.
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- ✱ Simple dosage aids patient compliance.

Destolit*

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DISSOLVES GALLSTONE PROBLEMS

Please clip and send to Lepetit Pharmaceuticals Limited for Destolit information package.

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"I feel I'm so full I could burst! With this overblown stomach I'm cursed." The Doctor smiled sweetly, Then murmured discreetly, "Well, we'd better try Maxolon first."

For relief from heartburn and flatulence

Maxolon

metoclopramide

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.

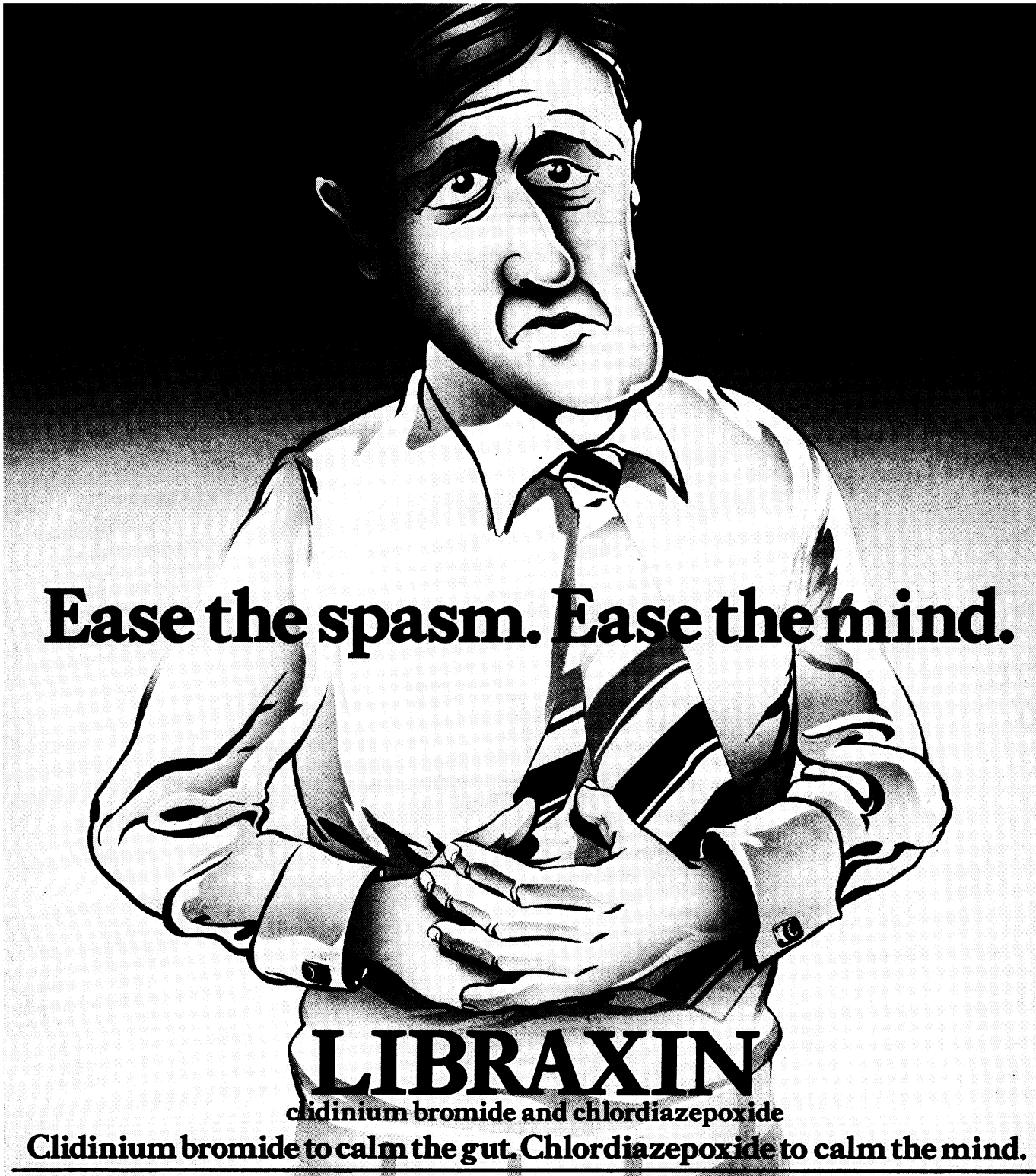
Side-effects and Precautions
There are no absolute contra-indications to the use of Maxolon.
Various extra-pyramidal reactions to Maxolon, usually of the dystonic type, have been reported. The incidence of these reactions in children and young adults may be increased if daily dosages higher than 0.5mg /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 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 (£7.70 for 100).
Syrup 5mg/5ml (£2.78 for 200ml).
A paediatric liquid presentation and ampoules for injection are also available.
Average daily cost of Maxolon tablets 2·3p.
Prices correct at January 1981.

