Current treatments have their limitations and some peptic ulcer patients remain unhealed after conventional therapy[1-3]. Until now, these patients have often been difficult to treat.

But, at last, there's a revolutionary new healing agent available, one that can heal virtually all[4,5] unresponsive duodenal and gastric ulcers within just 4 to 8 weeks.

Losec: the first proton pump inhibitor[6]; a new class of peptic ulcer therapy is indicated for peptic ulcer patients unresponsive to an adequate dose and duration of conventional therapy.

®

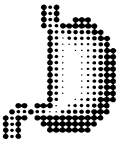
omeprazole – Astra

A new class of treatment for unresponsive ulcers

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. **Contra-indications, 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:** PL0017/0238 **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. Bardhan KD. Gastroenterology 1988; 94 (5 pt 2): A22. 5. Tytgat GNJ et al. Aliment Pharmacol Therap 1987; 1: 31-38. 6. Wallmark B et al. ISI Atlas of Science: Pharmacology 1987; 1: 158-61.



ASTRA

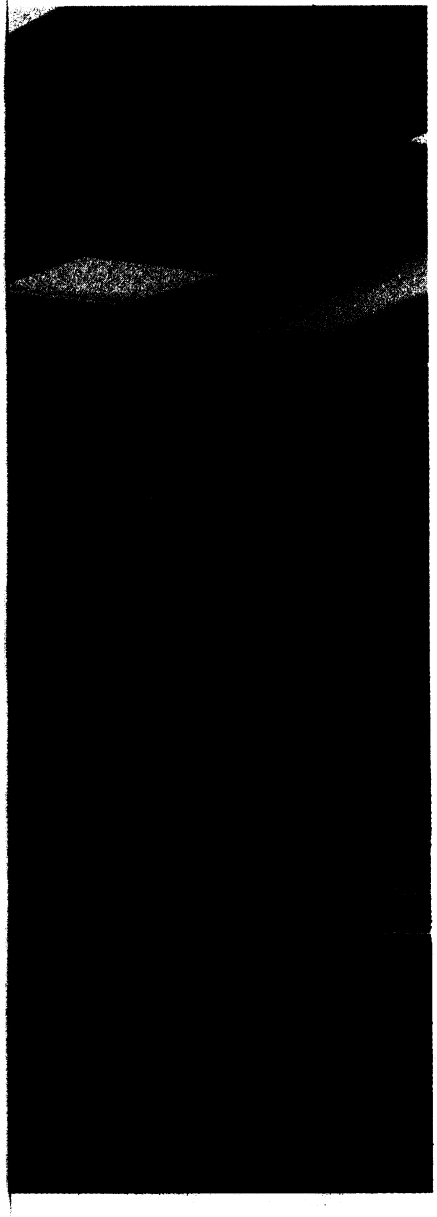
For further information please contact
Astra Pharmaceuticals Ltd, Home Park Estate, Kings Langley
Herts WD4 8DH. Telephone: (0923) 66191

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.

ORKER



'Pepcid' PM,
working fast to relieve
the pain of ulcers,[1] quickly
restoring the well-being
of many patients.
This rapid relief, together
with fast, effective healing,[2]
is achieved in many patients
with a simple dosage of
just one small 40 mg
tablet at night.

PEPCID® 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.

09-89 PCD.88.GB.3394.J.

Zantac 300

RANITIDINE

One tablet nightly for healing ulcers.

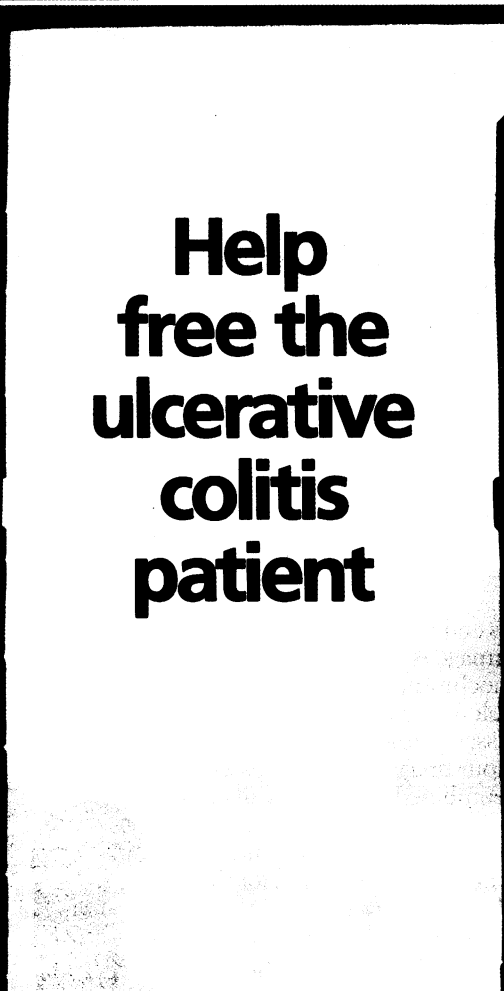
PRESCRIBING INFORMATION: INDICATIONS: DUODENAL ULCER, BENIGN GASTRIC ULCER, ULCERS ASSOCIATED WITH NON-STEROIDAL ANTI-INFLAMMATORY DRUGS (NSAIDs), REFLUX OESOPHAGITIS, CHRONIC EPISODIC DYSPEPSIA. **DOSAGE:** ADULTS: THE USUAL DOSAGE IS 150MG TWICE DAILY IN THE MORNING AND EVENING. ALTERNATIVELY, PATIENTS WITH DUODENAL ULCERATION, GASTRIC ULCERATION OR REFLUX OESOPHAGITIS MAY BE TREATED WITH A SINGLE BEDTIME DOSE OF 300MG. IN ULCERS FOLLOWING NON-STEROIDAL ANTI-INFLAMMATORY DRUG THERAPY, OR ASSOCIATED WITH CONTINUED NON-STEROIDAL ANTI-INFLAMMATORY DRUGS OR IN THE MANAGEMENT OF REFLUX OESOPHAGITIS UP TO EIGHT WEEKS' TREATMENT MAY BE NECESSARY. CHRONIC EPISODIC DYSPEPSIA: 150MG TWICE DAILY FOR SIX WEEKS. INVESTIGATE EARLY RELAPSERS 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 DYSPEPTIC SYMPTOMS. SUPERVISION OF PATIENTS WITH PEPTIC ULCERS AND ON NSAID THERAPY IS RECOMMENDED ESPECIALLY IF ELDERLY. 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 HEPATITIS. RARELY, REVERSIBLE MENTAL CONFUSION STATES, USUALLY IN VERY ILL OR ELDERLY PATIENTS. RARE CASES OF LEUCOPENIA AND THROMBOCYTOPENIA, USUALLY REVERSIBLE. AGRANULOCYTOSIS AND PANCYTOPENIA. HYPERSENSITIVITY REACTIONS, ANAPHYLACTIC SHOCK. RARE CASES OF BREAST SYMPTOMS IN MEN. AS WITH OTHER H_2-RECEPTOR ANTAGONISTS RARE CASES OF BRADYCARDIA AND A-V BLOCK (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

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 0002/0173, 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 of 5-aminosalicylic acid

SK&F Smith Kline & French Laboratories Limited
A SMITHKLINE BECKMAN COMPANY, Welwyn Garden City, Hertfordshire AL7 1EY

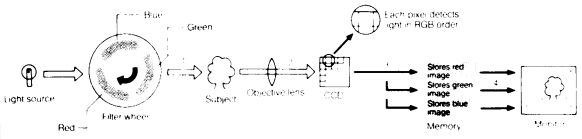
ASC:AD0079

OLYMPUS
KEYMED

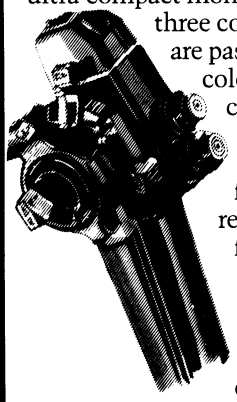
Committed to Quality and Service

OLYMPUS ENDOSCOPIC VIDEO INFORMATION SYSTEM (EVIS)

The relatively recent introduction of electronic endoscopes has created a great deal of interest amongst endoscopists, as these instruments are seen to offer advantages over conventional fiberoptic endoscopes. The principal reason for this is the substitution of the conventional coherent fibre bundle for a charge coupled device (CCD) chip which generates an image on a video monitor considered by many to be the closest to life yet seen with the aid of a flexible endoscope.



