# When gut spasm has 'em

**Even if your patients persist with the diet you recommend, it may not be enough to control the pain and spasm of irritable bowel syndrome.**

**If that is the case, it's a good case for new Merbentyl 20.**

**A 28-day t.d.s. course of this new presentation of an established antispasmodic should resolve the problem.**

**So when diet alone just won't do, remember to get it right by writing Merbentyl 20.**

**Three times daily and the right diet**

**NEW**

## MERBENTYL

**20 mg Dicyclomine Hydrochloride BP antispasmodic**

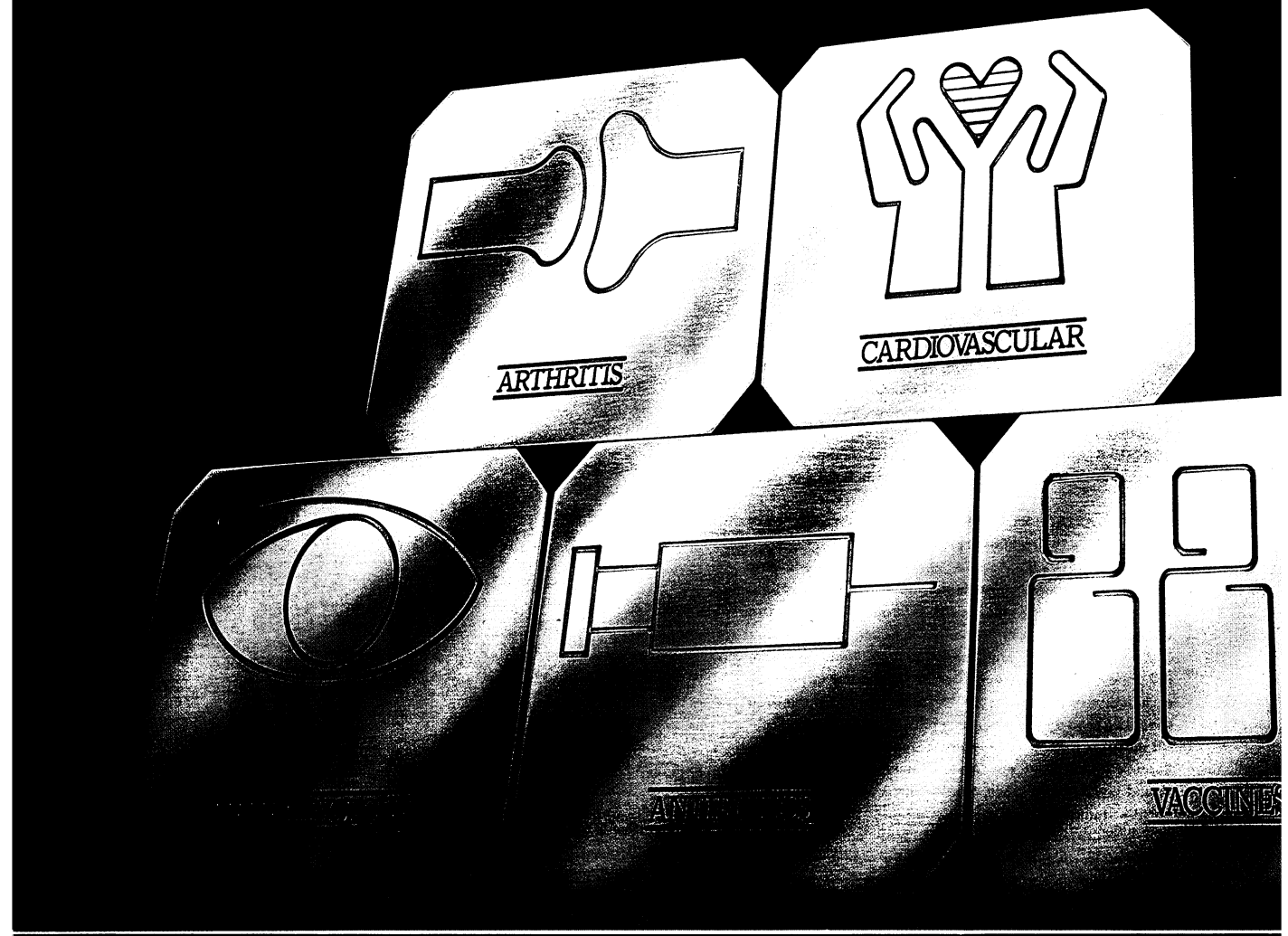
### PRESCRIBING INFORMATION

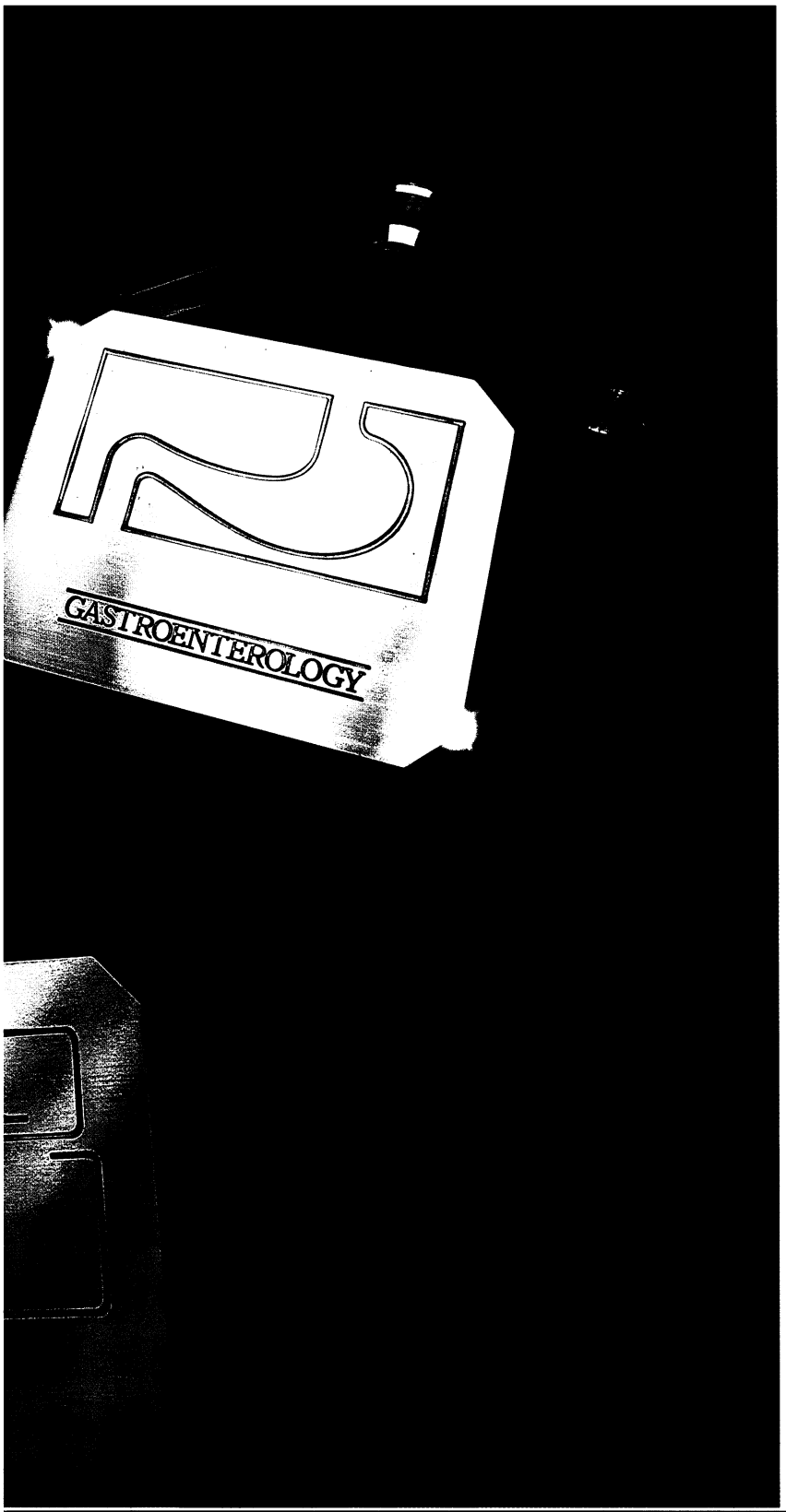
**PRESENTATION:** White, biconvex, oval tablets, stamped Merbentyl 20 containing Dicyclomine Hydrochloride BP 20 mg.
**USES:** Merbentyl is a smooth muscle antispasmodic primarily indicated for the treatment of functional conditions involving smooth muscle spasm of the gastro-intestinal tract.
**DOSAGE & ADMINISTRATION:** Adults and children over 12 years: One tablet (20 mg) three times daily before or after meals.
**CONTRA-INDICATIONS, WARNINGS, ETC:** Known idiosyncrasy to Dicyclomine Hydrochloride BP.
