

# ROTER

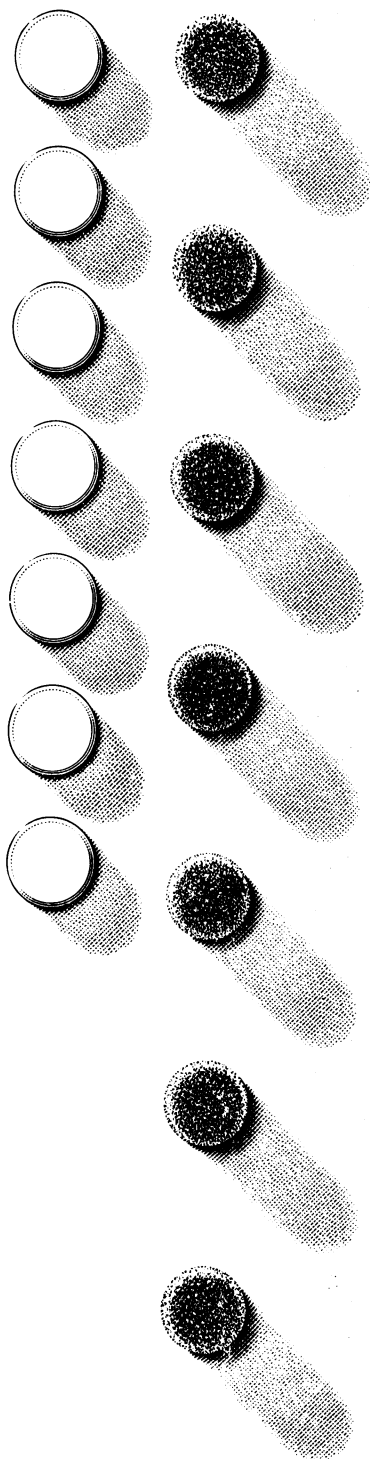
In cases of dyspepsia with or without a radiologically proven ulcer Roter will normally provide prompt symptomatic relief and lead to rapid healing of the lesion. The reputation of Roter is world wide. It is a complete treatment in itself and requires no additional antispasmodics or anticholinergics.



**FORMULA:** Each Roter tablet contains: Bismuth Subnitrate Roter (350 mg.), Magnesium Carbonate (400 mg.), Sodium Bicarbonate (200 mg.) and Cortex Rhamni Frangulae (25 mg.).

**PACKINGS OF ROTER TABLETS:** Tins of 40 and 120, also dispensing sizes, 360 and 720 (P.T. exempt).

## ROTER IN PEPTIC ULCER



## LONGER-LASTING DRIP THERAPY

Gastrils—first ever antacid pastilles. Gastrils do not break up in the mouth like tablets; they dissolve slowly and smoothly, so give sustained drip therapy for the treatment of peptic ulcer.

Gastrils contain a co-dried gel of aluminium hydroxide and magnesium carbonate, a buffer antacid comparable in activity to freshly prepared liquid aluminium hydroxide gel. Gastrils rapidly buffer gastric pH to an optimum level, and keep it there, without risk of acid rebound.

To relieve the tedium of constant antacid therapy, every Gastrils prescription is dispensed in equal quantities of two delicious flavours—mint and fruit. Few antacids are as effective as Gastrils—none is as good to take!

# GASTRILS

## ANTACID PASTILLES

**INDICATIONS** Hyperacidity, peptic ulcer, gastritis, heartburn, oesophagitis and hiatus hernia.

**FORMULA** Each pastille contains 500 mg. co-dried gel of aluminium hydroxide and magnesium carbonate.

**BASIC N.H.S. COST** 24 individually wrapped Gastrils in carton 3/-.  
24 individually wrapped Gastrils from dispensing pack: 2/6½d. Gastrils are prescribable on form E.C.10

*'Gastrils' is a registered trade mark of T. J. Smith & Nephew Ltd.*



**Smith & Nephew  
Pharmaceuticals Limited**

WELWYN GARDEN CITY · HERTFORDSHIRE · ENGLAND



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STERILISED SURGICAL INSTRUMENT

