A new diagnostic promise in gastroenterology

SeHCAT is a ^{75}Se-labelled taurine conjugate of homocholic acid. It has been shown to mimic the reabsorption and enterohepatic circulation of the endogenous bile acid pool, and is particularly resistant to deconjugation by intestinal flora.

SeHCAT represents a significant breakthrough, enabling for the first time, accurate and convenient measurement of bile acid pool turnover and assessment of ileal reabsorptive function.

SeHCAT has four broad areas of application:

- Measuring ileal function following gastrointestinal surgery.
- Indicating the extent of ileal involvement in inflammatory bowel disease.
- Classification of patients suffering chronic diarrhoea.
- Research into the dynamics of the enterohepatic circulation.

Such enormous diagnostic promise has already produced some exciting results.

Information about the product, its applications and the results it has produced are available on request.

SeHCAT

The first accurate, convenient measure of bile acid pool turnover

Amersham International plc
Amersham England HP7 9LL
telephone Little Chalfont (024 04) 4444

Amersham

A Better Way To Dissolve Gallstones

ROWACHOL®

menthol, pinene, menthone, borneol, camphene, cineole

COMPOUND OF CYCLIC MONOTERPENES

Rowachol and chenodeoxycholic acid

Combination therapy for common bile duct stones

- **greater dissolution than with bile acid alone**
- **reduced side effects**
- **cost effective treatment**

References:

1. Somerville K. W. et al. "Stones in the common bile duct — experience with oral cholelitholytic therapy in 31 patients". Data on file.
2. Ellis W. R. et al. "Adjunct to bile-acid treatment for gallstone dissolution: low-dose chenodeoxycholic acid combined with a terpene preparation". BMJ 1981; **282:** 611-612.
3. Doran J. et al. "Rowachol — a possible treatment for cholesterol gallstones". Gut 1979; **20:** 312-317.
4. Ellis W. R. et al. "Terpene treatment for gallstones: five years of experience with Rowachol 1977-1982". Gut 1982; **23:** 10, A882-883.
5. Bell G. D. et al. "How does Rowachol, a mixture of plant monoterpenes, enhance the cholelitholytic potential of low and medium dose chenodeoxycholic acid?" Br J Clin Pharmacol 1982; **13:** 278-279.
6. Ellis W. R. et al. "Oral dissolution therapy — a valid option in management of biliary duct stones". Gastroenterology; in press.

ROWACHOL CAPSULES

Presentation: A green spherical, enteric-coated soft gelatin capsule (3 minims round). Each capsule contains the following active ingredients in olive oil B.P.: pinene α + β 17mg, camphene 5mg, cineole BP 2mg, menthone 6mg, menthol BP 32mg, borneol 5mg.
Uses: Adjunct therapy for the dispersal (by dissolution and/or expulsion) of stones in the common bile duct. To be used in combination with chenodeoxycholic acid. It has been demonstrated that if Rowachol is combined with either low or medium dose chenodeoxycholic acid (CDCA), the gallstone dissolution rate is greater than if the same dose of CDCA is used alone. Combined therapy enables a reduced dose of CDCA to be used and there is therefore a lower incidence of side effects. Rowachol increases biliary secretion, relieves spasm of the bile ducts, enhances metabolic liver function, reducing biliary stasis. By inhibiting HMGCoA reductase, endogenous cholesterol production is reduced, desaturating bile, assisting the dissolution of gallstones, and preventing the precipitation of further stones.
Dosage and Administration: For oral administration.
Adult Dose: 1-2 capsules three times daily taken before meals. A dose of one capsule three times daily is recommended at the start of treatment. *There is no recommended dose for children.*
Contra-indications, Warnings etc. Caution should be used in patients receiving oral anticoagulants, or other agents metabolised by the liver, where the dose is critical. Reduced cholesterol intake in the diet is advisable. Although no teratogenic effects have been reported, Rowachol should not be given in the first trimester of pregnancy. *Treatment of Overdosage:* If capsules have been recently ingested, the stomach should be emptied by gastric lavage. Observation should be carried out with symptomatic treatment if necessary.
Pharmaceutical Precautions: Storage: Protect from heat and moisture.
Legal Category: POM.
Package Quantities: Containers of 50 capsules.
Further Information: Nil.
Product Licence No. 0007/0002.
Licence Holder: Rowa Limited, Bantry, Co. Cork, Ireland.
Basic NHS Price: £5.95/50 capsules.