**PRECAUTIONS:** Products containing dicyclomine hydrochloride should be used with caution in any patient with or suspected of having glaucoma or prostatic hypertrophy. Use with care in patients with hiatus hernia associated with reflux oesophagitis because anticholinergic drugs may aggravate the condition. Since the risk of teratogenicity cannot be excluded with absolute certainty for any product, the drug should be used during pregnancy only if clearly needed.
It is not known whether dicyclomine is secreted in human milk. Because many drugs are excreted in human milk, caution should be exercised when dicyclomine is administered to a nursing woman.
**SIDE-EFFECTS:** Side-effects seldom occur with Merbentyl. However, in susceptible individuals, dry mouth, thirst and dizziness may occur. On rare occasions, fatigue, sedation, blurred vision, rash, constipation, anorexia, nausea and vomiting, headache and dysuria have also been reported.
**PHARMACEUTICAL PRECAUTIONS:** None. **LEGAL CATEGORY:** POM **PACKAGE QUANTITIES:** Packs of 84 tablets. **FURTHER INFORMATION:** Nil. **PRODUCT LICENCE NUMBERS:** PL4425/0081, PA41/5/1. **BASIC NHS PRICE:** 84 tablets £4.89 (Oct. 1986). **NAME AND ADDRESS OF LICENCE HOLDER:** Merrell Dow Pharmaceuticals Limited, Stana Place, Fairfield Avenue, Staines, Middlesex TW18 4SX. **TRADEMARKS:** Merrell, Dow, Merbentyl.