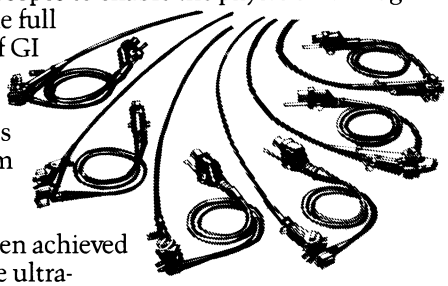
In the Olympus endoscopic video information system (EVIS), the image is generated using an ultra-compact monochrome chip, across which three colours, red, green and blue, are passed. This enables the single colour images to be processed and combined to create a full colour image on the monitor.



Diagnosis is made directly from the screen, and for this reason, the eyepiece, a standard feature of fiberoptic endoscopes, is no longer required.

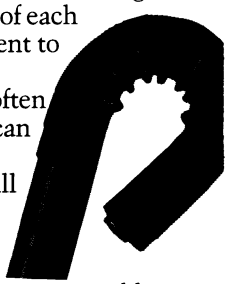
What is, unfortunately, often overlooked is that in all other respects, an electronic endoscope should be exactly the same as a fiberoptic endoscope, requiring the same design attention to insertion characteristics, cleaning and disinfection, durability and routine maintenance. With this in mind, each Olympus EVIS endoscope has an equivalent specification in the OES fiberoptic range and thus benefits from Olympus' long experience in mechanical and illumination system design.

Olympus has developed a complete range of video endoscopes to enable the physician to diagnose and treat the full spectrum of GI disorders, featuring instruments from 9.8mm to 14.2mm diameter.

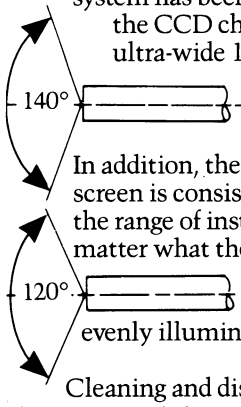


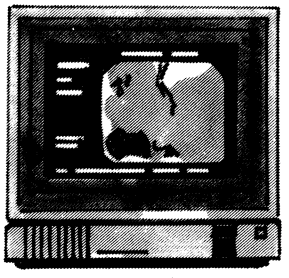
This has been achieved by using the ultra-compact CCD chip mounted face-on to the distal end of the scope, enabling Olympus to produce the widest range of electronic scopes available from one manufacturer.

Attention to detailed mechanical design throughout the range has meant that the angulation capabilities and bending radius of each electronic endoscope is equivalent to its fiberoptic counterpart. The importance of such features is often underestimated, although you can be assured that with Olympus electronic endoscopes it will still be possible, for example, to retrovert the colonoscopes for complete examination of the rectum or angulate the gastroscopes to enable complete inspection of the duodenum.

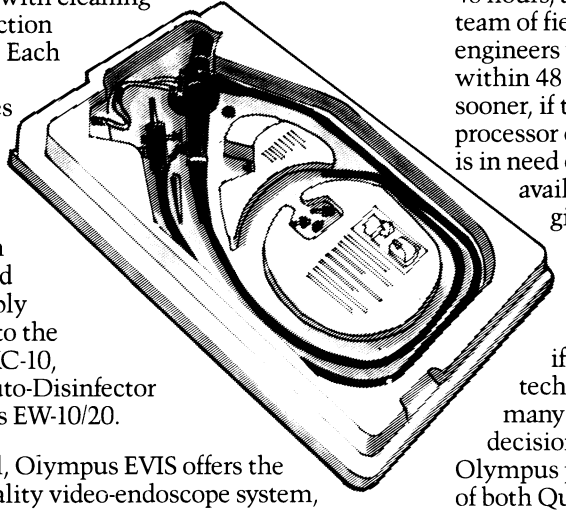


Olympus' wealth of experience in optical design has meant that a sophisticated illumination system has been incorporated to complement the CCD chip and provide an ultra-wide 140° field of view on colonoscopes and 120° on gastroscopes. In addition, the size of image on-screen is consistently large across the range of instruments, no matter what their outer diameter. You can therefore be assured of a large, bright, evenly illuminated image at all times.





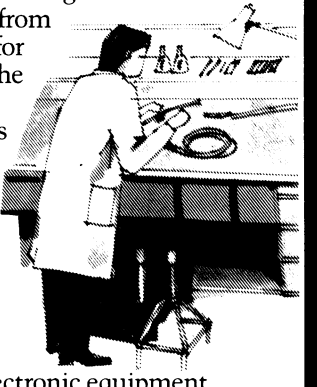
Cleaning and disinfection of electronic instruments is just as important as it is with conventional fiberscopes. Because of the consistency of design of Olympus scopes, no additional staff training is required to ensure familiarity with cleaning and disinfection procedures. Each EVIS scope incorporates the same semi-disposable air/water and suction buttons, and can be simply connected to the Olympus KC-10, KeyMed Auto-Disinfector or Olympus EW-10/20.



Overall, Olympus EVIS offers the highest quality video-endoscope system, based as it is on the combination of well-proven OES mechanical design and fully-developed Olympus image processing technology.

Last, but not least, all Olympus EVIS endoscopes come with a KeyMed unconditional guarantee for the first year after purchase, which means that no revenue costs will be incurred during the guarantee period.

The same high standard of after-sales service is available from KeyMed for EVIS as it is for fiberoptic endoscopes. The optical repair laboratory will deal with the 'scopes themselves, returning them after service or minor repair within 48 hours, and one of the team of field service engineers will be on-site within 48 hours, often sooner, if the video processor or ancillary electronic equipment is in need of repair. These services are also available under contract service schemes, giving full repair cover for a fixed budget.



The final choice of whether to change to electronic endoscopes or stay with fiberoptic instruments is up to you, but if you do decide to investigate this new technology further, there are obviously many points to consider before making your decision. Whichever route you choose, buying Olympus products from KeyMed gives you the best of both Quality and Service.

KeyMed

Specialised Services to Medicine

KeyMed (Medical & Industrial Equipment) Ltd.
KeyMed House, Stock Road, Southend-on-Sea, Essex SS2 5QH.
Telex: 995283, Facsimile: (0702) 465677, Telephone: (0702) 616333 (24 lines).

