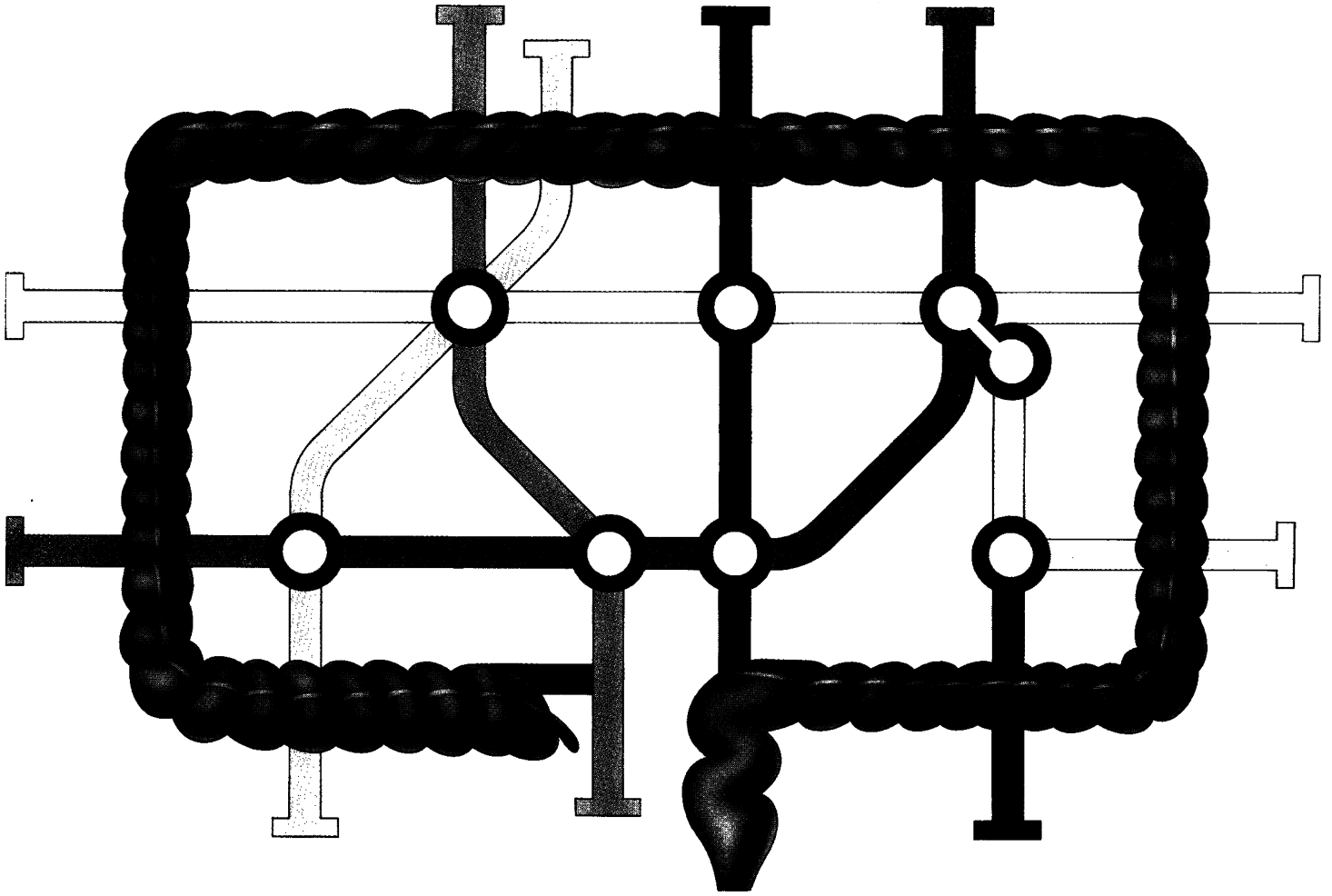


COLIFOAM

10% hydrocortisone acetate

FIRST CLASS TREATMENT WHICH TRAVELS TO WORK

- Colifoam is highly effective for distal ulcerative colitis.[1]
- The retrograde spread of Colifoam increases with the extent of disease.[2]
- Colifoam is easier to retain than liquid enemas and causes less interference with social, sexual and occupational activities.[1,3]

PRESCRIBED WITH CONFIDENCE FOR OVER 20 YEARS.

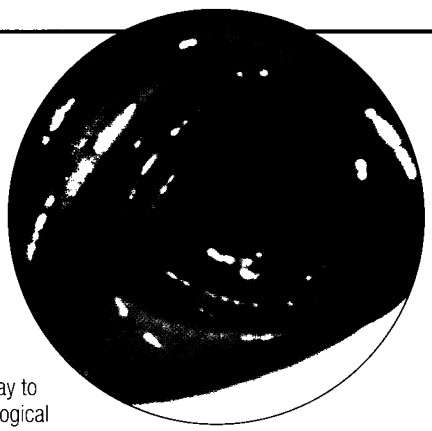
COLIFOAM

PRESCRIBING INFORMATION: Presentation: White odourless aerosol containing hydrocortisone acetate PhEur 10% w/w. **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. Although uncommon at this dosage, local irritation may occur. **Pharmaceutical precautions:** Pressurised container containing flammable propellant. Protect from sunlight and do not expose to temperatures above 50°C. Keep away from sources of ignition. Do not pierce or burn even after use. Do not refrigerate, store below 25°C. Keep out of reach of children. For external use only. **Legal category:** POM. **Package quantity & basic NHS cost:** 20.8g canister plus applicator, £7.07. Provides approximately 14 doses. **Product Licence no:** 0036/0021. **References:** 1. Somerville KW *et al.* BMJ 1985;291:866. 2. Farthing MJG *et al.* BMJ 1979;2:822-824. 3. Ruddell WSJ *et al.* Gut 1980;21:885-889. Further information is available on request from Stafford-Miller Ltd., Broadwater Road, Welwyn Garden City, Herts. AL7 3SP. **Code:** DO2665.

FOR EFFECTIVE BOWEL CLEANSING

NOW AVAILABLE IN THE UK

Trials show nothing comes cleaner[1,2] than Phospho-soda



"Phospho-soda was graded as 'excellent' or 'good' in 86% of 21 cases for the quality of mechanical bowel preparation, compared with 53% of 19 cases for sodium picosulphate"

"Overall, endoscopists scored sodium phosphate as 'excellent' or 'good' in 90% vs. 68% after the polyethylene glycol lavage."

Fleet Phospho-soda gives you a thoroughly effective way to clean the colon before colonoscopy examination, radiological procedures or surgery.

Fleet Phospho-soda is an oral saline laxative, increasing fluid accumulation in the lumen by osmosis to give bowel movements in 1/2-6 hours.

Under clinical conditions, not only did Fleet Phospho-soda outperform sodium picosulphate in bowel cleansing, it was also associated with less abdominal pain in the patients taking it. In addition, with a total dosage of only 90ml, patients found it easier to complete the course when compared with other bowel cleansing preparations.

The trials tell the story again and again – when you require a really clean bowel for medical procedures, you want nothing less than Fleet Phospho-soda.

