

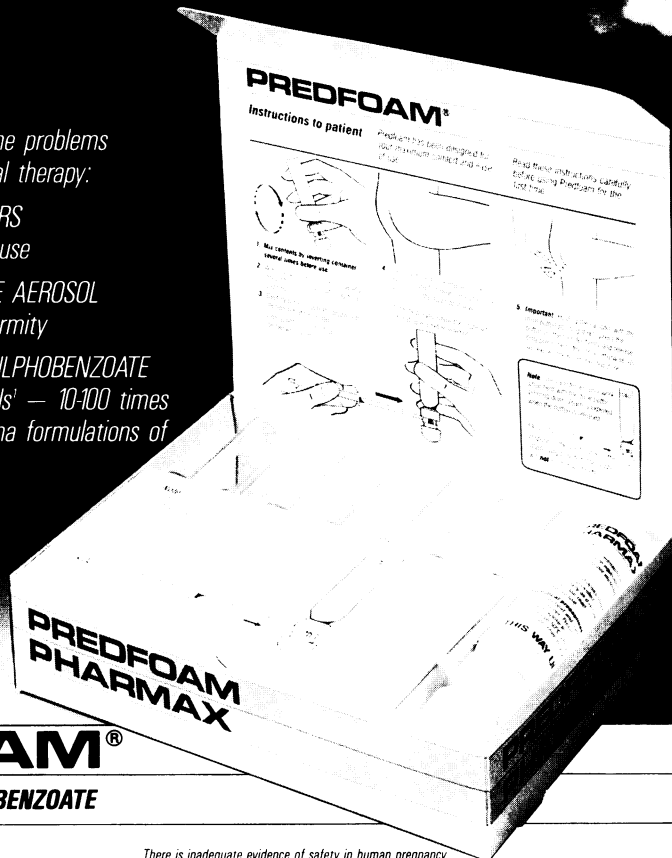
THIS WAY UP

# Ulcerative Colitis?

dispose of a problem...

... How Predfoam helps solve the problems currently associated with local therapy:

- **DISPOSABLE APPLICATORS**  
— Clean and simple to use
- **UNIQUE METERED DOSE AEROSOL**  
— Ensures dosage uniformity
- **PREDNISOLONE METASULPHOBENZOATE**  
— High local tissue levels<sup>1</sup> — 10-100 times those produced by enema formulations of prednisolone<sup>2</sup>



## PREDFOAM®

### PREDNISOLONE METASULPHOBENZOATE

#### Prescribing Information

**Presentation:** A white mucoadherent aerosol foam containing prednisolone metasulphobenzoate sodium equivalent to 20mg prednisolone per metered dose.

**Uses:** Treatment of proctitis and ulcerative colitis.

**Dosage and Administration:** One metered dose inserted rectally once or twice daily for two weeks, extending treatment for a further two weeks when a good response is obtained.

**Contra-indications, warnings, etc:**

**Contra-indications:** Local conditions where infection might be masked or healing impaired e.g. peritonitis, fistulae, intestinal obstruction, perforation of the bowel.

**Side effects:** The consequences of systemic absorption should be considered with extensive use over prolonged periods. As with all rectal corticosteroids, prolonged continuous use is undesirable.

There is inadequate evidence of safety in human pregnancy. Topical administration of corticosteroids to pregnant animals can cause abnormalities of foetal development including cleft palate and intra-uterine growth retardation. There may therefore be a very small risk of such effects in the human foetus. Overdosage by this route is unlikely.

**Legal Category:** POM

PL 0108/0101

**Pack and basic NHS price:** Box containing 1 fourteen-dose canister, 14 disposable nozzles and 14 plastic bags £7.00

© Registered Trade Mark

**References:** (1) McIntyre, P.B. et al. (1985) *GUT* 26 822-824  
(2) Rodrigues, C. et al. (1987) *Lancet*, June 27th, 1497.

Full information is available on request

**PHARMAX LIMITED**  
Bourne Road, Bexley, Kent. DA5 1NX  
Telephone 0322 91321

**NEW**

# SPECIFICALLY DEVELOPED

## THE IMPORTANCE OF NIGHT-TIME COVER

An important factor in the causation of duodenal ulcer is nocturnal intragastric acidity.<sup>1,2</sup> During the day, production of gastric acid is desirable for natural digestion and as protection against unwanted ingested bacteria.

'Pepcid' PM, the first H<sub>2</sub>-receptor antagonist indicated solely for once-nightly use.

'Pepcid' PM, when administered at night, effectively controls nocturnal acidity in most duodenal-ulcer patients, providing rapid healing and swift relief of pain.

'Pepcid' PM has been shown to achieve up to 91% (124 of 136 patients) healing of duodenal ulcers within six weeks<sup>4</sup> and up to 81% (62 of 77 patients) of gastric ulcers within eight weeks.<sup>5</sup>

That's 'Pepcid' PM. A small, once-nightly 40 mg tablet supplied in a convenient 28-day calendar pack to help maximise compliance.

## A B R I D G E D P R O D U C T I N F O R M A T I O N ▼

Full prescribing information is available and should be consulted before prescribing.

**INDICATIONS** Duodenal ulcer; prevention of relapses of duodenal ulceration; benign gastric ulcer; hypersecretory conditions such as Zollinger-Ellison syndrome.

**DOSAGE** In duodenal and benign gastric ulcer, 40 mg at night for four to eight weeks.

For prevention of duodenal ulcer recurrence, 20 mg at night.

Initiate antisecretory therapy of Zollinger-Ellison syndrome with 20 mg every six hours and adjust to individual response. The maximum dosage used for up to one year was 480 mg daily.

