THE PRO CHOICE IN ARTHRITIS

It is commonly agreed that prostaglandins confer upon the gastric mucosa a resistance to erosion and damage.[1] This so called mucoprotection is compromised by the use of antiarthritic drugs which are prostaglandin synthetase inhibitors. It has been suggested that this is of great relevance to the observed level of gastric side-effects observed with this class of drug.

Lederfen in the stomach has little or no effect on the mucoprotection conferred by the endogenous prostaglandins.[2] Simply, unmetabolised Lederfen is not a prostaglandin synthetase inhibitor.

The major metabolites of Lederfen are however most potent PSIs, shown by in vitro studies to be twice as potent as indomethacin.[2] Thus, once Lederfen

has been absorbed – avoiding prostaglandin-associated gastric compromise – a powerful antiarthritic effect is observed. Lederfen has been found to be at least equal in clinical effectiveness to reference standards including naproxen,[3] indomethacin,[4] and aspirin.[5] But with significantly fewer side-effects.

Power without doubt. The pro-choice in arthritis.

Lederfen

fenbufen TABLETS

the pro-drug way to control pain, stiffness and side-effects

Indications: Rheumatoid arthritis, osteoarthritis, ankylosing spondylitis. **Dosage: Adults:** One tablet in the morning and two at night. LEDERFEN is not a gastric irritant and is converted, following absorption into long-acting active metabolites. Consequently LEDERFEN is extremely unlikely to cause gastro-intestinal bleeding or ulceration. Furthermore, LEDERFEN may be used without dosage modification in elderly patients in whom mild to moderate renal impairment commonly occurs. **Contra-indications:** Hypersensitivity to propionic acid anti-inflammatory drugs or aspirin. **Precautions:** In patients with a history or evidence of active peptic or intestinal ulceration, and only when considered essential in pregnant and nursing women. **Side-effects:** LEDERFEN is well tolerated by most patients. Gastro-intestinal symptoms, and occasionally skin rash are the most commonly reported. **Legal Category:** POM. **Presentation:** Light blue, film coated, capsule shaped 300 mg tablets engraved "LL300," or capsules printed "Lederle 300 mg," in bottles of 100. **Basic NHS Cost:** £16.24 per 100 tablets or capsules. PL/0095/0081. Further information is available on request to the company.

Lederle Laboratories, a division of Cyanamid of Great Britain Limited, Fareham Road, Gosport, Hants PO13 0AS. Tel: (0329) 236131.

References: 1. Guth PH, Ann Rev Med; 33 : 183-196 (1982) 2. Birnbaum J, et al, Pharmacology; 25 (Suppl. 1): 27-38 (1982) 3. Khan FM, to be published 4. Salzman RT, Reid RT, Eur J Rheum and Inflam; 5 (3) 318-325 (1982) 5. Roden DF, J Irish Med Assoc; 72 (No. 6.) 250-256 (1979).

Lederle

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unique pH-sensitive

NEW ONCE-DAILY

2 CAPSULES o.d.

Oruvail

ketoprofen

Programmed to control your patients' symptoms 24 hours-a-day

dialysing membrane

ketoprofen

IN THE STOMACH

the acid environment prevents release of active drug – minimising local gastric irritation.

IN THE INTESTINE

the more alkaline environment [illegible]

Prescribing information

Dosage: Orally with food, 100-200mg once daily

Contra-indications: Recurring history of/or peptic ulceration, chronic dyspepsia, use in children, in patients sensitive to aspirin or other non-steroidal anti-inflammatory drugs known to inhibit prostaglandin synthetase or with bronchial asthma or allergic disease

Precautions: Pregnancy, lactation. Dosage of concomitant protein binding drugs may need modification

Side-effects: Occasional gastro-intestinal intolerance. Very rare gastro-intestinal haemorrhage/skin rashes.