ROWACHOL LIQUID

Presentation: A pale yellow liquid in a 10ml amber, screw cap dropper bottle, containing the following active ingredients: menthol 32% w/v (3.2g), menthone 6% w/v (0.6g), pinene 17% w/v (1.7g), borneol 5% w/v (0.5g), cineole 2% w/v (0.2g), camphene 5% w/v (0.5g) (olive oil excipient q.s. ad 10g).
Uses: Cholelithiasis, biliary and hepatic disorders. Rowachol has been demonstrated to increase biliary secretion, relieve spasm of the bile ducts, enhance metabolic liver function and reduce biliary stasis. By inhibiting HMGCoA reductase, endogenous cholesterol production is reduced, desaturating bile, assisting the dissolution of gallstones and preventing the precipitation of further stones.
Dosage and Administration: For oral administration.
Adult Dose: 3-5 drops four or five times daily. *No dose recommendation for children.*
Contra-indications, warnings etc. Caution should be used in patients receiving oral anticoagulants, or other agents metabolised by the liver, where the dose is critical. Reduced cholesterol intake in the diet is advisable. Although no teratogenic effects have been reported, Rowachol should not be given in the first trimester of pregnancy. *Treatment of overdosage:* Gastric lavage, followed by observation with symptomatic treatment if necessary.
Pharmaceutical Precautions: Storage: Protect from heat and moisture.
Legal Category: P.
Package Quantity: 10ml dropper bottle.
Further Information: Nil.
Product Licence No. 0531/6286.
Licence Holder: Rowa Limited, Bantry, Co. Cork, Ireland.
Basic NHS Price: £5.70/10ml.

Tillotts LABORATORIES

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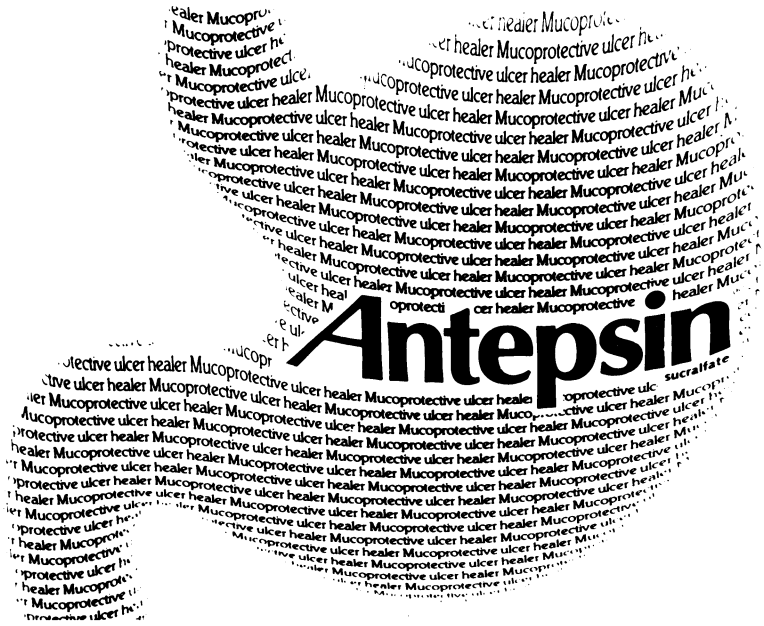
Tel: (0462) 813933
Telex: 82313 Tillab G.

TPM/1 ROWA

Antepsin®

Sucralfate

Mucoprotective ulcer healer



Non-systemic action

Fast pain relief
Excellent healing rates

Prolonged remission
Low incidence of side effects

Prescribing Information

Presentation Antepsin Tablets 1 gram are white, oblong, biconvex, uncoated tablets scored and embossed 1239 on one side and Ayerst on the other. Each tablet contains 1 gram sucralfate. **Uses** For the treatment of duodenal ulcer, gastric ulcer and chronic gastritis. **Dosage and Administration** For oral administration. *Adults* Usual dose 1 gram 4 times a day. Maximum daily dose 8 grams. Four to six weeks treatment is usually needed for ulcer healing but up to twelve weeks may be necessary in resistant cases. Antacids may be used as required for relief of pain. **Contra-indications, Precautions, Warnings, etc.** *Contra-Indications* There are no known contra-indications. *Precautions* 1. Concomitant administration with some oral anti-infectives such as tetracyclines may interfere with absorption of the latter. 2. The product should only be used with caution in patients with renal dysfunction. 3. As with all medicines, Antepsin should not be used in early pregnancy unless considered essential. **Side Effects** A low incidence of mild side effects, e.g. constipation, has been reported.

Further information is available on request to the Company.

Legal Category POM. **Package Quantities** Antepsin 1 gram – Securitainers of 100. **Pharmaceutical Precautions** No special requirements for storage are necessary. **Product Licence Numbers** PL No. 0607/0045 PA No. 149/4/2. **Basic N.H.S. Price** Average daily cost 50p.

Ayerst International
Ayerst Laboratories Ltd.,
South Way, Andover, Hampshire SP10 5LT.
Telephone: 0264 58711.
Distributors in Ireland: Ayerst Laboratories Ltd.,
765 South Circular Road, Islandbridge, Dublin 8.

* ANTEPSIN is a registered Trade Mark.

THE BEST CHOICE EVERY TIME

IT WORKS In the treatment of ulcerative colitis, Colifoam is as effective as steroid enemas. At the same time it has been shown that patients find the foam easier to retain.[1, 2]

PATIENTS PREFER IT
Colifoam is far more comfortable, more convenient and more acceptable than enemas. Patients also find it easier to administer and that it causes less interference in their daily lives.