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

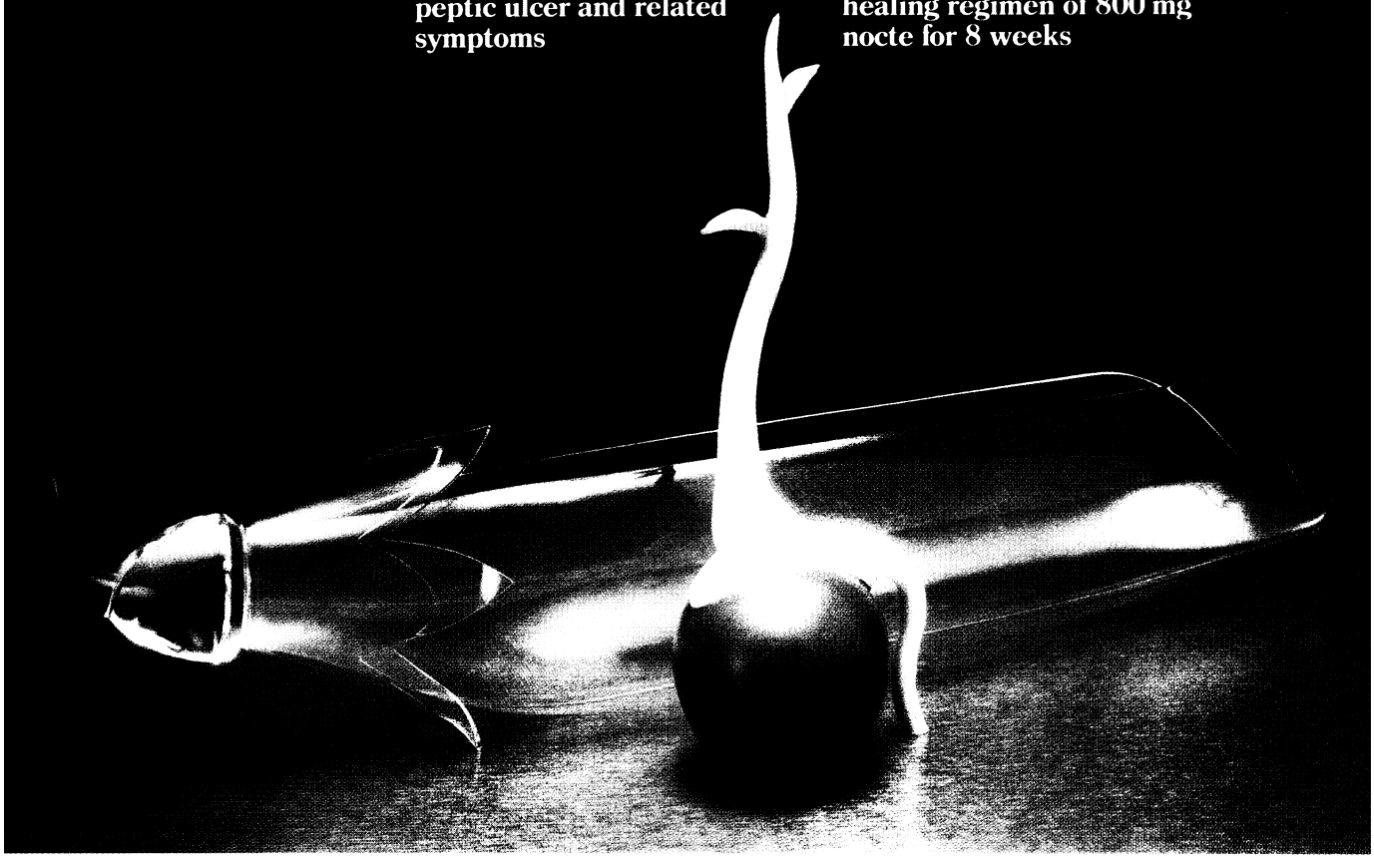
Ireland: KeyMed Ireland Ltd., KeyMed House, Lord Edward Court, Bride Street, Dublin 8, Telephone: 774855

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

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

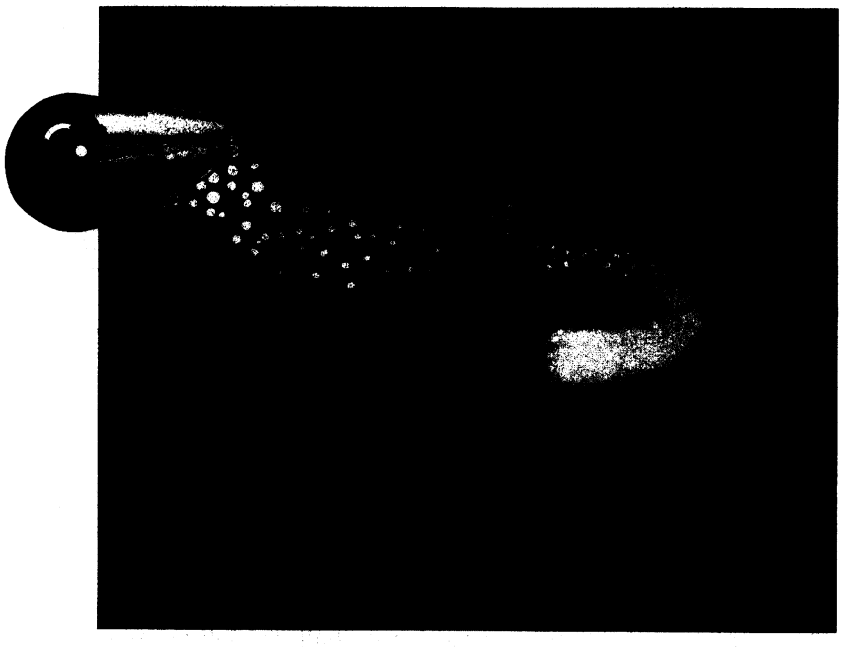
Prescribing Information. Presentation 'Tagamet Tiltab' Tablets, PL 0002/0128, each containing 800 mg cimetidine. 30 (2 calendar strips of 15 tablets), £17.76. 'Tagamet' Tablets, PL 0002/0092, each containing 400 mg cimetidine. 60 (4 calendar strips of 15 tablets), £18.69. **Uses** Duodenal and benign 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

SK&F
TG/AD0309

PROGRESS

In The Control Of Pancreatic Insufficiency



creon®
pancreatin

RIGHT ON TARGET – RIGHT FROM THE START

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 NHS 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 can 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.

duphar Further information is available from:
Duphar Laboratories Limited, Gaters Hill, West End, Southampton SO3 3JD. Tel: 0703 472281.

CRAd/PEI/1/89

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[1,2] Colifoam is now established as the leading treatment for ulcerative colitis.[3] 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.

Soften the impact of NSAIDs on the stomach with prostaglandins

Cytotec is a prostaglandin analogue and therefore replaces G.I. prostaglandins depleted by NSAIDs.

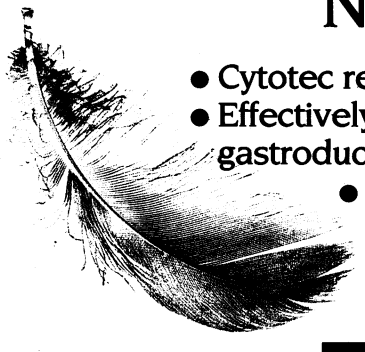
Unlike H_2 receptor antagonists, Cytotec not only inhibits gastric acid secretion[1] but also protects the gastric mucosa by stimulating bicarbonate secretion,[2] increasing mucus secretion[1] and enhancing gastric mucosal blood flow.[3]

ONLY

CYTOTEC®
misoprostol

Abbreviated prescribing information can be found overleaf.

