# I've got the power

**PRESCRIBING INFORMATION: Indications** Duodenal ulcer, benign gastric ulcer, ulcers associated with non-steroidal anti-inflammatory drugs (NSAIDs), prevention of NSAID associated duodenal ulcer, oesophageal reflux disease, severe oesophagitis, chronic episodic dyspepsia. **Dosage** *Adults:* Duodenal ulceration and gastric ulceration: A single 300mg dose at bedtime or 150mg twice daily in the morning and evening for four weeks. Alternatively, in duodenal ulcers, 300mg in the morning and evening for four weeks to achieve optimal healing. Continued maintenance treatment of 150mg at bedtime is recommended for patients with a history of recurrent ulceration. Ulcers following non-steroidal anti-inflammatory drug therapy or associated with continued non-steroidal anti-inflammatory drugs: 150mg twice daily for up to eight weeks. Prevention of NSAID associated duodenal ulcer: 150mg twice daily concomitantly with NSAID therapy. Chronic episodic dyspepsia: 150mg twice daily for six weeks, investigate early relapsers and non-responders. Oesophageal reflux disease: 300mg at bedtime or 150mg twice daily for up to eight weeks. Moderate to severe oesophagitis: 150mg four times daily for up to twelve weeks (see data sheet for full dosage instructions). *Children:* Oral dose for peptic ulcer: 2mg/kg to 4mg/kg, twice daily to a maximum of 300mg per day. **Contra-indications** Patients with known hypersensitivity to ranitidine. **Precautions** In patients in whom sodium restriction is indicated, care should be taken when administering sodium-containing Effervescent Tablets. Exclude the possibility of malignancy in gastric ulcer before instituting therapy, especially in middle-aged patients with new or recently changed dyspeptic symptoms. Regular supervision of patients taking NSAIDs concomitantly with Zantac is recommended, especially if elderly. Reduce dosage in presence of severe renal failure (see data sheet). Avoid in patients with history of porphyria. Effervescent Tablets contain aspartame, use with caution in patients with phenylketonuria. Like other drugs, use during pregnancy and lactation only if strictly necessary. **Side effects** Headache, dizziness, skin rash, occasional hepatitis, rarely arthralgia, myalgia. 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, A-V block and asystole (see data sheet). **Presentations** Zantac 150 Tablets each containing 150mg ranitidine HC*l* (Product licence number 0004/0279, 60 tablets £29·76); Zantac 300 Tablets each containing 300mg ranitidine HC*l* (Product licence number 0004/0302, 30 tablets £27·43); Zantac Dispersible Tablets each containing 150mg ranitidine HC*l* (Product licence number 0004/0298, 60 tablets £31·25); Zantac Effervescent Tablets each containing 150mg ranitidine HC*l* and 14·3mEq sodium (Product licence number 0004/0392, 60 tablets £31·25); Zantac Effervescent Tablets each containing 300mg ranitidine HC*l* and 20·8mEq sodium (Product licence number 0004/0393, 30 tablets £31·25); Zantac Syrup each 10ml dose containing 150mg ranitidine HC*l* (Product licence number 0004/0310, 300ml bottle £22·32). **Product licence holder** Glaxo Operations UK Limited, Greenford, Middlesex UB6 0HE. POM Zantac is a Glaxo trademark. Further information is available on request from: Glaxo Laboratories Limited, Stockley Park West, Uxbridge, Middlesex UB11 1BT. Telephone: 081-990 9444. February 1993.

