

# AT LAST...

## A new era in ulcer healing

N E W

Current treatments have their limitations and up to 30% of peptic ulcer patients remain unhealed. Until now these patients have been difficult to treat.

But, at last, there's a revolutionary new healing agent available, one that can heal virtually all (95%+) unresponsive duodenal and gastric ulcers within just 4 to 8 weeks.\*

*Losec, the first proton pump inhibitor.\**

You'll see the difference and your patients will feel the benefit.

For further information dial 100 and ask for Freephone LOSEC.

omeprazole – Astra

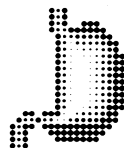
*Making unhealed ulcers a thing of the past*

**Abbreviated Prescribing Information ▼ Presentation:** Losec capsules containing 20mg omeprazole. **Indications:** Treatment of patients with benign peptic ulcers unresponsive to an adequate dose and duration of conventional therapy. **Zollinger-Ellison syndrome.** **Dosage and Administration:** Adults (including elderly): For duodenal ulcer 20mg Losec once daily for 4 weeks. For gastric ulcer 20mg Losec once daily for 8 weeks. In severe cases increase to 40mg Losec once daily. Long-term maintenance treatment with Losec is not recommended. **Zollinger-Ellison syndrome:** The recommended initial dosage is 60mg Losec once daily. Adjust individually and continue as long as clinically indicated. Patients are usually effectively controlled on doses of 20-120mg daily. With doses above 80mg daily, the dose should be divided and given twice daily. **Children:** There is no experience of the use of Losec in children. **Impaired renal or hepatic function:** Adjustment is not required. Patients with severe liver disease should not require more than 20mg Losec daily. **Contraindications, Warnings, etc:** There are no known contra-indications to the use of Losec. When gastric ulcer is suspected, the possibility of malignancy should be excluded before treatment with Losec is instituted, as treatment may alleviate symptoms and delay diagnosis. Avoid in pregnancy unless there is no safer alternative. Breast feeding should be discontinued if the use of Losec is considered essential. Losec is well tolerated. Nausea, headache, diarrhoea, constipation and flatulence have been reported but are rare. Skin rashes have occurred in a few patients. These events have usually been mild and transient and there has been no consistent relationship with treatment. Losec can delay the elimination of diazepam, phenytoin and warfarin. Monitoring of patients receiving warfarin or phenytoin is recommended and a reduction of warfarin or phenytoin dose may be necessary when omeprazole is added to treatment. There is no evidence of an interaction with theophylline, propranolol or antacids. **Animal Toxicology:** Gastric ECL-cell hyperplasia and carcinoids, localised to the oxyntic mucosa, have been observed in life-

long studies in rats. These changes have been related to sustained hypergastrinaemia. No treatment related mucosal changes have been observed in patients treated continuously for periods up to 4 years. **Pharmaceutical Precautions:** Use within one month of opening. Replace cap firmly after use. Dispense in original containers. **Legal Category:** POM. **Package Quantities and Basic NHS Cost:** Bottles of 5 capsules, £6.49; Bottles of 28 capsules, £36.36. **Product Licence Number:** PL00170238 **Product Licence Holder:** Astra Pharmaceuticals Ltd., Home Park Estate, Kings Langley, Herts WD4 8DH.

#### References

1. Jones D et al. Gut 1987; 28: 1120-27. 2. Bianchi Porro G et al. Scand J Gastroenterol 1988; 23 (Suppl 153): 81-88. 3. Brunner G et al. Digestion 1988; 39: 80-90. 4. Wallmark B et al. ISI Atlas of Science: Pharmacology 1987; 1: 158-61.



## ASTRA

For further information please contact  
Astra Pharmaceuticals Ltd, Home Park Estate, Kings Langley,  
Herts WD4 8DH. Telephone: (09277) 66191  
or dial 100 and ask for Freephone Losec.

Losec is a trade mark.

# FAST W



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

**ABRIDGED PRODUCT INFORMATION ▼**  
**Refer to Data Sheet 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.

# WORKER

'Pepcid' PM,  
working fast to relieve  
the pain of ulcers,<sup>1</sup> quickly  
restoring the well-being  
of many patients.

This rapid relief, together  
with fast, effective healing,<sup>2</sup>  
is achieved in many patients  
with a simple dosage of  
just one small 40 mg  
tablet at night.