IT COSTS LESS
Surprisingly, despite the fact that it's just as effective and far more comfortable, Colifoam is less expensive. In fact, it can cost up to ⅓ less per dose than a standard proprietary enema.[3]

IT'S SAFER
Recent clinical data shows Colifoam has extremely low levels of systemic absorption,[4] lower than proprietary prednisolone enemas.[5] Therefore, there is less potential for adrenal suppression which means that Colifoam may be considered safer in long-term use.

COLIFOAM

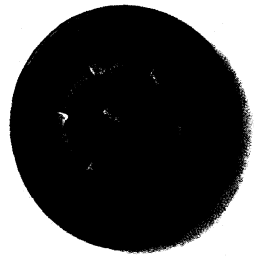
hydrocortisone acetate foam

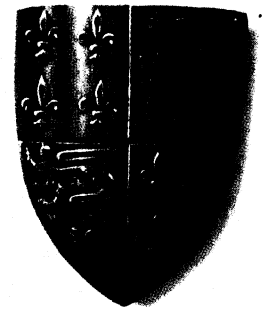
IN DISTAL INFLAMMATORY BOWEL DISEASE. THE BEST CHOICE EVERY TIME.

Presentation White odourless aerosol foam containing hydrocortisone acetate PhEur 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 with every pack). Satisfactory response usually occurs within five to seven days. **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. **Pharmaceutical precautions** Pressurized container. Protect from sunlight and do not expose to temperatures above 50°C. Do not pierce or burn even after use. Do not refrigerate. Shake vigorously before use. Keep out of reach of children. For external use only. **Legal category POM. Package quantities** Aerosol canister containing 25g (approx. 14 applications). **Basic NHS cost** 25g plus applicator, £7.40. **Further Information** One applicatorful of Colifoam provides a dose of approximately 125mg 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. **References 1.** Ruddell WSJ, et al. Gut 1980; 21: 885–889. **2.** O'Donoghue D. Modern Medicine, December 1981; 45. **3.** Source: Mims. **4.** Barr WH, Kline B, Beightol L, Zfass A, Medical College of Virginia/Virginia Commonwealth University. FDA bioavailability submission document October 1981. **5.** Lee DAH, et al. Gut 1980; 21: 215–218. Further information is available on request. Stafford-Miller Ltd., Professional Relations Division, Hatfield, Herts. AL10 0NZ.

Renaissance

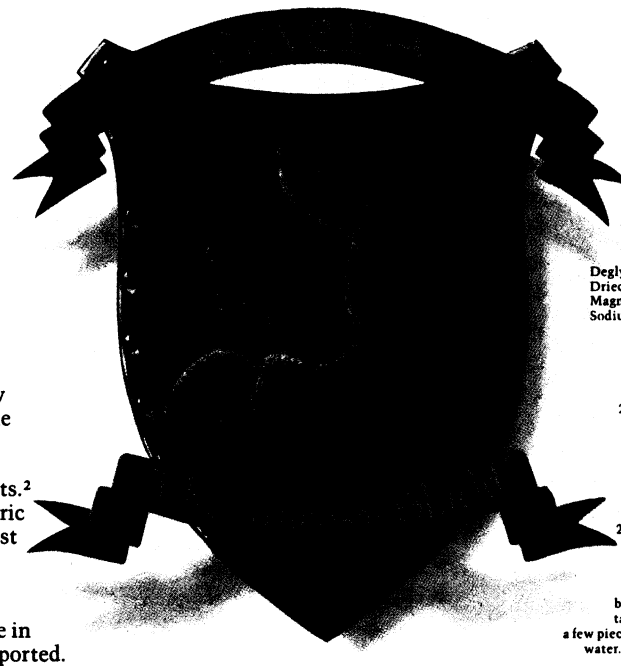
Mediaeval Crusades





Era of Richard III

Bodily defence still relies on shields



NOW! A natural mucosal shield helps heal peptic ulcers!

CAVED-S® does what no other ulcer therapy can do: it increases the number of mucus-secreting cells[1] with virtually no side effects.[2] This protects the gastric mucosal barrier against damaging agents [3,4,5] and reduces ulcer recurrence.[6]

An 88% healing rate in 12 weeks[7] has been reported. Studies also confirm that CAVED-S offers comparable efficacy to cimetidine in healing gastric ulcers[7] and comparable efficacy to ranitidine in healing duodenal ulcers.[6]

PRESCRIBING INFORMATION

Presentation:
Brown tablets embossed 'CAVED-S', each containing:

Deglycyrrhizinated Liquorice	380 mg
Dried Aluminum hydroxide gel	100 mg
Magnesium carbonate	200 mg
Sodium bicarbonate	100 mg

Indications:
For the treatment of peptic ulcer and other allied conditions.

Dosage and Administration:
Adult dose for gastric ulcer:
2 tablets 3 times a day between meals.
Adult dose for duodenal ulcer:
Increase to 2 tablets 6 times a day between meals when necessary.
Prophylactic dose:
Gastric ulcer:
1 tablet 3 times a day, between meals.
Duodenal ulcer:
2 tablets 3 times a day, between meals.
Children's dosage 10-14 years: half adult dose.
The tablets should be lightly chewed and swallowed with a drink of water, but in exceptional cases of objection to taste, the tablets should be broken into a few pieces and then swallowed with a drink of water. No additional antacids are necessary.