Putting back the G.I. prostaglandins NSAIDs take out



- Cytotec replaces mucosal protective prostaglandins.
- Effectively heals and prevents NSAID-induced gastroduodenal injury.[4,5]
- No effect on valuable anti-arthritic activity of NSAIDs.[5]

CYTOTEC
misoprostol

CYTOTEC ▼ Abbreviated Prescribing Information Presentation: Tablet containing misoprostol 200 micrograms. **Uses:** Healing of duodenal and gastric ulcer induced by non-steroidal 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:** £13.00 per 56 pack. **Product Licence Number:** 0020/0115.

References 1. Wilson DE, Quadros E, Rajapaksa T, Adams A, Noar M. Dig Dis Sci 1986; 37 (suppl): 126s-129s. **2.** Isenberg JL, Hogan DL, Koss MA, Selling JA. Gastroenterology 1986; 91: 370-378. **3.** Sato N, Kawano S, Fukuda M, Tsuji S, Kamada T. Am J Med 1987; 83 (suppl 1A): 15-21. **4.** Graham DY, Agrawal NM, Roth SH. Lancet 1988; ii: 1277-1280. **5.** Agrawal N, Roth S, Mahowald M et al. Am J Gastroenterol 1987; 82: 962.

SEARLE
GOLD CROSS
G.D. Searle & Co. Ltd.,
P.O. Box 53, Lane End Road,
High Wycombe, Bucks. HP12 4HL.

Data sheet with full prescribing information is available on request.

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.[1]

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.[2]

Fybogel Orange—the patients' first choice for flavour
Recent tasting research showed that patients prefer orange flavoured bulking agents.[3]

Fybogel Orange

Ispaghula husk BP

gently does it

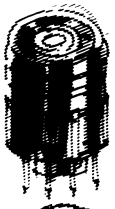
Active ingredients: Each sachet contains 3.5g Ispaghula husk BP. **Indications:** Conditions requiring a high-fibre regimen. **Dosage and Administration:** (To be taken in water.) Adults and children over 12: One sachet morning and evening. Children under 12: One half to one level 5ml spoonful depending 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, Eire: 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.

OLYMPUS
KEYMED

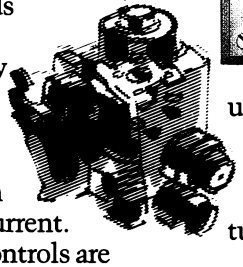
Committed to Quality and Service

QUALITY

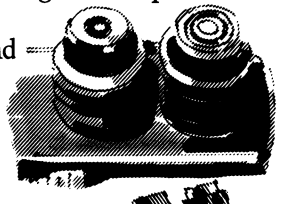
Whilst endoscopic image quality is undoubtedly of great importance, Olympus' commitment to quality goes far beyond optics alone — the OES range of endoscopes incorporates many innovative optical and mechanical designs to provide instruments of unparallelled quality and durability.



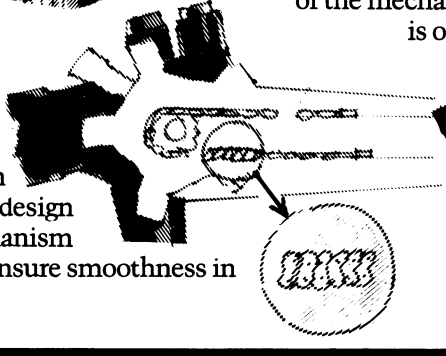
Let's look at some of these in detail. The Olympus OES eyepiece is angled at precisely 8° towards the user for optimal comfort during endoscopy. Additionally four ceramic spacers insulate it from the rest of the instrument to minimise any hazard to the endoscopist from diathermy leakage current.



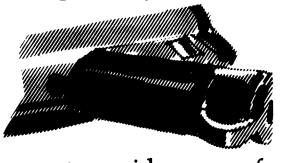
The angulation controls are situated close to the control body and can be operated with one hand enabling maximum angulation to be applied with minimum effort. This, together with the smaller, lighter control body, reduces fatigue during long endoscopic procedures.



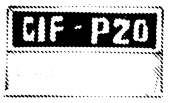
The air/water and suction buttons are ergonomically located on the control body for easy operation and, as well as being easy to clean and maintain, are fully interchangeable between all Olympus OES-20 GI 'scopes. Within the control body is a new design of angulation chain mechanism that eliminates slack to ensure smoothness in use and, most importantly, increased durability.



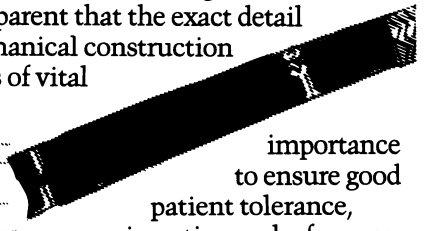
This new mechanism also enables easier adjustment during servicing which reduces repair costs and speeds up turnround times.



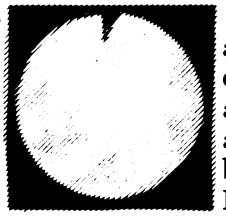
Moving down the control body, the biopsy valve is of a simple but ingenious design which is maintenance free and accepts a wide range of accessories without spitting. The biopsy port itself has a colour-coded bar to indicate the maximum size of accessory that can be safely passed through the channel.

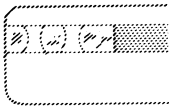


Perhaps the most sophisticated part of any fiberscope is the insertion tube – looking inside the plastic outer coating it soon becomes apparent that the exact detail of the mechanical construction is of vital importance to ensure good patient tolerance, easy insertion and, of course, mechanical durability.



Within the insertion tube is a state-of-the-art optical system, the heart of which being a precisely stacked fiberoptic image guide giving large, bright images over a wide field of view. To complement the optics, Olympus developed a completely new illumination system, including a complex distal lens arrangement to ensure even illumination over wide fields of view. At the light guide connector end, innovations include a heat resistant termination, sealed against the possibility of fluid ingress.





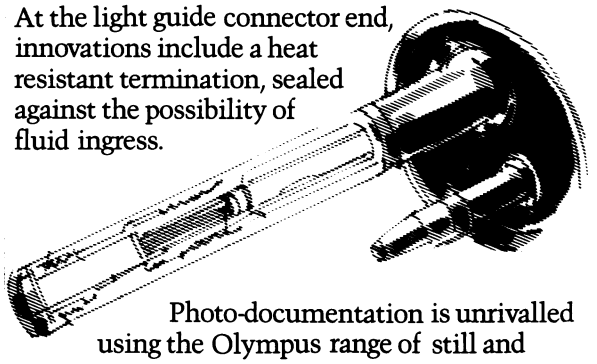
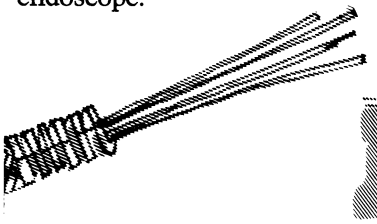
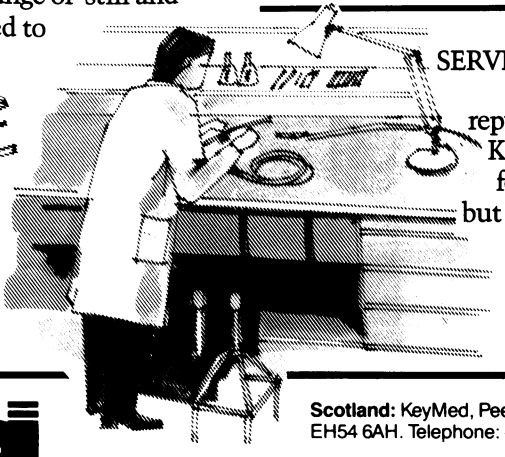
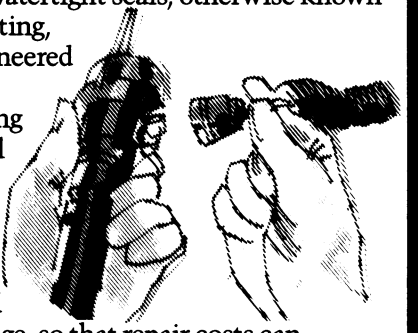


Photo-documentation is unrivalled using the Olympus range of still and video cameras, all designed to interface easily with the endoscope.