**CONTRA-INDICATION** Hypersensitivity.

**PRECAUTIONS** Exclude any likelihood of gastric carcinoma before using 'Pepcid' PM.

Consider reducing the daily dose if creatinine clearance falls to or below 30 ml/min.

'Pepcid' PM is not recommended in pregnancy, nursing mothers or children.

**SIDE EFFECTS** Rarely, headache, dizziness, constipation, diarrhoea. Less frequently, dry mouth, nausea, vomiting, rash, abdominal discomfort, anorexia, fatigue.

**BASIC NHS COST** 20 mg tablets, £14.00 for 28-day calendar pack and £25.00 for bottles of 50.

40 mg tablets, £26.60 for 28-day calendar pack and £47.50 for bottles of 50.

**Product Licence Numbers:** 20 mg tablets, 0025/0215; 40 mg tablets, 0025/0216.

▼ Special reporting to the CSM required.

Issued January 1988.

### References

1. Gledhill, T., *et al.*, *Gut*, 1983, 24, 904.
2. Ireland, A., *et al.*, *Lancet*, 1984, ii, 274.
3. Santana, I. A., *et al.*, *Postgrad. med. J.*, 1986, 62 (Suppl. 2), 39.
4. Mann, S. G., Cottrell, J., *Ital. J. Gastroenterol.*, 1987, 19 (Suppl. 3), 68.
5. Data on file, Merck Sharp & Dohme Research Laboratories.



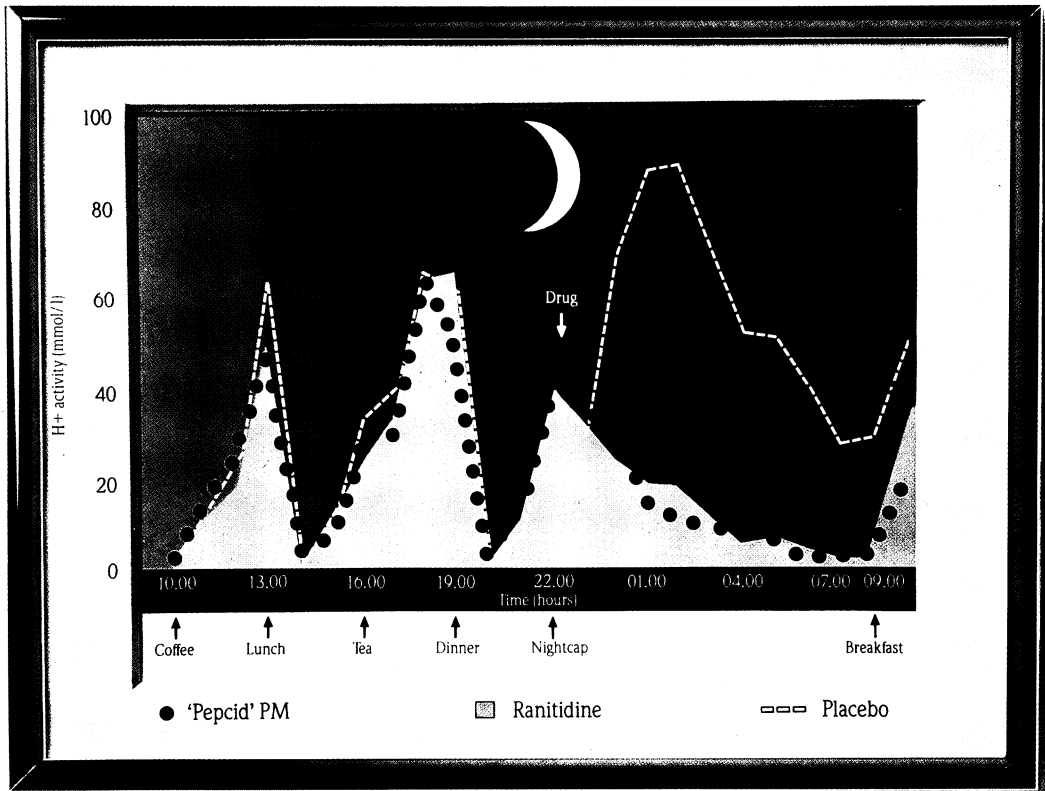
Thomas Morson Pharmaceuticals  
Hertford Road, Hoddesdon, Hertfordshire  
Division of Merck Sharp & Dohme Limited