Fleet®
Phospho-soda®
Oral Solution For Bowel Cleansing

scribing Information:
ientation: Two polyethylene bottles, each containing 45ml of a clear, colourless, ginger-on flavoured oral solution, with the equivalent of 24.4g (54.3% w/v) Sodium drogen Phosphate Dihydrate Ph Eur and 10.8g (24.0% w/v) Disodium Phosphate ecahydrate Ph Eur per 45ml. Fleet Phospho-soda is sugar free.
s: As a purgative for bowel cleansing in preparation for surgery or preparing the n for x-ray or endoscopic examination.
age and Administration: Adults only: Two doses of Fleet Phospho-soda are ired to be taken 12 hours apart. Refer to Patient Information Leaflet for full dosage uctions.
ake, dilute one bottle (45ml) of Fleet Phospho-soda in half a glass (120ml) of cold er. Follow with a further full glass (240ml) of water.
tra-indications, Warnings, etc: Contra-indicated in patients with known or pected gastrointestinal obstruction or ileus or in patients with congestive heart ure, Hirschsprung's Disease or congenital megacolon. Do not use when nausea, iiting or abdominal pain is present, unless directed by a physician. Use with caution atients with impaired renal function, heart disease, colostomy or on a low salt diet ıyperphosphataemia, hypocalcaemia, hypernatraemic dehydration and acidosis may occur. Patients should be warned to expect frequent, liquid stools.
Interactions: Use with caution in patients taking calcium channel blockers, diuretics, lithium treatment or other medications that might affect electrolyte levels as hyper-phosphataemia, hypocalcaemia, hypernatraemic dehydration and acidosis may occur.
Pregnancy and Lactation: Use under medical supervision only.
Pharmaceutical Precautions: Store below 25°C. Do not refrigerate.
Legal Category: P.
Package Quantities: Two single dose bottles each containing 45ml of solution in a single carton.
Basic NHS Price: £4.79.
Product Licence Number: 0083/0044.
Product Licence Holder: E.C. De Witt & Co. Ltd., Tudor Road, Manor Park. Runcorn. Cheshire, WA7 1SZ.
Date of Preparation: January 1997.

References: 1. Data on file, E.C. De Witt & Co. Ltd. 1995. **2.** Cohen S.M. *et al.*, Prospective, Randomised, Endoscopic-blinded Trial comparing Precolonoscopy Bowel Cleansing Methods. Dis. Colon Rectum, July 1994, 37, No.7, 689-696.

SEND NOW FOR YOUR FREE FLEET PHOSPHO-SODA FACT PACK

Simply complete and cut out the coupon and return it to: The Marketing Department E.C. De Witt & Co. Ltd., FREEPOST AWA1476, Runcorn, Cheshire WA7 1BR.

NAME.....

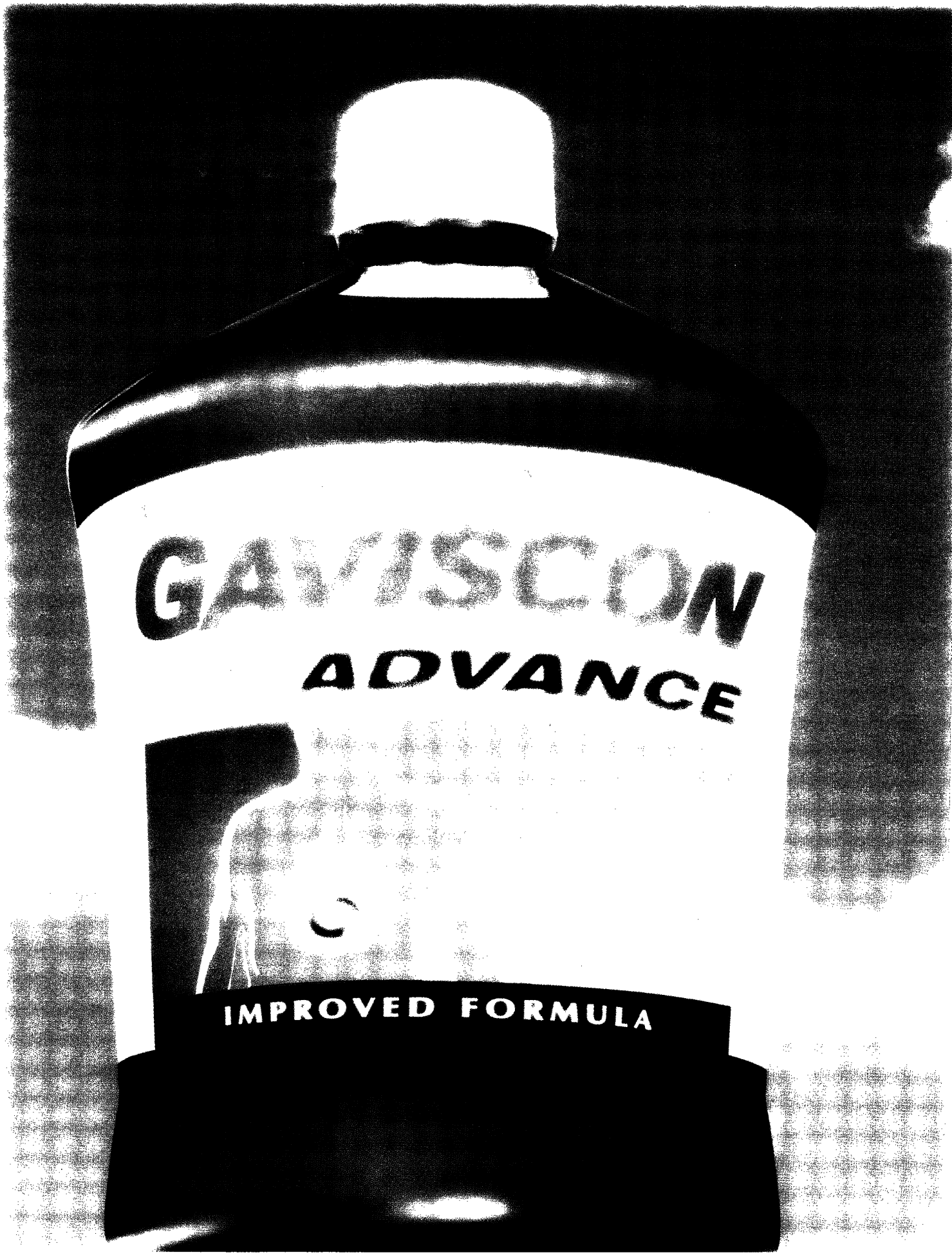
JOB TITLE.....

ADDRESS.....

..... POSTCODE.....

SIGNATURE..... DATE.....