Merrell* Dow

# THOMAS MORSON PHARMACEUTICALS

# BUILDING FOR THE FUTURE






**Building on strength**
On the strength of our parent company, Merck Sharp & Dohme Limited, one of the largest manufacturers of prescribed medicines in the world.

**Building on experience**
On the foundations of the extensive history of Thomas Morson Pharmaceuticals, which spans over a century.

**Building on research and commitment**
On the benefits of sharing over £250 million invested annually by MSD on research, which has helped establish Thomas Morson Pharmaceuticals in a wide range of therapeutic areas, including arthritis and cardiovascular disease.

**Building for the future**
A future committed to improved patient care through medical advances in all therapeutic areas, notably gastroenterology, and the beneficial implications for the many thousands of sufferers of distressing digestive disorders.

Thomas Morson Pharmaceuticals–new directions, new purposes

Thomas Morson Pharmaceuticals
Hertford Road, Hoddesdon, Hertfordshire
Division of Merck Sharp & Dohme Limited

3-87 GEN.86.GB.1907.J

TABLETS

# New Evoxin

domperidone

## activates the static stomach

## for relief of nausea and vomiting

## A move in the right direction

SRL

Evoxin is a trade mark. Full information available from Sterling Research Laboratories, Onslow Street, Guildford, Surrey GU1 4YS.

(SRL0521)587

# INFLAMMATORY BOWEL DISEASE

# TREATMENT

# AD·INFINITUM NOT AD·NAUSEAM

# Salazopyrin EN-tabs®

**enteric coated sulphasalazine**

Salazopyrin EN-tabs 'ad infinitum' may mean therapy for life, but it may also mean a 4-fold reduction in relapse rate.[1]

Success depends on continued compliance,[2] – compliance on tolerability.

That is why Salazopyrin EN-tabs are enteric-coated to reduce local gastric effects,[3] like dyspepsia and nausea.

To encourage your patients to continue therapy even when they are in remission, prescribe Salazopyrin EN-tabs.

It's therapy 'ad infinitum' rather than 'ad nauseam'.

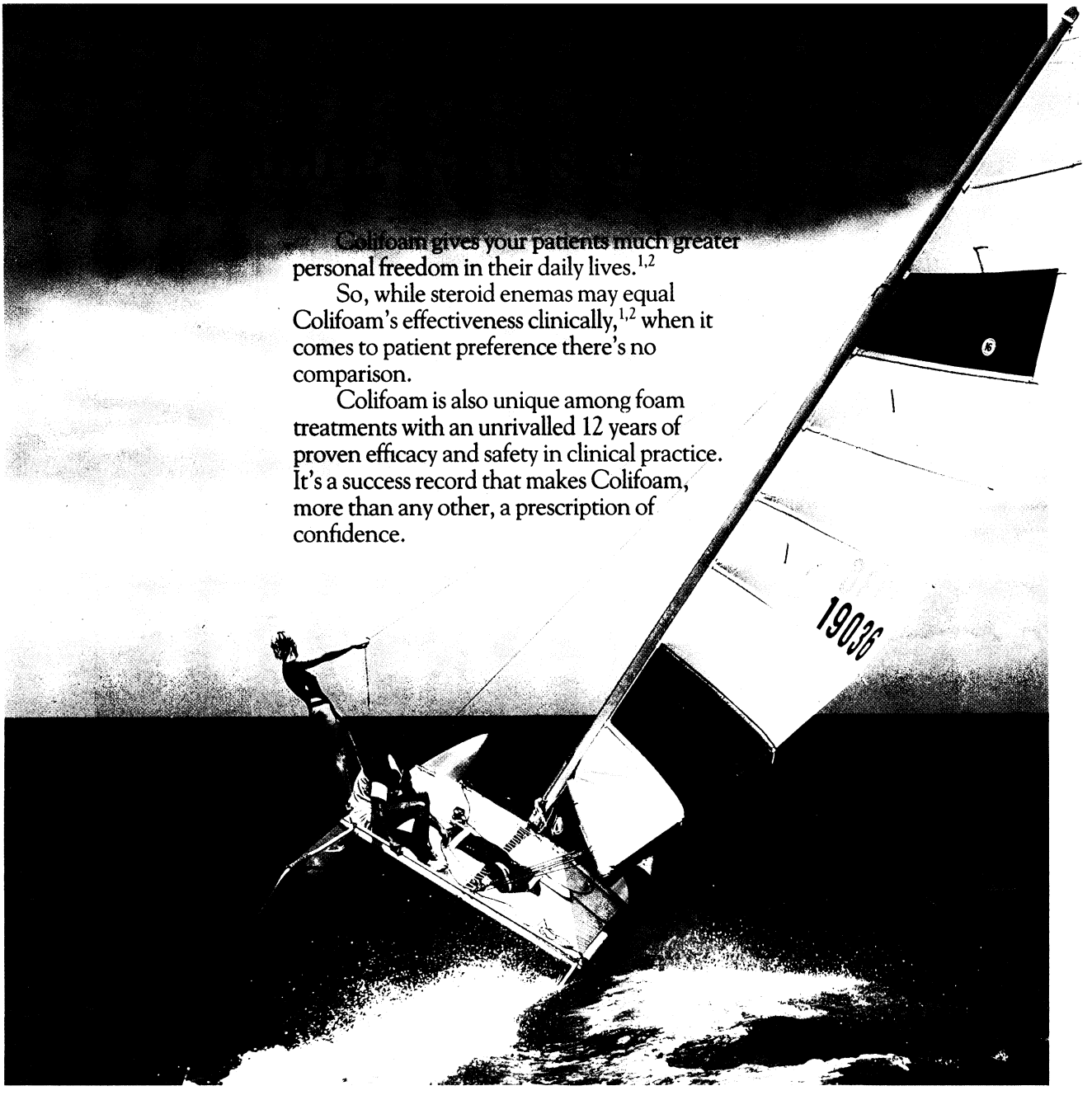
**References** 1. Dissanayake AS, Truelove SC, Gut, 1973;14:923-96 · 2. Van Hees PAM, J.Clin.Gastroenterol, 1982;4:333-36 · 3. Nielsen OH, Scand J.Gastroenterol, 1982;17:389-93.