Glaxo

Zantac
RANITIDINE HCl

**PRESCRIBING INFORMATION Properties:** Prepulsid is the first of a new class of drug capable of correcting abnormal motility throughout the GI tract. **Indications:** GASTRO-OESOPHAGEAL REFLUX DISEASE: Treatment of the symptoms such as heartburn, regurgitation and healing of mucosal lesions. Prepulsid may also be used for the maintenance treatment of reflux oesophagitis. DYSPEPSIA: Treatment of symptoms such as epigastric pain, early satiety, bloating, where organic disease has been excluded. IMPAIRED GASTRIC EMPTYING: Relief of the symptoms such as epigastric pain, early satiety, anorexia, bloating and nausea associated with delayed gastric emptying secondary to systemic sclerosis and autonomic neuropathy of diabetes. **Dosage and Administration:** ADULTS AND CHILDREN TWELVE YEARS AND OVER: Take 15 minutes before food. **Gastro-oesophageal reflux:** 10mg Prepulsid tds. Night time symptoms can be treated with an extra 10mg dose at bedtime. A 12 week course is recommended for healing oesophagitis. Patients may continue long term maintenance therapy at a dose of 20mg once daily (at bedtime) or alternatively, 10mg twice daily (before breakfast and at bedtime). In patients whose lesions were initially very severe, this dose can be increased to 20mg twice daily. **Dyspepsia:** 10mg Prepulsid tds. The usual course of treatment is 4 weeks. **Impaired gastric emptying:** 10mg Prepulsid tds or qds. An initial course of 6 weeks is recommended but longer treatment may be required. **Use in children:** Not recommended in children under 12. **Use in elderly:** Dose as for adults, but monitor response. **Abnormal renal or liver function:** Initially the dose should be halved. **Contra-indications, warnings etc. Contra-indications:** Contra-indicated in pregnancy and in patients in whom gastrointestinal stimulation might be dangerous, e.g. gastrointestinal haemorrhage, mechanical obstruction or perforation. **Warnings:** It is not advisable to take Prepulsid whilst breastfeeding. **Drug Interactions:** The absorption from the stomach of concomitantly administered drugs may be diminished, whereas absorption of drugs from small intestine may be accelerated. For drugs that require careful individual titration, such as anticonvulsants, it may be useful to measure their plasma concentration. In patients receiving anticoagulants, the prothrombin time may be increased. Prepulsid does not affect psychomotor performance nor does it induce sedation or drowsiness. However, the sedative effects of benzodiazepines and alcohol may be accelerated when administered concomitantly with Prepulsid. The effects of Prepulsid are antagonized by anticholinergic drugs. **Side-effects:** Abdominal cramps, borborygmi and loose stools (diarrhoea) are mainly transient and rarely require discontinuation of treatment. Should severe abdominal cramps occur with single administrations of 20mg Prepulsid, it is recommended that the dose is halved. Infrequent side-effects include headache and lightheadedness. Reports of convulsions and extrapyramidal effects have been received. Exceptionally, reversible liver function abnormalities have been reported – causal relationship not established. **Overdosage:** Treatment should include activated charcoal, close observation and general supportive measures. **Presentation and packaging:** Prepulsid Tablets; white, biconvex, scored tablets, engraved CIS/10 on one side and Janssen on the reverse in packs of 120. Each tablet contains 10mg of cisapride. The tablets also contain lactose. Prepulsid Suspension; white, cherry-flavoured suspension containing cisapride 1mg/ml, 500ml bottle. The suspension also contains sucrose, methyl and propyl parabens. **Pharmaceutical Precautions:** Prepulsid Tablets; store at room temperature in a dry place and protect from light. Prepulsid Suspension; store at room temperature (below 25°C). **Product Licence Numbers:** Prepulsid 10mg tablets PL 0242/0136. Prepulsid suspension 500ml PL 0242/0157. **Basic NHS Cost:** 120 tablets – £38.57; 500ml bottle suspension – £16.00. **Legal Category:** POM. **Date of last revision:** November 1992. (Correct at time of printing). **Reference:** 1. Blum AL *et al.* 1991. (Data on file.)

Further information is available from

**JANSSEN**
**PHARMACEUTICAL LTD**
Grove, Wantage, Oxon, OX12 0DQ
TM = Trademark © JPL/268/92

NOW APPROVED FOR MAINTENANCE

# THE SQUEEZE THAT RELIEVES

## WHEN ANTACIDS HAVE FAILED

New maintenance Prepulsid, taken once daily at night, effectively reduces recurrence of reflux oesophagitis symptoms, significantly delays relapse, and provides long term relief.[1]

# PREPULSID™

ONCE DAILY NEW IN MAINTENANCE 20mg NOCTE

**cisapride**

PROMOTES AND MAINTAINS GASTRO-OESOPHAGEAL

**Losec Capsules Abbreviated Prescribing Information**

**Presentation:** Losec Capsules containing 20mg omeprazole. **Uses:** Treatment of reflux oesophagitis. Symptom relief is rapid, and the majority of patients are healed after 4 weeks. Treatment of duodenal and gastric ulcers, including those complicating NSAID therapy. Zollinger-Ellison syndrome. **Dosage & administration:** *Adults (including elderly):* Reflux oesophagitis: 20mg once daily, given for 4 weeks. For those patients not fully healed after the initial course, healing usually occurs during a further 4-8 weeks treatment. Losec has also been used in a dose of 40mg once daily in patients with reflux oesophagitis refractory to other therapy. Healing usually occurred within 8 weeks. Patients can be continued at a dosage of 20mg once daily. *Duodenal and benign gastric ulcers:* 20mg once daily. The majority of patients with duodenal ulcer are healed after 4 weeks. The majority of patients with benign gastric ulcer are healed after 8 weeks. In severe cases, the dose may be increased to 40mg Losec once daily. Long-term therapy with Losec in the treatment of gastric and duodenal ulcers is not currently recommended. *Zollinger-Ellison syndrome:* 60mg once daily. The dosage should be adjusted individually and treatment continued as long as clinically indicated. More than 90% of patients with severe disease and inadequate response to other therapies have been effectively controlled on doses of 20 - 120mg daily. With doses above 80mg, give 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:** 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. All the following adverse reactions have usually been mild and transient, and there has been no consistent relationship with treatment: Nausea, headache, diarrhoea, constipation, flatulence, skin rashes, urticaria, pruritus, dizziness, somnolence, insomnia, vertigo, malaise, paraesthesia have occurred rarely. In isolated cases the following have been reported: muscular weakness, arthralgia, myalgia, blurred vision, dysgeusia, peripheral oedema, gynaecomastia, leucopenia, thrombocytopenia, GI candidiasis and stomatitis. Reversible mental confusion, agitation, depression and hallucinations have occurred predominantly in severely ill patients. Increases in liver enzymes with or without increases in bilirubin values have been observed. 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. No evidence of an interaction with theophylline, propranolol, metoprolol, lidocaine, quinidine, amoxycillin or antacids. The absorption of Losec is not affected by alcohol or food. **Animal Toxicology:** Gastric ECL-cell hyperplasia and carcinoids, have been observed in life-long studies in rats treated with omeprazole or subjected to partial fundectomy. These changes are the result of sustained hypergastrinaemia secondary to acid inhibition, and not from a direct effect of any individual drug. No treatment related mucosal changes have been observed in patients treated continuously with omeprazole for periods up to 5 years. **Pharmaceutical precautions:** Use within three months of opening. Replace cap firmly after use. Dispense in original container. **Legal category:** POM **Package quantities:** Bottles of 5 capsules, £6.49; Bottles of 28 capsules, £36.36 **Product licence no:** PL0017 0238 **Product licence holder:** Astra Pharmaceuticals Ltd., Home Park, Kings Langley, Herts WD4 8DH.