Presentation: 100mg capsules. PL 0019/0111

Basic NHS Cost: Oruvail 100 x 100mg capsules £38.38

Oruvail is a trademark

1982

M&B May & Baker

May & Baker Ltd, Dagenham, Essex RM10 7XS MA 1411

Presentation [illegible]

Indications [illegible]

Dosage [illegible]

Side-effects [illegible]

Precautions [illegible]

Contra-indications [illegible]

Pack [illegible] packs of 28 [illegible] prescribing information is available from Geigy

Pharmaceuticals Horsham West Sussex

References [illegible]

Geigy

New

ONE A DAY VOLTAROL® RETARD

diclofenac sodium in a slow-release formulation

Night and day relief from arthritic pain
Effective against morning stiffness[2]

Long term activity in arthritis

IN the treatment of arthritis, relief of pain and inflammation is a major objective. The ultimate aim, however, is to restore mobility lost through painful, stiffened joints. This requires long-term, consistently effective control of pain and inflammation. Continuity of treatment is fundamental to the successful management of arthritis.

A PRODUCT of Boots Research, Froben is designed for the long-term treatment of arthritis. Rapidly absorbed, it quickly reaches the affected joints bringing pain and inflammation firmly under control and maintaining that control over long periods of treatment. Drug accumulation does not occur and Froben is well tolerated by most patients. Froben is suitable for continuous treatment. Which is why it is effective.

SUITABLE for most arthritic patients, Froben is particularly valuable for those who need a high level of relief from pain and inflammation. Froben will provide that extra relief without the high incidence of side-effects often associated with the more potent of the anti-arthritic agents.

FROBEN is an excellent anti-arthritic with which to start treatment. It is an excellent antiarthritic with which to continue treatment. With Froben, your arthritic patients will receive the full benefit of continuous, consistent long-term therapy.

Froben
flurbiprofen

Active in Arthritis

Prescribing Information:
Presentation: Sugar-coated tablets, each containing either 50mg or 100mg of flurbiprofen. **Uses:** Froben is indicated in the treatment of rheumatoid disease, osteoarthrosis and ankylosing spondylitis. **Dosage:** 150mg to 200mg daily in 3 or 4 divided doses. In patients with severe symptoms or disease of recent origin, or during acute exacerbations, the total daily dose may be increased to 300mg in divided doses. **Contra-indications, Warnings etc.:** Froben should not be given to patients with peptic ulceration. Care should be taken when administering the drug to patients with asthma or who have experienced bronchospasm with other anti-inflammatory or analgesic agents. The safety of Froben during pregnancy or lactation has not been established. In animal experiments, no teratogenic effects were demonstrated but parturition was delayed and prolonged. Side-effects: dyspepsia, heartburn and headache are the commonest encountered. Occasional skin rashes have been reported. Treatment of overdosage: gastric lavage and, if necessary, correction of serum electrolytes. There is no specific antidote. **Basic NHS Price:** 50mg tablets, 100 £8.24 100mg tablets, 100 £15.65. **Product Licence No:** 50mg tablets, PL0014/0167. 100mg tablets, PL0014/0168. Further information is available on request.

If you have not yet used Froben, naturally you will wish to know more about the product than we can convey in this advertisement. We will gladly send you the Froben Clinical & Technical Review upon your request.

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Address .....

.....