E.C. De Witt & Co. Ltd., Tudor Road, Manor Park, Runcorn, Cheshire WA7 1SZ, England. Tel: 01928 579029 Telex: 627264 Telefax: 01928 579712



Gaviscon Advance Prescribing Information. ***Gaviscon Advance.*** **Active ingredients:** Sodium alginate BP 1000mg and potassium bicarbonate USP 200mg per 10ml dose. **Indications:** Gastric reflux, reflux oesophagitis, heartburn, hiatus hernia, flatulence associated with gastric reflux, heartburn of pregnancy, all cases of epigastric and retrosternal distress where the underlying cause is gastric reflux. **Dosage and Administration:** Adults and children over 12: 5-10ml liquid, after meals and at bedtime. Children under 12: Only on medical advice. **Contra-indication:** Hypersensitivity to any of the ingredients. **Precautions and warnings:** 10ml liquid contains 4.6mmol (106mg) sodium and 2.0mmol (78mg) potassium. **Side-effects:**

PRESCRIBING ADVANCE

Forms a stronger, lo
to prevent reflux,
prescribe per do

by 2/3 of e

Prescribe it by name:
Gaviscon Advance 5-10ml qds

GAVISCON **ADVANCE**

sodium alginate BP, potassium bicarbonate USP

The most advanced way to prescribe Gaviscon

Very rare hypersensitivity reactions. **Basic NHS Cost:** 500ml liquid £5.40. **Marketing Authorisation:** 0063 0097. **Supply Classification:** Pharmacy Medicinal Product. **Holder of Marketing Authorisation:** Reckitt & Colman Products Limited. Dansom Lane, Hull, HU8 7DS. Gaviscon Advance and the sword and circle symbol are trademarks. **Date of preparation:** December 1996. **References:** 1.2. Data on file. Reckitt & Colman Products Limited. 3. Liquid Gaviscon 500ml (25-50 doses at 10-20ml qds) basic NHS price £2.70; Gaviscon Advance 500ml (50-100 doses at 5-10ml qds) basic NHS price £5.40. 4. Data on file. Reckitt & Colman Products Limited.

Reckitt & Colman Products Limited

STAY HEALED†

NOW APPROVED IN MAINTENANCE

15mg ZOTON*

Lansoprazole

† Up to 87% remission rate in reflux oesophagitis after 1 year. (Range 69-87%)[1-5]

ZOTON* Abbreviated Prescribing Information
Presentation: Two tone lilac/purple capsules containing lansoprazole 30 mg. Opaque yellow capsules containing lansoprazole 15 mg. **Indications:** Healing and maintenance of gastro-oesophageal reflux disease (GORD) or duodenal ulcer. Healing of benign gastric ulcer. Effective for benign peptic lesions including reflux oesophagitis unresponsive to H_2 receptor antagonists. Eradication of *Helicobacter pylori* (*H. pylori*) in patients with duodenal ulcer or gastritis. **Dosage and Administration:** Duodenal ulcer: 30 mg for 4 weeks, then 15 mg for maintenance dose. GORD: 30 mg daily for 4-8 weeks, then 15 mg or 30 mg for maintenance dose. Benign gastric ulcer: 30 mg daily for 8 weeks. *H. pylori* eradication: 30 mg twice daily plus two of the following antibiotics for 7 days: clarithromycin 250 mg twice daily, amoxycillin 1 g twice daily or metronidazole 400 mg twice daily. Swallow capsules whole. No dosage adjustment is necessary in the elderly, or the renally or hepatically impaired. There is no experience with Zoton in children. **Contra-indications:** None known. **Precautions:** Exclude the possibility of malignancy when gastric ulcer is suspected. When using in combination with antibiotics, refer to the prescribing information of the respective antibiotics. **Pregnancy and Lactation:** Avoid in pregnancy. Avoid during breast feeding unless essential. **Interactions:** Interactions with drugs metabolised by the liver are possible. Apply caution when used concomitantly with oral contraceptives, phenytoin, theophylline or warfarin. Antacids should not be taken within an hour of Zoton. **Side Effects:** Generally mild and transient, including gastro-intestinal disturbances, headache, dizziness, malaise, dry or sore mouth or throat, fatigue, rashes, urticaria, pruritis and alterations in liver function test values. A few cases of arthralgia, myalgia, peripheral oedema, depression, haematological changes, bruising, purpura, petechiae, jaundice, hepatitis, paraesthesia or blurred vision have been reported. **Legal Category:** POM **Package Quantities:** 30 mg capsules: Blister packs of 56, 28, 14 and 7 (hospital starter pack) capsules. 15 mg capsules: Blister packs of 56 and 28 capsules. **Product Licence Number:** 30 mg capsules: PL 0095/0264 15 mg capsules: PL 0095/0302 **Cost:** 30 mg capsules: 7 £9.09 (hospital starter pack) 14 £16.68 28 £33.36 56 £66.72 15 mg capsules: 28 £18.95 56 £37.90 Full prescribing information is available on request. **Name and Address of Licence Holder:** Cyanamid of Great Britain Ltd, Fareham Road, Gosport, Hampshire, PO13 0AS.

REFERENCES: 1. Gough, A.L. et al, *Aliment Pharmacol Ther*, 1996, **10**, 529-539 2. Hatlebakk, J.G., and Berstad, A., *Gastroenterol*, 1995, **108** (4), A111 (102909) 3. Poynard, T. et al, *Gastroenterol*, 1995, **108** (4), A195 (102907) 4. Robinson, M., *Ann Intern Med*, 1996, **126**, 859-867 5. Baldi, F., *Gastroenterol*, 1996, **110** (4) Suppl A55 (107136), and Data on file, Lederle Laboratories (105806).

Date of preparation: August 1996

Takeda Under Licence agreement with Takeda Chemical Industries Ltd, Japan.

Lederle Further information can be obtained from: Wyeth Laboratories, Huntercombe Lane South, Taplow, Maidenhead, Berks SL6 0PH

Wyeth

ZZOT473/0896

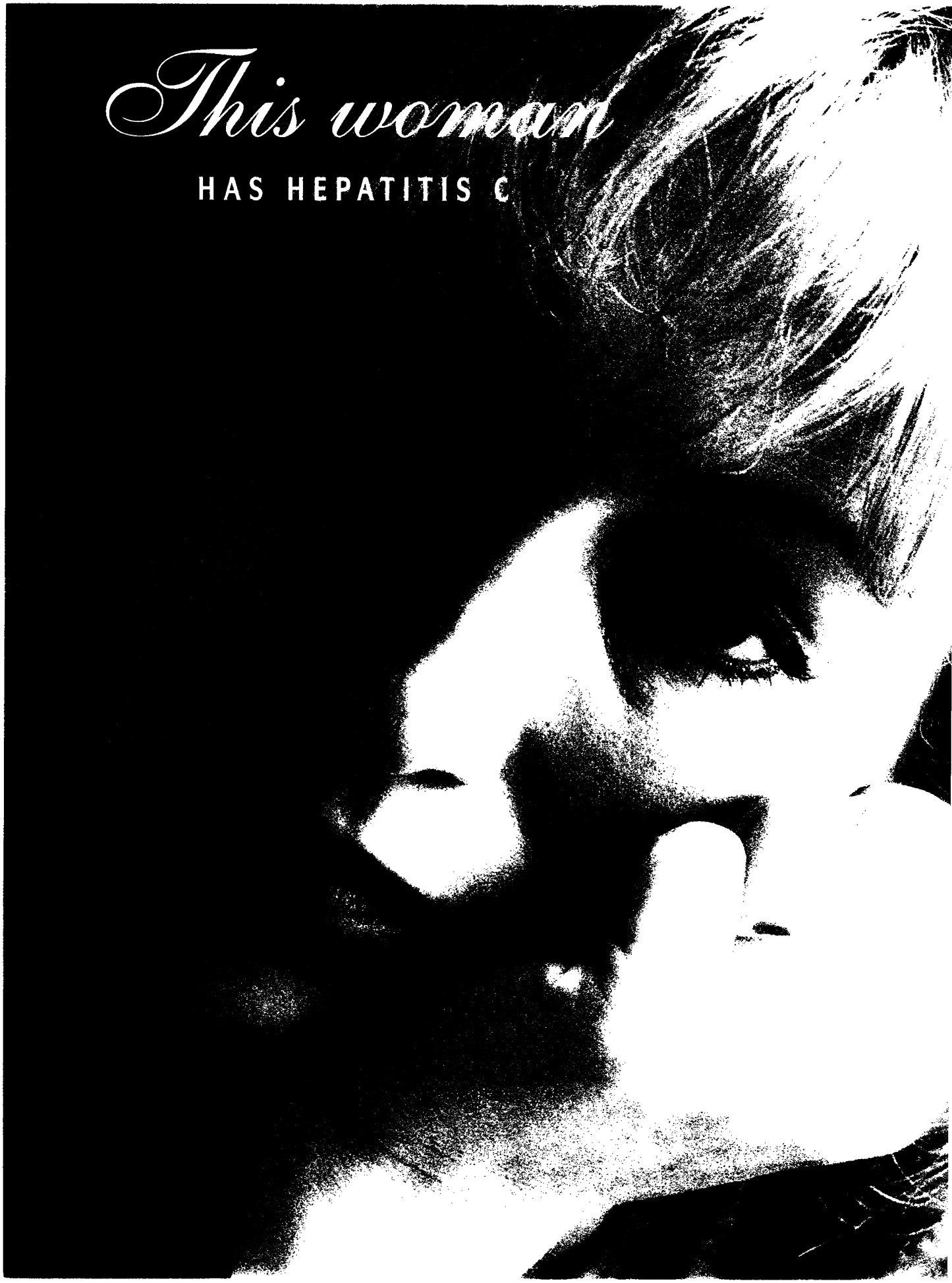
EVERYDAY PEOPLE TAKE LOSEC.