TM denotes trademark



# FOR ONCE-NIGHTLY USE

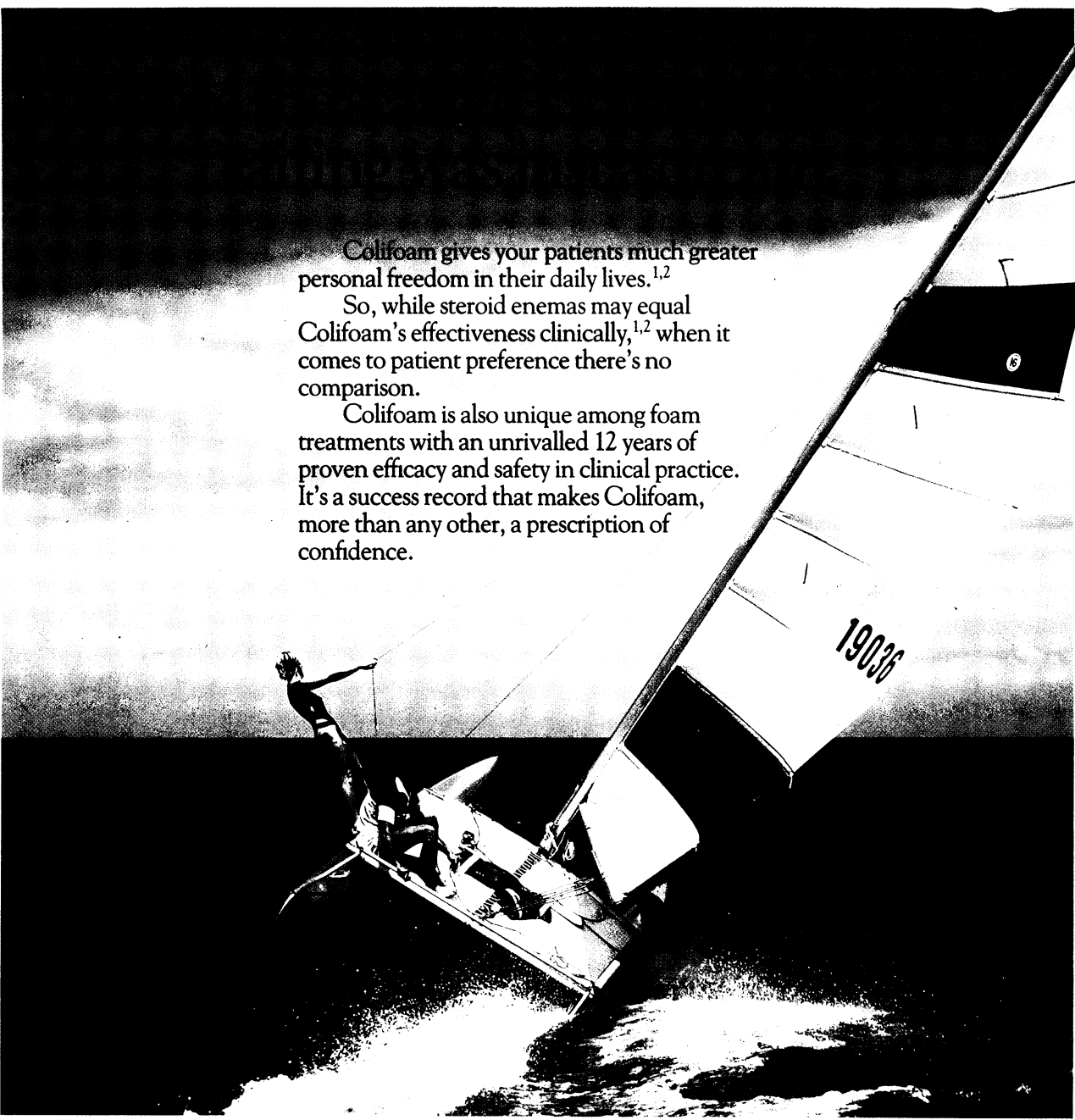
## NIGHT-TIME COVER FROM A SINGLE DOSE<sup>3</sup>



Mean hourly intragastric H<sup>+</sup> activity in healthy subjects taking one dose of either famotidine 40 mg, ranitidine 300 mg or placebo.<sup>3</sup>

**PEPCID<sup>TM</sup> PM**  
40 mg (famotidine)

*One at night can make their day*



Colifoam gives your patients much greater personal freedom in their daily lives.<sup>1,2</sup>

So, while steroid enemas may equal Colifoam's effectiveness clinically,<sup>1,2</sup> 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.

# ASACOL

## NEW INDICATION

**'Asacol' is now indicated as  
initial therapy for the maintenance  
of remission of ulcerative colitis.**

**'Asacol' delivers 5-ASA direct to the colon,  
without the sulphapyridine carrier moiety  
of sulphasalazine.**

**Your patients no longer have to run the risk of  
sulphapyridine-associated side effects,  
before receiving the benefits of 'Asacol'.**

# ASACOL

MESALAZINE\* (5-aminosalicylic acid)

**Effective maintenance of remission of ulcerative colitis  
without the risk of sulphapyridine associated side effects**

#### Prescribing Information

Presentation 'Asacol' Tablets, PL 0002/0173, each containing 400 mg of mesalazine (5-aminosalicylic acid) coated with a pH-dependent acrylic based resin (Eudragit S) to ensure release of the active ingredient in the terminal ileum and colon. 100 (10 blister packs of 10 tablets), £21.85. Uses For the maintenance of remission of ulcerative colitis.

**Dosage and administration** Adults: 3 to 6 tablets daily in divided doses. There is no dose recommendation for children. **Contra-indications** A history of sensitivity to salicylates. Children under 2 years of age. **Precautions** Not recommended in patients with renal impairment. Use with caution in patients with a raised blood urea or proteinuria. Avoid during pregnancy. Do not give with lactulose or similar preparations

which lower stool pH. Adverse reactions Nausea, diarrhoea, abdominal pain and headache. Exacerbation of the symptoms of colitis. Rarely, reversible pancreatitis. Legal category POM. 5.5.88

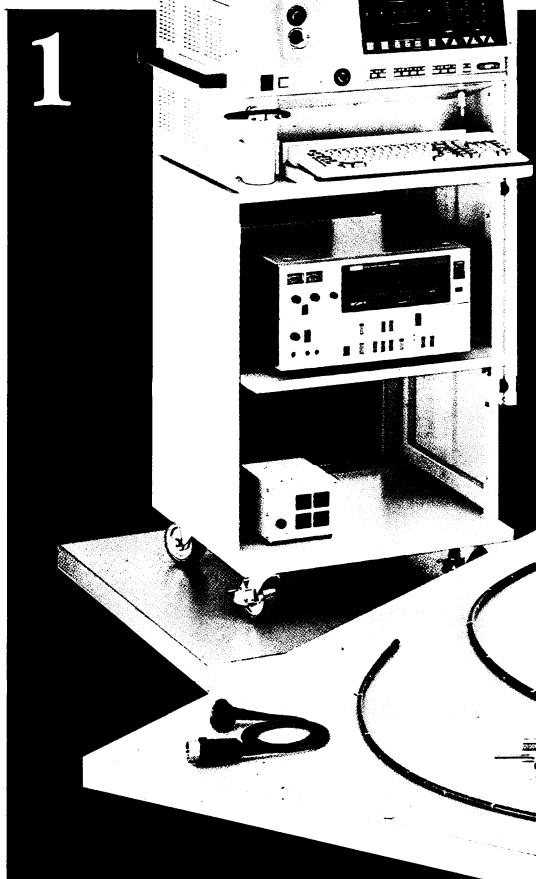
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\*Mesalazine is the British approved name of 5-aminosalicylic acid