The Boots Company Ltd., Nottingham, England

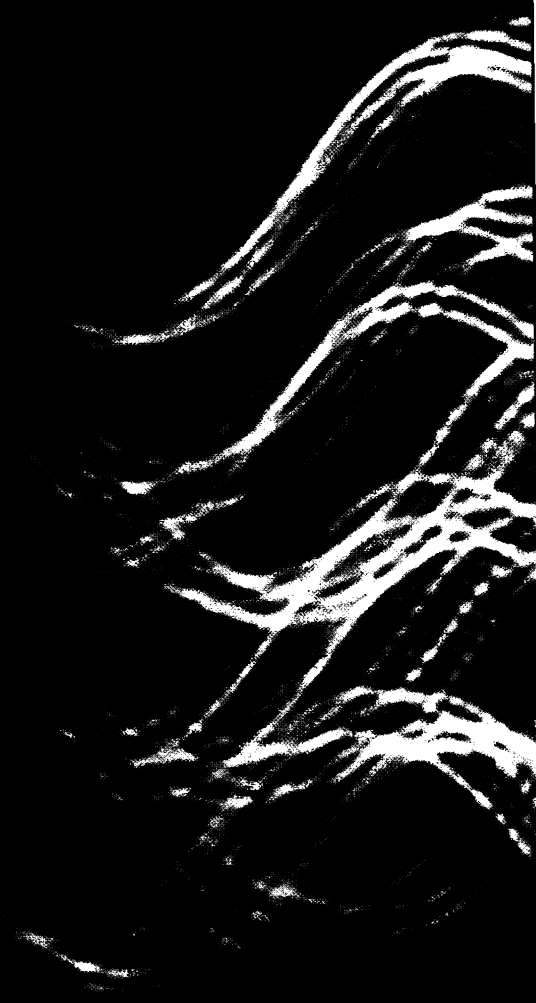
New Product

towards mobility

Flosint offers major anti-inflammatory/analgesic activity WITHOUT an unacceptable level of adverse effects, possessing both the powerful anti-inflammatory properties of indomethacin and the potent analgesic effects of the propionic acid derivatives.

Flosint is particularly suitable for treatment of a wide range of arthritic disorders including:

- Osteoarthritis
- Rheumatoid arthritis
- Ankylosing spondylitis
- Non-articular rheumatism



Prescribing Information

Presentation White, uncoated, biconvex, scored tablets containing 200 mg indoprofen.

Uses Flosint is an analgesic anti-inflammatory indicated for the treatment of the arthritides: rheumatoid arthritis, osteo-arthrosis, ankylosing spondylitis and others. Its analgesic activity may be utilised in a variety of disorders characterised by mild to moderate pain such as lower limb ischaemia, episiotomy and other surgical and dental procedures, and malignancy.

Dosage and Administration Adults: The recommended initial dosage of indoprofen is 200 - 600 mg daily in two to three divided doses. In some severe conditions it can be advantageous to increase the daily dosage to 800 mg. Maintenance therapy can be accomplished by reducing the dosage to the level which gives satisfactory relief of symptoms for prolonged periods. The tablets should be taken with food to increase tolerability. Children: Paediatric usage has not been established.

Contra-Indications, Warnings, etc. *Contra-Indications:* Indoprofen is a propionic acid derivative and a prostaglandin synthetase inhibitor. It should not be given to patients with known sensitivity to this class of compounds or to patients with active peptic ulceration. *Warnings:* Bronchospasm may be precipitated in patients suffering from or with a previous history of bronchial asthma or allergic disease. Indoprofen is extensively protein-bound, and may displace oral anti-coagulants, sulphonylureas, etc. from binding sites. Dosage alterations may be needed in patients requiring concomitant treatment with these agents. Dosage reduction may be required in renal or hepatic impairment. *Pregnancy:* Animal experiments show no evidence of teratogenicity. However, this class of compounds has been shown to delay parturition in animals. The use of indoprofen during pregnancy should be avoided if possible. *Adverse Effects:* The most common adverse reactions caused by indoprofen are gastro-intestinal, including dyspepsia and nausea. Haemorrhage can occur rarely, as well as peptic ulceration. Other effects include mild central nervous system symptoms, such as dizziness and headache, and also skin rashes of various types. Decrease in platelet count has been observed rarely and blood dyscrasias may uncommonly occur. Limited data available suggests that abnormal liver function may be further impaired by treatment with indoprofen. *Overdosage:* Gastric lavage and general supportive treatment should be carried out. There is no specific antidote.

Legal Category POM

Package Quantities Containers of 100 tablets.

Basic NHS Cost Container of 100 tablets - £16.00

Product Licence Number, 3433/0034 April 1983

References:

1. *Eur. J. Rheumatol. Inflamm.* (1981), **4**, 103
2. *Curr. Med. Res. Opin.* (1979), **5**, 793
3. *Eur. J. Rheumatol. Inflamm.* (1981), **4**, 74
4. *Eur. J. Rheumatol. Inflamm.* (1981), **4**, 53
5. *Eur. J. Rheumatol. Inflamm.* (1981), **4**, 1
6. *J Oral Surg* (1981), **39**, 21
7. *J. Int. Med. Res.* (1982), **10**, 306.