And last, but certainly not least, is the ability to check the integrity of the endoscope's watertight seals, otherwise known as leakage testing, a concept pioneered by Olympus. Leakage testing is an essential feature of immersible 'scopes to enable leaks to be detected at an early stage, so that repair costs can be minimised.



The Olympus OES-20 system is the result of 10 years' continuous research and development, utilising the expertise accumulated during 70 years at the forefront of technology in both optics and instrument mechanics. Only with such a distinguished pedigree can the highest quality be expected. Olympus meets this expectation.

SERVICE

Just as Olympus has a reputation for quality, KeyMed has a reputation for service — but that's another story .....

KeyMed

Specialised Services to Medicine

KeyMed (Medical & Industrial Equipment) Ltd.
KeyMed House, Stock Road, Southend-on-Sea, Essex SS2 5QH.
Telex: 995283, Facsimile: (0702) 65677, Telephone: (0702) 616333 (24 lines).

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

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 × 2ml ampoules: NHS Price £6.29

Product Licence No: 10183/0001

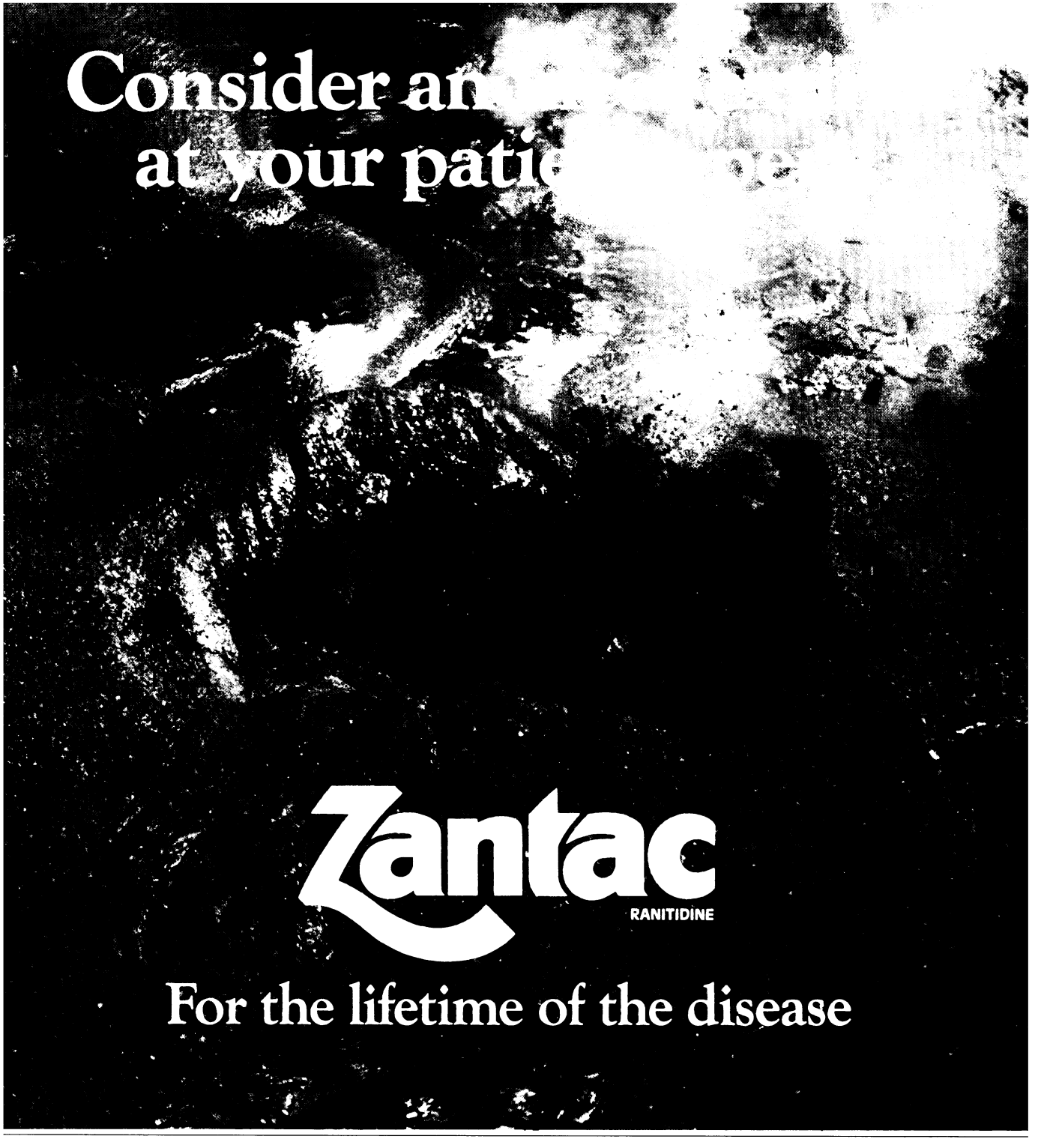
Date of preparation: April 1989

(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

KV881/5/89



PRESCRIBING INFORMATION: INDICATIONS: DUODENAL ULCER, BENIGN GASTRIC ULCER, ULCERS ASSOCIATED WITH NON-STEROIDAL ANTI-INFLAMMATORY DRUGS (NSAIDs), REFLUX OESOPHAGITIS, CHRONIC EPISODIC DYSPEPSIA. **DOSAGE:** ADULTS: THE USUAL DOSAGE IS 150MG TWICE DAILY IN THE MORNING AND EVENING. ALTERNATIVELY, PATIENTS WITH DUODENAL ULCERATION, GASTRIC ULCERATION OR REFLUX OESOPHAGITIS MAY BE TREATED WITH A SINGLE BEDTIME DOSE OF 300MG. IN ULCERS FOLLOWING NON-STEROIDAL ANTI-INFLAMMATORY DRUG THERAPY, OR ASSOCIATED WITH CONTINUED NON-STEROIDAL ANTI-INFLAMMATORY DRUGS OR IN THE MANAGEMENT OF REFLUX OESOPHAGITIS UP TO EIGHT WEEKS' TREATMENT MAY BE NECESSARY. CHRONIC EPISODIC DYSPEPSIA: 150MG TWICE DAILY FOR SIX WEEKS; INVESTIGATE EARLY RELAPSERS 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 DYSPEPTIC SYMPTOMS. SUPERVISION OF PATIENTS WITH PEPTIC ULCERS AND ON NSAID THERAPY IS RECOMMENDED ESPECIALLY IF ELDERLY; 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 HEPATITIS. RARELY, REVERSIBLE MENTAL CONFUSION STATES, USUALLY IN VERY ILL OR ELDERLY PATIENTS. RARE CASES OF LEUCOPENIA AND THROMBOCYTOPENIA, USUALLY REVERSIBLE, AGRANULOCYTOSIS AND PANCYTOPENIA. HYPERSENSITIVITY REACTIONS, ANAPHYLACTIC SHOCK. RARE CASES OF BREAST SYMPTOMS IN MEN. AS WITH OTHER H_2-RECEPTOR ANTAGONISTS RARE CASES OF BRADYCARDIA AND A-V BLOCK (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

