

It is commonly agreed that prostaglanding confer upon the gastric mucosa a resistance to erosion and damage. 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.<sup>2</sup> 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.<sup>2</sup> 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 prochoice in arthritis.

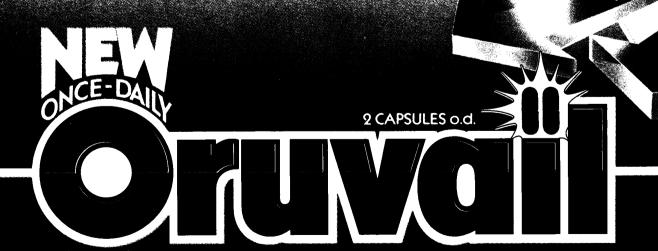
the pro-drug way to control pain, stiffness and side-effects

Indications: Rheumatoid arthritis, osteoarthritis, ankylosing spondylitis. Dosage: Adults: One tablet in the morning and two at night. LEDER FEN is not a gastric irritant and is converted, following absorption into long-acting active metabolites. Consequently LEDER FEN is extremely unlikely to cause gastro-intestinal bleeding or ulceration. Furthermore, converted, following absorption into long-acting active metabolites. Consequently LEDEK FEN is extremely unlikely to cause gastro-intestinal bleeding or ulceration. Furthermore, LEDER, which 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 mursing women. Side-effects: LEDER, FEN is well tolerated by most patients. Gastro-intestinal symptoms, and occasionally skin reash 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: 516.24 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: I. Guth PH, Ann Rev Med: 33: 183-196 (1982) 2. Bimbaum J. et al. Pharmacology. 25 (Suppl. 1): 27-38 (1982) 3. Rhan FM, to be published 4. Salzman R.T.

Lederle
Reid R.T. Eur J Rheum and Inflam; 5 (3) 318-325 (1982) 5. Roden DF, JIrish Med Assoc: 72 (No. 6) 250-256 (1979).

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unique DH-Sec



ketoprofen

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





#### IN THE STOMACH

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

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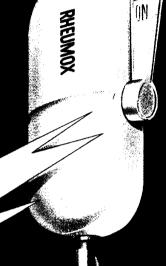
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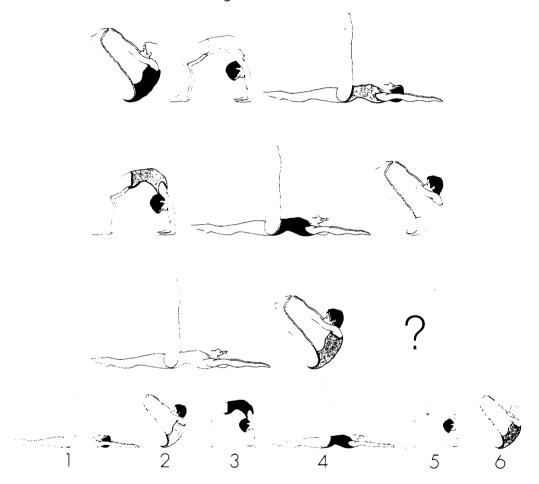
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Select the correct figure from the six numbered ones



# Voltaro I<sup>®</sup> for osteoarthritis

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### ...confused?

# Thank goodness for BRUFEN 400

The Great British Workhorse in arthritis



# New Product

#### **Prescribing Information** Presentation

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

Rheumatoid arthritis, osteoarthritis, ankylosing spondylitis and other musculo-skeletal disorders.

Dosage

Osteoarthritis: the recommended dosage of indoprofen is two tablets in the morning and one tablet at night. The night-time dosage may be increased to two tablets for patients

with more severe pain.
Rheumatoid Arthritis and Ankylosing Spondylitis: the recommended dosage of indoprofen is two tablets in the morning and two tablets at night.
A relatively small group of patients may prefer to take one tablet three times or even four times daily. Flosint allows for this flexibility.

As with similar drugs, the tablets should be taken with food to diminish the risk of gastric irritation.

Children: Paediatric usage has not

been established.

Contra-Indications, Warnings, etc. Sensitivity to this class of compounds,

and 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: The use of indoprofen during pregnancy should be avoided if possible, though animal experiments show no evidence of teratogenicity. Adverse Effects: The most common adverse reactions caused by indoprofen are gastro-intestinal, including dyspepsia and nausea. Haemorrhage can occur rarely, as well as exacerbation of latent 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 suggest that abnormal liver function may be further impaired by treatment with indoprofen. Overdosage: Gastric lavage and general supportive treatment should

Legal Category

Basic NHS Cost
Container of 100 tablets-£15.00.
Product Licence Number PL3433/0034.

be carried out. There is no specific

neturunces
1. Eur. J. Rheumatol. Inflamm. 1981; 4: 118.
2. Ibid 1981; 4: 74. 3. Ibid 1981; 4: 53. 4. Brit. Med. J. 1978; 1: 274. 5. Clim. Trials. J. 1982; 19: 248. 6. Eur. J. Rheumatol. Inflamm. 1981; 4: 126. 7. Ibid 1981; 4: 135. 8. Ibid 1981; 4: 144.
9. Curr. Ther. Res. 1978; 24: 274. 10. J. Oral Surg. 1981; 39: 21.