**PRESCRIBING INFORMATION**

**Presentation** Orange elliptical convex film-coated tablets containing 0.5g sulphasalazine (USP) with Pharmacia logo on one side. **Uses** · **1** Induction and maintenance of remission of Ulcerative Colitis. **2** The treatment of active Crohn's disease. **Dosage and Administration** · Salazopyrin EN-tabs should not be broken or crushed. *A ULCERATIVE COLITIS* Adults Severe: 2-4 tablets four times a day given in conjunction with steroids as part of an intensive management regime. The night-time interval between doses should not exceed eight hours. In severe disease rapid passage of the tablets may reduce the effect of the drug. *Mild-moderate:* 2-4 tablets four times a day given in conjunction with steroids. *Maintenance:* With induction of remission reduce the dose gradually to four tablets per day in divided doses. This dosage should be continued indefinitely, since discontinuance even several years after an acute attack has been shown to be associated with a four fold increase in the risk of relapse. *Children:* The dose is reduced in proportion to body weight. Severe: 40-60mg/kg per day · Mild-Moderate: 40-60mg/kg per day · Maintenance: 20-30mg/kg per day. *B CROHN'S DISEASE* In active Crohn's disease. Salazopyrin EN-tabs should be administered as for severe ulcerative colitis. **Contra-indications** Sensitivity to sulphonamides and salicylates. Infants under 2 years of age. **Precautions** Blood checks and LFTs should be carried out monthly for 3 months. Care in renal or hepatic disease, in glucose-6-phosphate deficiency and porphyria. **Adverse Effects** The most commonly encountered reactions are nausea, headache, rash, loss of appetite and raised temperature. The following adverse reactions have been reported. Haematological: Heinz body anaemia, methaemoglobulinaemia, hypoprothrombinaemia, haemolytic anaemia, leucopenia, agranulocytosis, aplastic anaemia, megaloblastic anaemia, thrombocytopenia. Hypersensitivity reactions: Generalised skin eruptions. Stevens-Johnson syndrome, exfoliative dermatitis, epidermal necrolysis, pruritus, urticaria, photosensitisation, anaphylaxis, serum sickness, drug fever, periorbital oedema, conjunctival and scleral injection, arthralgia, allergic myocarditis, polyarteritis nodosa, LE-phenomenon and lung complications with dyspnoea, fever, cough, eosinophilia, fibrosing alveolitis. Gastro-intestinal reactions: Stomatitis, parotitis, pancreatitis, hepatitis. CNS reactions: Vertigo, tinnitus, peripheral neuropathy, ataxia, convulsions, insomnia, mental depression and hallucinations. Fertility: Oligospermia, reversible on discontinuance of drug. Renal reactions. Crystalluria, haematuria, proteinuria and nephrotic syndrome. **Pregnancy and Lactation** Long term clinical usage and experimental studies have failed to reveal any teratogenic or icteric hazards. Amounts of drug in milk should not present a risk to a healthy infant. **Presentation and Legal Status** POM · PL0009/5007R. EN-tabs 125 (special pack for the disabled) £11.94 · EN-tabs 500 £42.58.

Further information available from Pharmacia Ltd., Pharmacia House, Midsummer Boulevard, Milton Keynes MK9 3HP. Salazopyrin and EN-tabs are registered trade marks. 1 March 1987

Pharmacia




Colifoam gives your patients much greater personal freedom in their daily lives.[1,2]

So, while steroid enemas may equal Colifoam's effectiveness clinically,[1,2] when it comes to patient preference there's no comparison.

Colifoam is also unique among foam treatments with an unrivalled 12 years of proven efficacy and safety in clinical practice. It's a success record that makes Colifoam, more than any other, a prescription of confidence.