BREAK THE STRANGLEHOLD OF GUT SPASM

IRRITABLE BOWEL SYNDROME

COLPERMIN™

(enteric-coated peppermint oil) CAPSULES

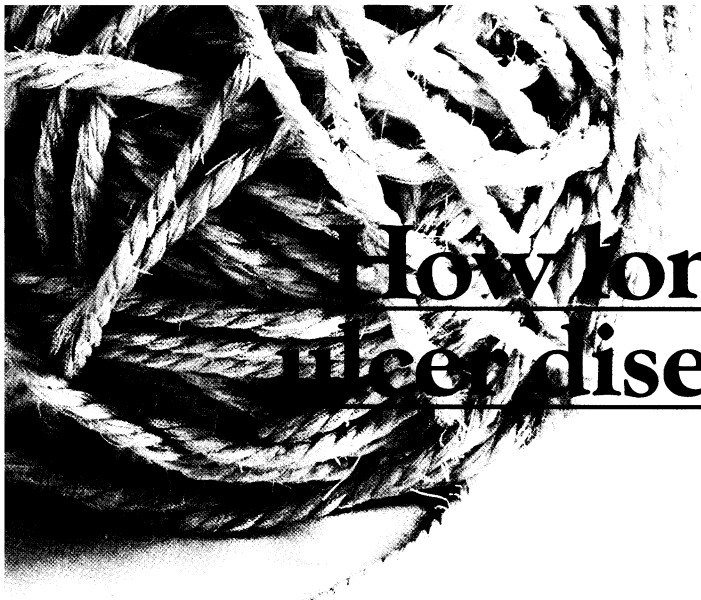
Delivers effective relief right where it hurts

Presentation: A light blue/dark blue enteric-coated capsule with a green band between cap and body. Each capsule contains 0.2ml peppermint oil B.P. **Uses:** For the treatment of symptoms of discomfort and of abdominal colic and distension experienced by patients with irritable bowel syndrome. **Dosage and Administration:** Adult dose: 1-2 capsules three times a day, 30 minutes to one hour before food, and taken with a small quantity of water. The capsules should not be taken immediately after food. The capsules should be taken until symptoms resolve, usually within one or two weeks. At times when symptoms are more persistent, the capsules can be continued for longer periods of between 2 to 3 months. There is no experience in the use of capsules in children under the age of 15 years. **Contra-indications, warnings, etc** *Precautions:* The capsules should not be broken or chewed because this would release the peppermint oil prematurely, possibly causing local irritation of the mouth and oesophagus. Patients who already suffer from heartburn sometimes experience an exacerbation of these symptoms when taking the capsule. Treatment should be discontinued in these patients. Do not take indigestion remedies at the same time of day as this treatment. *Adverse effects:* Heartburn; sensitivity reactions to menthol, which are rare and include erythematous skin rash, headache, bradycardia, muscle tremor and ataxia. **Pharmaceutical Precautions:** Store in a cool place. Avoid direct sunlight. **Legal category:** P **Product Licence:** PL 0424/0009 **Basic NHS Cost:** £12.15 per 100 **Date of issue:** March 1989 Colpermin is a Trade Mark.

Tillotts Laboratories

COL. AD1

Tillotts Laboratories, Valley Road Industrial Estate, Porters Wood, St Albans, Hertfordshire AL3 6PD



How long does ulcer disease last?

How long is a piece of string?

Zantac

RANITIDINE

For the lifetime of the disease

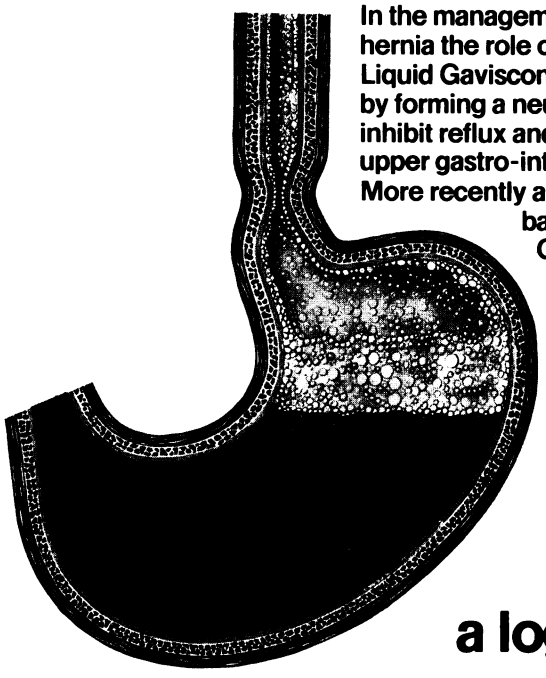
PRESCRIBING INFORMATION: INDICATIONS: DUODENAL ULCER, BENIGN GASTRIC ULCER, ULCERS ASSOCIATED WITH NON-STEROIDAL ANTI-INFLAMMATORY DRUGS (NSAIDs), REFLUX OESOPHAGITIS, CHRONIC EPISODIC DYSPEPSIA. **DOSAGE:** ADULTS: THE USUAL DOSAGE IS 150MG TWICE DAILY IN THE MORNING AND EVENING. ALTERNATIVELY, PATIENTS WITH DUODENAL ULCERATION, GASTRIC ULCERATION OR REFLUX OESOPHAGITIS MAY BE TREATED WITH A SINGLE BEDTIME DOSE OF 300MG. IN ULCERS FOLLOWING NON-STEROIDAL ANTI-INFLAMMATORY DRUG THERAPY, OR ASSOCIATED WITH CONTINUED NON-STEROIDAL ANTI-INFLAMMATORY DRUGS OR IN THE MANAGEMENT OF REFLUX OESOPHAGITIS UP TO EIGHT WEEKS' TREATMENT MAY BE NECESSARY. CHRONIC EPISODIC DYSPEPSIA: 150MG TWICE DAILY FOR SIX WEEKS; INVESTIGATE EARLY RELAPSERS 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 DYSPEPTIC SYMPTOMS. SUPERVISION OF PATIENTS WITH PEPTIC ULCERS AND ON NSAID THERAPY IS RECOMMENDED ESPECIALLY IF ELDERLY. 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 HEPATITIS. RARELY, REVERSIBLE MENTAL CONFUSION STATES, USUALLY IN VERY ILL OR ELDERLY PATIENTS. RARE CASES OF LEUCOPENIA AND THROMBOCYTOPENIA, USUALLY REVERSIBLE, AGRANULOCYTOSIS AND PANCYTOPENIA. HYPERSENSITIVITY REACTIONS, ANAPHYLACTIC SHOCK. RARE CASES OF BREAST SYMPTOMS IN MEN. AS WITH OTHER H_2-RECEPTOR ANTAGONISTS RARE CASES OF BRADYCARDIA AND A-V BLOCK (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[1]



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[1] 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®

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.

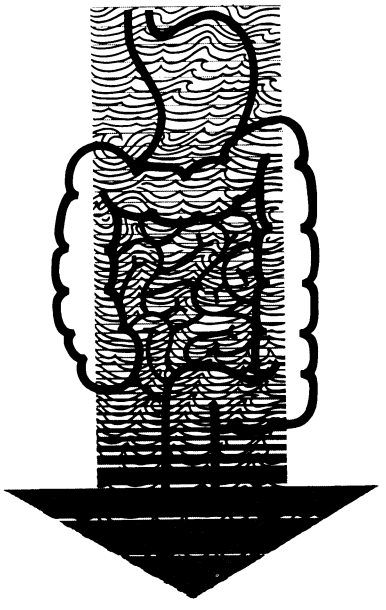
Reference

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.