**References**

1. Holt S & Howden CW. Dig Dis & Sci 1991; **36** (4): 385-93. 2. Sandmark S et al. Scand J Gastroenterol 1988; **23**: 625-32. 3. McFarland RJ et al. Gastroenterol 1990; 98: 278-83. 4. Bate CM et al. Gut 1990; **31**: 968-72.

**ASTRA**

For further information contact the product licence holder: Astra Pharmaceuticals Ltd., Home Park, Kings Langley, Herts WD4 8DH. Telephone: (0923) 266191.

*Losec compared with conventional starting courses of $H_2$-antagonists in reflux oesophagitis, duodenal and gastric ulcers.



**Date of Preparation:** January 1993

# SETS THE STANDARD

FROM THE START
IN REFLUX OESOPHAGITIS,
DUODENAL AND GASTRIC ULCERS

*One 20mg capsule daily*

**LOSEC®**

omeprazole-Astra

***Rapid relief  Accelerated healing****[1-4]

# 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®**

mebeverine

**loosens the grip of IBS**

**Presentation.** 1. White round sugar-coated tablets with no superficial markings each containing 135mg mebeverine hydrochloride. Available in packs of 100. Basic NHS price £8.35. 2. 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 (including the elderly) and children ten years and over: one tablet three times a day, preferably 20 minutes before meals. Suspension: Adults (including the elderly) 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 teratogenic effects. However, the usual precautions concerning the administration of any drug during pregnancy should he observed. **Product Licence Number:** Tablets: 0512/0044. Suspension: 0512/0061. **Legal Category:** POM. ® Registered Trade Mark.
Further information is available from: Duphar Laboratories Limited, Gaters Hill, West End, Southampton, SO3 3JD. Tel: 0703 472281.
Date of last review January 1993