# COLIFOAM

**10% Hydrocortisone acetate foam.**

# The proven choice in distal inflammatory bowel disease

1. Ruddell WSJ et al. Gut 1980; 21: 885-889 2. Somerville KW et al. British Medical Journal 1985; 291: 866

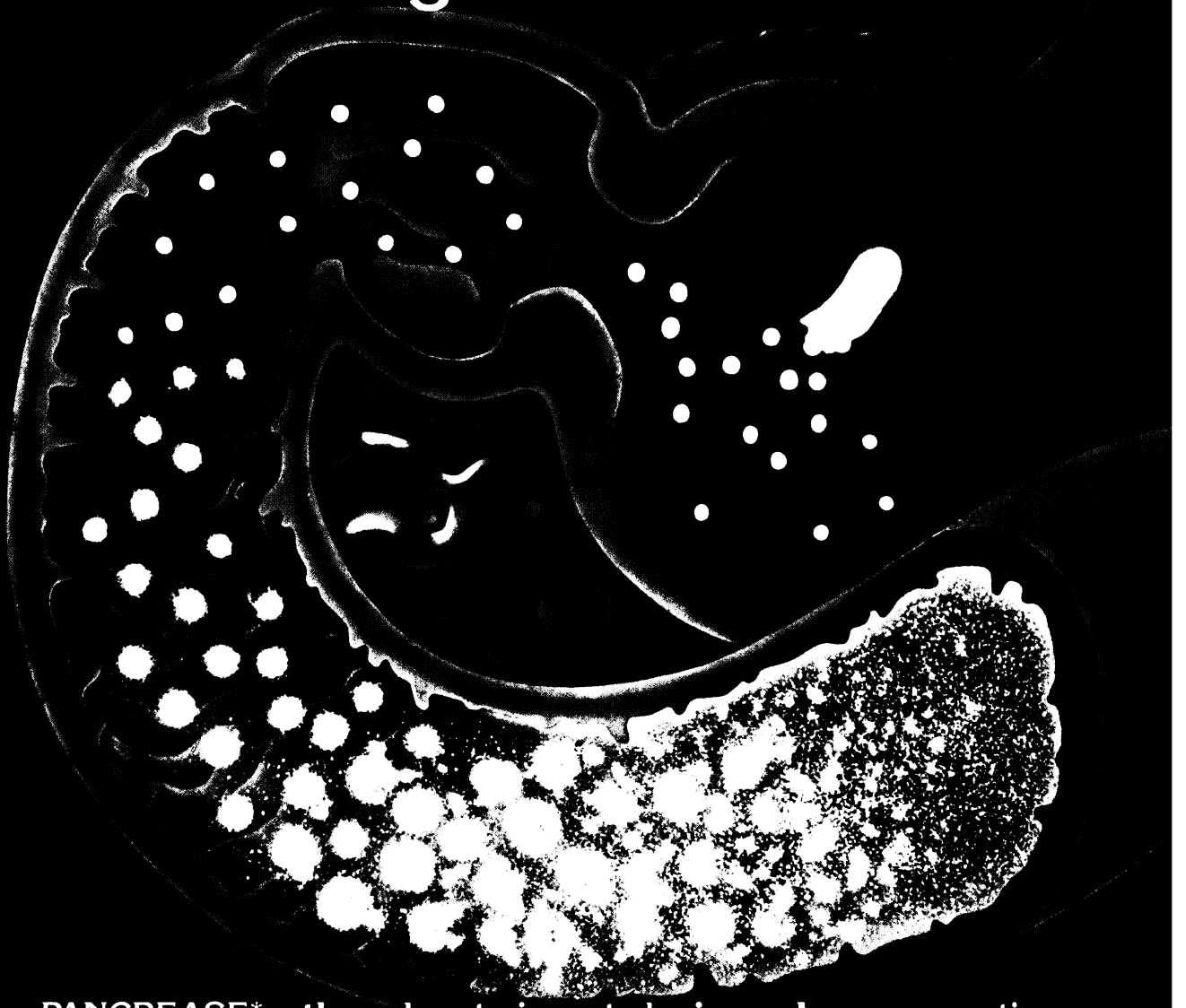
**PRESCRIBING INFORMATION:** Presentation: White odourless aerosol containing hydrocortisone acetate PhEur 10%. Uses: Ulcerative colitis, proctosigmoiditis and granular proctitis. Dosage and administration: One applicatorful inserted into the rectum once or twice daily for two or three weeks and every second day thereafter. Shake can vigorously before use (illustrated instructions are enclosed with pack). 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. Keep out of reach of children. For external use only. Legal category: POM. Package Quantity & Basic NHS cost: 25g canister plus applicator, £7.25. 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. Further information is available on request.

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

# PANCREASE* Capsules deliver

PANCREATIN BP

# the full dose of enzyme right to the site of digestion.



## PANCREASE* – the only enteric coated **microsphere** preparation.

- Protected from gastric inactivation
- Improves nutritional status
- Effective in Cystic Fibrosis and Chronic Pancreatic Insufficiency.