THE 4-HOUR PREP

GoLYTELY™



TOTAL ORAL GI LAVAGE FOR COLONOSCOPY, BARIUM ENEMA AND SURGERY IN 4 HOURS WITHOUT DIETARY RESTRICTIONS, ENEMAS OR SUPPOSITORIES.

FAST... administration of GoLYTELY solution can begin just 4 hours prior to examination or surgery, 3 hours for drinking plus an hour to complete evacuation. Home patients can stay active for longer. Length of stay of hospitalized patients is reduced.

EXCELLENT RESULTS... clinical comparison with standard prep regimens has shown that GoLYTELY significantly improves bowel emptying and subsequent visualization.[1,2]

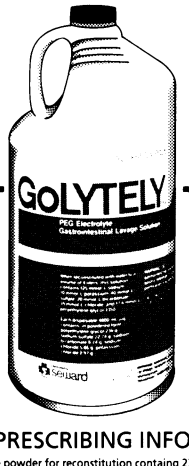
THOROUGH... with a clean bowel, the need for repeat examinations is reduced.

SAFE... because GoLYTELY produces no significant changes in fluid or electrolyte balance, it is well tolerated by virtually all patients including those who are elderly, poorly hydrated, or have impaired cardiac or renal function.

EASY TO USE... premeasured, unit-of-use packaging guarantees accurate reconstitution and guards against incorrect or inadequate usage.

PATIENTS PREFER GoLYTELY because it offers them dietary freedom, short preparation time, a more convenient routine to follow at home and is less distressing.[2,3,4]

SURGERY... GoLYTELY is indicated as a pre-operative bowel preparation for surgery.



GoLYTELY PRESCRIBING INFORMATION

DESCRIPTION: A white powder for reconstitution containg 236g polyethylene glycol 4000 BP, 22.74 g sodium sulphate BP, 6.74 g sodium bicarbonate BP, 5.86 g sodium chloride BP and 2.97 g potassium chloride BP. When dissolved in water to a volume of 4 litres. GoLYTELY is an isosmotic solution having a mildly salty taste. GoLYTELY is administered orally or via nasogastric tube.

CLINICAL PHARMACOLOGY: GoLYTELY induces a diarrhea which rapidly cleanses the bowel, usually within four hours. The osmotic activity of polyethylene glycol 4000 and the electrolyte concentration result in virtually no net absorption or excretion of ions or water. Accordingly, large volumes may be administered without significant changes in fluid or electrolyte balance.

INDICATIONS AND USAGE: GoLYTELY is indicated for bowel cleansing prior to colonoscopy, x-ray examination and surgery.

CONTRAINDICATIONS: GoLYTELY is contraindicated in patients with gastrointestinal obstruction, gastric retention, bowel perforation, toxic colitis, toxic megacolon or ileus.

WARNINGS: No additional ingredients, e.g. flavourings, should be added to the solution. GoLYTELY should be used with caution in patients with severe ulcerative colitis. ***KEEP OUT OF REACH OF CHILDREN.***

PRECAUTIONS:

General: Patients with impaired gag reflex, unconscious, or semiconscious patients, and patients prone to regurgitation or aspiration should be observed during the administration of GoLYTELY, especially if it is administered via nasogastric tube. If a patient experiences severe bloating, distention or abdominal pain, administration should be slowed or temporarily discontinued until the symptoms abate. If gastrointestinal obstruction or perforation is suspected, appropriate studies should be performed to rule out these conditions before administration of GoLYTELY.

Information for patients: GoLYTELY produces a watery stool which cleanses the bowel before examination. Prepare the solution according to the instructions on the bottle. It is more palatable if chilled. For best results, no solid food should be consumed during the 3 to 4 hour period before drinking the solution, but in no case should solid foods be eaten within 2 hours of taking GoLYTELY.

Drink 240ml (8oz) every 10 minutes. Rapid drinking of each portion is better than drinking small amounts continuously. The first bowel movement should occur approximately one hour after the start of GoLYTELY administration. You may experience some abdominal bloating and distention before the bowels start to move. If severe discomfort or distention occur, stop drinking temporarily or drink each portion at longer intervals until these symptoms disappear. Continue drinking until the water stool is clear and free of solid matter. This usually requires at least 3 litres and it is best to drink all of the solution. Any unused portion should be discarded.

Drug Interactions: Oral medication administered within one hour of the start of administration of GoLYTELY may be flushed from the gastrointestinal tract and not absorbed.

Carcinogenesis, Mutagenesis, Impairment of Fertility: Carcinogenic and reproductive studies with animals have not been performed.

Pregnancy: Animal reproduction studies have not been conducted with GoLYTELY. It is also not known whether GoLYTELY can cause fetal harm when administered to a pregnant woman or can affect reproductive capacity. GoLYTELY should be given to a pregnant woman only if clearly needed.

Pediatric Use: Safety and effectiveness in children have not been established.

ADVERSE REACTIONS: Nausea, abdominal fullness and bloating are the most common adverse reactions (occurring in up to 50% of patients) to administration of GoLYTELY. Abdominal cramps, vomiting and anal irritation occur less frequently. These adverse reactions are transient and subside rapidly. Isolated cases of urticaria, rhinorrhea and dermatitis have been reported which may represent allergic reactions.

DOSAGE AND ADMINISTRATION: The recommended dose for adults is 4 litres of GoLYTELY solution prior to gastrointestinal examination, as ingestion of this dose produces a satisfactory preparation in over 95% of patients. Ideally the patient should fast for approximately three or four hours prior to GoLYTELY administration, but in no case should solid food be given for at least two hours before the solution is given.

GoLYTELY is usually administered orally, but may be given via nasogastric tube to patients who are unwilling or unable to drink the solution. **Oral administration** is at a rate of 240ml (8oz) every 10 minutes, until 4 litres are consumed or the rectal effluent is clear. Rapid drinking of each portion is preferred to drinking small amounts continuously. **Nasogastric tube administration** is at the rate of 20-30ml per minute (1.2-1.8 litres per hour). The first bowel movement should occur approximately one hour after the start of GoLYTELY administration.

Various regimens have been used. One method is to schedule patients for examination in midmorning or later, allowing the patients three hours for drinking and an additional one hour period for complete bowel evacuation. Another method is to administer GoLYTELY on the evening before the examination, particularly if the patient is to have a barium enema.

Preparation of the solution: GoLYTELY solution is prepared by filling the container to the 4 litre mark with water and shaking vigorously several times to ensure that the ingredients are dissolved. Dissolution is facilitated by using lukewarm water. The solution is more palatable if chilled before administration. The reconstituted solution should be refrigerated and used within 48 hours. Discard any unused portion.

HOW SUPPLIED: In powdered form, for oral administration as a solution following reconstitution. Each disposable jug contains, in powdered form: 236 g polyethylene glycol 4000 BP, 22.74 g sodium sulphate BP, 6.74 g sodium bicarbonate BP, 5.86 g sodium chloride BP, and 2.97 g potassium chloride BP. When made up to 4 litres volume with water, the solution contains PEG 4000 17.6 mmol/L, sodium 125 mmol/L, sulfate 40 mmol/L, chloride 35 mmol/L, bicarbonate 20 mmol/L and potassium 10 mmol/L.

LEGAL CATEGORY: POM.

STORAGE: Store in sealed container at 59°-86°F. When reconstituted keep solution refrigerated. Use within 48 hours. Discard unused portion.

PRODUCT LICENCE NUMBER: 8653/0001

PRODUCT LICENCE HOLDER: Braintree Laboratories Inc, PO Box 361, Braintree, MA 02184, USA.