Contra-indications, warnings, etc:
Rare cases of mild diarrhoea can occur. No other side-effects have been reported.
Caved-S should be used with caution in pregnancy.

Basic NHS Price:
60's—£2.83
240's—£10.12
600's—£22.76
PL0424/5000.

CAVED-S®

(deglycyrrhizinated liquorice, alum hydrox gel, mag carb, sod bic)

"The Mucosal Shield" for peptic ulcers

Tillotts LABORATORIES

Henlow Trading Estate, Henlow, Bedfordshire. SG16 6DS.
Telephone 0462 813933 Telex: 82313 Tillab G.

REFERENCES:
1. Van Marle J, Aarsen PN, Lind A, et al: Deglycyrrhizinised liquorice (DGL) and the renewal of rat stomach epithelium. *Eur J Pharmacol* 72:219-225, 1981. 2. Cooke WM, Baron JH: Metabolic studies of deglycyrrhizinated liquorice in two patients with gastric ulcer. *Digestion* 4:264-268, 1971. 3. Rees WDW, Rhodes J, Wright JE, et al: Effect of deglycyrrhizinated liquorice on gastric mucosal damage by aspirin. *Scand J Gastroenterol* 14:605-607, 1979. 4. Morgan RJ, Nelson LM, Russell RI, et al: The effect of deglycyrrhinized liquorice on the occurrence of aspirin and aspirin plus bile acid-induced gastric lesions, and aspirin absorption in rats, abstracted. *Gastroenterology* 82:1134, 1982. 5. Morris TJ, Calcraft BJ, Rhodes J, et al: Effect of a deglycyrrhizinised liquorice compound in the gastric mucosal barrier of the dog. *Digestion* 11:355-363, 1974. 6. McAdam WAF, Morgan AC, Pacsoo C, et al: A comparison between ranitidine and Caved-S in duodenal ulcer treatment, abstracted. Proceedings, World Congress of Gastroenterology, Stockholm, June 1982. 7. Morgan AG, McAdam WAF, Pacsoo C: Comparison between cimetidine and Caved-S in the treatment of gastric ulceration, and subsequent maintenance therapy. *Gut* 23:545-551, 1982.

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Pentax Endoscopy Systems, together with a full range of accessories, are now sold and serviced direct in the U.K. from manufacturer to medical specialist.

Pentax combine the most advanced optical technology with mechanical excellence to produce endoscopes designed for today's procedures.

