The 'ideal' sedative at last? : Sedaltine : safe, non-barbituric, sedative, muscle relaxant, anti-tensive ; in stress and insomnia / Clinical Products Ltd.

"**Quadriga:** *As the Roman War Chariot propelled by four matched horses reached its goal by concerted effort so in* **sedaltine** *the four matched myopsychic and sedative drugs reach theirs . . .*"

the 'ideal' sedative at last?

sedaltine

safe — non-barbituric — sedative
muscle relaxant — anti-tensive

in stress and insomnia

WHAT IS sedaltine?

A 'Myopsychic' sedative, containing the synergistic combination of carbromal, bromvaletone, mephenesin and rauwolfia serpentina with aluminium hydroxide. This well balanced formula provides rapid and effective sedation, assisted by muscle relaxation and anti-tensive action, without the clinically undesirable side-effects so often produced by barbiturates.

WHY IS IT DIFFERENT?

Containing no barbiturates, **sedaltine** combines the hypnotic efficacy of the group without their undesirable side-effects with the unique sedative action of rauwolfia. Its concomitant muscle-relaxant and anti-tensive effects, make the patient more responsive to sedation.

WHAT IS ITS ACTION?

sedaltine acts both centrally and peripherally, normalises a depressed anxiety threshold, relaxes muscular tension and is anti-tensive.

In sedative dosages it is of proven value in **stress** conditions and all cases where sedation is indicated, including the field of psychosomatic medicine and psychiatry.

In hypnotic dosages it is rapid in action (10-15 minutes) promotes natural sleep of satisfactory duration. **sedaltine** is not habit-forming, gives rise to no withdrawal symptoms even after prolonged use.

Treatment of insomnia by day-time sedation. It has been clinically established that in cases due to **stress** conditions **sedaltine** may be successfully employed in sedative dosages (½ to 1 tablet after breakfast, lunch and dinner). In many cases the necessity for a further hypnotic dose on retiring is thereby obviated.

ITS FORMULA

Carbromal B.P.C.	... ...	195 mg.
Bromvaletone B.P.C. '49	...	65 mg.
Aluminium hydroxide B.P.C.	...	100 mg.
Rauwolfia B.P.C. (total alkaloids 55%)	... ...	0.25 mg.
Mephenesin B.P.C.	... ...	100 mg.

ITS PHARMACOLOGY

Carbromal and Bromvaletone act directly on the sensory cortex, repress morbid psychomotor activity, and due to their rapid excretion do not give rise to side-effects. **Mephenesin** sedates both the cortex and spinal cord and relaxes muscle tension. **Rauwolfia** endows **sedaltine** with its unique sedative effect, characterized by calm, tranquillity and sociability without drowsiness. In the sub-therapeutic dosage present it exerts no definite hypotension but only mild anti-tensive effect thereby facilitating sedation. **Aluminium hydroxide** is an effective alkaline gastric sedative which reduces motility and normalises secretion.

ITS ADVANTAGES

The greatest value of the **sedaltine** formula is the demonstrable synergy between its active constituents. By reason of its polyvalent effect, both central and peripheral, dosages of the individual components have been reduced, thus relegating to a clinically negligible minimum the incidence of side-effects.

- **Myopsychic Sedation**
- **Safety,** even in doses greatly in excess of therapeutic requirements
- in sedative dosage—sedation without somnolescence
- in hypnotic dosage—rapid onset and satisfactory duration of sleep without morning 'hangover'
- concomitant muscle relaxation
- concomitant anti-tensive action
- rapid elimination (non-cumulative)
- no depression of the medullary centres
- no hepatic or renal impairment
- no danger of habit-formation or withdrawal symptoms
- no known contra-indications

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(*Indications and Dosage Recommendations see back page*)

CLINICAL PRODUCTS LTD. RICHMOND SURREY

sedaltine

(carbromal · bromvaletone · mephenesin · rauwolfia)

Summary and Conclusions of Biological Tests

A series of tests were made to compare the narcotic effect of **sedaltine** with a mixture of bromvaletone and carbromal as a 'standard' and amylobarbitone as a control. The mixtures were administered to groups of mice of approximately 20 gms. body weight by the intra-peritoneal route. The animals were placed on their backs and the number in each group that failed to right themselves in one hour was observed. The median effective dose of each substance was defined as the amount necessary to maintain narcosis in 50% of the mice for at least one hour. The results are summarised in the following tables.