Losec offers efficacy, flexibility, practicality and good tolerability. And with over 190 million treatments in 96 countries, it also inspires a high level of confidence. No wonder Losec is taking care of more people. Every day.

LOSEC® CAPSULES (omeprazole) PRESCRIBING INFORMATION refer to full data sheet before prescribing
PRESENTATION: Losec Capsules containing 10mg, 20mg or 40mg omeprazole **(O)** as enteric coated granules within an aqueous based coating. **USES:** Oesophageal reflux disease. Duodenal and benign gastric ulcers including NSAID-induced. Prophylaxis of NSAID-associated ulcers in patients with a history of gastroduodenal lesions, including relief of dyspeptic symptoms. *Helicobacter pylori* eradication: Relief of associated dyspeptic symptoms in combination treatment with antibiotics. Prophylaxis of acid aspiration. Zollinger-Ellison syndrome. **DOSAGE & ADMINISTRATION:** **Adults (including the elderly):** The usual dose in oesophageal reflux disease and peptic ulcer is 20mg once daily, increasing to 40mg once daily in severe or refractory cases, if required. **Oesophageal reflux disease:** Healing: 20mg daily for 4 weeks. Continue for further 4-8 weeks if required. **Maintenance in acid reflux disease:** Losec 10mg daily. Increase to 20mg daily if symptoms return. **Duodenal ulcer (DU):** Healing: 20mg daily for 4 weeks. **DU maintenance:** Losec 10mg daily increasing to 20mg daily if symptoms return. **Benign Gastric Ulcer:** 20mg daily for 8 weeks. **Prophylaxis of NSAID-associated DU & GU:** Losec 20mg once daily. ***Helicobacter pylori* eradication: DU disease: Triple therapies:** Losec 40mg daily with amoxycillin **(A)** 500mg and metronidazole **(M)** 400mg, both three times a day for 1 week. Or clarithromycin **(C)** 250mg and metronidazole 400mg or tinidazole 500mg both bd for 1 week. Or amoxycillin 1g and clarithromycin 500mg both bd for 1 week. **Dual therapies:** Losec 40mg daily with amoxycillin 750mg to 1g bd or clarithromycin 500mg tds, both for 2 weeks. **GU disease:** Losec 40mg daily with amoxycillin 750mg to 1g bd for 2 weeks. **Prophylaxis of acid aspiration:** Losec 40mg on the evening before surgery followed by Losec 40mg on the morning of surgery. **Zollinger-Ellison Syndrome:** 60mg daily as long as clinically indicated. Individually adjust within range 20-120mg daily. If in excess of 80mg daily give in 2 equal divided doses. **Renal impairment:** No dose adjustment needed. **Hepatic impairment:** Adjust dose maximum daily dose 20mg. **Children:** No experience of use. **CONTRA-INDICATIONS, WARNINGS,** etc: Known hypersensitivity to omeprazole. In gastric ulcer, exclude malignancy before starting therapy. Avoid in pregnancy unless no safer alternative. Discontinue breast feeding if Losec is considered essential. **Side effects:** Losec is well tolerated. Adverse reactions are generally mild and reversible relationship to Losec not established in many cases. They include diarrhoea, headaches, skin disorders and in isolated cases, angioedema, musculoskeletal disorders, fatigue, insomnia, dizziness, blurred vision, dry mouth, vertigo, paraesthesia, anaphylaxis, liver enzyme and haematological changes. **Interactions:** The absorption of ketoconazole may be reduced. Losec can delay the elimination of diazepam, phenytoin and warfarin. Plasma concentrations of omeprazole and clarithromycin are increased when used concomitantly. Simultaneous treatment with omeprazole and digoxin may increase the bioavailability of digoxin. **PHARMACEUTICAL PRECAUTIONS:** Store below 30 C. Bottles: Use within three months of opening. Replace cap firmly after use. Dispense in original container. **LEGAL CATEGORY:** POM. **FURTHER INFORMATION:** ***Helicobacter pylori*** *Hp* is associated with acid peptic and ulcer disease, contributing to gastritis and ulcer recurrence. Eradication of *Hp* with omeprazole and antibiotics gives rapid symptom relief, high healing rates and long-term remission of ulcer disease.
Quality of life. In recent clinical data, in patients with acute peptic ulcer disease, omeprazole *Hp* eradication therapy improved patients' quality of life. **PACKAGE QUANTITIES:** 10mg: bottles of 7* capsules £4.99, bottles of 28 capsules £19.95. 20mg: bottles of 7* capsules £8.86, bottles of 28 capsules £35.45. 40mg: bottles of 7* capsules £17.72, blisters of 7 capsules £17.72. *Hospital pack only. **MARKETING AUTHORIZATION NO:** PL 0017 0337 – Losec Capsules 10mg. PL 0017 0238 – Losec Capsules 20mg. PL 0017 0320 – Losec Capsules 40mg.

ASTRA
Astra Pharmaceuticals

For further information contact the **MARKETING AUTHORIZATION HOLDER:** Astra Pharmaceuticals Ltd. Home Park, Kings Langley, Herts WD4 8DH. Tel: 01923 266191.
LOSEC is a registered trademark of Astra Pharmaceuticals Ltd.
Date of preparation: November 1996 LOS ADV 1552


This woman
HAS HEPATITIS C

Do you tell her

IT COULD BE FATAL?

85,000 people in the UK
have chronic HCV*

▼

50,000 of them will
develop cirrhosis*

▼

10,000 will develop
liver cancer*

▼

Many will die
prematurely

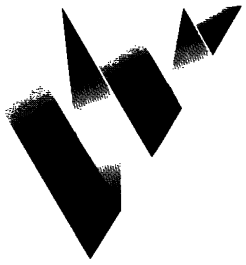
▼

She could be one of them

▼

Viraferon is not a vaccine,
nor a miracle cure.
But should this patient
develop chronic HCV
it could save her life.