**SK&F**  
ASC:AD0558

# VIDEO IMAGE

## Spoilt for



The Olympus Electronic Video Information System (EVIS) uses the latest technology to transmit high-resolution electronic images direct from the distal tip to the monitor screen – a new era in endoscopy.

A complete and practical system, EVIS also incorporates all the features associated with the Olympus Endoscopy System, including all-channel access and total immersibility.

**NOW LARGEST  
G.I. SCOPE RANGE -  
AS SHOWN AT  
BSG SHEFFIELD**

**OLYMPUS EVIS**

# In the lead with **OLYMPUS**

# ENDOSCOPY

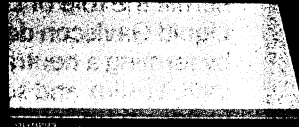
## choice

### 2

A small, compact CCD camera that takes bright, high-contrast images. It is particularly well suited to far-field endoscopy.

The camera is part of the OTV-F2, an integral fibre-optic fiberoptic adapter for remote control. It features a built-in video system for video tape recording of endoscopy procedures.

Designed for use with all Olympus Endoscopy System OTV-F2 fiberoptic and standard light sources, offering the best performance available.



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OES FIBERSCOPES**

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

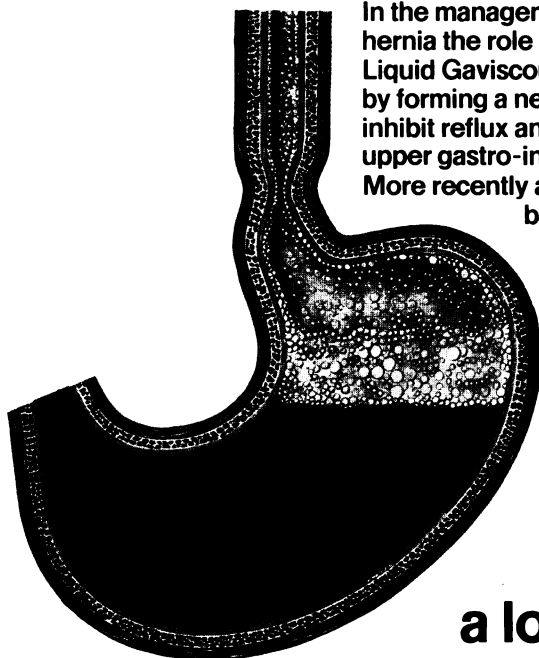
**Ireland:** KeyMed Ireland Ltd., KeyMed House, Lord Edward Court, Bride Street, Dublin 8. Telephone: 774855

**USA:** KeyMed Inc., 400 Airport Executive Park, Spring Valley, New York 10977. Telephone: (914) 425-3100



**Medical Equipment**

# STRENGTH AGAINST REFLUX<sup>1</sup>



In the management of reflux oesophagitis and hiatus hernia the role of Liquid Gaviscon is well established. Liquid Gaviscon deals with reflux simply and physically by forming a neutral layer or 'raft' on gastric contents to inhibit reflux and so bring effective relief of reflux-related upper gastro-intestinal symptoms.

More recently an in-vitro comparison<sup>1</sup> using computer-based techniques, has shown that Liquid Gaviscon produces a 'raft' more resistant to upward pressures than any other alginate-containing compound tested.

## Liquid GAVISCON<sup>®</sup>

Sodium Alginate BPC, Sodium Bicarbonate Ph.Eur.,  
Calcium Carbonate Ph.Eur.

### a logical choice in reflux

#### Prescribing Information

**Active Ingredients:** Sodium Alginate BPC 500mg, Sodium Bicarbonate Ph.Eur. 267mg per 10ml; Calcium Carbonate 160mg per 10ml dose. **Indications:** Heartburn, including heartburn of pregnancy, dyspepsia associated with gastric reflux, hiatus hernia and reflux oesophagitis. **Contra-indications:** None known. **Dosage and Administration:** Adults, children over 12: 10-20ml liquid after meals and at bedtime. Infants: not recommended. Children under 12: 5-10ml liquid after meals and at bedtime.

**Note:** 10ml liquid contains 6.2mmol sodium. **Basic NHS Cost:** As at Jan. 1988: 500ml liquid £2.88, Irish Price IR £3.72. **PL:** 44/0058. **Irish P.A. No.:** 27/12/1.

#### Reference

1. Washington, N. *et al.*, *Int. J. Pharmaceut.* (1986) **28**, 139-143  
Further information is available on request.  
Reckitt & Colman Pharmaceutical Division,  
Hull HU8 7DS.

\*Registered trade mark.





# Lactaid's 2 lactases:

- Tablets—For oral use
- Drops—To add to milk

Lactaid enables your patients to make lactose digestible regardless of their level of tolerance or where or when they eat. Your patients will enjoy dairy foods once again and benefit from their nutritional value.

