

# INHALED

# Becotide

(beclomethasone dipropionate BP)

for the asthmatic

who needs more than a bronchodilator

**Controls the inflammatory processes  
in more severe asthma**

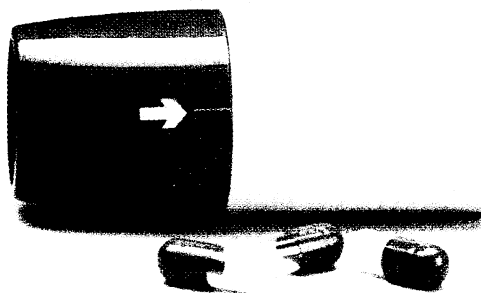
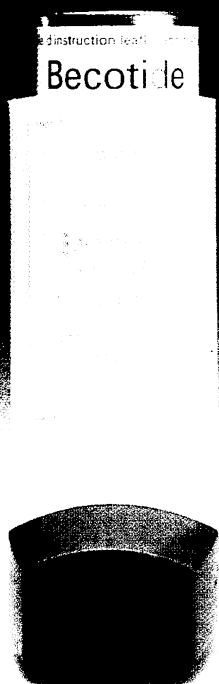
**Restores the response to bronchodilators**

**Avoids the side effects  
associated with systemic steroids**

**Eliminates or greatly reduces the need for  
systemic steroids  
in steroid-dependent patients**

**Obviates physical disfigurement  
and stunting of growth in children**

**Available as metered-dose aerosol  
and Rotacaps with Rotahaler**



Cross-section of bronchiole illustrating bronchospasm complicated by bronchial mucosal oedema and hypersecretion of mucus.

To support this claim of extraordinary activity (of Becotide), there are not only statistically valid comparisons but also numerous validated individual experiences. These include the impressive therapeutic results in patients with severe asthma not controllable with high daily doses of systemic steroids; the beneficial responses of those refractory to adrenergic agonists and unable to tolerate even suboptimal doses of theophylline; the suppression of asthma unresponsive to mediator-release inhibitors, such as cromolyn sodium; and, importantly, the high level of acceptance and compliance among people who do not comply with other standard therapeutic routines.

(*Lancet*, 1979, i, 932-933)

# Trandate

(labetalol hydrochloride)



“Good blood pressure control was obtained easily and the treatment regimen was simpler than that with previous therapy received by the patients. Few incremental changes in dosage were required and all but six (10%) patients were controlled by labetalol alone.”

(*Current Medical Research and Opinion*, 1978, 5, 618)

## PRODUCT INFORMATION

### PRESENTATION AND BASIC NHS COST

Trandate Tablets 100mg, Trandate Tablets 200mg and Trandate Tablets 400mg each contain 100mg, 200mg and 400mg labetalol hydrochloride, respectively. In containers of 50 and 250 tablets. Basic NHS cost of 50 tablets of each strength is £3.44, £4.88 and £7.76.

### INDICATIONS

Treatment of all grades of hypertension when oral antihypertensive therapy is indicated.

### DOSAGE AND ADMINISTRATION

The recommended starting dose is 100mg three times daily. If necessary, this may be increased gradually at intervals of one or two weeks. A daily dosage of 600mg is usually adequate but severe cases may require up to 2,400mg daily. Once the optimum dosage is established a twice-daily dosage regimen can be used. Trandate Tablets should preferably be taken after food.

For transfer of patients from other antihypertensive therapy see Data Sheet.

Trandate therapy is not applicable to children.

### CONTRA-INDICATIONS

There are no known absolute contra-indications.

### WARNING

There have been reports of skin rashes and/or dry eyes associated with the use of beta-adrenoceptor blocking drugs. The reported incidence is small and in most cases the symptoms have cleared when the treatment was withdrawn. Discontinuation of the drug should be considered if any such reaction is not otherwise explicable. Cessation of therapy with a beta-adrenoceptor blocking drug should be gradual.

### PRECAUTIONS

Trandate should not be given to patients with uncompensated or digitalis-resistant heart failure or with atrioventricular block. The presence of severe liver disease may necessitate reduced doses of Trandate. Care should be taken in asthmatic patients and

# simplifies the management of hypertension

## for the doctor

- Trandate provides effective control of the hypertension
- Trandate is suitable for a wide range of patients
- Trandate obviates the need for multi-drug regimens or fixed combination products
- Trandate needs few incremental changes in dosage for control of most patients.