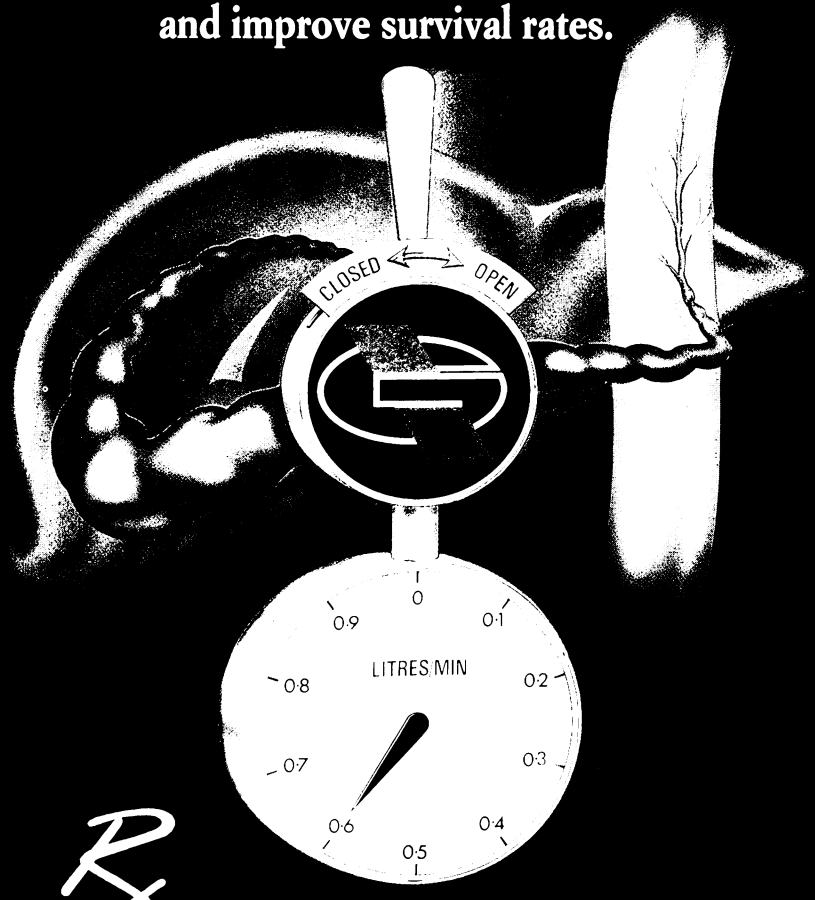
**duphar**

**A member of the Solvay Group.**

COL/HOSP/JA/JAN 93

# Bleeding Oesophageal Varices

**To reduce portal flow, lower variceal pressure and improve survival rates.**

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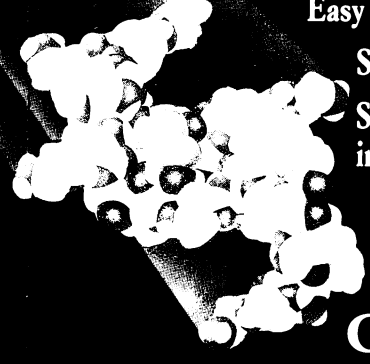
# GLYPRESSIN

**Immediately controls bleeding[1]**

**Easy to use in any emergency department**

**Single iv bolus injection[2]**

**Significant decrease in hospital mortality with improvement in one month survival rates[1]**



## GLYPRESSIN
**(terlipressin)**

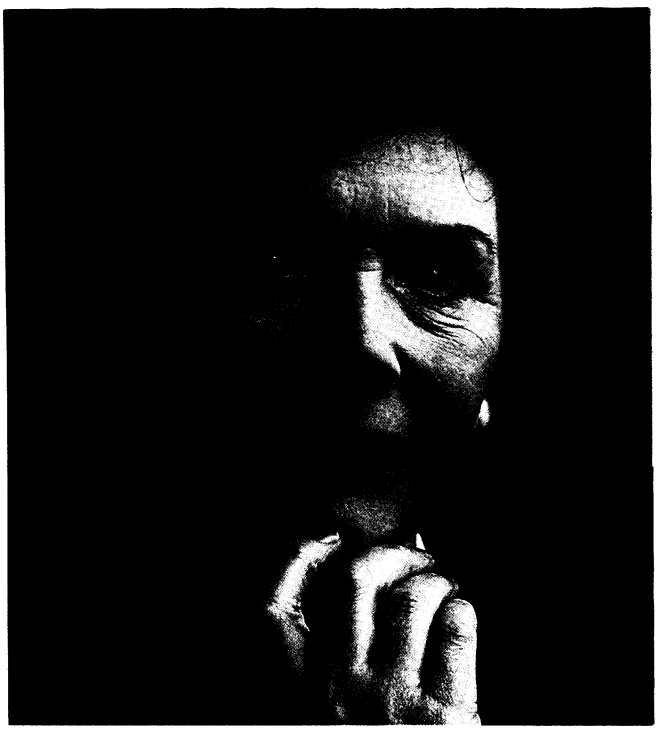
**"The preferred treatment for bleeding oesophageal varices"[1]**

**Abridged Prescribing Information**

**Name of Product:** GLYPRESSIN Terlipressin (INN/BAN) **Presentation:** GLYPRESSIN 1 mg. Freeze dried powder for injection. Supplied with 5ml ampoule of sterile diluent. **Indications:** GLYPRESSIN is indicated in the treatment of bleeding oesophageal varices. **Dosage and Administration:** In acute variceal bleeding, 2mg GLYPRESSIN should be administered by intravenous bolus injection followed by 1 or 2 mg every 4 to 6 hours until bleeding is controlled, up to a maximum of 72 hours. **Contraindications:** Due to its effect on smooth muscle GLYPRESSIN is contraindicated in pregnancy. **Warnings and Precautions:** The pressor and antidiuretic effects of GLYPRESSIN are reduced (compared with lysine or arginine vasopressin) but the product should still be used with great caution in patients with hypertension, advanced atherosclerosis, cardiac dysrhythmias or coronary insufficiency. Constant monitoring of blood pressure, serum sodium, serum potassium and fluid balance are essential. The possibility of immunological sensitisation cannot be excluded. **Side effects:** Because the severity of pressor and antidiuretic activities are reduced, few side effects have been recorded. Infrequent effects include: abdominal cramps, headache, transient blanching, increase in arterial blood pressure. **Pharmaceutical precautions:** Freeze dried powder and the diluent may be stored at room temperature, protected from direct sunlight. Each 1 mg vial of GLYPRESSIN should be reconstituted with 5 ml diluent supplied and used immediately. **Legal category:** Prescription Only Medicine. **Package quantity:** GLYPRESSIN Terlipressin 1 mg freeze dried powder: single use vial. Diluent 5 ml ampoule supplied with each vial. **Product Licence:** UK Product Licence number:3194/0018 **UK Product Licence holder:** Ferring Pharmaceuticals Ltd, Greville House, Hatton Road, FELTHAM, Middlesex. TW14 9PX. **Date of Preparation:** January 1993. GLYPRESSIN is a Trade Mark.