## LACTAID TABLETS

*An oral stomach acid-stable lactase*

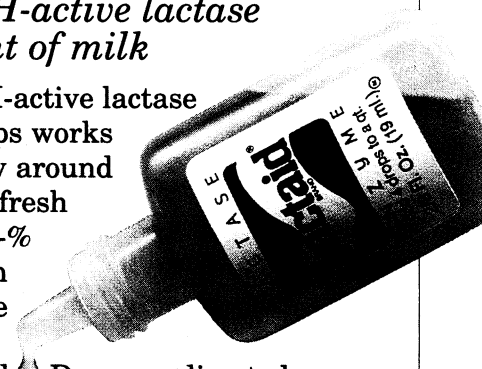
As an acid-stable lactase, Lactaid Tablets work effectively in most gastric conditions from pH 2.5 to above 7.0. When taken at the beginning of a meal, Lactaid Tablets hydrolyze lactose into digestible sugars, glucose and galactose, as the food is eaten. Each Lactaid Tablet contains 3000 FCCLU (*Food Chemicals Codex* lactase units). This amount will hydrolyze the lactose in 8 ounces of milk in 11 minutes at pH 4.5, 37° C. Dosage ranges from one-half to three tablets taken with the lactose-content food, to treat various intolerance levels.

## LACTAID DROPS

*A neutral pH-active lactase for treatment of milk*

The neutral pH-active lactase in Lactaid Drops works most effectively around pH 6.8, that of fresh milk. Up to 99+% of the lactose in any milk can be hydrolyzed by adding Lactaid Drops as directed, so any lactose intolerant patient can drink milk symptom-free.

**Lactaid Brand Milk** is pre-treated at the dairy with Lactaid neutral pH-active lactase to 70% hydrolysis of the lactose. It can be further home-treated if necessary with Lactaid Drops for 99+% lactose reduction. Lactaid Lowfat Milk is real milk, ready to drink, and is available in the dairy case of almost all supermarkets.



Lactaid works effectively orally and for treating milk. The clinical effectiveness of both tablets and drops is well established.

For our professional pamphlets on Lactaid Tablets and Lactaid Drops, patient literature, and free samples, please call our Lactaid Hotline. **800-257-8650** 9am to 4pm Eastern Time Monday - Friday

# Lactaid<sup>®</sup>

BRAND

THE COMPLETE TREATMENT FOR LACTOSE INTOLERANCE

# Enteric coated granules for improved enzyme delivery in chronic pancreatitis



**creon**<sup>®</sup>  
pancreatin

**Capsule dissolves in stomach**

**Granules unaffected by stomach acid**

**Enzymes released in duodenum**

**Mimics the normal digestive process**

## A predictable release for patients with chronic pancreatitis

**PRESCRIBING INFORMATION:** **Presentation:** Brown/yellow capsules containing enteric coated granules of pancreatin equivalent to: 9,000 BP units of amylase; 8,000 BP units of lipase; 210 BP units of protease. Available in packs of 100. Basic N.H.S. price £13.33. **Indication:** Pancreatic exocrine insufficiency. **Dosage and administration:** Adults and children: Initially one or two capsules with meals, then adjust according to response. The capsules should be swallowed whole, or for ease of administration they may be opened and the granules taken with fluid or soft food, but without chewing. If the granules are mixed with food, it is important that they are taken immediately, otherwise dissolution of the enteric coating may result. **Contra-indications, Warnings, etc.** **Contra-indications:** Substitution with pancreatic enzymes is contra-indicated in the early stages of acute pancreatitis. **Warnings:** Use in pregnancy: There is inadequate evidence of safety in use during pregnancy. The product is of porcine origin. Rarely, cases of hyper-uricosuria and hyper-uricaemia have been reported with high doses of pancreatin. Overdosage could precipitate meconium ileus equivalent. Perianal irritation could occur, and, rarely, inflammation when large doses are used. **Product Licence Number:** 5727/0001. **Name and address of Licence Holder** Kali Chemie Pharma GmbH, Postfach 220, D-3000, Hannover 1, West Germany.

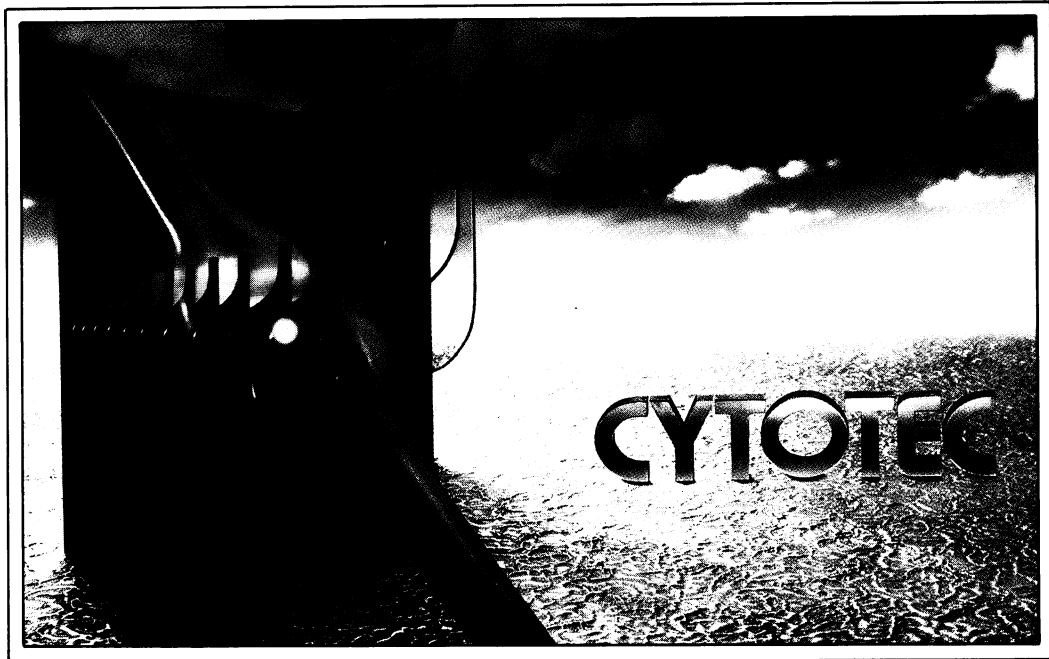
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Further information is available from:

Duphar Laboratories Ltd, Duphar House, Gaters Hill, West End, Southampton SO3 3JD. Tel: (0703) 472281

# CYTOTEC®

GIVES 'AT RISK' ARTHRITIC PATIENTS  
THE PROTECTION TO STOMACH NSAIDs



CO-PRESCRIBE  
**CYTOTEC®**  
misoprostol

THE ONLY ANTI-ULCER AGENT LICENSED  
FOR CO-PRESCRIPTION WITH NSAIDs

**CYTOTEC ▼ Abbreviated Prescribing Information**

**Presentation:** Tablet containing misoprostol 200 micrograms. **Uses:** Healing of duodenal and gastric ulcer induced by nonsteroidal anti-inflammatory drugs (NSAID) in arthritic patients at risk, whilst continuing NSAID therapy. Prophylaxis of NSAID-induced ulcers. Healing of duodenal and gastric ulcer. **Dosage:** Adults including the elderly. Healing of duodenal and gastric ulcer: 800 micrograms daily in two or four divided doses taken with breakfast and/or each main meal and at bedtime. Prophylaxis of NSAID-induced ulcer: 200 micrograms twice daily, three times daily or four times daily. Refer to data sheet for additional information. **Contraindications:** Pregnant women, women of childbearing age, patients allergic to prostaglandins. **Precautions:** Cytotec does not produce hypotension in



clinical studies at ulcer-healing doses, nevertheless exercise caution in disease states where hypotension might precipitate severe complications. **Adverse reactions:** Mild and transient diarrhoea may occur. Other adverse events reported included abdominal pain, dyspepsia, flatulence and nausea, although a causal relationship to Cytotec has not been established. **Basic NHS Price:** £26.00 per 112 pack. **Product Licence Number:** 0020/0115.

**SEARLE**  
**GOLD**  
**CROSS**

G. D. Searle & Co. Ltd., P.O. Box 53, Lane End Road,  
High Wycombe, Bucks HP12 4HL  
Cytotec, Searle and Gold Cross are registered trade marks. Data  
Sheet with full prescribing information is available on request.

FOR FURTHER INFORMATION

DIAL 100 AND ASK FOR

**FREEFONE CYTOTEC**

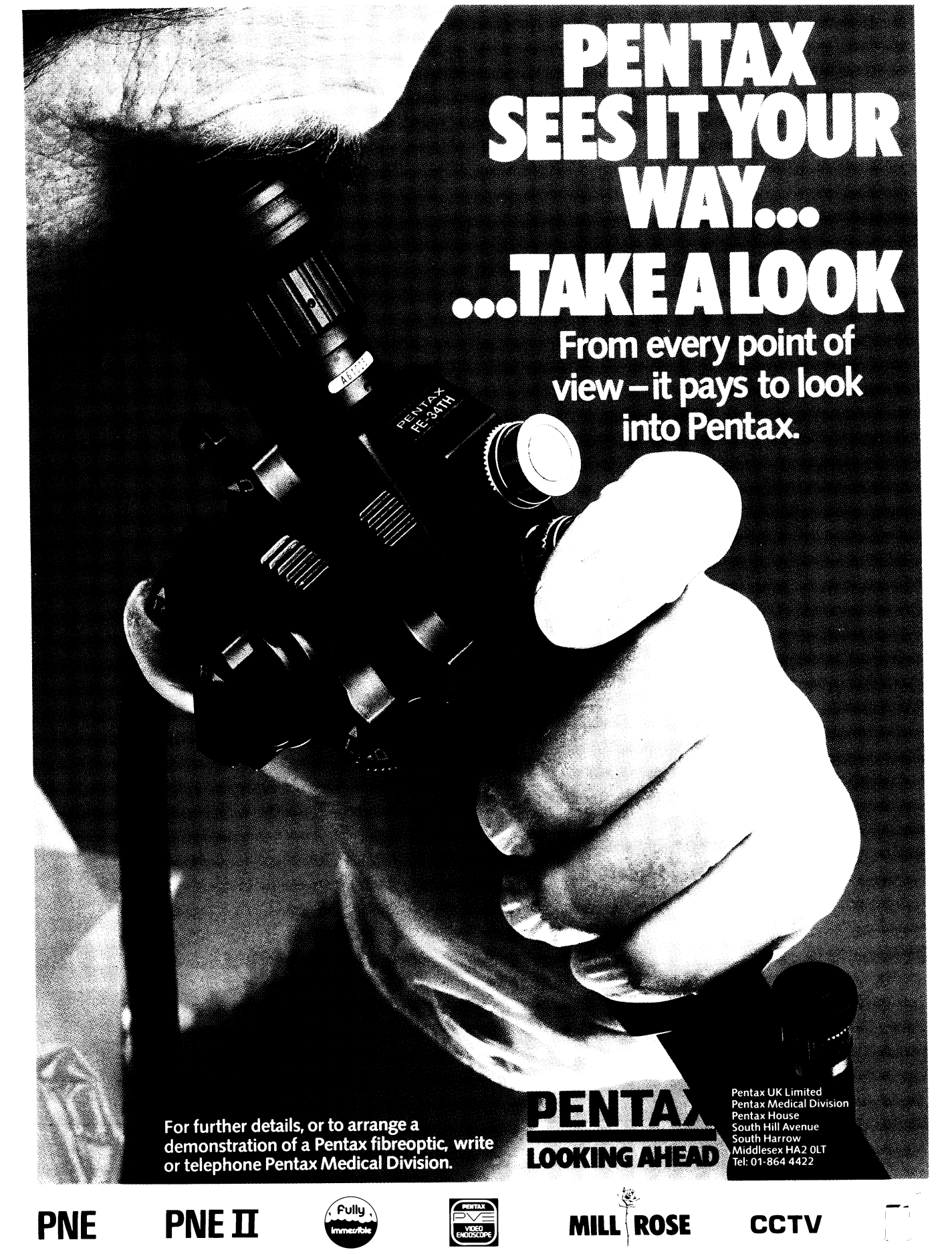
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# SUCH A REVOLUTIONARY NEW TREATMENT DESERVES FAR MORE THAN THE USUAL SMALL PRINT