**PRESCRIBING INFORMATION – PANCREASE* Capsules**

**Presentation:** Hard white gelatin capsules containing enteric coated beads of pancreatin BP. Each capsule has a protease activity of not less than 330 BP Units and amylase activity of not less than 2,900 BP Units and lipase activity of not less than 5,000 BP Units. **Uses:** Exocrine pancreatic enzyme deficiency. **Dosage and administration:** For adults and children 1 or 2 capsules during each meal and one capsule with snacks. To protect the enteric coating the beads should not be crushed or chewed. **Contra-indications, warnings, etc.** Hypersensitivity to pork protein. The safety of Pancrease* during pregnancy, has not yet been established. Such use is not recommended. The most frequently reported adverse reactions to Pancrease* Capsules are gastrointestinal in nature. Contact of the beads with food having a pH higher than 5.5 can dissolve the protective enteric shell. **Pharmaceutical precautions:** Keep bottle tightly closed. Store at room temperature in a dry place. Do not refrigerate.

**Legal category:** P **Package Quantities:** Containers of 100 capsules.
**Basic NHS Cost:** £15.98 (for 100 capsules). **Product Licence Number:** PL 76 129.

Further information available from:
Ortho Clag Pharmaceutical Ltd
P.O. Box 79, Saunderton
High Wycombe, Bucks. HP14 4HJ.

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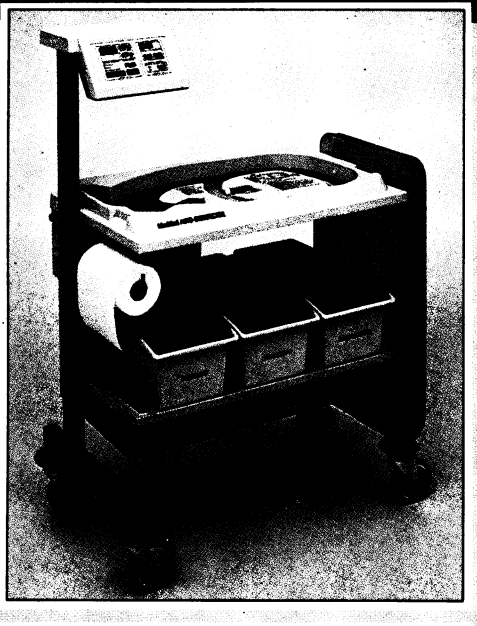
# Another cleaning solution from KeyMed



**Manual cleaning and disinfection of fiberscopes is a tedious and time-consuming task set against a background of the increased risk of cross-infection. Automated processing ensures a regimented and pre-determined level of decontamination on a repeatable basis.**

## The New KeyMed Auto-Disinfector

**RELIABLE** processes all Olympus OES immersible fiberscopes providing the benefits of total immersion and all channel irrigation*.

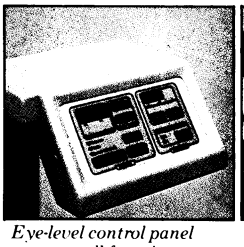
**VERSATILE** self-contained, mobile and requires no plumbing.

**SIMPLE** scope connections are quick and easy and all functions are operated from a convenient eye-level control panel.

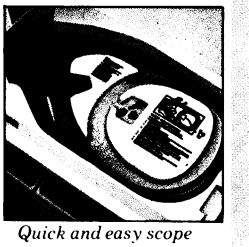
**The KeyMed Auto-Disinfector has two pre-set programmes and also incorporates a pause facility to allow prolonged endoscope immersion in disinfectant solution when required.**

**For further information or to arrange a practical evaluation of the KeyMed Auto-Disinfector in your own unit, contact Medical Customer Liaison at any of the numbers below.**

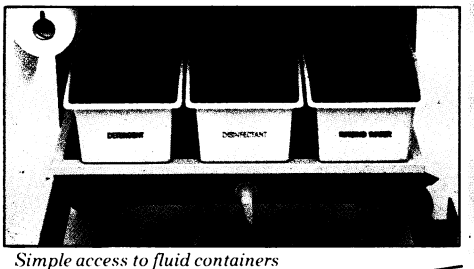
**excluding raiser bridge channel on JF series, GIF-K10 and GIF-D10.*



*Eye-level control panel operates all functions*



*Quick and easy scope connections*



*Simple access to fluid containers*

**DESIGNED FOR ALL OLYMPUS IMMERSIBLE FIBERSCOPES**

KeyMed

**Specialised Services to Medicine**

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**Scotland:** Peel House, Ladywell East, Livingston EH54 6AH. Telephone: (0506) 416655