Further information is available from:

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without pain

Clinical evidence has confirmed that Flosint is at least as effective as other anti-inflammatory agents in relieving pain and inflammation. [1-4]

FLOSINT
INDOPROFEN

- Highly effective anti-inflammatory properties. [5]
- Powerful, rapid relief of pain - superior in pain relief to paracetamol (650mg) plus dextropropoxyphene (100mg). [6]
- Well tolerated by most patients [5] - the spectrum of adverse reactions does not differ significantly from other leading non-steroidal, anti-inflammatory drugs. [7]
- Dosage tailored to meet the patients' changing needs - simple b.d. dosage.

in arthritis

FLENAC®

fenclofenac

a step beyond symptomatic relief

Flenac is not only a first-class treatment for arthritic pain and inflammation; recent studies[1-4] point to an extra benefit not shared by other non-steroidal anti-inflammatories.

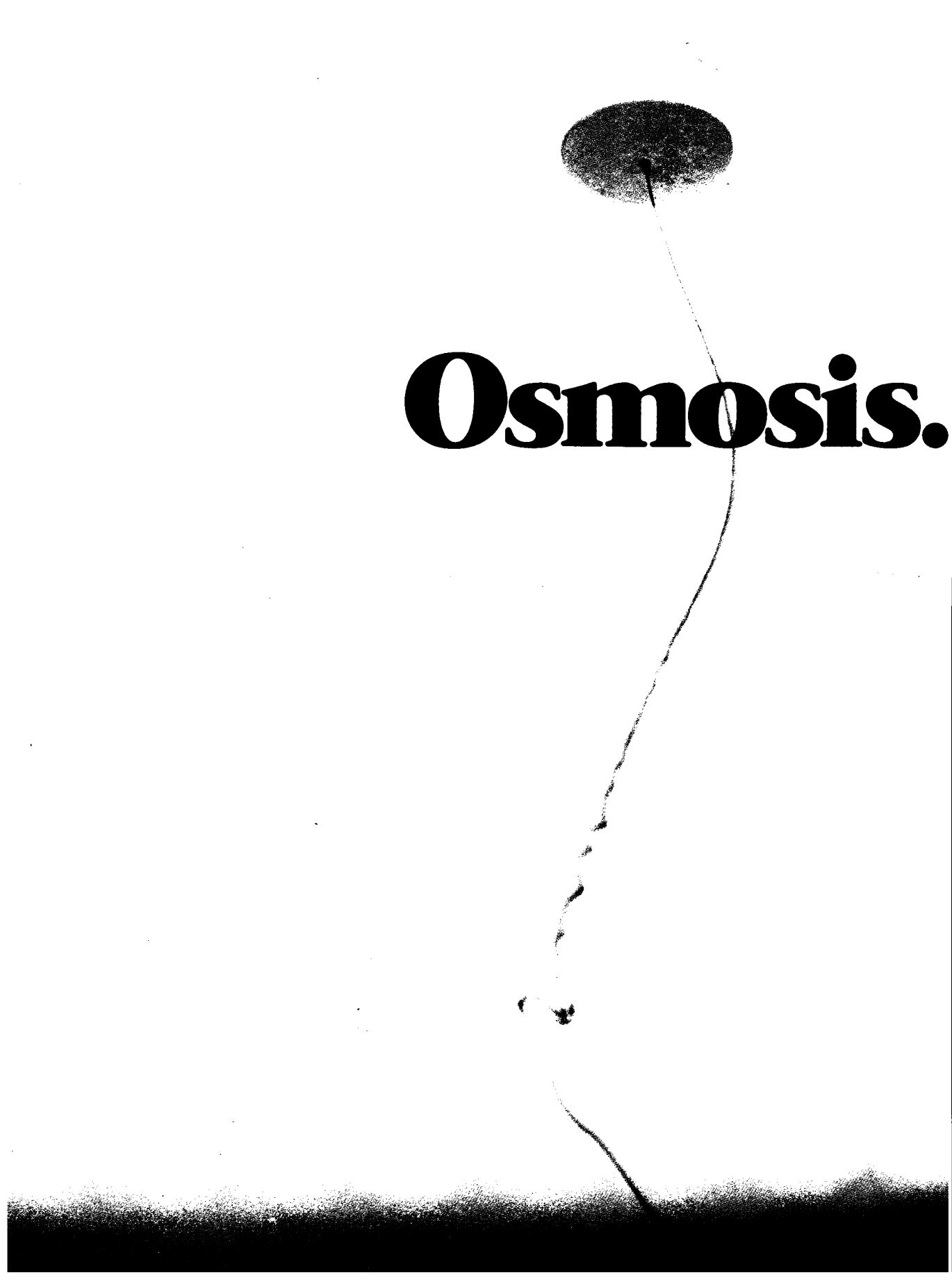
These studies show Flenac to have a beneficial effect on E.S.R. and on C-reactive protein and Rheumatoid Factor titres – the laboratory parameters considered to best reflect disease activity and correlate with radiological evidence of joint damage[5]