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

**ONE AT NIGHT CAN MAKE THEIR DAY**



SPECIFICALLY DEVELOPED  
FOR THE SUPPRESSION OF  
NOCTURNAL ACID

**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. Issued March 1989.

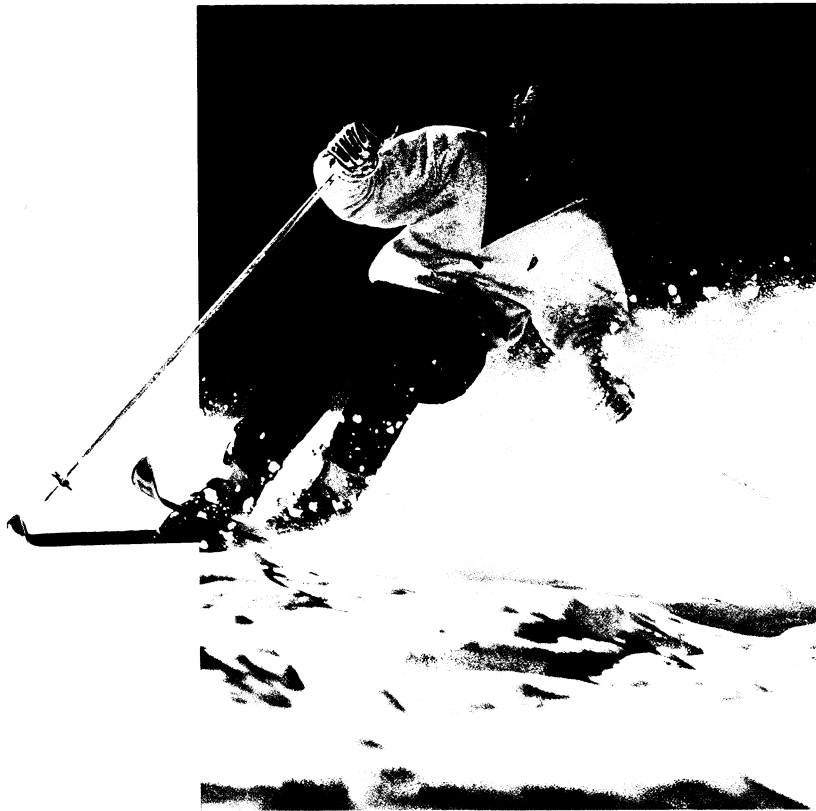
▼ Special reporting to the CSM required.

® denotes registered trademark of Merck & Co., Inc., Rahway, NJ, USA.

**References**

1. Rohner, H-G., and Gugler, R., *Amer. J. Med.*, 1986, 81 (Suppl. 4B) 13. 2. Dobrilla, G., *et al.*, *Scand. J. Gastroenterol.*, 1987, 22 (Suppl. 34), 21.

# IT MAKES LIFE WORTH LIVING.



Effective control of ulcerative colitis is only half of Colifoam's success story. As thousands of patients previously managed with aqueous enemas have found, its simplicity and ease of retention has transformed their lives.

Colifoam causes little if any disturbance to their daily routine, and enables patients to enjoy their normal social and outdoor activities!

Equally as effective as steroid enemas,<sup>1,2</sup> Colifoam is now established as the leading treatment for ulcerative colitis.<sup>3</sup> It is also unique among foam treatments with an unrivalled 12 years of proven efficacy and safety in clinical practice.

**COLIFOAM**  
10% Hydrocortisone acetate foam.

The proven choice in ulcerative colitis.

**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. References 1. Somerville KW et al. British Medical Journal 1985; 291:866. 2. Ruddell WSJ et al. Gut 1980; 21:885-889. 3. Independent Research Audit. Data on File. Further information is available on request. Stafford-Miller Ltd., Professional Relations Division, Hatfield, Herts. AL10 0NZ.

# ULCERATIVE COLITIS IS LIKE A LIFE SENTENCE

Help  
free the  
ulcerative  
colitis  
patient

**ASACOL**  
Mesalazine\* (5-aminosalicylic acid)

Effective maintenance  
of disease remission.  
No sulphapyridine side effects.

**Prescribing Information:** Presentation: 'Asacol' Tablets, Pl. 0002 01/3, each containing 400 mg of mesalazine (5-amino-salicylic 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. Severe renal impairment (GFR less than 20 ml/min). 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. 12.8.88.

\*Mesalazine is the British Approved Name for 5-aminosalicylic acid.

**SK&F** Smith Kline & French Laboratories Limited

A SMITHKLINE-BEECHAM COMPANY Welwyn Garden City, Hertfordshire AL7 1JY

© 1989 Smith Kline & French Laboratories Limited. Authorised user of the trade mark 'Asacol' in the UK.