Full prescribing information is available from



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# towards mobility

■losint offers major anti-inflammatory/analgesic activit WITHOUT an unacceptable level of adverse effects. possessing both the powerful anti-inflammatory propertic of indomethacin and the potent analysesic effects of the propionic acid derivatives.

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

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



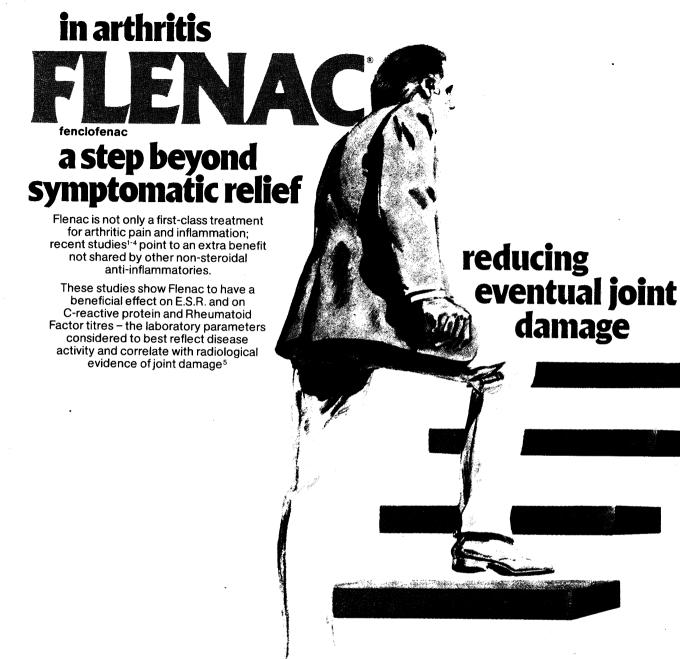
# vithout pain

Clinical evidence has confirmed that Flosint is at least as effective as other anti-inflammatory agents in relieving pain and inflammation<sup>1-5</sup> and is often better tolerated.<sup>6-8</sup>

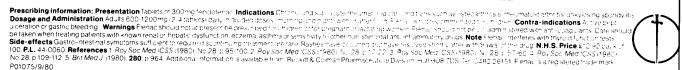


- Highly effective anti-inflammatory properties 4.9
- Powerful, rapid relief of pain superior in pain relief to paracetamol (650 mg) plus dextropropoxyphene (100 mg)<sup>10</sup>
- Well tolerated by most patients no reports of onycholysis or phototoxicity in long-term studies 6.7
- Dosage tailored to meet the patients changing needs - simple b.d. dosage.





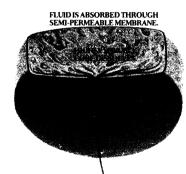
relieving pain and inflammation



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# The tablet.



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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.

# SMOSIN sodium indomethacin trihydrate

Antiarthritic.



FOR MOST ARTHRITICS

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

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.

BASICNHS COST Each OSMOSIN Tablet is blue, coded 'OSMOSIN' and contains 105 mg sodium indomethacin trihy drate. Pack of 30 - Basic NHS price

410.80. Product licence number: 0025-0148 Product authorisation number: 35-59-1 Issued November 1982

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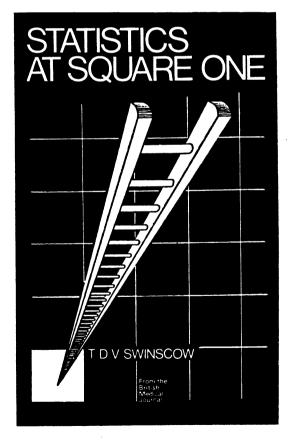
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O'Donnell, Barry, British Medical Journal, 1977, 1, 451.

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ation. Continuity of treatment is fundamental to the successful management of arthritis.



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ROBEN is an excellent antiarthritic with which to start treatment. It is an excellent antiarthritic with which to continue treatment. With Froben, your arthritic patients will receive the full

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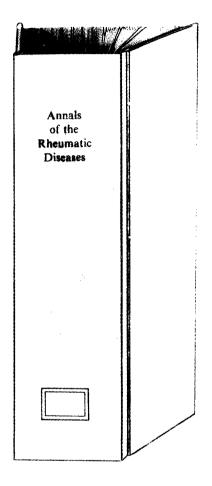


### Active in Arthritis

Prescribing information:

Presentation: Sugar-coated labels, such containing either 50mg or 100mg of flurbiprofen. Usea: Froban is indicated in the treatment of rhearmatoid disease, extecanthrosis and anhylosing spondysis: Dossage: 150mg to 200mg daily in 3 or 4 divided doses. In plasteris with sweets gungtoms or disease of recent origin, or during scale excentrations, the total daily dose may be increased to 200mg in divided doses. In disease of recent origin, or during scale excentrations, the total daily dose may be increased to 200mg in divided doses. Or disease of recent origin, or during scale excentrations, the total daily dose may be increased to 200mg in divided doses. Coestra-indications, Warnings after: Frober should not be given to painters with abanta or who have experienced broundaries are within the scale of th

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