**Ireland:** KeyMed Ireland Ltd., KeyMed House, Lord Edward Court, Bride Street, Dublin 8. Telephone: 774855

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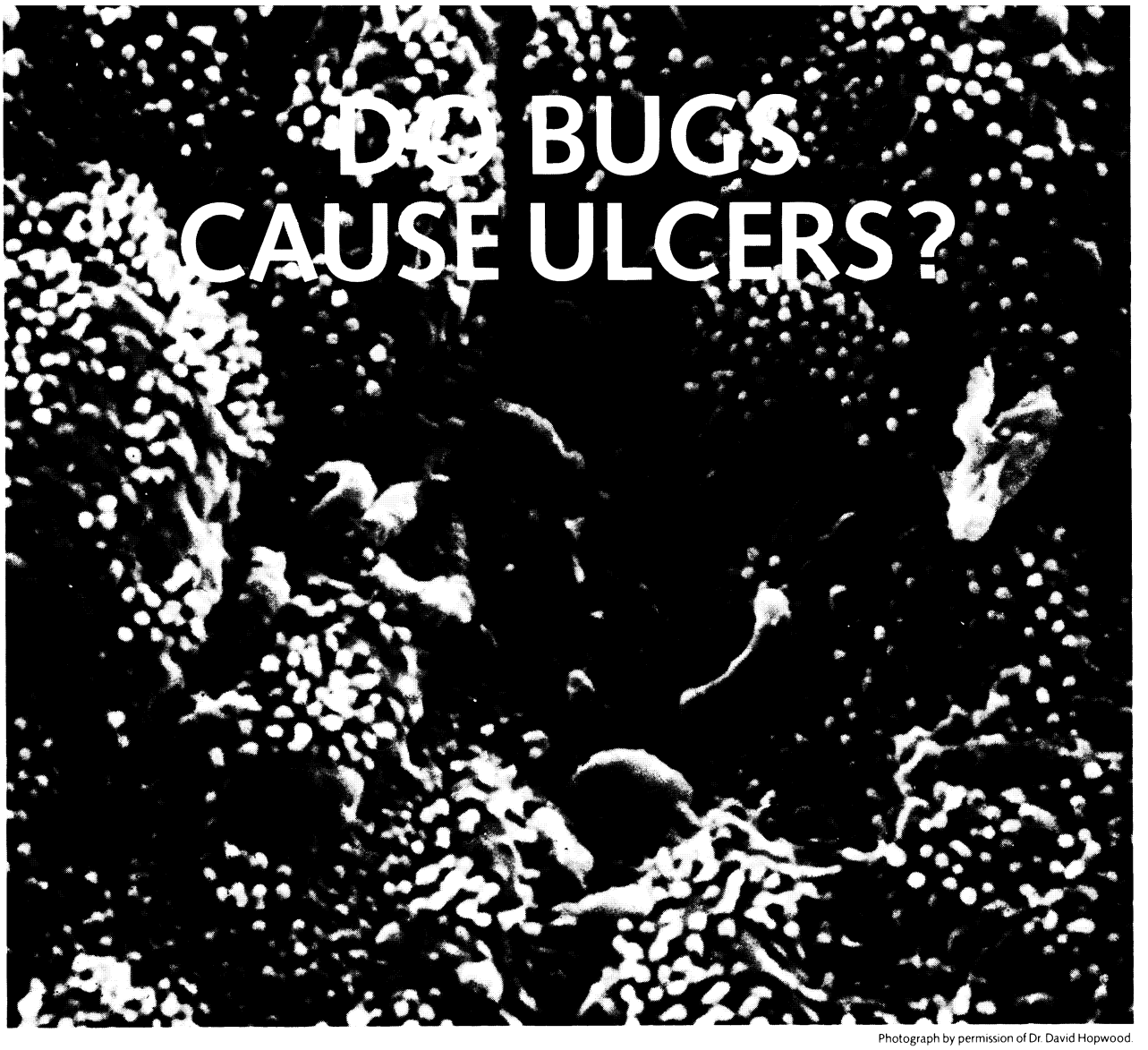
REGISTERED MANUFACTURER DHSS

**Medical Equipment**




Photograph by permission of Dr. David Hopwood.

Recent work has shown that a bacterium, Campylobacter pyloridis, is present on the gastric mucosa of almost all peptic ulcer patients.[1] Its eradication or recolonisation seems to be related to healing and relapse.[2] The evidence is strong but not yet conclusive.

De-Nol is the only peptic ulcer healer which has been shown to be antibacterial to Campylobacter pyloridis.[3] Other agents such as the $H_2$ antagonists, at best have no effect.[4]

We do know that De-Nol gives healing rates equal to the $H_2$ antagonists,[5,6] and has been shown to reduce relapse rates without maintenance therapy.[7,8]

Whether it's the bugs or not, De-Nol is the logical choice.

tri-potassium di-citrato bismuthate

## REBALANCES THE ULCER EQUATION.

**References:** 1. Marshall, B.J. et al, Lancet 1 (1984) 1311-1315. 2. Axon, A.T., B.M.J. 293 (1986) 772. 3. Humphries, H. et al, Gastroenterology 90 (1986) 1470. 4. Tytgat, G.N.J. et al, Scand. J. Gastro. 21 (suppl. 122) (1986) 22-29. 5. Hamilton, I. et al, Gut 24 (1983) 1148-1151. 6. Lee, F.I. et al, Lancet (June 8, 1985) 1299-1302. 7. Martin, D. et al Lancet 1 (1981) 7-10. 8. Bianchi Porro, G. et al, B.S.G. April 1984.