ASACOL 1/89

# SOME THINGS APPEAR TO



Indications: Gastric and duodenal ulcers. Contra-indications: Severe renal dysfunction. Use during pregnancy: There is insufficient data on its use in pregnancy to assess possible harmful effects. There are no indications of harmful effects in animals. Warnings and precautions: Prolonged use of high doses of bismuth compounds is not recommended.

**Gist-brocades**

Gist-brocades Pharmaceuticals, Division of Royal  
Gist-brocades NV, Delft, Holland

because it has occasionally led to reversible encephalopathy. The risk of this is very small provided De-Nol is used as recommended. It is, however, not advisable to use concomitantly other bismuth-containing drugs or alcohol. Antacids and milk should not be taken within half an hour before, or half an hour after, taking De-Nol, because gastric acid is necessary for the formation of the protective layer. The absorption of tetracyclines may be reduced when De-Nol is taken concomitantly. Dosage: Two tablets twice daily on an empty stomach, half an hour before breakfast and dinner, for 4-8 weeks. Alternatively

# BE SLIGHTLY DIFFERENT

Take for example peptic ulcers. For years people were convinced that the pathophysiology was related to gastric acid; healing no longer seemed to be a major problem. The high rate of ulcer relapse however proved that in most cases it was only temporary healing and not a definite cure.

*Campylobacter pylori*: the other factor

In 1983 J.R. Warren and B.J. Marshall discovered an important factor in the pathogenesis of peptic ulcers: *Campylobacter pylori*. Since their historic publication in *The Lancet* more and more proof has been produced, reflected in a continuous stream of publications on the connection between the presence of *Campylobacter pylori* in the gastric mucosa on one hand and histologically proven gastritis and peptic ulcers on the other.

There is now no doubt of the association between chronic gastritis, ulcer relapse and *Campylobacter pylori*.

De-Nol: the only ulcer healer that cures

De-Nol (colloidal bismuth subcitrate) is the only ulcer healer that is active against *Campylobacter pylori*. De-Nol can cure peptic ulcers. The relapse rates are much lower than those with acid suppressant preparations. Studies have shown that among patients in whom *Campylobacter pylori* was eliminated, the relapse rate of peptic ulcers after one year was only 25%.

The pathogenesis and cure of peptic ulcers therefore appear to be slightly different from what has been assumed for years.

one tablet four times daily on an empty stomach: half an hour before breakfast, lunch and dinner and at bedtime, for 4-8 weeks. Thereafter De-Nol or other bismuth-containing drugs should not be taken for 8 weeks. A treatment course may then be prescribed again for 4-8 weeks, if necessary. Side effects Stool blackening may occur from the formation of bismuth sulphide. This discolouration may easily be distinguished from melaena. There may also be nausea and vomiting. These effects are not dangerous and disappear upon completion of therapy.