reducing eventual joint damage

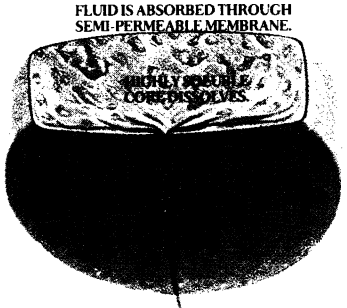
relieving pain and inflammation

Prescribing information: Presentation Tablets of 500mg fenclofenac. **Indications** Chronic and subacute rheumatological conditions such as osteoarthritis, rheumatoid arthritis, ankylosing spondylitis. **Dosage and Administration** Adults 600-1200mg (2-4 tablets) daily in divided doses (morning and night) with or after food. Flenac is not recommended for children. **Contra-indications** Active peptic ulceration or gastric bleeding. **Warnings** Flenac should not at present be prescribed for children or for pregnant or lactating women. Flenac should not be co-administered with anti-coagulants. Care should be taken when treating patients with known renal or hepatic dysfunction, eczema, asthma or sensitivity to other non-steroidal anti-inflammatory drugs. **Note** Flenac is marketed without tablet markings. **Side-effects** Gastro-intestinal symptoms sufficient to require discontinuing treatment are rare. Rashes have occurred, but have resolved shortly after withdrawal of the drug. **N.H.S. Price** £12.92 per pack of 100. **P.L.** 44/0060. **References** 1. *Roy Soc Med (CSS)* (1980) No 28, p 95. 2. *Roy Soc Med (CSS)* (1980) No 28, p 17-22. 3. *Roy Soc Med (CSS)* (1980) No 28, p 57-60. 4. *Roy Soc Med (CSS)* (1980) No 28, p 109-112. 5. *Brit Med J* (1980), **280**, p 964. Additional information is available from: Reckitt & Colman Pharmaceutical Division, Hull HU8 7DS. Tel: (0482) 26151. Flenac is a registered trademark.

P01075/9/80


Osmosis.

The tablet.



OSMOSIN is the tablet that releases therapy only in solution.

Designed to deliver a constant flow of relief from pain, inflammation and stiffness.

With a precision and regularity that no other oral therapy can achieve.

OSMOSIN releases a solution gradually and consistently which is absorbed throughout the digestive system.

To help minimise GI and CNS side effects associated with conventional therapies.

One tablet daily will provide full 24-hour efficacy, for most patients.

OSMOSIN is the principle of osmosis in a tablet.

Osmosin™

sodium indomethacin trihydrate

Antiarthritic.

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OSMOSIN: One tablet a day gives 24-hour relief.

OSMOSIN: Highly effective relief from pain, inflammation and stiffness.

OSMOSIN: Minimises GI and CNS side effects.

℞ Osmosin 1 daily (30)

Abridged Product Information.

Full prescribing information is available on request and should be consulted before prescribing.

INDICATIONS Osteoarthritis; rheumatoid arthritis; ankylosing spondylitis; acute musculoskeletal disorders and low back pain. Pain and associated symptoms of primary dysmenorrhoea.

DOSAGE Usually one daily. If required one twice daily, take whole - do not chew or crush - and take with food or immediately after a meal. The maximum dose is two per day.

CONTRA-INDICATIONS Active peptic ulcer, history of gastro-intestinal lesions, sensitivity to indomethacin or other non-steroidal anti-inflammatory agents, children, lactating women, and pregnancy.