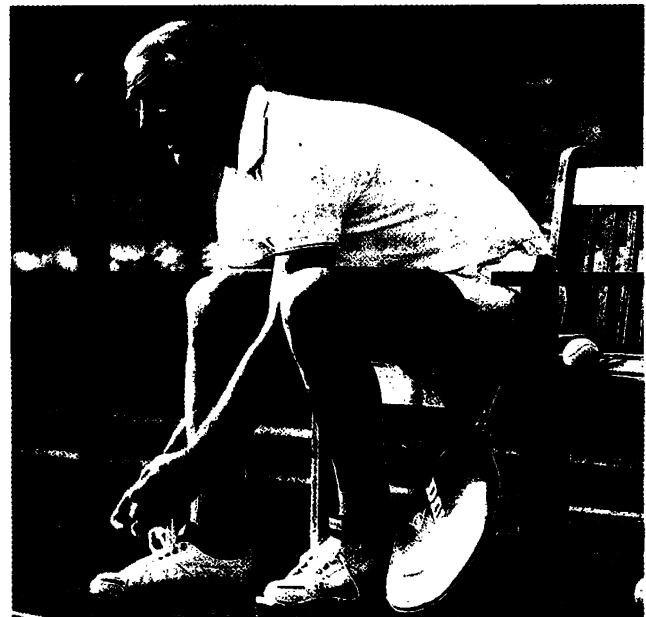


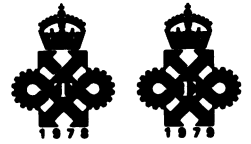
## and for the patient

- The overall incidence of side effects is low
- Trandate avoids unwanted effects such as sedation and lack of energy
- The dosage regimen is simple – just one tablet two or three times a day
- **Patients feel better on Trandate and the treatment does not restrict activity**

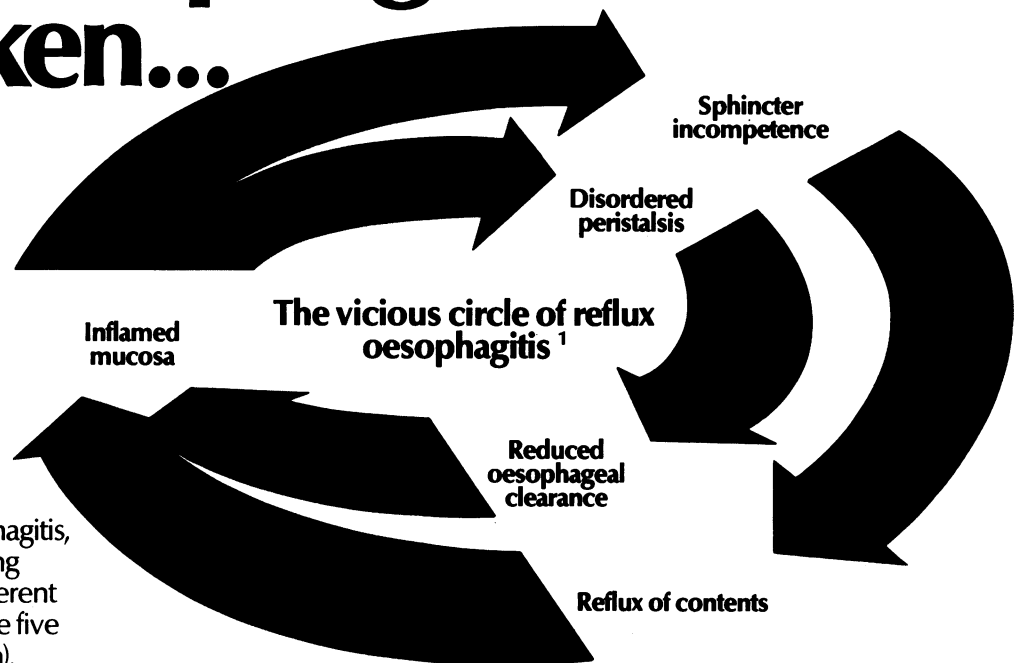
"It is therefore particularly encouraging that 74% of patients in this study reported that they were much less tired, more energetic, more active physically and more mentally relaxed than when on their previous antihypertensive therapy."

*(Practitioner, 1979, 222, 131)*





# When the vicious circle of reflux oesophagitis needs to be broken...



'Tagamet' by its unique action in controlling gastric acid secretion, can break the vicious circle of reflux oesophagitis, a condition which, with varying degrees of importance in different patients, is considered to have five causative factors (see diagram).

The interaction of these five factors can prove difficult to break, with the incompetent lower oesophageal sphincter allowing reflux of gastric contents into the oesophagus, thus leading to mucosal inflammation.

This may affect the muscle layers leading to reduced oesophageal clearing and the completion of the vicious circle, with further gastric contents refluxing into the oesophagus causing increased inflammation.