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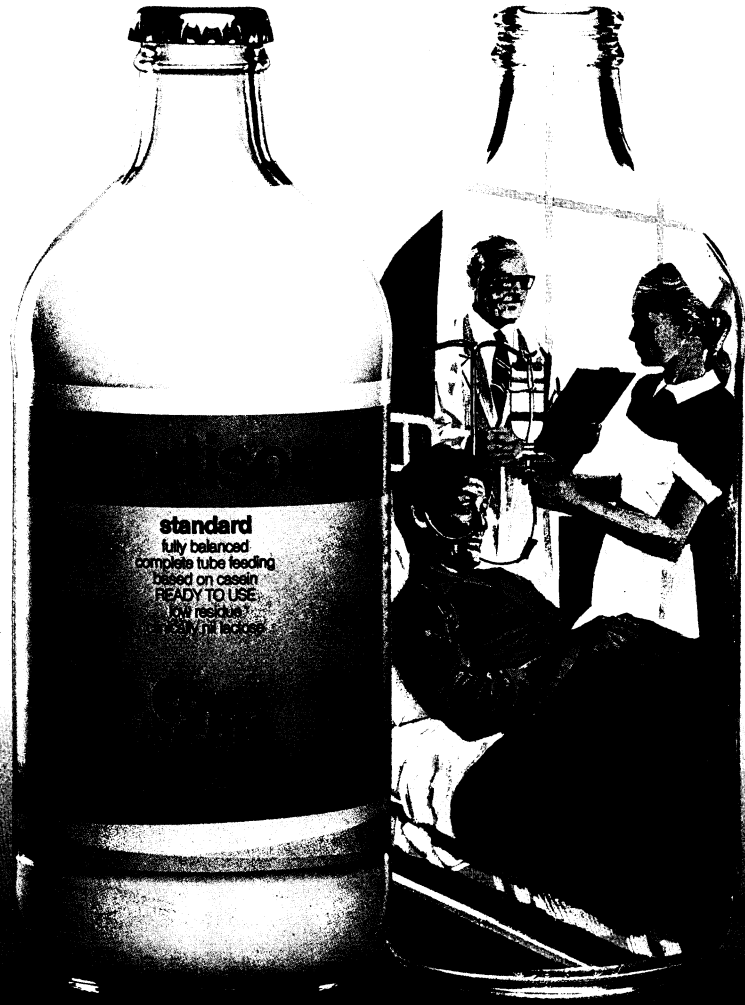
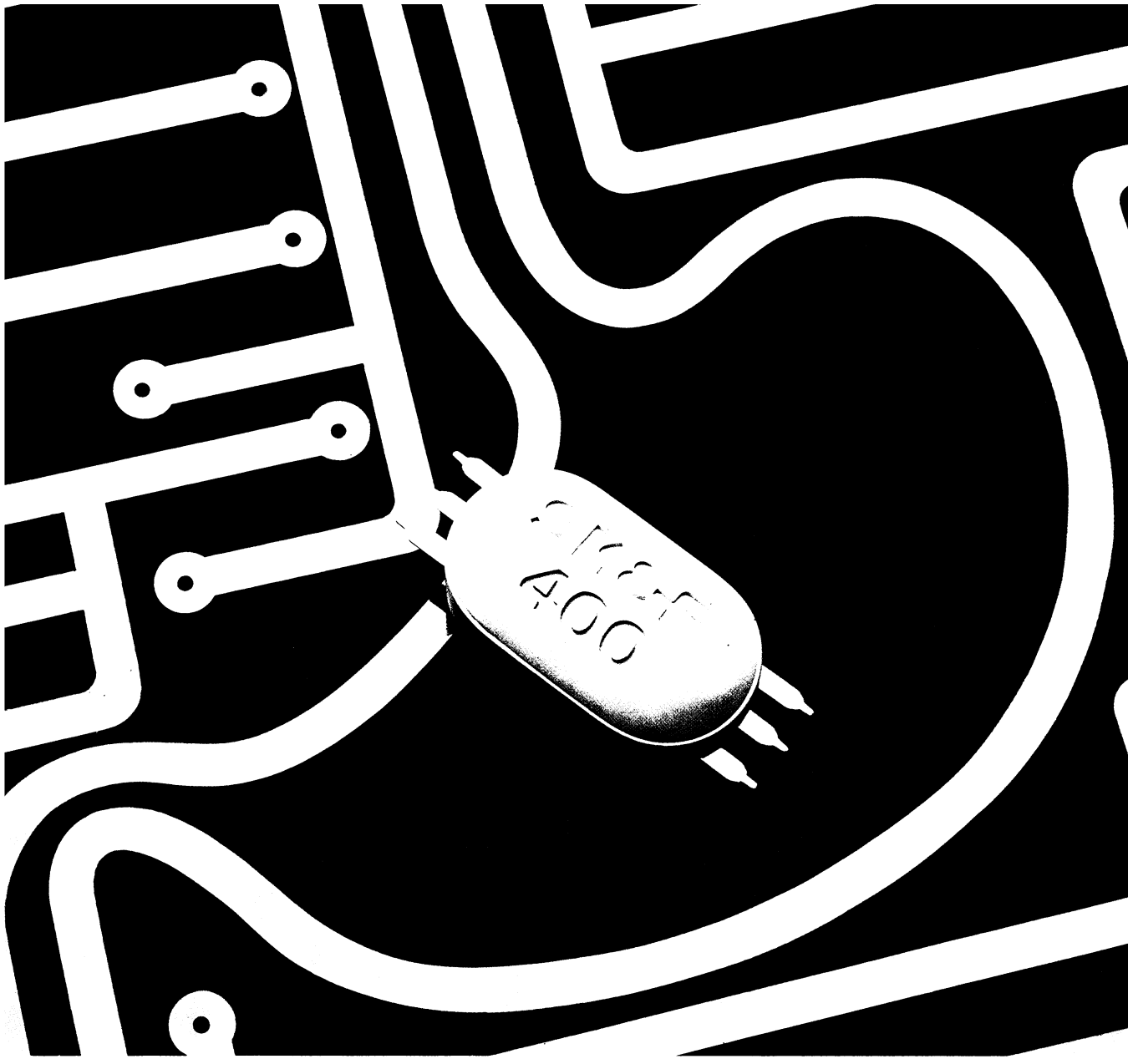
The liquid life-line



for the medical patient

Administration of Fortison feeding is most easily accomplished using the Fortison feeding set (gastric drip line) and the Fortison tube.

For further information contact–
Cow & Gate Limited, Clinical Products Division,
Cow & Gate House, Trowbridge, Wiltshire, BA14 8YX.
Telephone: Trowbridge 02214 68381.