VIRAFERON
INTERFERON ALFA-2B (rbe)

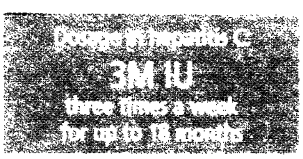


Today, for the future

* Estimates based on current incidence and epidemiology of hepatitis C

ABBREVIATED PRESCRIBING INFORMATION

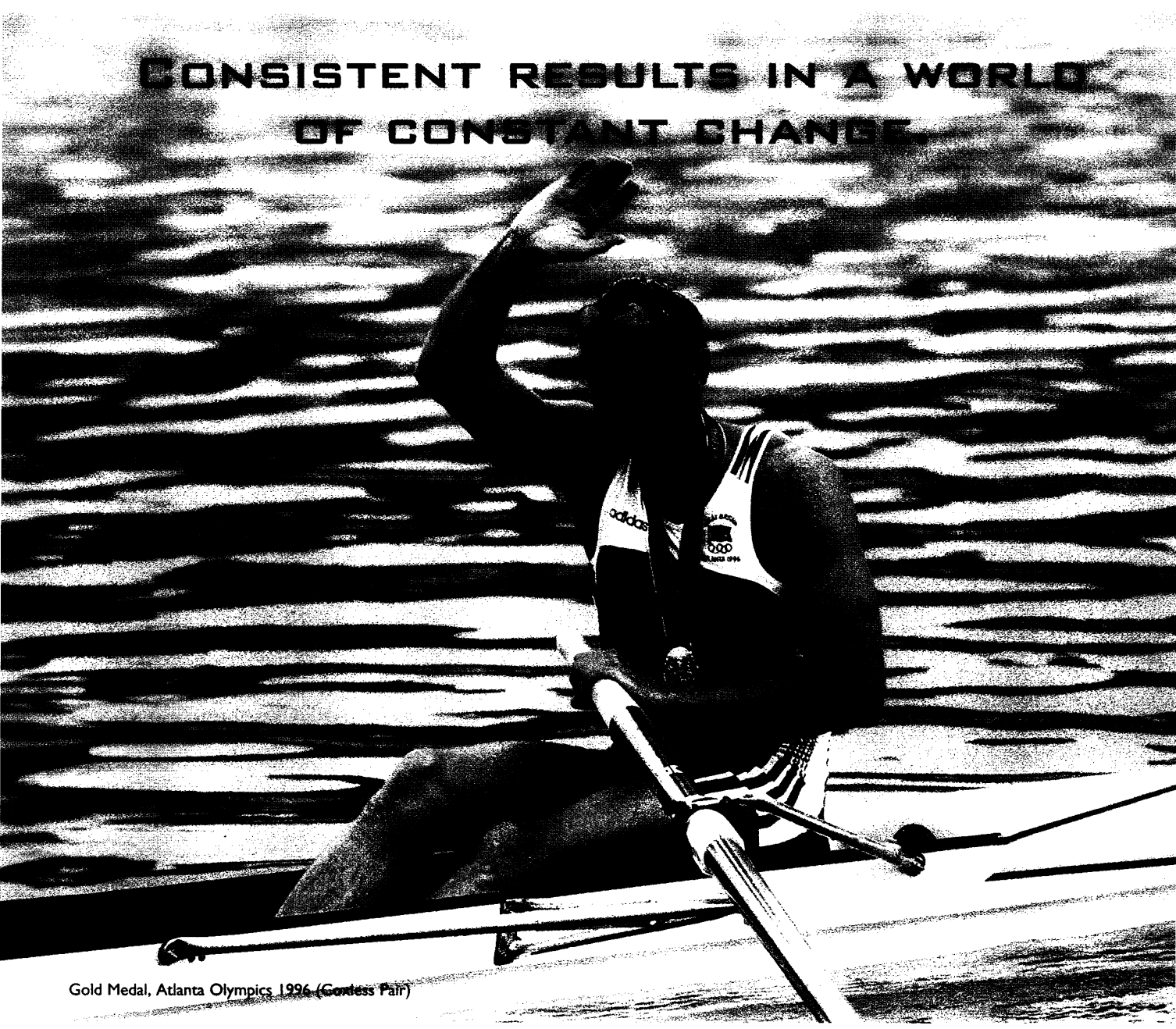
Before prescribing Viraferon please refer to full Data sheet. **Presentation:** 10 million or 25 million IU/vial of Interferon Alfa-2b (rbe) in solution. **Uses:** Treatment of Chronic Active Hepatitis B; reduction of disease activity in Chronic Hepatitis C/ Non-A, Non-B. **Dosage and Administration:** *Chronic Active Hepatitis B:* The recommended dosage is usually in the range of 2.5 million IU to 5.0 million IU/m² of body surface area administered subcutaneously three times per week for a period of four to six months. *Chronic Hepatitis C/Non-A, Non-B:* The recommended dose is 3 million IU administered three times a week. Most patients who respond demonstrate improvement in ALT levels within 12-16 weeks. In those patients, therapy should be continued with 3 million IU three times a week for up to 18 months. **Contraindications, Warnings, Precautions, etc.: Contraindications:** A history of hypersensitivity to recombinant Interferon Alfa-2b (rbe) or components of VIRAFERON Injection contraindicates its use; severe pre-existing cardiac disease, severe renal or hepatic dysfunction; epilepsy and/or compromised central nervous system function; chronic hepatitis with advanced decompensated cirrhosis of the liver; chronic hepatitis patients who are being or have been recently treated with immunosuppressive agents excluding short-term corticosteroid withdrawal. Autoimmune hepatitis or history of autoimmune disease, pre-existing thyroid disease not controlled by conventional therapy. **Warnings and Precautions:** Use with caution in patients with a history of pulmonary disease, diabetes mellitus, coagulation disorders or severe myelosuppression. Moderate to severe adverse experiences may require reduction of dosage or termination of VIRAFERON therapy. Patients with chronic Hepatitis B with evidence of decreasing hepatic synthetic function may be at increased risk of clinical decompensation if a flare of aminotransferases occurs during treatment. Patients with a recent history of cardiovascular events should be closely monitored as adverse cardiovascular events including hypotension and cardiac arrhythmias have been observed. Adequate hydration of patients should be maintained during treatment. Pulmonary infiltrates, pneumonitis and pneumonia, including fatality, have been observed rarely. Reversible CNS effects commonly manifested by confusion have been seen, usually at high doses. Infrequently, patients treated for chronic Hepatitis C/Non-A, Non-B developed thyroid abnormalities, either hypothyroid or hyperthyroid. VIRAFERON may exacerbate pre-existing psoriatic disease. Ocular adverse events have been reported. Concomitant narcotics or sedatives should be administered with caution. Patients taking xanthine derivatives should be monitored and dosage adjusted as necessary. No information is available on the use of interferon in human pregnancy or its effect on human lactation. VIRAFERON should only be given if the benefit clearly outweighs the potential hazard to the foetus or nursing infant. **Side Effects:** Elevated liver function tests, reduction in white blood cell, granulocyte and platelet counts have been observed especially at higher doses. Retinal haemorrhages, cotton wool spots and retinal artery or vein obstruction have been observed rarely. The most common adverse effects are flu-like symptoms, leucopenia, thrombocytopenia and CNS effects, which are generally dose-related and reversible and can be ameliorated by dose adjustment. Flu-like symptoms can be alleviated by the use of paracetamol. **Package Quantities:** 10 million IU (2ml) and 25 million IU (5ml) per vial. **Trade Price:** *Starter Packs* - 10 Million IU (2ml) pack containing 1 x 10M IU vial £56.52. - 25 Million IU (5ml) pack containing 1 x 25M IU vial £141.30. *Multi-vial Packs* - 10 Million IU (2ml) pack containing 3 x 10M IU vials £169.56 - 25 Million IU (5ml) pack containing 2 x 25M IU vials £282.60. **Legal Category:** POM. **Product Licence Numbers:** PL 0201/0203-0204. Further information is available from the **Product Licence** Holder: Schering-Plough Ltd, Shire Park, Welwyn Garden City, Hertfordshire AL7 1TW. **References:** 1. Lau J.Y.N., Williams R. The GP-Specialist Forum, Medical Dialogue 1991; 334. 1-4. 2. Hepatitis Information for General Practitioners British Liver Trust.