Uses

**Indications**  
Cytotec is indicated for the healing of duodenal ulcer and gastric ulcer including those induced by nonsteroidal anti-inflammatory drugs (NSAID) in arthritic patients at risk, whilst continuing their NSAID therapy. In addition Cytotec can be used for the prophylaxis of NSAID-induced ulcers.

**Actions**  
Cytotec is an analogue of naturally occurring prostaglandin E<sub>1</sub> which promotes peptic ulcer healing and symptomatic relief.  
Cytotec protects the gastroduodenal mucosa both by inhibiting basal, stimulated and nocturnal acid secretion and by reducing the volume of gastric secretions, the proteolytic activity of the gastric fluid, and increasing bicarbonate and mucus secretion.



**PENTAX  
SEES IT YOUR  
WAY...**

**...TAKE A LOOK**

From every point of  
view – it pays to look  
into Pentax.

For further details, or to arrange a  
demonstration of a Pentax fibreoptic, write  
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**PNE**

**PNE II**

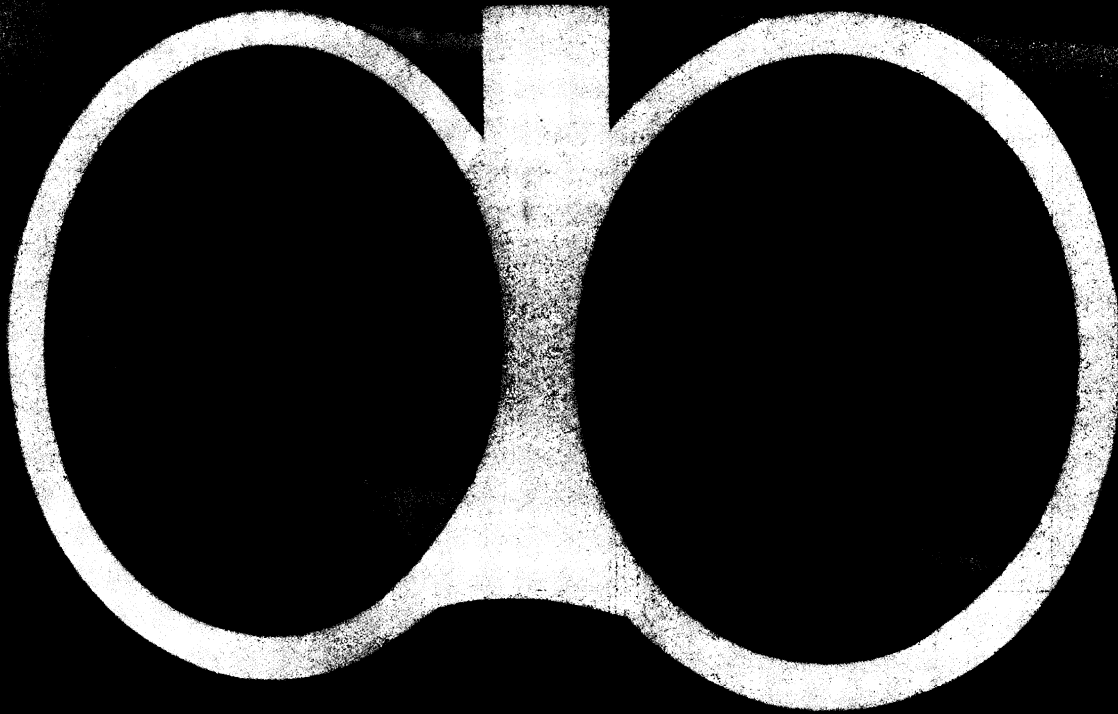


**MILL ROSE**

**CCTV**



# KEEP ULCERS AWAY



**REFERENCE:** I. Smith et al, Gut 1988 Vol. 29, No.5 A711.

**PRESENTATION:** Each tablet or 5 ml dose contains 120 mg tri-potassium di-citrate bismuthate (calculated as  $\text{Bi}_2\text{O}_3$ ). **USES:** Ulcer healing agent. For the treatment of gastric and duodenal ulcers. **DOSAGE AND ADMINISTRATION:** By oral administration. **Adults:** The more convenient dosage is two tablets or two 5 ml spoonful twice daily (half an hour before breakfast and half an hour before the evening meal) for 28 days. If necessary a further month's treatment may be given. Maintenance therapy with De-Nol is not indicated, but treatment may be repeated after an interval of one month. The tablets are to be taken with a draught of water and each 10 ml dose of the liquid diluted with 15 ml of water. **Children:** Not recommended. **CONTRA-INDICATIONS, WARNINGS:** De-Nol/De-Noltab should not be administered to patients with renal disorders and, on theoretical grounds, is contra-indicated in pregnancy. **Special precautions:** De-Nol/De-Noltab may inhibit

**Gist-brocades**

# WITH DE-NOL.

**NEW RESEARCH  
FINDINGS**

Preventing ulcer relapse has always been an aim. But now it seems there is a new target.