ETHICON

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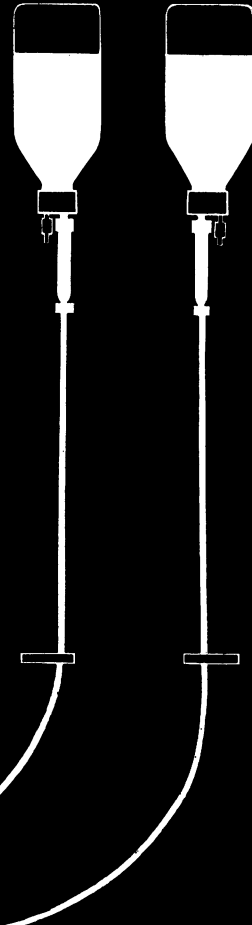
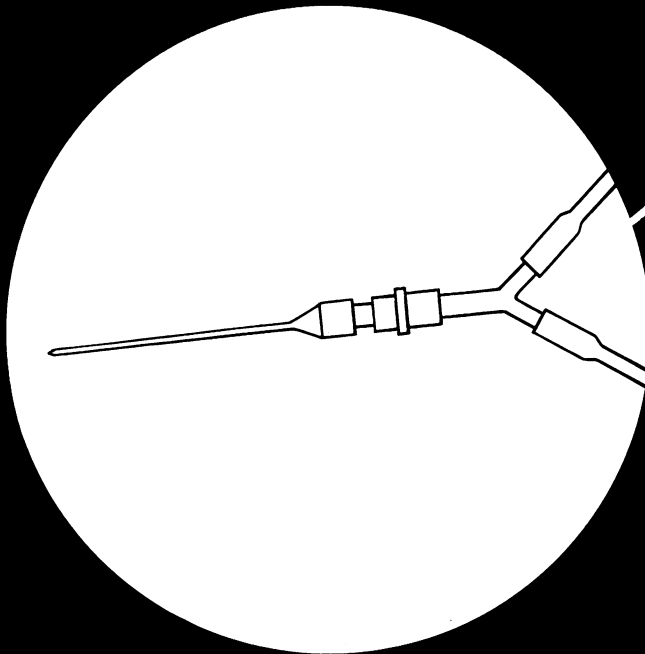
ATCU

# AMINOSOL 10% + INTRALIPID

(fat emulsion)

= NITROGEN EQUILIBRIUM

in even the most severely debilitated patients



*Further literature and  
information on request.*



PAINES & BYRNE LTD., Pabryn Laboratories, Greenford, Middlesex

*Vitrum*

# The success of BIOGASTRONE in gastric ulcer

further proof:



In October 1962, Biogastrone\* was used in a clinical trial among patients with peptic ulcer. The results indicated that Biogastrone significantly reduced the size of ulcer niche.

**"It is suggested that Biogastrone promotes the healing of gastric ulcers."**

Lancet (1962) *ii*: 793

Now, in the latest 1964 trial, the same author proves beyond any doubt that Biogastrone is successful in assisting peptic ulcers to heal. The average degree of healing was similar in both trials—72 and 77% in the Biogastrone groups and 35 and 44% for the control.

**"It is concluded, therefore, that the drug is of real therapeutic benefit."**

Scot.med.J. (1964) *9*: 183

**Dosage:** Two tablets (each 50 mg. carbenoxolone sodium) to be taken three times a day after meals for the first week, followed by one tablet three times a day for the next three weeks, the tablets best being taken with a little water or milk.

More detailed information from  
Berk Pharmaceuticals Ltd., Catteshall Lane,  
Godalming, Surrey

\*trade mark BR 2869/J578

# don't use Merbentyl to inhibit gastric secretion

## because

Merbentyl is not an antisecretory drug. Do use it to control gastrointestinal spasm because here Merbentyl is a remarkably effective antispasmodic. Moreover, Merbentyl is so selective that its use is rarely followed by side effects commonly seen with other drugs used for this purpose. It can even be administered to patients with chronic simple glaucoma or prostatic hypertrophy.

Merbentyl (dicyclomine hydrochloride B.P.C.) was first described in 1947, and has been widely used clinically to control gastrointestinal spasm and hypermotility in many countries for over 12 years. It acts both on the neuroreceptor sites innervated by post-ganglionic parasympathetic fibres, and directly on smooth muscle tissue.

### Indications

- 1 Primary functional disorders of the gastro-intestinal tract: spastic colon, pylorospasm, post-cholecystectomy syndrome.
- 2 Adjunctive therapy in organic disorders, e.g. ulcerative colitis, diverticulitis.
- 3 Infant colic (here the drug is regarded as specific therapy).