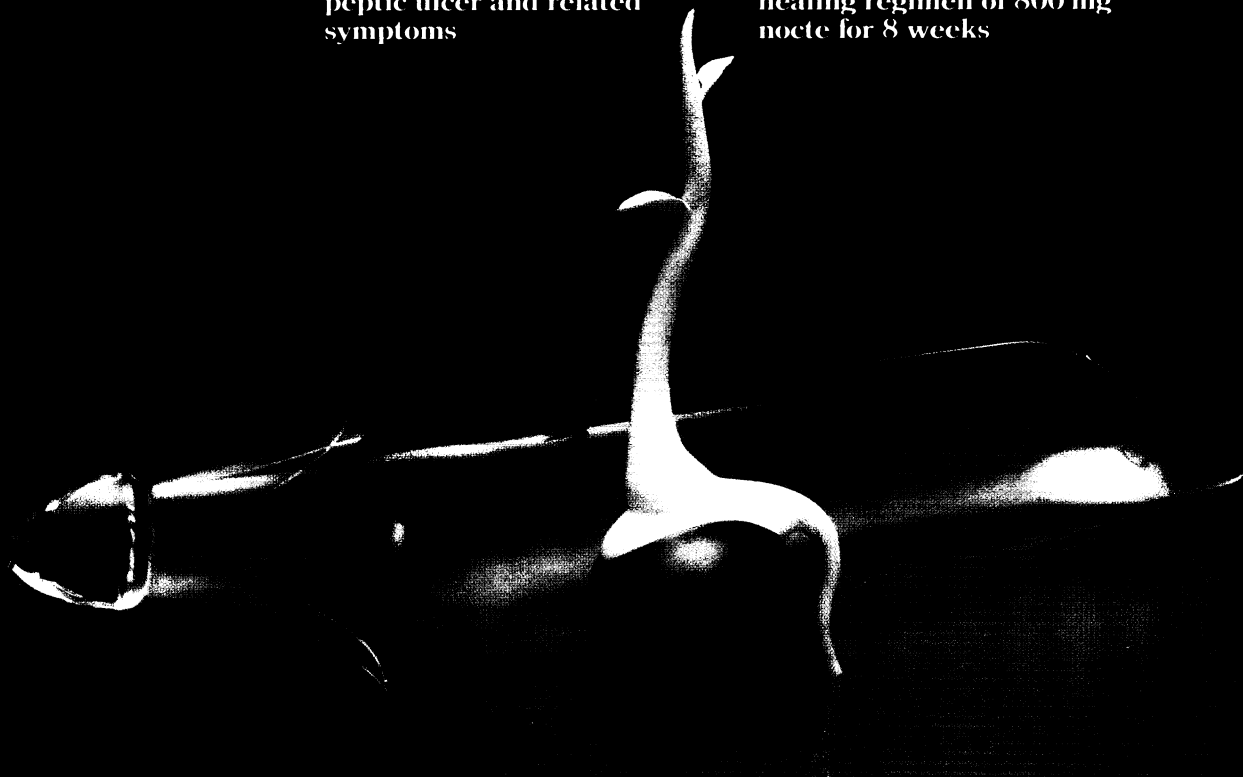


**De-Nol**

# A NEW INDICATION

'Tagamet' can now be co-prescribed with NSAIDs\* when patients present with peptic ulcer and related symptoms

The NSAID may be continued throughout the recommended 'Tagamet' healing regimen of 800 mg nocte for 8 weeks



\*Non-steroidal anti-inflammatory drug

## **TAGAMET** **CIMETIDINE 800**

can now be co-prescribed with NSAIDs

**Prescribing Information. Presentation** 'Tagamet Tiltab' Tablets, PL 0002/0128, each containing 800 mg cimetidine. 30 (2 calendar strips of 15 tablets), £17.76. 'Tagamet' Tablets, PL 0002/0092, each containing 400 mg cimetidine. 60 (4 calendar strips of 15 tablets), £18.69. **Uses** Duodenal and benign gastric ulceration, including that associated with NSAIDs. Other conditions where reduction of gastric acid by 'Tagamet' is beneficial: persistent dyspeptic symptoms, particularly meal-related, including such symptoms associated with NSAIDs. **Dosage and administration** For full dosage instructions see Data Sheet. **Adults:** Duodenal or benign gastric ulceration, 800 mg once a day at bedtime. Otherwise usually 400 mg b.d. with breakfast and at bedtime. If inadequate, 400 mg q.d.s. with meals and at bedtime (1.6 g/day). Treat for at least 4 weeks (6 weeks in benign gastric ulcer, 8 weeks in ulcer associated with continued NSAIDs). To prevent relapse of peptic ulcer, usually 400 mg at bedtime or else 400 mg morning and at bedtime. **Children:** Over 1 year: 25-30 mg/kg/day, divided. **Contra-indication** Hypersensitivity to cimetidine. **Precautions** Impaired renal function: reduce dosage (see Data Sheet). Potentiation of oral anti-

coagulants, phenytoin and theophylline (see Data Sheet). Prolonged treatment: observe patients regularly. Potential delay in diagnosis of gastric cancer (see Data Sheet). Regularly observe patients with a history of peptic ulcer and on NSAIDs, especially if elderly. Care in patients with compromised bone marrow (see Data Sheet). Avoid during pregnancy and lactation. **Adverse reactions** Diarrhoea, dizziness, rash, tiredness. Gynaecomastia, occasional reversible liver damage, confusional states (usually in the elderly or very ill). Very rarely interstitial nephritis, acute pancreatitis, thrombocytopenia, agranulocytosis, headache, myalgia, arthralgia, sinus bradycardia, tachycardia, heart block, aplastic anaemia; very rare reports of alopecia, reversible impotence but no causal relationship established at usual therapeutic doses. **Legal category** POM. 7.3.89. Smith Kline & French Laboratories Limited A SMITHKLINE BECKMAN COMPANY Welwyn Garden City, Hertfordshire AL7 1EY © 1989 Smith Kline & French Laboratories Limited 'Tagamet', 'Tiltab' and the appearance of the tablets are trade marks

**SK&F**  
TG AD0309



# Rapid relief for patients gripped by IBS

Colofac rapidly relieves the symptoms of Irritable Bowel Syndrome by a direct action on colonic smooth muscle.

Colofac eliminates spasm without the anti-cholinergic side effects that can prove troublesome to the patient.



