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PATTERNS OF NATURE : a series of decorative plants

No. 2: Rhododendron

Rhododendrons belong to the same family as the heaths and heather. Of the thousand odd species—not including hybrids—none is native to Britain, though Rhododendron ponticum from northern Asia Minor has established itself here as a weed in many woodlands. The majority of species flourish in soils derived from sand, gravel and some igneous rocks.

Western China and the Himalayas have provided most of the species now in cultivation in the British Isles. Fortunately many of them are hardy and easily grown from seed. May and June are the main flowering months but some blossoms can be found in any month. In size rhododendrons range from low growing plants a few inches high to tall trees. Botanically the azaleas are placed in the genus Rhododendron, though they are deciduous and have only five stamens in contrast with the true rhododendrons, which are evergreen and have ten stamens, like the shell pink variety in our illustration.

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Colour photograph by Douglas F. Lawson, A.I.B.P., A.R.P.S.

EXCESSIVE alkalisation of the stomach contents can induce a compensatory increase in acid secretion. Even carefully regulated milk-alkali drip has been suspected of aggravating hyperacidity.

In treating hyperacidity and peptic ulcer, therefore, alkalisation is not only unnecessary, but undesirable. It imposes on an already disorganised pattern of secretion unphysiological fluctuations that can prolong the hyperacidic tendency and impede the healing of ulcer.

The optimum therapeutic *p*H range is actually acid—between 3.5 and 4.5—but it permits ulcer healing and does not prejudice the secretory equilibrium or digestive function.

A natural pattern of secretion can be restored to the hyperchlorhydric patient by Prodexin tablets, without inconvenience or discomfort. When sucked, they rapidly relieve acid pain and maintain a safe and equable pH.

PRODEXIN

provides safe and predictable antacid treatment

Each Prodexin Tablet contains:

Aluminium glycinate (dihydroxy aluminium aminoacetate)...0.9 gramme Light magnesium carbonate.....0.1 gramme

DOSAGE:

For best results one tablet should be allowed to dissolve *slowly* in the mouth. If the tablets are chewed and swallowed the *duration* of the antacid action is correspondingly reduced and more frequent doses may be required.

For hyperacidity:

One to two tablets as required, or every two hours.

For prevention of hyperacidic attacks:

One tablet every two hours.

For peptic ulcer:

One to three tablets every hour depending on the severity of the condition.

PACKAGES:

Cartons of 30 individually wrapped tablets and dispensing packs of 240. Basic N.H.S. cost of 240 tablets: 30s. 4d.



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