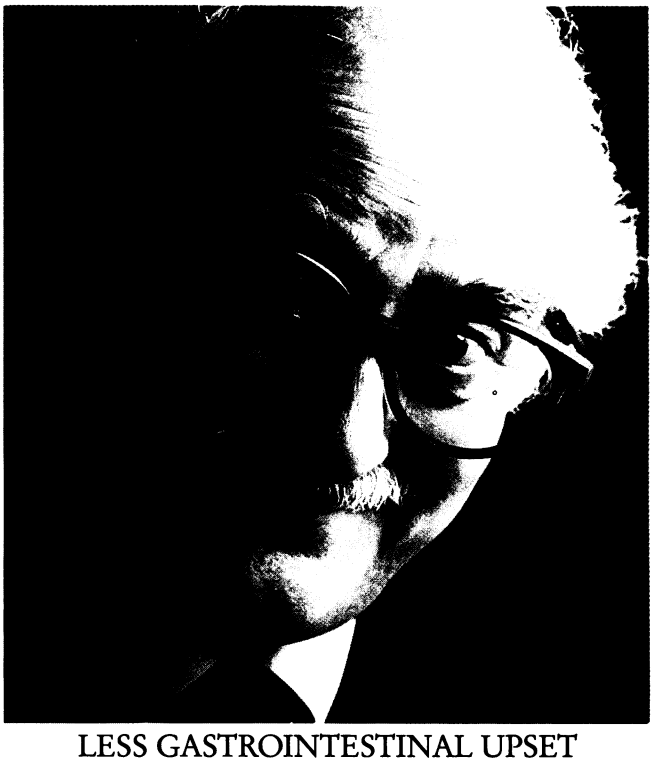
**References:- 1.** Söderlund C et al Scand. J Gastroenterol 1990; 25: 622-630. **2.** Lin HC et al J Hepatology 1990; 10: 370-374.

**Further Information is available from:-** Ferring AB, Box 30561, S-200 62 MALMÖ, Sweden.



LESS HEADACHE THAN SULPHASALAZINE[2]

NO SULPHAPYRIDINE-INDUCED INFERTILITY[3]



LESS GASTROINTESTINAL UPSET THAN SULPHASALAZINE[2]

LESS HAEMATOLOGICAL COMPLICATIONS THAN SULPHASALAZINE[2]

**Prescribing Information: Presentation:** 'Asacol' Tablets, PL 0002/0173, each containing 400 mg mesalazine (5-aminosalicylic acid) coated with a pH-dependent acrylic based resin (Eudragit S) formulated to release the active ingredient in the terminal ileum and colon. Blister packs of 120 (12 × 10), £34.30. 'Asacol' Suppositories 250 mg, PL 0002/0158, each containing 250 mg mesalazine. 20, £6.50. 'Asacol' Suppositories 500 mg, PL 0002/0195, each containing 500 mg mesalazine, 10, £6.50. **Uses:** Treatment of mild to moderate acute exacerbations of ulcerative colitis. Maintenance of remission of ulcerative colitis. Suppositories particularly appropriate for distal disease. **Dosage and administration: Tablets:** *Adults: Acute disease:* 6 tablets a day, in divided doses, with concomitant corticosteroid therapy where clinically indicated. *Maintenance therapy:* 3 to 6 tablets a day, in divided doses. *Children:* No dosage recommendation. **Suppositories:** *Adults: 250 mg strength:* 3 to 6 a day, in divided doses, with the last dose at bedtime. *500 mg strength:* A maximum of 3 a day, in divided doses, with the last dose at bedtime. *Children:* No dosage recommendation. **Contra-indications:** A history of sensitivity to salicylates. Severe renal impairment (GFR <20 ml/min). Children under 2 years of age. **Precautions:** Best

# WHY THE MAJORITY OF SPECIALISTS USE 'ASACOL' FIRST

A survey of 50 BSG consultant members found that 60% of them would select 'Asacol' Tablets as their first-line maintenance therapy for ulcerative colitis, on the basis of tolerance, efficacy and previous experience.[1]

'Asacol' Tablets are equally as effective as sulphasalazine in maintenance treatment but are significantly better tolerated, and can avoid the side effects associated with sulphapyridine.[2] Because of their superior tolerability, 'Asacol' Tablets can be used in higher doses to gain stabilisation of active disease,[4,5] and have been shown to provide greater symptomatic relief than sulphasalazine.[4]

When patients have been transferred to 'Asacol' Tablets the majority of them have said they prefer them to their previous therapy and would be happy to take 'Asacol' again.[6]

Four very good reasons to use 'Asacol' first.

**ASACOL**

**mesalazine***
**(5-aminosalicylic acid) 400mg**

## COLITIS CONTROL WITHOUT SULPHAPYRIDINE

avoided in patients with established renal impairment but, if necessary, use with caution. Avoid during pregnancy and lactation. Caution in elderly and only where renal function is normal. Do not give tablets with lactulose or similar preparations which lower stool pH. **Adverse reactions:** Nausea, diarrhoea, abdominal pain, headache. Exacerbation of symptoms of colitis. Reports of leucopenia, neutropenia, thrombocytopenia, pancreatitis, hepatitis, interstitial nephritis, nephrotic syndrome, renal failure with oral treatment usually reversible. Suspect nephrotoxicity in patients developing renal failure. **Legal category:** POM. 24.4.91.