Date of Preparation: January 1996

Schering-Plough

CONSISTENT RESULTS IN A WORLD OF CONSTANT CHANGE



Gold Medal, Atlanta Olympics 1996 (Coxless Pair)

OVER 90% H. PYLORI ERADICATION[1]

OVER 90% PATIENT COMPLIANCE[1]

℞ KLARICID 500MG B.D.

OMEPRAZOLE 20MG O.D.

AMOXYCILLIN 1G B.D. *for 10 days*

NEW TRIPLE THERAPY

KLARICID® 500

Clarithromycin

Prescribing information PI/1/4/002 **Klaricid 500 Presentation:** Yellow ovaloid film coated tablets containing 500mg of clarithromycin. Each tablet is engraved with ⓐ on one side. **Indications:** Klaricid in the presence of acid suppression effected by omeprazole is indicated for the eradication of H. pylori in patients with duodenal ulcers. **Dosage and Administration:** Adults: Dual therapy: clarithromycin 500mg t.d.s. for 14 days plus oral omeprazole 40mg o.d. The pivotal study was carried out with omeprazole 40mg o.d. for 28 days, whilst supportive studies were carried out with omeprazole 40mg o.d. for 14 days. Triple therapy: Klaricid (500mg) b.d. should be given with amoxycillin 1000mg twice daily and omeprazole 20mg daily for 10 days. See omeprazole and amoxycillin data sheet for further information on omeprazole dosing. **Contraindications, Warnings etc:** *Contraindications:* known hypersensitivity to macrolide drugs. Do not administer with any of the following: cisapride, pimozide, terfenadine, ergot derivatives. *Precautions:* Caution in adults with impaired hepatic and renal function. Prolonged or repeated use of clarithromycin may result in an overgrowth of non-susceptible bacteria or fungi. If superinfection occurs, clarithromycin should be discontinued and appropriate therapy instituted. Caution in patients taking drugs metabolised by the cytochrome P450 system as there may be elevations in their serum levels. H. pylori organisms may develop resistance to clarithromycin in a small number of patients. *Interactions:* Potentiation of astemizole, theophylline, digoxin, warfarin and carbamazepine. Interaction of Klaricid tablets with simultaneously administered zidovudine in adults. No interaction with oral contraceptives. *Side-effects:* Klaricid is generally well tolerated. Side-effects include nausea, dyspepsia, vomiting, diarrhoea and rarely pseudomembranous colitis, abdominal pain, headache, taste perversion, reversible tongue discolouration, glossitis, stomatitis and oral monilia. Allergic reactions including anaphylaxis and Stevens-Johnson syndrome, and transient central nervous system side-effects have been reported. Hepatic dysfunction has also been reported. There have been reports of hearing loss which is usually reversible on withdrawal of therapy. **Use in Pregnancy and Lactation:** The safety of Klaricid during pregnancy and breast feeding has not been established, and therefore if a patient becomes pregnant Klaricid should only be used if the benefits outweigh risks. Clarithromycin has been found in the milk of lactating animals and humans. **Overdose:** Should be treated with gastric lavage and supportive measures. **Legal Category:** POM. **Marketing Authorisation Number:** PL 0037/0254: 20 or 42 tablet calendar blister pack. **Basic NHS Price:** 500mg b.d. £3.21 per day; 500mg t.d.s. £4.82 per day.

Further information is available on request from Abbott Laboratories Ltd., Norden Road, Maidenhead, Berkshire SL6 4XE. Date of Preparation September 1996.
Reference: 1. Data on file, Abbott Laboratories.
PXKHP96227

ⓐ ABBOTT ANTIBIOTICS

TO Deliver

MULTIPLE CHOICE SOLUTION

SIMPLE AND EASY TO USE

Saving time for both patients and health professionals.

COMPREHENSIVE DOSE RANGE

3MIU, 4.5MIU, 6MIU, 9MIU single dose pre-filled syringes.

HSA FREE

No risk of viral contamination.

SUPPORT

Patient education material, support items and further information about the complete Roferon-A range are available via Freephone Roferon-A: 0800 387189

NOW AVAILABLE IN A RANGE OF PRE-FILLED SYRINGES FOR EASE OF DELIVERY

®

Interferon alfa-2a (rbe)

Further information is available from:- Ferring AB, Box 30047, S-200 61 Malmö, Sweden.

GLYPRESSIN

Abridged Prescribing Information Name of Product: GLYPRESSIN Terlipressin. **Presentation:** GLYPRESSIN 1 mg. Freeze dried powder for injection. Supplied with 5ml ampoule of sterile diluent. **Indications:** 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, Warnings and Precautions:** GLYPRESSIN is contraindicated in pregnancy. The product should 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:** 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:** July 1994. GLYPRESSIN is a Trade Mark.

Reference:

1) Groszmann RJ et al In: Portal Hypertension II Ed De Franchis R Blackwell Science, Oxford 1996:98.