**Prescribing Information** De-Noltab and De-Nol. **Presentation:** De-Noltab is presented as flat round pink tablets, each tablet containing 120mg tri-potassium di-citrato bismuthate (calculated as $Bi_2O_3$). De-Nol is presented as a clear red liquid in a 560ml bottle containing 120mg tri-potassium di-citrato bismuthate (calculated as $Bi_2O_3$) in each 5ml. Uses: Ulcer healing agent. For the treatment of gastric and duodenal ulcers. **Dosage and administration:** By oral administration. Each tablet is to be crushed in the mouth and swallowed with a draught of water. Each dose of the liquid presentation is to be diluted with 15ml of water. ADULTS: One tablet or 5ml dose four times a day on an empty stomach, half an hour before each of the three main meals and two hours after the last meal of the day. The treatment course should be taken for the full 28 day period and it is important that a dose is not missed. If necessary, one further course of therapy may be given. Maintenance therapy with De-Noltab/De-Nol is not indicated. CHILDREN: As for adults. **Contra-indications, Warnings, etc:** De-Noltab and De-Nol should not be administered to patients with renal disorders, and on theoretical grounds the products are contra-indicated in pregnancy. SPECIAL PRECAUTIONS: De-Noltab and De-Nol may inhibit the efficacy of orally administered tetracyclines. SIDE EFFECTS: Blackening of the stool usually occurs. Darkening of the tongue, nausea and vomiting have been reported. OVERDOSAGE: No reports of overdosage have been received; gastric lavage and, if necessary, supportive therapy would be indicated. **Pharmaceutical precautions**: Normal pharmaceutical storage and handling are indicated. **Legal category**: P **Package quantities**: DE-NOLTAB: Foil treatment packs of 112 tablets. DE-NOL: Treatment packs of 560ml. **Basic N.H.S. Price**: De-Noltab £18.00. De-Nol £12.74. **GMS Price (Eire)**: De-Noltab IR£19.03. De-Nol IR£12.38. **Further information**: Some patients with an associated gastritis may experience an initial discomfort whilst taking De-Nol liquid. Milk should not be drunk by itself during the course of treatment as this can prevent the medicine from working properly. Small quantities of milk on a breakfast cereal or in tea or coffee taken with meals are permissible. Antacids should not be taken for half an hour before or half an hour after taking a dose of De-Noltab/De-Nol as these can interfere with the action of the drug. **Product Licence Numbers**: De-Noltab: 0166/0102. De-Nol: 0166/5024. **Product Authorisation Numbers**: De-Noltab 62/22/1. De-Nol 62/23/1.

*Gist-brocades*

Brocades/Great Britain/Limited, West Byfleet, Surrey.

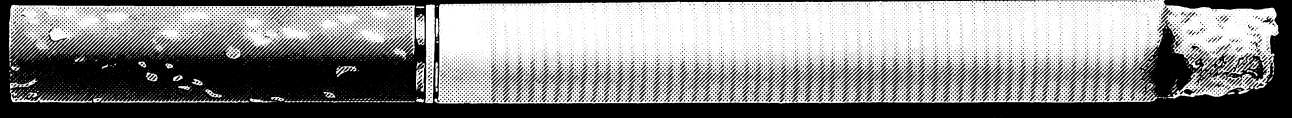
# How to stop your ulcer therapy going up in smoke

Numerous reports have linked cigarette smoking and peptic ulcer disease. Cigarette smoking has an adverse effect on healing rates of duodenal ulcer in patients treated with antacid, cimetidine or ranitidine[1]. It is best for your patient to try to stop smoking but success is not guaranteed.

However recent trials[2,3] have shown that duodenal ulcer healing rates with Antepsin are unaffected by smoking.

A comparative study showed that healing rates in smokers treated with Antepsin (81.6%) were significantly ($p<0.05$) better than in smokers treated with cimetidine (62.5%)[2].

So if your ulcer patient can't or won't give up smoking remember...



# Antepsin®
## sucralfate
## heals smokers' ulcers

**Abbreviated Prescribing Information**
Refer to data sheet for full prescribing information.
**Presentation:** Antepsin tablets contain 1 gram sucralfate. PL0607/0045, PA149/4/2, pack size 100 tablets, £12.50. **Uses:** duodenal ulcer, gastric ulcer and chronic gastritis. **Dosage and Administration:** Adults, orally 1 gram 4 times a day to be taken one hour before meals and at bedtime. For ease of administration Antepsin tablets may be dispersed in 10-15ml of water. **Precautions:** renal dysfunction, pregnancy, nursing women (see data sheet). **Drug Interactions:** Antepsin may reduce the bioavailability of certain drugs; tetracycline, phenytoin, cimetidine and digoxin. Administration of Antepsin with any of these drugs should be separated by two hours. Warfarin (see data sheet). **Side-effects:** constipation. **Legal Category:** POM.


**References**
1. Richardson C.T. Am J Med 1985; 79 (Suppl 2c) 1-7.
2. Lam S.K. et al Data presented at the World Congress of Gastroenterology, Brazil 1986.
3. Brandstater G. Am J Med 1985 79. (Suppl 2C) 36-38.


Date of preparation: December 1985.
Antepsin is a registered trade mark. 533/12/86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CONTENTS



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