**References**
**1.** Cole AT *et al.* Gut 1990;31:A1205. **2.** Riley SA *et al.* Gastroenterology 1988;94:1383-9. **3.** Riley SA *et al.* Gut 1987;28:1008-12. **4.** Riley SA *et al.* Gut 1988;29:669-674. **5.** Sninsky CA *et al.* Ann Intern Med 1991; 115:350-5. **6.** Pera A *et al.* Ital J Gastroenterol 1991;23(9):647.

Smith Kline & French Laboratories, Welwyn Garden City, Hertfordshire AL7 1EY.  *Mesalazine is the British approved name of 5-aminosalicylic acid.

SK&F

0193AS:AD/2/116

# PREDFOAM

Unique metered dose aerosol – providing dosage uniformity[1]

Foam formulation – easier to retain than liquid preparations and preferred by patients[2,3]

Proven clinical efficacy[4,5]

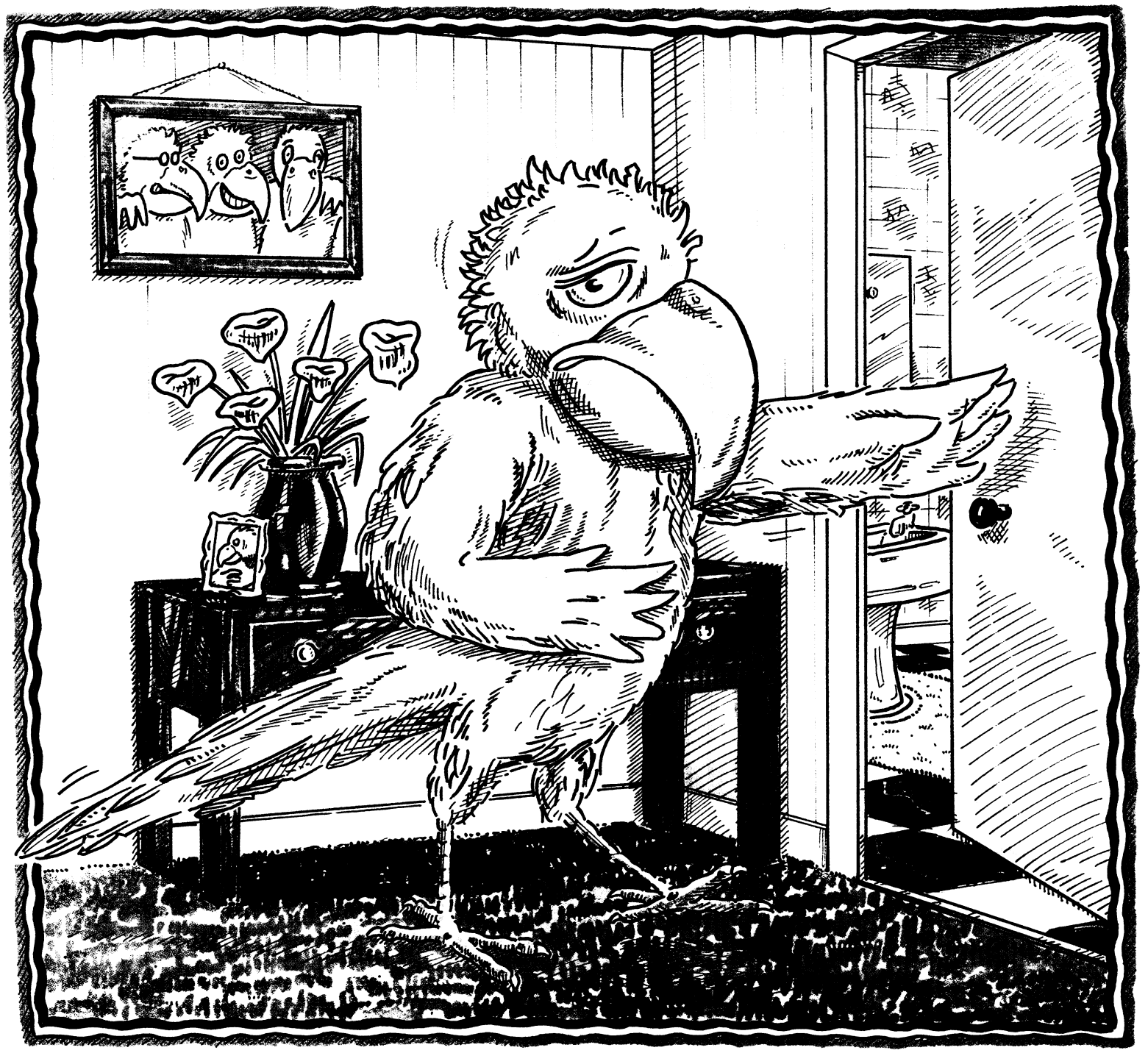
Easy to use disposable applicators – clean and convenient for patients at home or at work