Bibliography

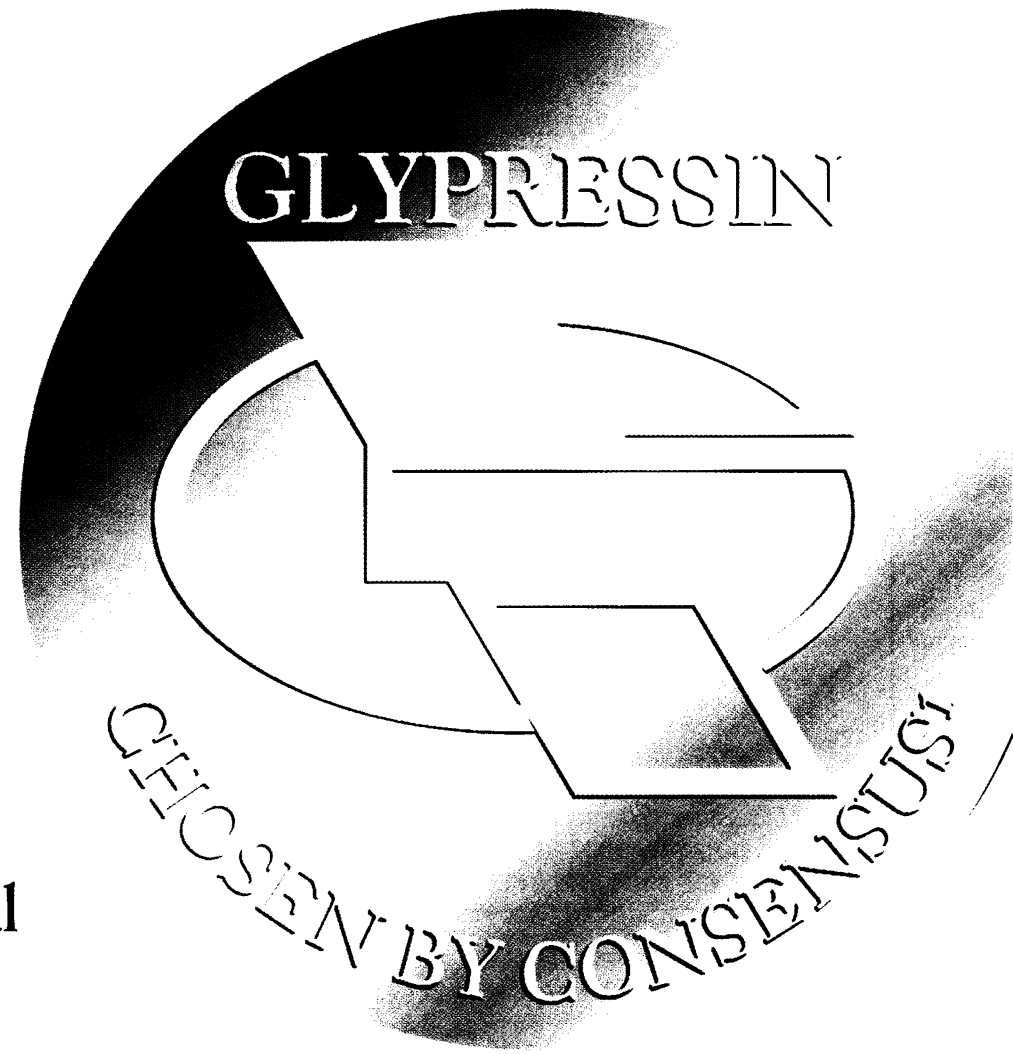
1) Walker S et al Hepatology 1986;6:112-115.
2) Freeman JG et al J Clin Gastroenterol1989;11; 58-60.
3) Söderlund C et al Scand J Gastroenterol1990; 25: 622-630.
4) Levacher S et al The Lancet 1995; 25: 865-868.
5) Fiaccadori F et al Curr Therap Res 1993; 54(5):1-10

The Pharmacological Gold Standard for Bleeding Oesophageal Varices

GLYPRESSIN®

(terlipressin)

- Rapidly Controls Bleeding
- Reduces Frequency and Severity of Rebleeding
- Reduces Mortality and Improves Survival Rates



FERRING
PHARMACEUTICALS

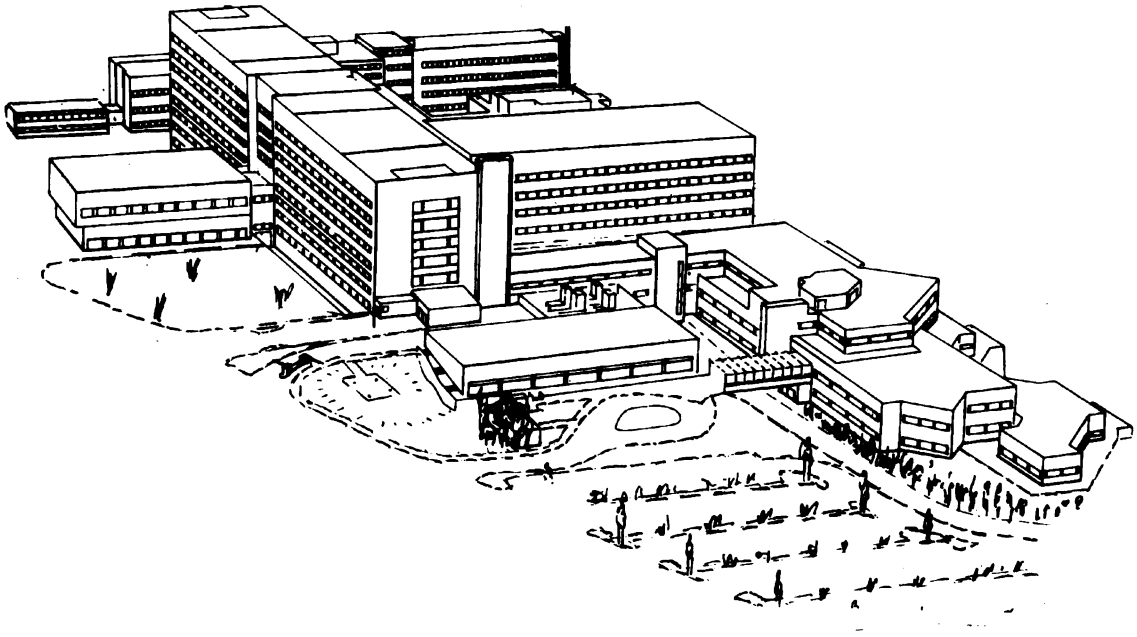
Prescribing Information Opposite

The University Hospital of the Free University of Brussels (Dutch speaking) opened in 1977. It has since become one of the most modern in Belgium.
With over 2000 employees and 700 beds the A.Z.-V.U.B. occupies an important position in the health care sector.

The University Hospital of the Free University of Brussels now has a vacancy for a (m/f)

HEAD OF THE MEDICAL

Gastroenterology & Hepatology Department



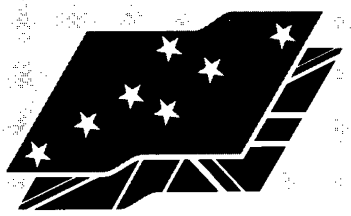
Duties/abilities: *Qualified Gastroenterologists are ivited to apply for the position of Head of the Medical Gastroenterology and Hepatology Department, University Hospital of the Free University of Brussels. The appointee should have a record of significant achievement in teaching, research in gastroenterology and/or hepatology and should be able to provide leadership in this area. Applicants must hold a basic medical qualification and board certification in internal medecine/ gastroenterology and should be prepared to acquire full knowledge of the Dutch language.*

Assignment: *As head of the department, he/she will be responsible for the day-to-day management of the department at both medical and administrative level.*

The head of the department will have significant teaching commitments and will be expected to develop research interests.

Candidates should send their handwritten application, together with a detailed personnel and scientific curriculum vitae to: A.Z.-V.U.B., Prof. Dr. L. TIELEMANS, Medical Director, Laarbeeklaan 101, B-1090 Brussels. Applicants are requested to use the appropriate form which can be obtained from the Personnel Department (tel. 32-2/477.55.67) and to submit their application within one month of the publication of this announcement.

BIRMINGHAM '97



6th UNITED EUROPEAN GASTROENTEROLOGY WEEK

18 - 23 October 1997
ICC, Birmingham, UK

International Faculty of 250
including Blaser, Brandtzaeg, Cotton, Furness, Kimura, Malagelada, Manns, Meyer, Pichlmayer, Sansonetti, Siewert, Tytgat, Vane, Watanabe, Wright and Wu.

Core Meeting – 8 Parallel Sessions

20 State-of-the-Art Lectures
including Future Endoscopy, Laparoscopic Surgery, TIPSS, H. pylori, Apoptosis, The Cell Cycle, Liver Fibrogenesis, 100 Years of Aspirin.