A particular bacterium has been associated with ulcer relapse. That bacterium is *Campylobacter pylori*.

In a recent study duodenal ulcer patients were given an initial treatment of ranitidine or De-Nol. After six weeks treatment the healing rates with both drugs were high (79% with ranitidine, 85% with De-Nol.) But 18 months later 82% of the ranitidine healed ulcers had relapsed, compared with only 32% of those healed with De-Nol.

The *Campylobacter pylori* status was monitored at intervals throughout this clinical trial.

- All the patients who relapsed were *Campylobacter pylori* positive.

- All those who remained free from *Campylobacter pylori* remained ulcer free.

Only patients treated with De-Nol became *Campylobacter pylori* negative. This is not so surprising since De-Nol is the only ulcer healing drug that has been shown to eradicate this bacterium.

So now you know what you are shooting at, how many of your ulcer patients will be coming back?

*R* De-Noltab 2 b.d.

**Only 32% came back after De-Nol.<sup>1</sup>  
(82% came back after ranitidine.)**

## DE-NOL<sup>®</sup>

tri-potassium di-citrate bismuthate

**BOTH BARRELS  
TWICE A DAY**

the efficacy of orally administered tetracyclines. **Side effects:** Blackening of the stool usually occurs; nausea and vomiting have been reported. Darkening of the tongue may occur with De-Nol liquid only. **Overdosage:** No reports of overdosage have been received; gastric lavage and, if necessary, supportive therapy would be indicated. **LEGAL CATEGORY:** P. **PACKAGE QUANTITIES:** De-Noltab: Treatment pack of 112 tablets. De-Nol: Treatment pack of 560 ml. **N.H.S PRICES:** De-Noltab: £20.98. De-Nol: £14.65. **PRODUCT LICENCE NUMBERS:** De-Noltab: 0166/0124. De-Nol: 0166/5024.

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

# For Constipation



**Fybogel Orange—gentle but effective**  
Fybogel Orange treats constipation gently but effectively by increasing bulk in the colon and thus encouraging normal, healthy peristalsis with soft, formed stools.<sup>1</sup>

**Fybogel Orange—rapid first-line therapy**

In a recent study of 224 newly presenting constipation patients treated with Fybogel Orange, 63.1% had a motion within 24 hours—and after 48 hours of Fybogel Orange 89.9% of patients had achieved bowel movement.<sup>2</sup>

**Fybogel Orange—the patients' first choice for flavour**

Recent tasting research showed that patients prefer orange flavoured bulking agents.<sup>3</sup>

# Fybogel Orange

Ispaghula husk BP

*gently does it*

**Active ingredients:** Each sachet contains 3.5g Ispaghula husk BP. **Indications:** Conditions requiring a high-fibre regimen. **Dosage and Administration:** (To be taken in water.) Adults and children over 12. One sachet morning and evening. Children under 12. One half to one level 5ml spoonful depending on age and size, morning and evening. **Contra-indications, Warnings, etc.:** Fybogel is contra-indicated in cases of intestinal obstruction and colonic atony. **Basic NHS Price:** At April '88 60 sachets £4.24, 60 sachets IR £4.92. **PL No.:** Fybogel Orange 44/0068, Fybogel 44/0041. **Irish P.A. No.:** Fybogel Orange 27/2/2, Fybogel 27/2/1. **References:** 1. Data on file, 1985, Reckitt & Colman Pharmaceutical Division. 2. Data on file, 1988, Reckitt & Colman Pharmaceutical Division. 3. Data on file, 1987, Reckitt & Colman Pharmaceutical Division. Fybogel is a trade mark. Further information is available from Reckitt & Colman Pharmaceutical Division, Dansom Lane, Hull HU8 7DS.





SELECTIVE ANTISPASMODIC

## FREES THE IBS PATIENT FROM THE GRIP OF SPASM



Further information is available from:

**Norgine**

Norgine Limited, 116-120 London Road,  
Oxford OX3 9BA.

Norgine is a British company

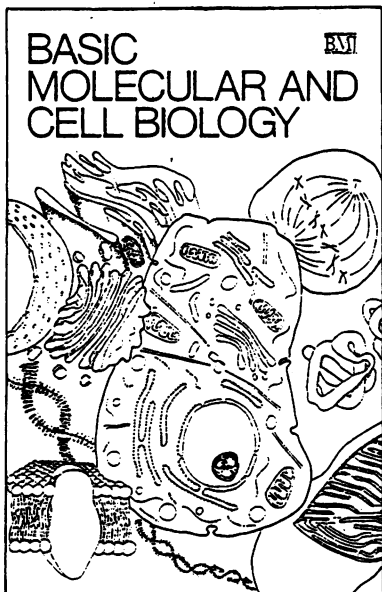
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alverine citrate

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The extraordinary technical developments in molecular biology over the past few years, and the equally rapid advances in understanding of cell biology, will almost certainly result in far reaching changes in medical research and practice. In this collection of articles experts in molecular and cell biology provide the background information to give clinicians an insight into the way in which the medical sciences may be moving over the next few years and into the exciting possibilities opening up for the treatment of genetic disorders, cancer, and the common illnesses of Western society such as degenerative vascular disease and diabetes.

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## Guide to Gastrointestinal Secretion

Edited by

**J S Davison** BSc PhD

Department of Medicine, University of Calgary Health  
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- outlines the basic concepts relating to secretions within the gastrointestinal system
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