Gastro-technology

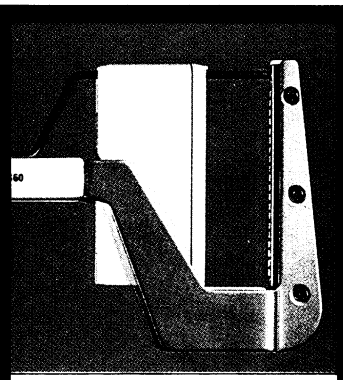
Tagamet
cimetidine
acid controlled

Prescribing Information. Presentations 'Tagamet' Tablets, PL 0002/0092, each containing 400 mg cimetidine. 56, £16.61. 'Tagamet' Tablets, PL 0002/0063, each containing 200 mg cimetidine. 500, £74.15. 'Tagamet' Syrup, PL 0002/0073, containing 200 mg cimetidine per 5 ml. 500 ml, £20.43. **Indications** Duodenal ulcer, benign gastric ulcer, recurrent and stomal ulceration, oesophageal reflux disease. Other conditions where reduction of gastric acid is beneficial: prophylaxis of stress-induced gastrointestinal haemorrhage and of acid aspiration (Mendelson's) syndrome; malabsorption and fluid loss in short bowel syndrome. Zollinger-Ellison syndrome. **Dosage** *Usual dosage:* Adults. *Duodenal ulcer,* 400 mg b.d. with breakfast and at bedtime, or 200 mg t.d.s. with meals and 400 mg at bedtime (1.0 g/day) for at least 4 weeks. To prevent relapse, 400 mg at bedtime or 400 mg morning and at bedtime for at least 6 months. *Benign gastric ulcer,* 200 mg t.d.s. with meals and 400 mg at bedtime (1.0 g/day) for at least 6 weeks. *Oesophageal reflux disease,* 400 mg t.d.s. with meals and 400 mg at bedtime (1.6 g/day) for 4 to 8 weeks. *Prophylaxis of stress-induced gastrointestinal haemorrhage,* up to 2 g a day, divided, to maintain intragastric pH above 4. *Prophylaxis of acid aspiration syndrome,* 400 mg 90-120 mins before induction of general anaesthesia. 400 mg at start of labour then 200 mg 2-hourly as necessary, suggested maximum 1.6 g. Do not use 'Tagamet' syrup. *Zollinger-Ellison syndrome,* up to 2 g a day, divided. *Recurrent and stomal ulceration* and *short bowel syndrome,* 200 mg t.d.s. and 400 mg at bedtime (1.0 g/day). *N.B. For full dosage instructions see Data Sheet.* **Cautions** Impaired renal function: reduce dosage (see Data Sheet). Potentiation of oral anticoagulants, phenytoin and theophylline (see Data Sheet). Prolonged treatment: observe patients periodically. Exclude malignancy in gastric ulcer. Care in patients with compromised bone marrow (see Data Sheet). Avoid during pregnancy and lactation. **Adverse reactions** Diarrhoea, dizziness, rash, tiredness. Rarely, mild gynaecomastia, reversible liver damage, confusional states (usually in the elderly or very ill), interstitial nephritis, acute pancreatitis. **Legal category** POM. 9.12.83.

SK&F

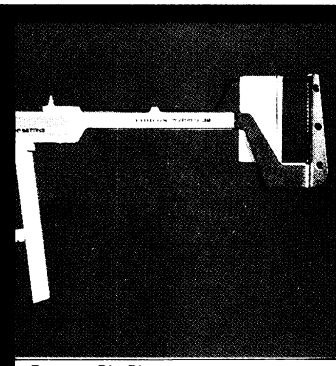
TG: AD724

LCN



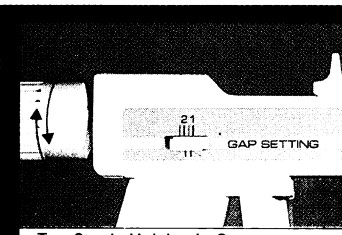
Parallel Jaw Closure

Parallel jaw closure aids even compression of the tissue, and reduces the possibility of tissue extruding from the instrument's jaw; correct staple formation is also enhanced.



Remote Pin Placement

Tissue retaining pin placement is achieved by the use of a remote slide lever. Accurate pin placement and containment of tissue lead to precise closure of the parallel jaws. Pin placement is achieved easily and under full visibility.



Two Staple Heights In One Instrument

Unlike other staplers requiring separate colour-coded cartridges for different tissue thicknesses, the PROXIMATE LS Stapler fires staples equivalent to the closed height of 3.5mm and 4.8mm staples by simply adjusting the gap setting scale.

Replacing the normal two cartridge system with PROXIMATE Linear Stapler enables the choice to be made at the operating table, reducing operation time and providing the opportunity for significant inventory savings.

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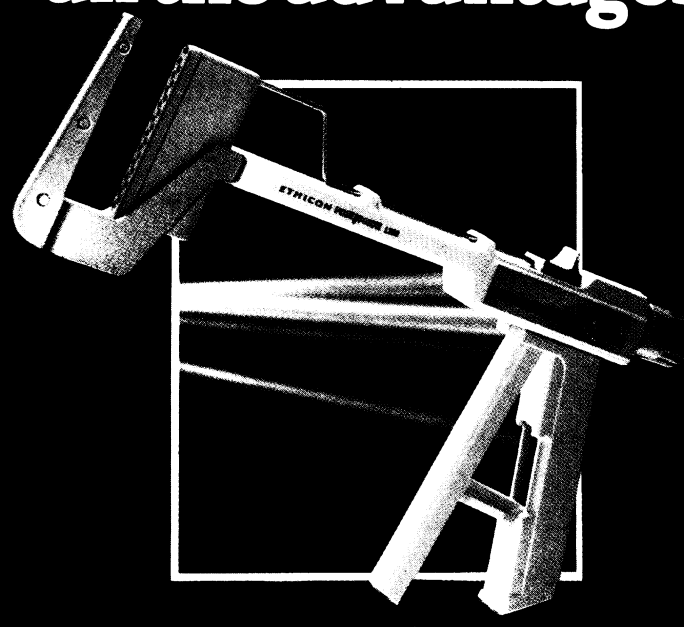