40 Topic Symposia – Basic Science, Clinical, Endoscopy.

4 Postgraduate Courses
Case orientated 'Evidence Based Gastroenterology'
Live Interactive Teaching of New Endoscopic Techniques
Liver Transplantation
Advances in Paediatric Gastroenterology and Nutrition

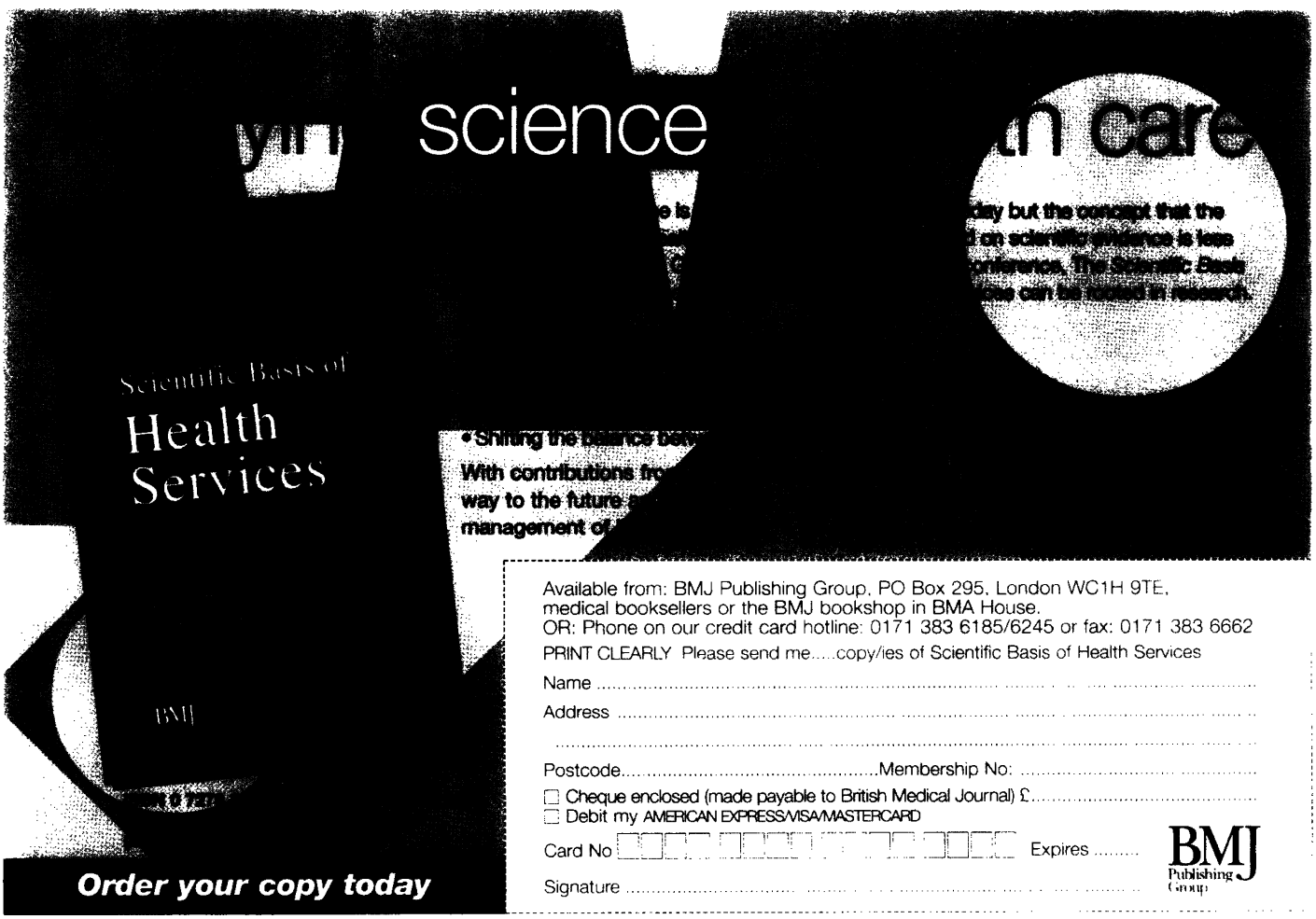
6 Industry-sponsored Satellite Meetings

Debates and Video Demonstrations
Daily CPC
Conference Reports
Free Papers, Posters and Poster Discussions
Biomedical Exhibition

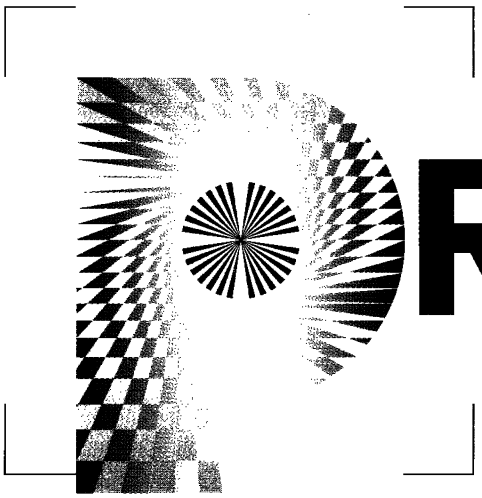
KEY DATES

March 1997	Final Announcement & Call for Abstracts available
23 May 1997	Deadline for submission of Abstract Forms
15 August 1997	Last date for reduced registration fees
18-23 October 1997	6th UEGW

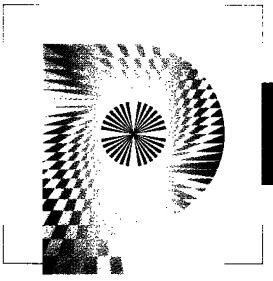
For further information: **6th UEGW,**
Concorde Services Ltd, 10 Wendell Road, London W12 9RT, UK
Tel: +44 181 743 3106 **Fax:** +44 181 743 1010



"The proton pump inhibitor that is setting the standard for clinical safety?"



PRECISELY.



PANTOPRAZOLE*

A new level of precision in acid control

Since indications may vary from country to country, please consult your local prescribing information.

Abbreviated Prescribing Information: Pantoprazole Byk Gulden. See local prescribing information for full details. **Indications and dosage:** Duodenal ulcer 40 mg Pantoprazole once daily for 2-4 weeks. Gastric ulcer and moderate and severe reflux oesophagitis 40 mg Pantoprazole once daily for 4-8 weeks. 40 mg Pantoprazole once daily is recommended. If needed, the dose can be increased to 80 mg. **Precautions:** When gastric ulcer is suspected, the possibility of malignancy should be excluded before treatment is initiated. Use during pregnancy and lactation should be avoided unless considered essential. Interactions with other drugs metabolised by th[illegible]hrome-P-450-System cannot be excluded. In a series of studies specific with such drugs (Diazepam, Warfarin, Theophylline, Phenytoin, Digoxin and one oral contraceptive) nc[illegible]rovable. Alteration of absorption of substances with pH-dependent absorption should be considered. Pantoprazole should not [illegible]ypersensitivity to one of its constituents or severely impaired liver function. **Side effects:** headache, diarrhoea, rarely naus[illegible] skin rashes, pruritus, dizziness. Edema, fever, the onset of depression and disturbances in vision (blurred vision) were reporte[illegible]**cation*:** Pantoprazole 40 mg tablets each containing 45.1 mg Pantoprazole-Sodium-Sesquihydrate.

For further information please contact Byk Gulden, Byk Gulden-Straße 2, D-78467 Konstanz, Germany, or the local subsidiary.

BYK
Byk Gulden