Further information is available on request to the company.

Beecham Research Laboratories
Brentford, England. A branch of Beecham Group Limited.
Maxolon and the BRL logo are trade marks.

PL 0038/0095 0098 5040 5041. BRL 4026



Ease the spasm. Ease the mind.

LIBRAXIN

clidinium bromide and chlordiazepoxide

Clidinium bromide to calm the gut. Chlordiazepoxide to calm the mind.

Indications For the control of hypersecretion, hypermotility and emotional factors associated with gastro-intestinal disorders, such as nervous dyspepsia, peptic ulcer, cardiospasm, pylorospasm, nervous or irritable colon.

Dosage 1 or 2 tablets three or four times daily. In elderly patients, it is recommended that the initial dose be 1 tablet twice daily.

Contra-indications Because of its anticholinergic effects, Libraxin should not be given to patients suffering from glaucoma or prostatic enlargement.

Precautions Patients should avoid alcohol while under treatment with Libraxin, since the individual response cannot be foreseen. Patients' reactions (driving ability, operation of machinery, etc.) may be modified to a varying extent, depending on dosage and individual susceptibility. The established medical principle of prescribing medicaments in early pregnancy only when absolutely indicated should be observed.

Side-effects Side-effects are infrequent and are controlled by reduction of dosage. They include drowsiness, muscle weakness, dryness of the mouth, blurring of vision, constipation and hesitancy of micturition.

Presentation Libraxin tablets containing 5mg chlordiazepoxide and 2.5mg clidinium bromide in packings of 100 and 500.

Basic NHS Cost 1 tablet 3 times daily 7.4p/day ex 500 pack.

Licence Number 0031/5024

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

Libraxin is a trade mark

ROCHE

J486035/380

TECHNICAL DATA

STERILISED ABSORBABLE SYNTHETIC SUTURE COATED POLYGLACTIN 910 VICRYL*

Presentation The basic VICRYL (Polyglactin 910) Suture is prepared from a copolymer of glycolide and lactide. The substances are derived respectively from glycolic and lactic acids. The empirical formula of the copolymer is $(C_2H_2O_2)m(C_3H_4O_2)n$.

Coated VICRYL (Polyglactin 910) Sutures are obtained by coating the braided suture material with a mixture composed of a copolymer of glycolide and lactide and an equal amount of calcium stearate. This coating does not affect the biological properties of the suture.

VICRYL (Polyglactin 910) Sutures are coloured by adding D & C Violet No 2 during polymerisation of the lactide and glycolide. Suture may also be manufactured in the undyed form.

These sutures are relatively inert, nonantigenic, nonpyrogenic and elicit only a mild tissue reaction during absorption.

Action Two important characteristics describe the in vivo behaviour of absorbable sutures. The first of these is tensile strength retention and the second absorption rate or loss of mass.

Subcutaneous tissue implantation studies of both VICRYL and Coated VICRYL Suture in rats show at two weeks post-implantation approximately 55% of its original tensile strength remains, while at three weeks approximately 20% of its original strength is retained.

Intramuscular implantation studies in rats show that the absorption of these sutures is minimal until about the 40th post-implantation day. Absorption is essentially complete between the 60th and 90th days.

Uses VICRYL and Coated VICRYL synthetic absorbable sutures are intended for use where an absorbable suture or ligature is indicated.

Dosage and Administration
By implantation.

Contraindications, Warnings, etc.
These sutures, being absorbable, should not be used where extended approximation of tissues under stress is required.

Sutures placed in skin and conjunctiva may cause localised irritation if left in place for longer than 10 days and should be removed as indicated.

The safety and effectiveness of VICRYL (Polyglactin 910) and Coated VICRYL Sutures in neural tissue and in cardio-vascular tissue have not been established.

Pharmaceutical Precautions
Do not re-sterilise.

Legal Category P Pharmacy medicine sold to surgeons and hospitals through surgical dealers.

Package Quantities Various lengths of material packaged in sealed aluminium foil sachets. This primary pack is contained in a peel-apart secondary pack. The unit of sales is 12 packs contained in a film wrapped drawer style carton.

Adverse Reactions No suture related adverse reactions were reported during clinical trials, although a number of minor reactions were classified as being of unknown cause.

Product Licence Nos PL 0508/0001
PL 0508/0009

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PO BOX 408, BANKHEAD AVE
EDINBURGH EH11 4HE

*Trademark

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