## colofac<sup>®</sup>

mebeverine

### loosens the grip of IBS

#### Prescribing Information

**Presentation:** White, sugar coated tablets each containing 135mg mebeverine hydrochloride. Available in packs of 100. Basic NHS price £8.35. Yellow, banana-flavoured sugar-free suspension containing mebeverine pamoate equivalent to 50mg mebeverine hydrochloride per 5ml. Available in bottles of 300ml. Basic NHS price £3.50.

**Indications:** 1. Irritable bowel syndrome. 2. Gastro-

intestinal spasm secondary to organic diseases

**Dosage and Administration:** Tablets: Adults and children ten years and over: One tablet three times a day, preferably 20 minutes before meals. Suspension: Adults and children ten years and over: 15ml (150mg) three times a day, preferably 20 minutes before meals. **Contra-indications, warnings, etc:** Animal experiments have failed to show any terato-

genic effects. However, the usual precautions concerning the administration of any drug during pregnancy should be observed. **Product Licence Number:**

**Tablets:** 0512/0044; **Suspension:** 0512/0061.

Further information is available on request to

the Company: Duphar Laboratories Limited,

**duphar** Gaters Hill, West End, Southampton, SO3 3JD. Telephone: 0703 472281

C Hosp Ad 1 88



# 1

# Zantac 300

RANITIDINE

One tablet nightly for healing ulcers.

**PRESCRIBING INFORMATION:** **INDICATIONS:** DUODENAL ULCER, BENIGN GASTRIC ULCER, REFLUX OESOPHAGITIS, CHRONIC EPISODIC DYSPEPSIA **DOSAGE:** ADULTS. IN DUODENAL AND BENIGN GASTRIC ULCER, 300MG AT BEDTIME OR 150MG TWICE DAILY. CONTINUED MAINTENANCE TREATMENT OF 150MG AT BEDTIME IS RECOMMENDED FOR PATIENTS WITH A HISTORY OF RECURRENT ULCERATION. REFLUX OESOPHAGITIS: 150MG TWICE DAILY FOR UP TO EIGHT WEEKS. CHRONIC EPISODIC DYSPEPSIA: 150MG TWICE DAILY FOR SIX WEEKS. INVESTIGATE EARLY RELAPERS AND NON-RESPONDERS. (SEE DATA SHEET FOR FULL DOSAGE INSTRUCTIONS.) **CONTRA-INDICATIONS:** PATIENTS WITH KNOWN HYPERSENSITIVITY TO RANITIDINE **PRECAU- TIONS:** EXCLUDE THE POSSIBILITY OF MALIGNANCY IN GASTRIC ULCER BEFORE INSTITUTING THERAPY. ESPECIALLY IN MIDDLE-AGE PATIENTS WITH RECENTLY CHANGED DYSPEPTIC SYMPTOMS. REDUCE DOSAGE IN THE PRESENCE OF SEVERE RENAL FAILURE (SEE DATA SHEET). LIKE OTHER DRUGS, USE DURING PREGNANCY AND LACTATION ONLY IF STRICTLY NECESSARY. **SIDE EFFECTS:** HEADACHE, DIZZINESS, SKIN RASH, OCCASIONAL REVERSIBLE HEPATITIS, RARELY, REVERSIBLE MENTAL

CONFUSION STATES, USUALLY IN VERY ILL OR ELDERLY PATIENTS. RARE CASES OF REVERSIBLE LEUCOPENIA, THROMBOCYTOPENIA, AGRANULOCYTOSIS, PANCY- TOPENIA AND HYPERSENSITIVITY REACTIONS. RARE CASES OF BREAST SYMPTOMS IN MEN. RARE CASES OF BRADYCARDIA (SEE DATA SHEET). **PRESENTATIONS:** ZANTAC 150 TABLETS EACH CONTAINING 150MG RANITIDINE (PRODUCT LICENCE NUMBER 0004/0279, 60 TABLETS £29.76) ZANTAC 300 TABLETS EACH CONTAINING 300MG RANITIDINE (PRODUCT LICENCE NUMBER 0004/0302, 30 TABLETS £27.43). ZANTAC DISPERSIBLE TABLETS EACH CONTAINING 150MG RANITIDINE (PRODUCT LICENCE NUMBER 0004/0298, 60 TABLETS £31.25). **PRODUCT LICENCE HOLDER:** GLAXO OPERATIONS U.K. LIMITED, GREENFORD, MIDDLESEX UB6 0HE  
ZANTAC IS A GLAXO TRADE MARK  
FURTHER INFORMATION IS AVAILABLE ON REQUEST FROM:  
GLAXO LABORATORIES LIMITED  
GREENFORD, MIDDLESEX UB6 0HE  
TEL: 01-422 3434