**Low NHS. cost** An average week's treatment—2/8d.

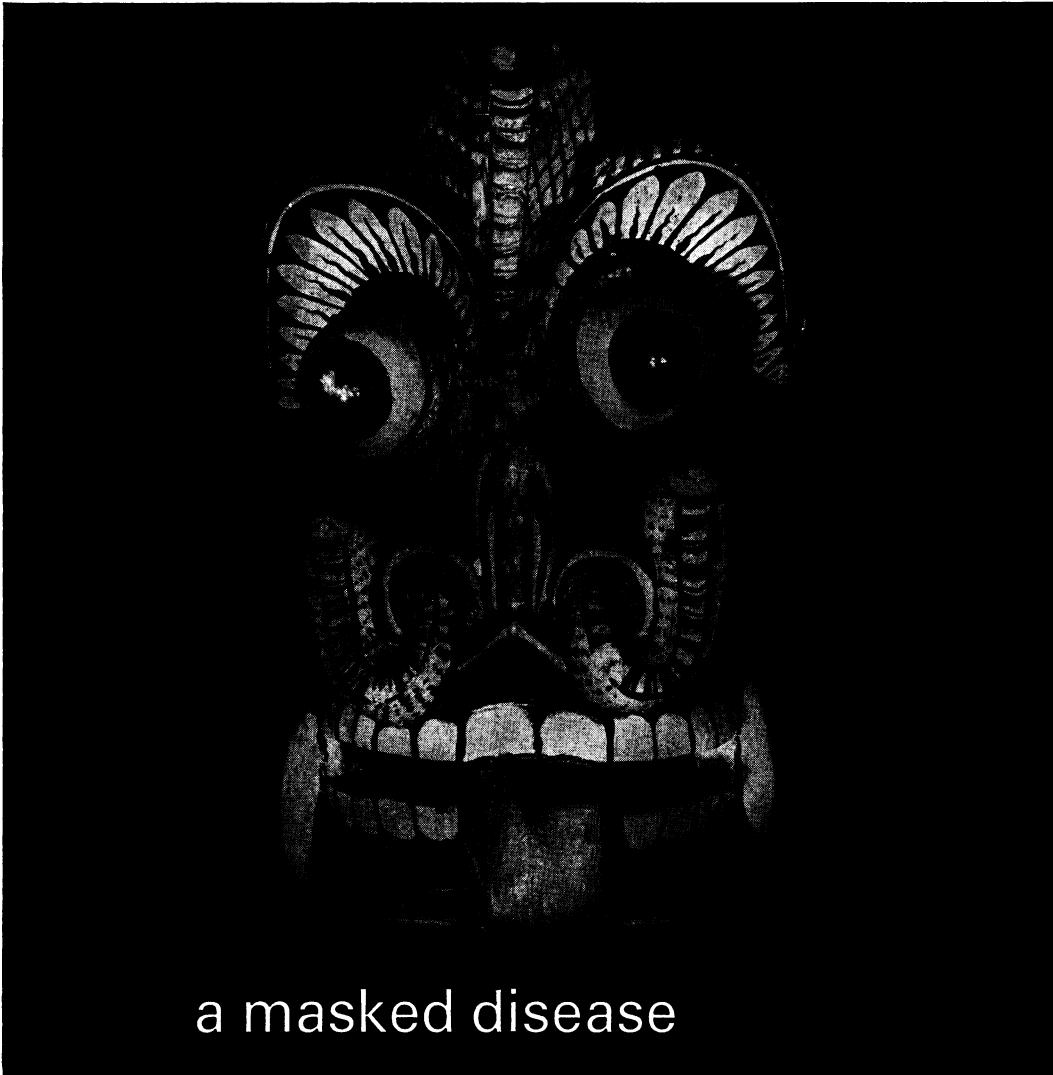
**Merbentyl tablets** each tablet contains 10mg. dicyclomine hydrochloride B.P.C.  
Recommended adult dosage, 2 t.d.s.

*Also available with phenobarbitone and as Merbentyl Syrup.*

Full clinical information available on request.



