

Zyloric prevents the formation of high uric acid levels in the body : apply a raw lean beef-steak to the gouty part ...

Contributors

Burroughs Wellcome and Company

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Zyloric

prevents the formation of
high uric acid levels in the body

There are many conditions, other than gout, where the use of ZYLORIC* will prevent such complications as urate stone formation, chronic gouty arthritis and kidney disease. (Kidney disease is the cause of death in about 25 per cent of patients with chronic gout. *Medicine* (1960), 39, 405.)

*Trade Mark

Apply a raw lean beef-steak to the gouty part. Change every 12 hours till cured.
John Wesley, *Primitive Physic*. 1st Edition 1747.

patients may offer optimum
acid levels.
do not interfere with the action
and may be given concomitantly.
vention of uric acid nephropathy
ly to excessive nucleoprotein catabo
c disease, treatment with ZYLORIC
possible, be given for 2 or 3 days
on or antineoplastic therapy, in a
three times daily for an adult, or
one per day for a child. ZYLORIC
should be continued indefinitely.



**in gout
and other conditions
where uric acid
is present in excess**

Zyloric

Prescribing information

Indications

Gout, both primary and secondary; secondary hyperuricaemia due to diseases in which nucleoprotein catabolism is excessive (acute and chronic leukaemia, polycythaemia vera, multiple myeloma, psoriasis, etc); and in the prophylaxis of urate nephropathy during intensive treatment of neoplastic conditions with radiotherapy or antineoplastic drugs when rapid destruction of tissue masses may occur. ZYLORIC is especially indicated in unusually severe or tophaceous gout, in gouty nephropathy, and where there is history, presence or risk of urinary urate stone formation.

Dosage and administration

ZYLORIC is administered orally in divided doses three times daily. In mild or moderate gout and hyperuricaemia one tablet three times daily should be given; in severe conditions up to two tablets three times daily may be required. The minimum effective dose is one tablet and the maximum recommended dose eight tablets daily. It is essential that a daily urinary output of 2 litres or more be maintained during ZYLORIC therapy, and neutral or alkaline urine is desirable. Normal serum uric acid levels are usually achieved in one to three weeks; thereafter the daily dosage should be adjusted according to the severity of the disease. In gout the prophylactic administration of colchicine is advisable during initial treatment with ZYLORIC. When ZYLORIC is used to replace uricosuric agents the precipitation of gouty attacks may be avoided if the uricosuric agent is withdrawn gradually over a period of about one month after the establishment of treatment with ZYLORIC at ordinary dosage. Combined therapy is not contra-indicated, however,

and for certain patients may offer optimum control of serum uric acid levels.

Salicylates do not interfere with the action of ZYLORIC and may be given concomitantly. For the prevention of uric acid nephropathy secondary to excessive nucleoprotein catabolism in neoplastic disease, treatment with ZYLORIC should, whenever possible, be given for 2 or 3 days before X-irradiation or antineoplastic therapy, in a dosage of 200 mg three times daily for an adult, or 8 mg per kg bodyweight per day for a child. ZYLORIC treatment can be maintained during the antineoplastic therapy and can also be continued indefinitely for prophylaxis of the hyperuricaemia which may arise during the natural crises of the disease. For prolonged treatment in these patients, 300 or 400 mg of ZYLORIC daily is usually enough to control the serum uric acid level.

Precautions and Contra-indications

As with uricosuric agents, acute gouty attacks may be precipitated at the start of treatment with ZYLORIC in new patients, and these may continue even after serum uric acid levels begin to fall. As stated previously, prophylactic administration of colchicine is advisable, particularly in new patients and in those where the previous attack rate has been high.

In patients receiving PURI-NETHOL* (Mercaptopurine) treatment with ZYLORIC will require a reduction to approximately 25 per cent of the usual dose of PURI-NETHOL.

The use of ZYLORIC to potentiate the effects of PURI-NETHOL has been reported. Animal experiments have shown that allopurinol may

increase the hepatic accumulation of iron, but the significance of this finding in man is not yet known.

Extensive reproductive studies using large doses of ZYLORIC in several species of animals have shown no adverse effects. So far there has been no clinical experience of the use of the drug in pregnancy.

Side-effects

In therapeutic dosage in man ZYLORIC is a drug of low toxicity. Diarrhoea and intermittent abdominal pain, skin rashes and mild fever have been reported occasionally. Symptoms suggesting drug idiosyncrasy, characterised by fever, chills, leucopenia, skin rash, pruritus, nausea and vomiting, have been reported in two cases. Hepatomegaly and jaundice have been noted in two patients, one of whom showed purpura and a skin rash; and abnormal liver enzyme levels have been detected in several cases. The changes reverted to normal when all medication was stopped, and their significance is not yet entirely clear.

Presentation

ZYLORIC Allopurinol, 100 mg scored white tablets. Basic cost to NHS: 40s 0d for 100 tablets. Additional information is available on request.

*Trade Mark



Wellcome

Burroughs Wellcome & Co.

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