**Glaxo** 

new product  
introduction announcement  
from Sandoz

**The  
first long-acting  
somatostatin  
analogue**

**SANDOSTATIN<sup>®</sup>**

octreotide

**subcutaneous injection**

**Effective  
symptomatic control of  
VIPoma, glucagonoma and  
carcinoid tumour**



▼ **Prescribing Information**

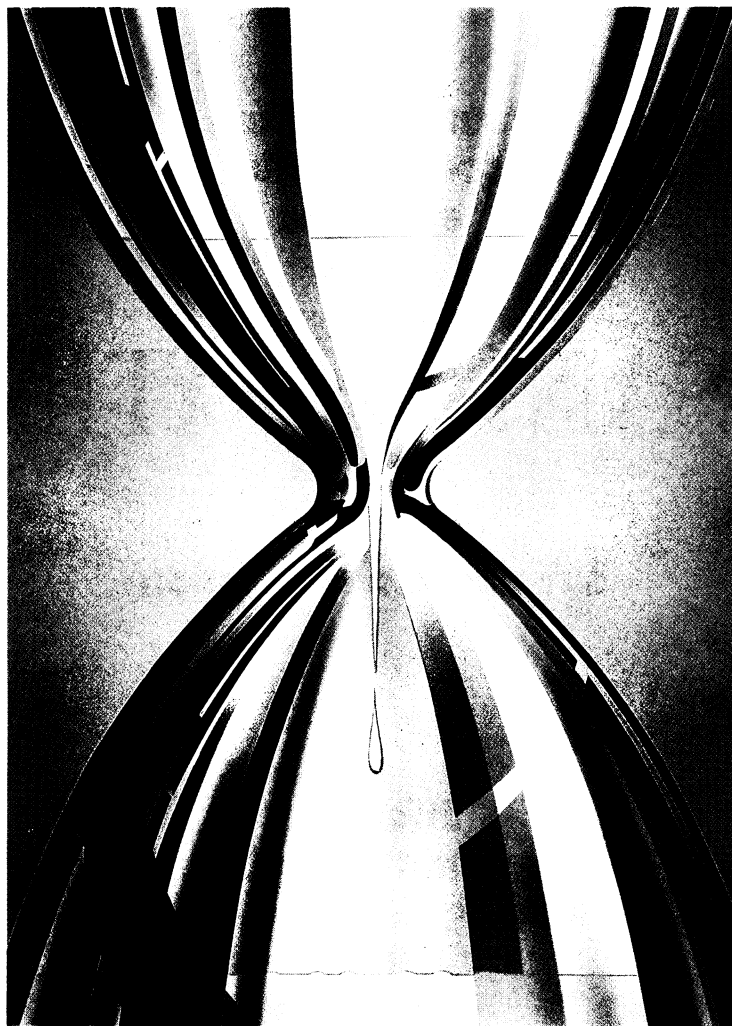
**Indications** Relief of symptoms of carcinoid tumours, VIPomas and glucagonomas. **Presentations** Ampoules containing 50, 100 or 500 microgrammes octreotide per ml. **Dosage and Administration** Initially, 50 microgrammes sc once or twice daily. Increase, if necessary, up to 200 microgrammes sc tds. Allow to reach room temperature before injecting. **Contra-indications** Hypersensitivity to octreotide. **Precautions** Sudden escape from symptomatic control can occur. Insulin or oral hypoglycaemic requirements may be reduced in diabetics. The depth and duration of hypoglycaemia may be increased in insulinoma. May interfere with intestinal absorption of cyclosporin and cimetidine. Monitor thyroid function during long-term therapy. Do not use during pregnancy or lactation. **Side-Effects** Pain, stinging, redness and swelling at injection site.

Anorexia, nausea, vomiting, abdominal pain, bloating, flatulence, diarrhoea and steatorrhoea. Gastrointestinal side-effects may resemble acute intestinal obstruction. Persistent hyperglycaemia and hepatic dysfunction have been reported rarely. **Package Quantities and Basic NHS Cost** 50 microgrammes per ml 5×1 ml: £14.17, 100 microgrammes per ml 5×1 ml: £26.67, 500 microgrammes per ml 5×1 ml: £129.17. **Product Licence Numbers** 50 microgrammes per ml: PL 0101/0212, 100 microgrammes per ml: PL 0101/0213, 500 microgrammes per ml: PL 0101/0214.

Sandostatin is a registered Trade Mark.