Compound	*Median effective dose*	*Median effective dose in terms of Carbromal and Bromvaletone*	*Potentiation or additive effect*
Carbromal 6g. Bromvaletone 2g.	0.25g./Kg.	0.25g./Kg.	Standard
sedaltine Carbromal 7.8g. Bromvaletone 2.6g. Mephenesin 4g. Rauwolfia 10mg. (total alkaloids 55%) Alum. Hydrox. 4g.	0.35g./Kg.	0.17g./Kg.	47%
Amylobarbitone	0.12g./Kg.	0.12g./Kg.	For comparison

N.B.—It is interesting to note that **sedaltine** appears to have one-third of the activity of Amylobarbitone and yet the open-chain ureides in the preparation are present in sub-therapeutic dosage.

sedaltine

(carbromal · bromvaletone · mephenesin · rauwolfia)

Summary and Conclusions of Clinical Tests

Test of efficacy

The efficacy of the treatment was assessed on subjective clinical findings; especially interesting was the frequency with which patients spontaneously remarked on the relaxation of tension and improved sleep which they experienced.

Side-effects

The incidence of side-effects was negligible; a few patients complained of slight drowsiness which, however, cleared on the dose being reduced. It was found that in average cases of **stress** it was advisable to commence with half a tablet twice daily and increase this dosage according to individual response.

Discussion of the results

The conditions treated may be grouped as follows:
Anxiety and tension, psychiatric conditions, insomnia, pre-operative tension and other conditions requiring general sedation.
With the exception of one case all patients benefited from the therapy and reported a sense of general well-being. So far there appear to be no contra-indications. The patients were under observation from 2 to 6 weeks.

Summary

A group of patients suffering from various psychosomatic disorders have been treated in general practice with **sedaltine** tablets. Amelioration of the symptoms occurred rapidly and the results were highly satisfactory. The reports here reviewed seem to indicate that in the overwhelming majority of cases requiring sedation, **sedaltine** is a valuable alternative to barbiturate therapy. ***It was noted with considerable interest that insomnia states significantly improved after the administration of sedative doses during the day.***

Result	*Anxiety states*	*Insomnia*	*Depression*	*Nervous Headache*	*Total*
Dramatic response	5	6	1	nil	12
Satisfactory response	10	3	3	2	18
No response	nil	1	nil	nil	1

RICHMOND SURREY

C.P.L

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WHEN AND HOW TO USE IT

INDICATIONS

for general sedation

sedaltine is indicated as symptomatic therapy in all psychosomatic conditions such as anxiety states, cardiac neurosis, neuro-dermatitis, neuroses generally, nervous dyspepsia, etc.

Sedative dosage:

¼—1 tablet after breakfast and lunch.

in pre-operative sedation

for general and dental surgery.

Pre-operative dosage:

½—2 tablets one hour before operation.

for insomnia

except if caused by severe pain.

Hypnotic dosage:

1—2 tabs. 10-15 minutes before retiring.

in pediatrics

because of its wide safety margin, **sedaltine** is the sedative of choice.

Child dosage:

Over 5 years according to age.

An Original

C.P.L

Research Product

sedaltine: supplied in dispensing packs, 100 and 250 tabs.

Basic N.H.S. cost: 25 tablets 3/-

sedaltine *is not advertised to the public and may be prescribed under the N.H.S.*

Clinical samples gladly sent on request

CLINICAL PRODUCTS LTD. - RICHMOND - SURREY