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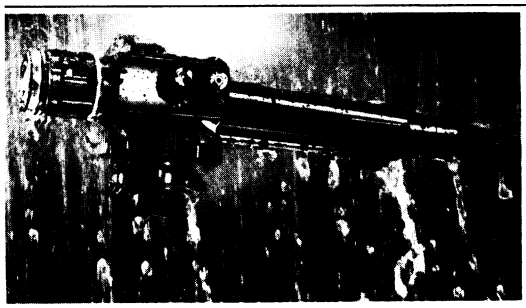

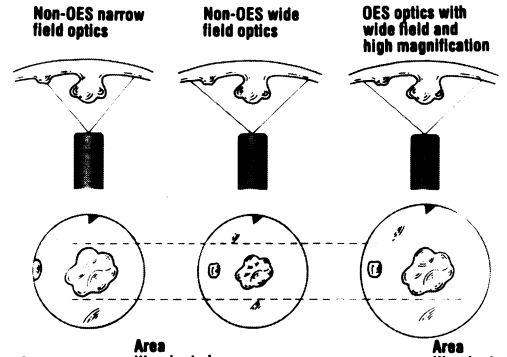

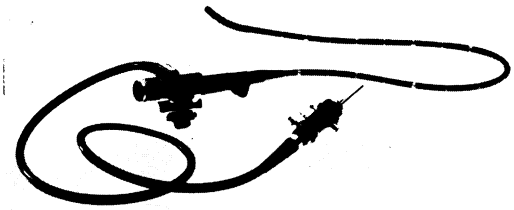

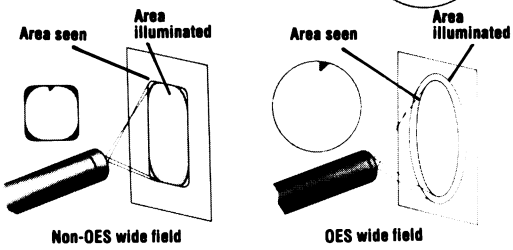

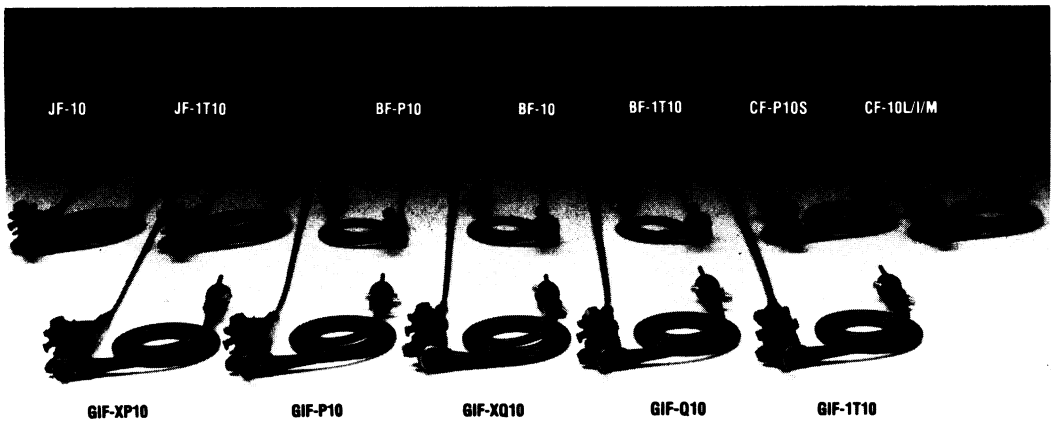

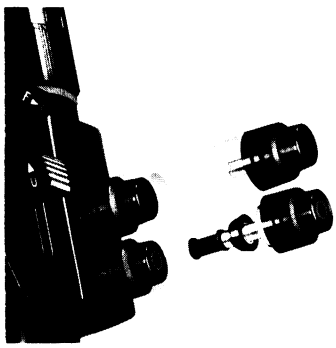

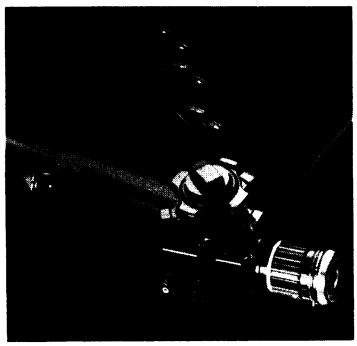

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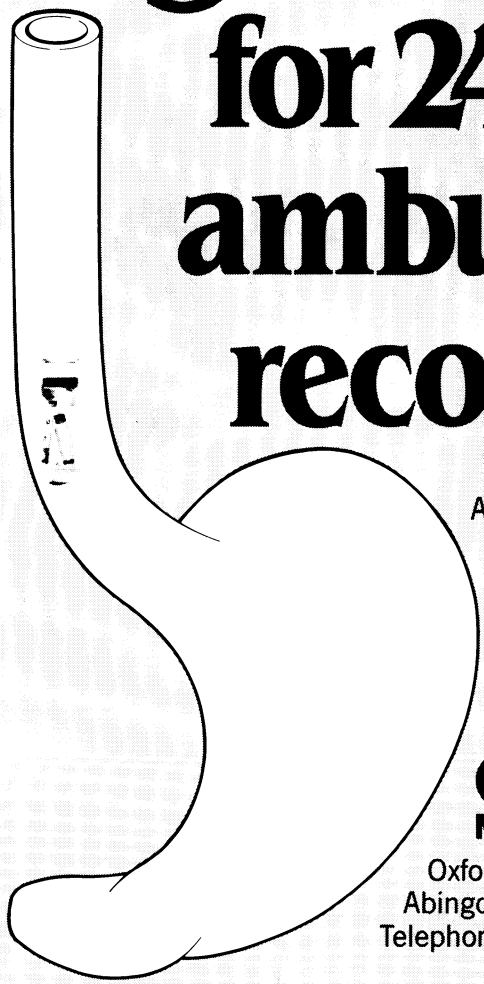

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Gastrozepin DOES NOT . . .
- **rely on acid reduction alone**
- **rely on pepsin reduction alone**
- **rely on mucosal protection alone**
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Gastrozepin DOES . . .
- **relieve daytime pain**
- **relieve night-time pain**
- **reduce antacid intake**
- **heal peptic ulcers with one 50 mg tablet b.d.**

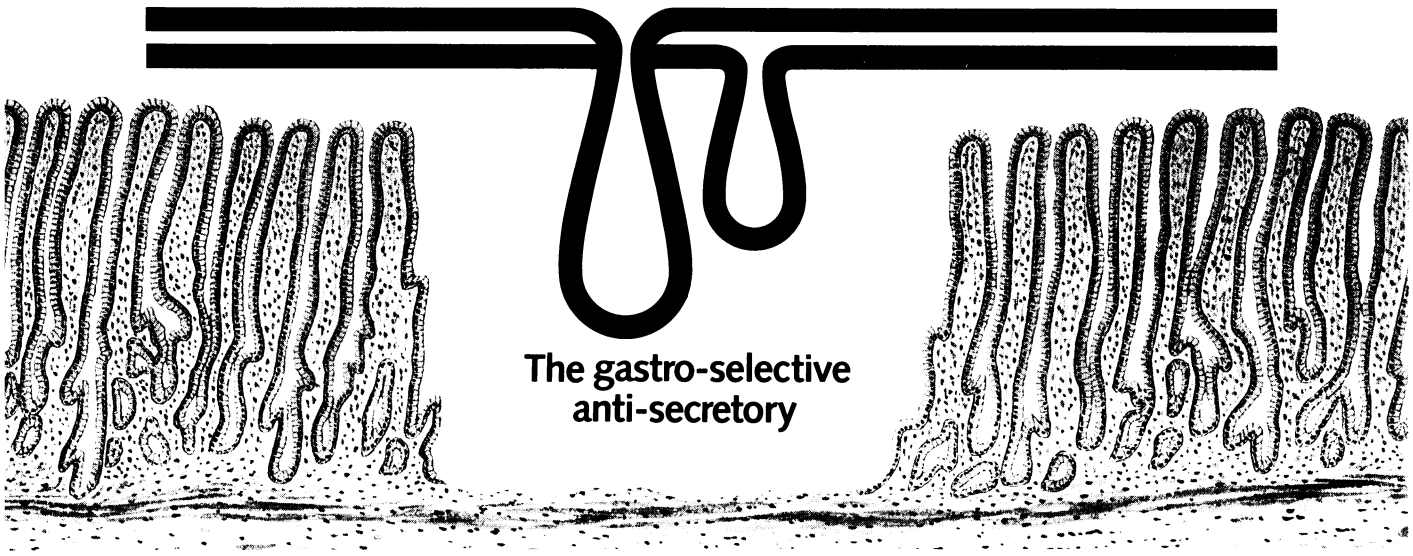
For the treatment of peptic ulcer

Twice daily

GASTRO SELECTIVE

Gastrozepin®

pirenzepine



The gastro-selective anti-secretory

Prescribing Information; Presentation: White tablets each containing 50 mg of pirenzepine dihydrochloride scored on one face with "G" on one side of the score and "50" on the other. The obverse is impressed with the symbol. **Uses:** Gastrozepin is indicated in the treatment of gastric and duodenal ulcers. **Dosage:** 50 mg at bedtime and in the morning before meals. In severe cases the total daily dose may be increased to 150 mg in divided doses. Continuous therapy may be recommended for up to three months. **Contra-indications, Warnings etc:** Interaction with sympathomimetics and monoamine oxidase inhibitors and Gastrozepin is a theoretical possibility. Gastrozepin is not recommended during pregnancy although in animal experiments no teratogenic effects were noted. Breast milk concentration after therapeutic doses is unlikely to affect the infant. *Side effects*: occasionally transitory dry mouth and accommodation difficulty may occur. Treatment of overdosage: entirely symptomatic. There is no specific antidote. **Basic NHS price:** 50 mg tablets, 60 £20.50. **Product Licence No.:** 50 mg tablets, PL0014/0260.

Further information is available on request
The Boots Company PLC Nottingham

Gastrozepin® Trade Mark