A complete local management system for maximum patient compliance

**Prescribing Information**
**Predfoam** Prednisolone metasulphobenzoate sodium equivalent to 20mg prednisolone per metered dose **Uses:** Treatment of proctitis and ulcerative colitis. **Dosage and administration:** Adults and elderly patients: 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. Use should be discontinued at the discretion of the physician once the disease is stable and under control. Children: Not recommended. **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. **Precautions:** The product should be used with extreme caution in the presence of severe ulcerative colitis. The possible occurrence of masking of local or systemic infection should be borne in mind when using this product. For rectal use only. **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. **Use in pregnancy and lactation:** 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:** Overdosage by this route is unlikely. **Pharmaceutical Precautions:** Pressurised container. Protect from sunlight and do not expose to temperatures above 50°C. Do not pierce or burn even after use. Shake before use. **Product Licence Number** 0108/0101. **Product Authorisation Number** 100/40/1.

**References**
1. Data on file, Pharmax. 2. K.W. Somerville, et al (1985) BMJ, 291-866. 3. W.S.J. Ruddell, et al (1980) Gut, 885-889. 4. C. Rodrigues, et al (1987). The Lancet, i, 1497. 5. Data on file, Pharmax.

**PHARMAX LIMITED**
Bourne Road, Bexley, Kent DA5 1NX.
Telephone: 0322 550550.



# "Sorry to bring it up, but I need some Motilium"

**If you are called on to deal with acute nausea and vomiting remember Motilium and avoid a flap. Clinical trials have shown Motilium to be more effective than metoclopramide[1,2] and unlikely to cause central side-effects[3,4,5] because it does not readily cross the blood-brain barrier.[6] Motilium: it will be a feather in your cap.**

# Motilium®

**domperidone**

## effective relief of acute nausea and vomiting — whatever the cause

**Prescribing information Uses:** *Adults (including elderly):* The acute treatment of nausea and vomiting of any aetiology, and for up to 12 weeks treatment of nausea and vomiting due to L-dopa and bromocriptine. Not recommended for chronic use nor, routinely, for prophylaxis of post-operative vomiting. *Children:* Only for nausea and vomiting following cancer chemotherapy or irradiation. **Presentation:** *Motilium tablets (domperidone 10mg):* Cartons of 30 and 100 tablets in blister strips of 10. Basic NHS cost 30 tablets: £2.52, 100 tablets: £8.42. PL0071/0287. *Motilium suspension (domperidone 1mg ml):* Bottles of 200ml. Basic NHS cost of 200ml: £1.85. PL0071/0292. *Motilium suppositories (domperidone 30mg):* Cartons of 10 in blister strips of 5. Basic NHS cost 10 suppositories: £2.72. PL0071/0290. **Dosage:** Route, dose and frequency of dosaging should be adjusted according to severity and duration of symptoms. *Adults (including elderly):* Tablets or suspension: 10-20mg at 4-8 hourly intervals. Suppositories: 1 or 2 at 4-8 hourly intervals. *Children:* Suspension: 0.2-0.4mg/kg at 4-8 hourly intervals. Suppositories: for children aged 2-12 years, 1-4 daily according to body weight (see Data Sheet). **Contra-indications, Warnings, etc.:** No specific contra-indications. Safety of Motilium in pregnancy has not yet been established, therefore it should be avoided in those who are pregnant. **Side-effects:** In common with other dopamine antagonists Motilium produces a rise in serum prolactin which may be associated with galactorrhoea, and less frequently, gynaecomastia. Domperidone does not readily cross the normally functioning blood-brain barrier. However, acute extrapyramidal dystonic reactions have been reported with Motilium.

**References:** 1. Moriga M, *Roy. Soc. Med. Int. Cong. Symp. Ser.* 1981; **36**: 77-79. 2. De Loose F, *Pharmatherapeutica* 1979; **2** (3): 140-146. 3. Van Ganse W, *Curr. Ther. Res.* 1978; **23** (6): 695-701. 4. Van Outryve M *et al., Postgrad. Med. J.* 1979; **55** (Suppl. 1): 33-35. 5. Van de Mierop L *et al., Digestion* 1979; **19**: 244-250. 6. Laduron PM & Leysen JE, *Biochem. Pharmacol.* 1979; **28**: 2161-2165. Motilium is a registered trade mark. Further information available from: Sanofi Winthrop Limited, 1 Onslow Street, Guildford, Surrey GU1 4YS.

sanofi WINTHROP

# THE QUALITIES OF LEADERSHIP

## Experience

Unique among foam treatments, Colifoam has over 12 years of proven efficacy and safety in clinical practice.

## Trust

Equally as effective as steroid enemas,[1,2] Colifoam is well documented and is the most prescribed topical treatment[3] for ulcerative colitis.

## Confidence

Colifoam's simplicity and effectiveness has transformed the lives of thousands of patients, enabling them to pursue active social and working lives.[1]

**COLIFOAM**
**10% Hydrocortisone acetate foam.**

The leading topical treatment for 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, Broadwater Road, Welwyn Garden City, Herts. AL7 3SP.