Full prescribing information, including product Data Sheet, is available from SANDOZ PHARMACEUTICALS, Frimley Business Park, Frimley, Camberley, Surrey GU16 5SG.

# Predictable in IV sedation.



## DUMEX

**Diazemuls®**  
10mg diazepam in 2ml emulsion

### The cream of IV sedation

#### PRESCRIBING INFORMATION

**PRESENTATION** Ampoules of a white opaque emulsion containing diazepam BP 10mg in 2ml.

#### Indications:

1. Sedation prior to procedures such as endoscopy, dentistry, cardiac catheterisation and cardioversion.
2. Premedication prior to general anaesthesia.
3. Control of acute muscle spasm due to tetanus or poisoning.
4. Control of convulsions; status epilepticus.
5. Management of severe acute anxiety or agitation including delirium tremens.

#### DOSAGE AND ADMINISTRATION

Diazemuls may be administered by slow intravenous injection (1ml per min), or by continuous infusion. Diazemuls should be drawn up into the syringe immediately prior to administration.

1. **Sedation:** 0.1 – 0.2 mg diazepam/kg body weight by iv injection.
2. **Premedication:** 0.1 – 0.2 mg diazepam/kg body weight by iv injection.
3. **Tetanus:** 0.1 – 0.3 mg diazepam/kg body weight by iv injection repeated every 1 – 4 hours as required. Alternatively, continuous infusion of 3 – 10 mg/kg body weight every 24 hours may be used.
4. **Status epilepticus:** An initial dose of 0.15 – 0.25 mg/kg body weight by iv injection repeated in 30 to 60 minutes if required, and followed if necessary by infusion of up to 3 mg/kg body weight over 24 hr.

5. **Anxiety and tension, acute muscle spasm, acute states of excitation, delirium tremens:** The usual dose is 10 mg repeated at intervals of 4 hours, or as required.

**Elderly or debilitated patients:** Elderly and debilitated patients are particularly sensitive to benzodiazepines. Dosage should initially be reduced to one half of the normal recommendations.

#### CONTRA-INDICATIONS, WARNINGS, ETC:

As with other benzodiazepine preparations: should not be used in phobic or obsessional states nor in the treatment of chronic psychosis. Treatment with diazepam may cause drowsiness and increase the patient's reaction time. Use with caution in patients with impairment of renal or hepatic function and in patients with pulmonary insufficiency or myasthenia gravis. Should not be used alone to treat depression or anxiety associated with depression. Amnesia may occur. In cases of loss or bereavement psychological adjustment may be inhibited by benzodiazepines. Disinhibiting effects may be manifested in various ways. Suicide may be precipitated in patients who are depressed and aggressive behaviour toward self and others may be precipitated. Extreme caution should therefore be used in prescribing benzodiazepines in patients with personality disorders. Physiological and psychological symptoms of withdrawal including depression may be associated with discontinuation of benzodiazepines even after normal therapeutic doses for short periods of time.

**Pregnancy and Lactation:** Diazepam crosses the placenta and should not be used during pregnancy unless considered essential. Large maternal doses administered during delivery may produce clinical effects in the newborn. Diazepam can be transmitted in breast milk and clinical effects may occur in the breast-fed infant.

**Side Effects:** May rarely cause local pain or thrombophlebitis. Rare instances of a local painless erythematous rash around the site of injection. Urticaria and, rarely, anaphylaxis have been reported.

**Overdosage:** CNS depression and coma. Treatment symptomatic.

#### PHARMACEUTICAL PRECAUTIONS: See Data Sheet

Pack Size & Cost: 10 x 2ml ampoules: NHS Price £6.29

Product Licence No: 10183/0001

Date of preparation: April 1989

(Diazemuls is a registered trademark)

Product Licence Holder: Dumex Ltd.,  
Riverside Way,  
UXBRIDGE,  
Middx. UB8 2YF  
Tel: Uxbridge (0895) 51144