PRECAUTIONS If GI symptoms occur, weigh benefits against risks of continuing. If GI bleeding occurs discontinue OSMOSIN. May mask the signs and symptoms of infection. Use cautiously in the elderly and in patients with a history of psychiatric disorders, epilepsy or parkinsonism. Monitor the prothrombin time when adding OSMOSIN to the treatment of patients on anticoagulants. Interactions: aspirin, probenecid, lithium, frusemide, thiazides, beta-blockers.

SIDE EFFECTS OSMOSIN is usually well tolerated. GI symptoms including nausea, dyspepsia, are most common. Isolated cases of peptic ulcer and bleeding have been reported with indomethacin as have hepatic CVS, and renal effects. CNS symptoms including headache, dizziness, rarely hypersensitivity - including skin rashes - and haematological reactions; ocular changes including blurred vision and corneal deposits have occurred.

BASIC NHS COST Each OSMOSIN Tablet is blue, coded 'OSMOSIN' and contains 105mg sodium indomethacin trihydrate. Pack of 30 - Basic NHS price £10.80.

Product licence number: 0025 0148 Product authorisation number: 35 59 1

Issued November 1982

TM denotes trademark.

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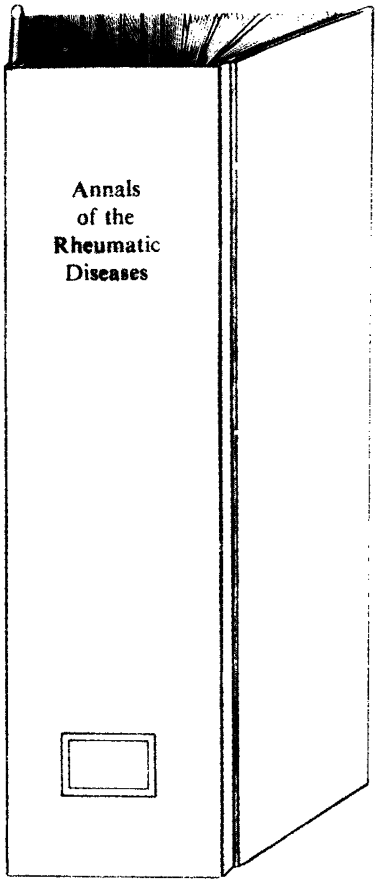
Merck Sharp & Dohme Limited, Hoddesdon, Hertfordshire, EN11 9BU

Osmosin™

sodium indomethacin trihydrate

Antiarthritic.



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O'Donnell, Barry, *British Medical Journal*, 1977, **1**, 451.

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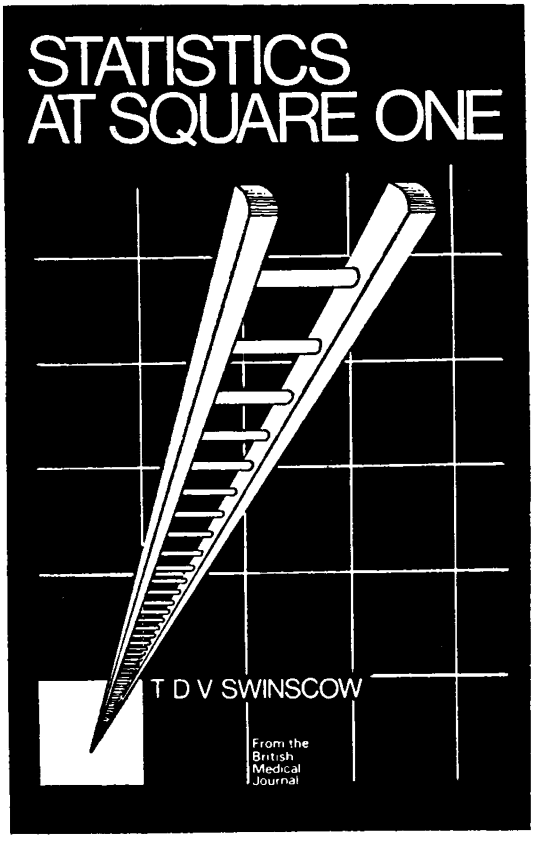
de Jong, Rudolph, H., *J.A.M.A.*, 1977, **237**, 1874.



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