UNITED KINGDOM DISTRIBUTOR: Seward Medical Limited
131 Great Suffolk Street, London, SE1 1PP
Phone: 01 357 6817 Fax: 01 357 6563

PRICE AVAILABLE ON REQUEST

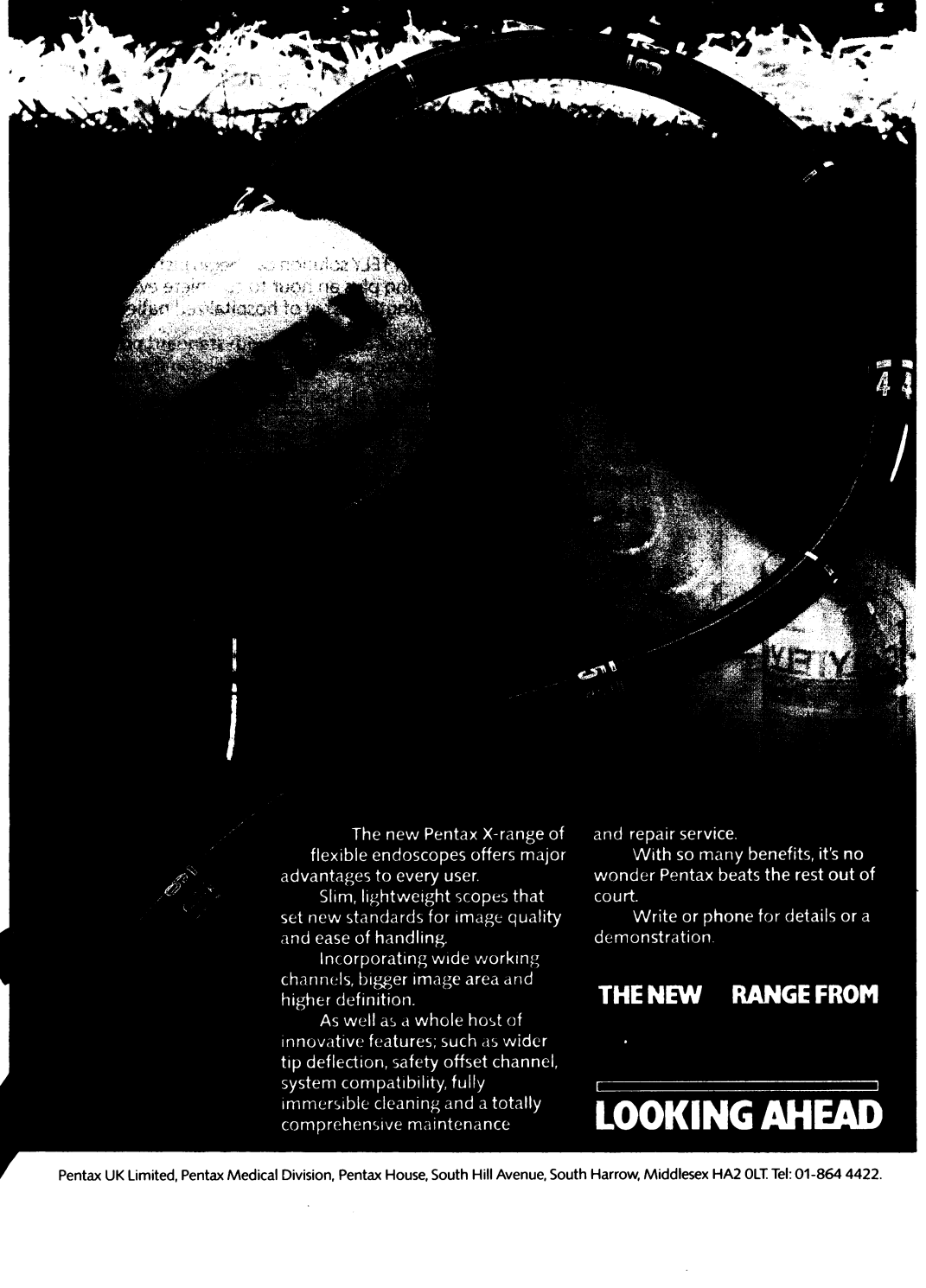
FURTHER INFORMATION IS AVAILABLE ON REQUEST

References: 1. Ernstoff JJ, et al: A randomized blinded clinical trial of a rapid colonic lavage solution (GoLYTELY) compared with standard preparation for colonoscopy and barium enema. Gastroenterology 1983; 84: 1512-1516. 2. DiPalma JA: Comparison of colon cleansing methods in preparation for colonoscopy. Gastroenterology 1984; 86: 856-860. 3. Goldman J, Reichelderfer M: Evaluation of rapid colonoscopy preparation using a new gut lavage solution. Gastrointest Endosc 1982; 28: 9-11. 4. Thomas G, Brozinsky S, Isenberg JI: Gastroenterology 1982; 82: 435-437.

LABORATORIES · INC
Braintree

Distributed by:
seward medical
Seward Medical Limited
131 Great Suffolk Street, London SE1 1PP
Telephone: 01-357 6817 Fax: 01-357 6563

ADVANTAGE PENTAX.



The new Pentax X-range of flexible endoscopes offers major advantages to every user.

Slim, lightweight scopes that set new standards for image quality and ease of handling.

Incorporating wide working channels, bigger image area and higher definition.

As well as a whole host of innovative features; such as wider tip deflection, safety offset channel, system compatibility, fully immersible cleaning and a totally comprehensive maintenance and repair service.

With so many benefits, it's no wonder Pentax beats the rest out of court.

Write or phone for details or a demonstration.

THE NEW RANGE FROM

LOOKING AHEAD

Pentax UK Limited, Pentax Medical Division, Pentax House, South Hill Avenue, South Harrow, Middlesex HA2 0LT. Tel: 01-864 4422.

NORDIC

A new cornerstone in the management of ulcerative colitis

- PENTASA enema – effective and well tolerated.
- PENTASA enema – formulation keeps active substance in contact with affected mucosa for a prolonged period.
- PENTASA enema – resulted in significantly greater frequency of remission of clinical symptoms during the first 2 weeks (c.f. prednisolone enemas).
- PENTASA enema – can be safely administered to patients who are sensitised to the sulphapyridine moiety of sulphasalazine.
- PENTASA enema – at least as effective as hydrocortisone and well tolerated.

PENTASA Mesalazine Enema ▼

Abridged prescribing information: Presentation: Unit dose plastic enema bottles containing 1 g Mesalazine in 100 ml suspension. **Uses:** Treatment of ulcerative colitis affecting the distal colon and rectum. **Dosage and Administration:** Adults: The recommended dosage is one enema at bedtime. Children: Not recommended. **Contraindications: Known sensitivity to salicylates. Precautions, Warnings, etc:** PENTASA is not recommended in patients with renal impairment. Patients with raised blood urea or proteinuria should be treated with caution. PENTASA should be used with caution during pregnancy and lactation. **Adverse reactions:** Adverse reactions including nausea, headache and abdominal pain may occur in a small proportion of patients. Mesalazine may be associated with the exacerbation of the symptoms of colitis in patients who have previously had this problem with sulphasalazine. **Legal Category:** POM. **Package Quantity:** Cartons containing seven individually foil-wrapped 100 ml enemas. **Basic NHS price:** £19.45 per carton. **Product Licence:** PL 3194/0027.

Full prescribing information is available on request:

NORDIC PHARMACEUTICALS LTD.,
11 Mount Rd, Feltham, Middlesex TW13 6JG. Tel: 01-898 8396.