By its direct action on the parietal cell, 'Tagamet' is uniquely effective in

inhibiting both the volume and concentration of gastric acid and the volume of pepsin secreted.

Furthermore, one study has shown that 'Tagamet' can improve oesophageal sensitivity to acid.<sup>2</sup> 'Tagamet' can thus have a potentially beneficial effect on 2, possibly 3, of the causative factors and hence break the vicious circle of reflux oesophagitis, which in one study brought improvement or complete healing to 50% of patients, compared with 0% on placebo.<sup>3</sup>

#### References

1. Medical management of gastro-oesophageal reflux. (1976) Clinics in Gastroenterology, 5, 175.
2. Cimetidine in the treatment of symptomatic gastro-oesophageal reflux. A double blind controlled trial. (1978) Gastroenterology, 74, 441.
3. Oral cimetidine in reflux oesophagitis: a double blind controlled trial. (1978) Gastroenterology, 74, 821.

#### PRESCRIBING INFORMATION

##### Presentations

'Tagamet' Tablets PL0002/0063 each containing 200mg cimetidine. 100. £13.22; 500. £64.75.  
'Tagamet' Syrup PL0002/0073 containing 200mg cimetidine per 5ml syrup. 200ml, £6.29.

##### Indication

Reflux oesophagitis.

##### Dosage

Adults: 400mg t.d.s. with meals and 400mg at bedtime (1.6g/day) for 4 to 8 weeks.

##### Cautions

Impaired renal function: reduce dosage (see Data Sheet). Potentiation of oral anticoagulants (see Data Sheet). Prolonged treatment: observe patients periodically. Avoid during pregnancy and lactation.

##### Adverse reactions

Diarrhoea, dizziness, rash, tiredness. Rarely, mild gynaecomastia, reversible liver damage, confusional states (usually in the elderly or very ill), reversible interstitial nephritis.

Full prescribing information is available from

**SK&F**

Smith Kline & French Laboratories Limited  
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Welwyn Garden City, Hertfordshire AL7 1EY  
Telephone: Welwyn Garden 25111  
'Tagamet' is a trade mark

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TG:AD689

# Tagamet

cimetidine

## unique control of gastric acid secretion

## Medical Aid at Accidents

*This is a significant contribution to the discipline of emergency care and can be recommended for use internationally.* The Lancet  
Roger Snook, 1974, 235 figures, 136pp, hardback, ISBN 0 906141 65 6, price £7.65, post and packing free.

## Rehabilitation Today

*'Every medical practitioner, every medical student (and every dean) should . . . have access to a copy of this book . . . Its use as a source should become second nature.'* British Medical Journal  
Stephen Mattingley (Ed.), 1977, 216 figures, 189pp, paperback, ISBN 0 906141 00 1, price £6.20, post and packing free.

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*'As an aid to the diagnosis and treatment of a wide range of skin disorders, this richly illustrated guide is immeasurable. No general practitioner or vocational trainee should be without it.'* Modern Medicine  
Lionel Fry, 2nd edition, 1978, 506 figures, 168pp, hardback, ISBN 0 906141 02 8, price £9.50, post and packing free.

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Malcolm Chiswick, 1978, 113 figures, 112pp, hardback, ISBN 0 906141 01 X, price £6.95, post and packing free.

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*'A profusely illustrated book aiding the early recognition, prompt referral and treatment of diseases found in the mouth. Of outstanding value to medical students, dental practitioners, dental students and dental auxiliaries.'* Choice  
C. E. Renson (Ed.), 1978, 230 figures, 96pp, hardback, ISBN 0 906141 04 4, price £6.75, post and packing free.

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*'This book is particularly welcome as it provides a concise and readable account of immunisation procedures throughout the world.'* Journal of the Royal College of General Practitioners.  
George Dick, 1978, 24 figures, 160pp, paperback, ISBN 0 906141 03 6, Price £4.95, post and packing free.

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*'It incorporates between its covers more information than can be gleaned from any other single source with respect to preventive cariology and does so at a remarkable low cost.'* The Probe  
Leon Silverstone, 1978, 74 figures, 176pp, hardback, ISBN 0 906141 06 0, price £6.45, post and packing free.

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James S. Fleming, 1979, 245 figures, 144pp, hardback, ISBN 0 906141 05 2, price £7.50, post and packing free.

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*'This book convincingly demonstrates the contribution psychiatry can make to the understanding and management of a wide range of problems . . . particularly useful to community psychiatric nurses, general practitioners, medical and nursing students.'*  
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Michael N. Maisey, 1980, 349 figures, 144pp, hardback, ISBN 0 906141 42 7, price £9.95, post and packing free.

## Topic Packs

To be published in March 1980.

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