Merrell-National (Laboratories) Limited, 20 Savile Row, London, W.1.



a masked disease

**Pancreatitis** may be difficult to differentiate from a coronary thrombosis, perforated peptic ulcer, a dissecting aneurysm of the aorta or acute cholecystitis, but when the diagnosis is established, TRASYLOL the proteinase inactivator is indicated. TRASYLOL specifically inhibits the proteolytic enzymes of the pancreas, and administered in adequate dosage arrests the autodigestive processes. A recent analysis of all cases of pancreatitis, those treated with TRASYLOL showed a reduction in mortality from 22% to 9%. TRASYLOL is therefore indicated in the treatment of acute pancreatitis, pancreatic fistulae, and pancreatitis accompanying disorders of the gall bladder and bile ducts.

**TRASYLOL<sup>®</sup>**

Proteinase Inactivator



<sup>®</sup> Registered trade mark of **BAYER LEVERKUSEN GERMANY**  
U.K. Subsidiary **FBA PHARMACEUTICALS LTD**, Haywards Heath, Sussex

## ANTIBIOTICS AND THE INTESTINAL FLORA

Treatment with broad spectrum antibiotics suppresses the normal flora, which may be replaced by abnormal resistant organisms causing diarrhoea.

This change can be prevented or reversed by the implantation of *Lactobacillus acidophilus* which has been rendered antibiotic-resistant, and is thus able to multiply freely under these abnormal conditions. This organism itself forms an antibiotic which may contribute to its rapid preponderance over other species. <sup>1, 2</sup>

Oral treatment with antibiotic-resistant *L. acidophilus* in the form of ENPAC has been shown to eliminate *Candida* from the faeces of infants with antibiotic-induced diarrhoea, with relief of symptoms succeeded by rapid gain in weight <sup>3, 4</sup> and greatly to reduce the numbers of staphylococci in the faeces of patients treated with tetracyclines. <sup>5</sup>

<sup>1</sup> (1958) *Ann. Inst. Pasteur* **95**, 194.      <sup>2</sup> (1959) *J. Bact.* **78**, 477.      <sup>3</sup> (1957) *Klin. Wschr.* **35**, 198.  
<sup>4</sup> (1959) *Medizinische* **7**, 296.      <sup>5</sup> (1957) *Lancet* (i), 899.



### LACTOBACILLUS ACIDOPHILUS PREPARATION

Samples and literature will be sent to the medical profession on request to:—

**APLIN and BARRETT LIMITED · BIOLOGICALS DIVISION · TROWBRIDGE · WILTS**

## TO-DAY'S DRUGS

This book has just been published — on 22 December 1964. It is based on a series of review articles which were printed in the "To-day's Drugs" section of the **BRITISH MEDICAL JOURNAL** between January 1963 and May 1964. These articles have been edited and brought completely up to date so as to form an authoritative and practical guide to modern therapeutics. The book is designed to cover the drug treatment of those common conditions which are met with in general and hospital practice. There are important sections dealing with antibiotic therapy, cardiovascular conditions, rheumatic disorders, oral contraceptives, and the special problems involved in paediatric and geriatric prescribing. Special attention has been paid to the precautions which should be taken in using these drugs and their toxic and side-effects. This book should be of value to all doctors concerned in the day-to-day treatment of patients.

*Demy Octavo*

**Price 30s. net**

(400 pages)

(postage 2s. 6d. extra)

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**20 YEARS  
OF SUCCESS IN  
ULCERATIVE COLITIS  
WITH**

# **SALAZOPYRIN**

Salazopyrin was first used in Sweden in the early 1940's. Since then it has become the universally recognised treatment for ulcerative colitis. Its action is believed to depend on its specific affinity for connective tissues. Remission, or considerable improvement, has been seen in 70-80% of patients treated with Salazopyrin.

**Positive Results**

In patients with active ulcerative colitis, Salazopyrin achieves positive results—

- \* number of stools decreases
- \* abdominal cramp disappears
- \* fever subsides
- \* appetite improves
- \* rectal mucosa heals rapidly

## **NEW SALAZOPYRIN EN-tabs...**

are better tolerated because of their special enteric coating and convenient, easily-swallowed shape. They dissolve easily in the small intestine, so reducing to a minimum gastric upset or nausea, which have been noted in some patients.

**SALAZOPYRIN**(plain) in bottles of 100 and 500 tablets  
**SALAZOPYRIN EN-tabs** in bottles of 100 tablets

*Each tablet of Salazopyrin, coated or uncoated, contains 0.5G of Salicylazosulphapyridine/sulphasalazine.*

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(GREAT BRITAIN) LTD West Ealing · London W13

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