# CA 72-4™

## SERUM TUMOR MARKER ASSAY

# FOR GASTRIC CANCER

New clinical evidence supports the value of the CA 72-4 assay as an important aid in monitoring and detecting recurrence of patients with gastric cancer.[1,2]

Studies have also confirmed the superior clinical utility of the CA 72-4 assay over either CEA or the CA 19-9™ assay. Additionally, the CA 72-4 assay has a 99% specificity with twice the sensitivity of CEA.[1]

The CA 72-4 serum tumor marker assay. New evidence, new insight, new potential.

**CA 72-4™**
**Serum Tumor Marker Assay**

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1 Guadagni F, Roselli M, Amato T, et al: CA 72-4 measurement of tumor-associated glycoprotein 72 (TAG 72) as a serum marker in the management of gastric carcinoma. Cancer Res 52:1222-1227, 1992.
2 Gero EG, Colcher D, Ferroni P, et al: CA 72-4 radioimmunoassay for the detection of the TAG-72 carcinoma-associated antigen in serum of patients. J Clin Lab Anal 3:360-369, 1989.


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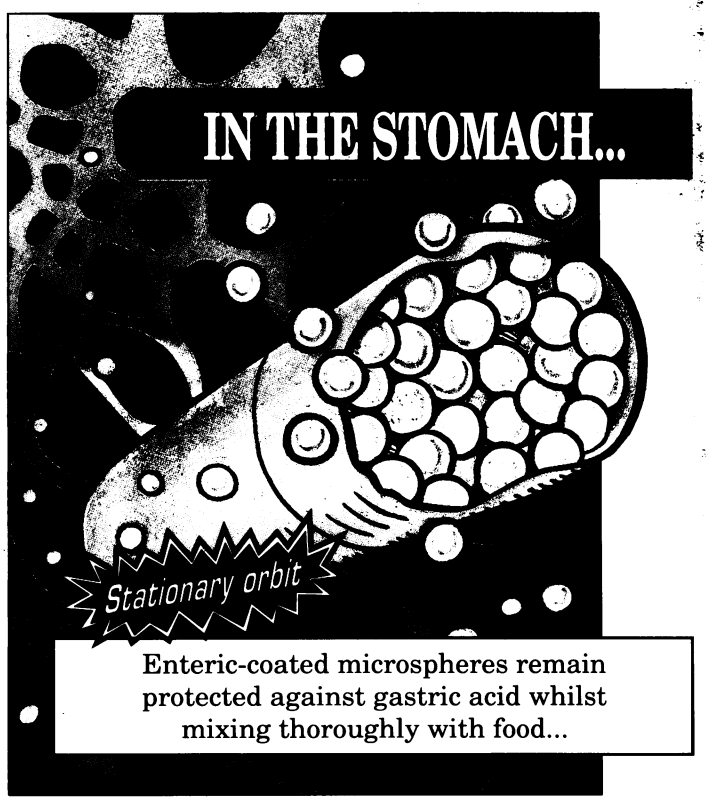


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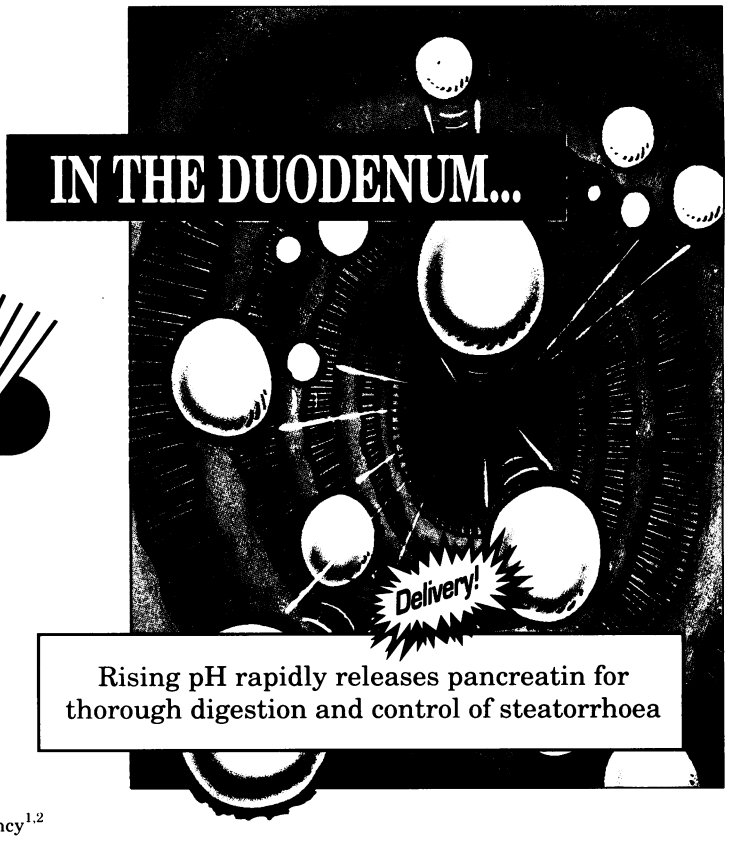


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**References**
1. Stead R J et al. *Thorax* 1987; **42**: 533-37
2. Beverley D W et al. *Arch Dis Child* 1987; **62**: 564-68

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