Distributed in the UK by KabiVitrum Ltd

# Consider an ulcer extinct at your patient's peril

# Zantac

RANITIDINE

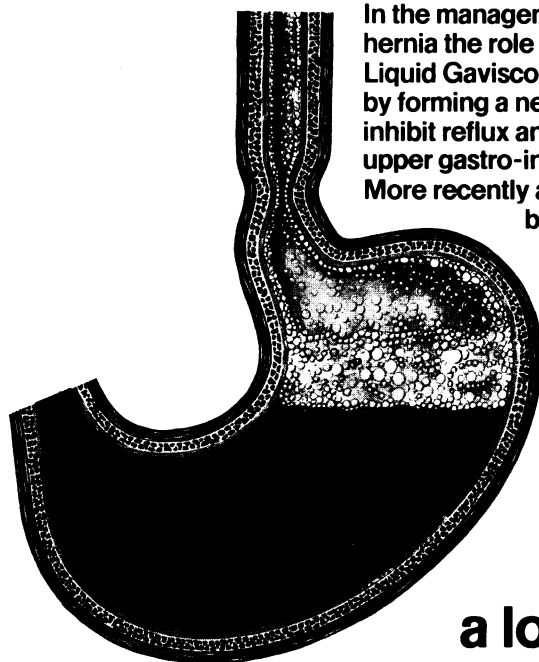
## For the lifetime of the disease

**PRESCRIBING INFORMATION: INDICATIONS:** DUODENAL ULCER, BENIGN GASTRIC ULCER, REFLUX OESOPHAGITIS, CHRONIC EPISODIC DYSPESIA. **DOSAGE:** ADULTS: IN DUODENAL AND BENIGN GASTRIC ULCER, 300MG AT BEDTIME OR 150MG TWICE DAILY. CONTINUED MAINTENANCE TREATMENT OF 150MG AT BEDTIME IS RECOMMENDED FOR PATIENTS WITH A HISTORY OF RECURRENT ULCERATION. REFLUX OESOPHAGITIS: 300MG AT BEDTIME OR 150MG TWICE DAILY FOR UP TO EIGHT WEEKS. CHRONIC EPISODIC DYSPESIA: 150MG TWICE DAILY FOR SIX WEEKS. INVESTIGATE EARLY RELAPSES AND NON-RESPONDERS. (SEE DATA SHEET FOR FULL DOSAGE INSTRUCTIONS.) **CONTRA-INDICATIONS:** PATIENTS WITH KNOWN HYPERSENSITIVITY TO RANITIDINE. **PRECAUTIONS:** EXCLUDE THE POSSIBILITY OF MALIGNANCY IN GASTRIC ULCER BEFORE INSTITUTING THERAPY, ESPECIALLY IN MIDDLE-AGED PATIENTS WITH RECENTLY CHANGED DYSPETIC SYMPTOMS. REDUCE DOSAGE IN THE PRESENCE OF SEVERE RENAL FAILURE (SEE DATA SHEET). LIKE OTHER DRUGS, USE DURING PREGNANCY AND LACTATION ONLY IF STRICTLY NECESSARY. **SIDE EFFECTS:** HEADACHE, DIZZINESS, SKIN RASH, OCCASIONAL REVERSIBLE HEPATITIS. RARELY, REVERSIBLE MENTAL CONFUSION STATES,

USUALLY IN VERY ILL OR ELDERLY PATIENTS. RARE CASES OF REVERSIBLE LEUCOPENIA, THROMBOCYTOPENIA, AGRANULOCYTOSIS, PANCYTOPENIA AND HYPERSENSITIVITY REACTIONS. RARE CASES OF BREAST SYMPTOMS IN MEN. RARE CASES OF BRADYCARDIA (SEE DATA SHEET). **PRESENTATIONS:** ZANTAC 150 TABLETS EACH CONTAINING 150MG RANITIDINE (PRODUCT LICENCE NUMBER 0004/0279, 60 TABLETS £29.76), ZANTAC 300 TABLETS EACH CONTAINING 300MG RANITIDINE (PRODUCT LICENCE NUMBER 0004/0302, 30 TABLETS £27.43), ZANTAC DISPERSIBLE TABLETS EACH CONTAINING 150MG RANITIDINE (PRODUCT LICENCE NUMBER 0004/0298, 60 TABLETS £31.25), ZANTAC SYRUP EACH 10ML DOSE CONTAINING 150MG RANITIDINE (PRODUCT LICENCE NUMBER 0004/0310, 300ML BOTTLE £22.32). **PRODUCT LICENCE HOLDER:** GLAXO OPERATIONS U.K. LIMITED, GREENFORD, MIDDLESEX UB6 0HE. ZANTAC IS A GLAXO TRADE MARK. FURTHER INFORMATION IS AVAILABLE ON REQUEST FROM: GLAXO LABORATORIES LIMITED, GREENFORD, MIDDLESEX UB6 0HE. TEL: 01-422 3434

**Glaxo** 

# 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.

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**PL:** 44/0058. **Irish P.A. No.:** 27/12/1.

#### Reference

1. Washington, N. et al., *Int. J. Pharmaceut.* (1986) **28**, 139-143  
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# GASTROENTÉROLOGIE CLINIQUE ET BIOLOGIQUE

Gastroenterol Clin Biol, t. 13.

N° 4

Avril 1989

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