

Simecon; Simetyl; Sicon; **Turk.:** Antiflat; Metsil; **UAE:** Salinal; **UK:** Asilone Windheaters†; Dentinox; Colic Drops; Infacol; Wind-Eze; **USA:** Baby Gas-X; Colicon; Degas; Extra Strength Minto Plus; Flatulex; Gas Relief; Gas-X; Maalox; Anti-Gas†; Major-Con; Mylanta Gas; Mylicon; Phazyme; SonoRox; **Venez.:** Antiflorm; Flatoril; Sicon†; Silicon†.

Multi-ingredient: numerous preparations are listed in Part 3.

Used as an adjunct in: **Austria:** Prontobarion; **Cz.:** Prontobarion†; **Spain:** Bario Dif.

Smectites

СМЕКТИТЫ

ATC — A07BC05 (diosmectite).

ATC Vet — QA07BC05 (diosmectite).

Profile

Smectites are natural mineral clays composed mainly of aluminium silicates and include aluminium magnesium silicate (p.2141), bentonite (p.2141), and Fuller's earth (p.1447). They have adsorbent properties and some, such as dioctahedral smectite (diosmectite), have been used in the management of diarrhoea. They are also used as pharmaceutical excipients and in industry.

References

1. Szajewska H, et al. Meta-analysis: smectite in the treatment of acute infectious diarrhoea in children. *Aliment Pharmacol Ther* 2006; **23**: 217–27.
2. Yen ZS, Lai MS. Smectite for acute diarrhoea in children. *Emerg Med J* 2006; **23**: 65–6.

Preparations

Proprietary Preparations (details are given in Part 3)

Cz.: Smecta; **Fr.:** Smecta; **Ger.:** Colina; **Gr.:** Smecta; **Hong Kong:** Smecta; **Hung.:** Smecta; **Ital.:** Diosmectal; Nodia; **Malaysia:** Smecta; **Pol.:** Smecta; **Rus.:** Smecta (Смекта); **Singapore:** Smecta; **Thai.:** Smecta.

Multi-ingredient: **Belg.:** Baxelax; **Ger.:** Colina Spezial.

Sodium Picosulfate (BAN, rINN)

DA-1773; LA-391; Natrii picosulfas; Natrii Picosulfas Monohydricus; Natrio pikosulfatas; Natriumpikosulfatti; Natriumpikosulfat; Nátrium-pikosulfát; Picosulfate de Sodium; Picosulfato de sodio; Picosulfophol; Pikosíran sodný monohydrát; Sodium picosulfate de; Sodium Picosulphate. Disodium 4,4'-(2-pyridylmethylene)-di(phenyl sulphate).

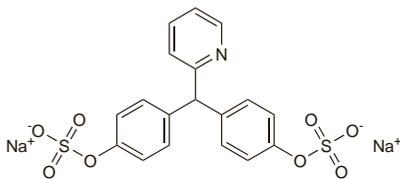
Натрия Пикосульфат

$C_{18}H_{13}NNa_2O_8S_2 \cdot H_2O = 499.4$.

CAS — 10040-45-6.

ATC — A06AB08.

ATC Vet — QA06AB08.



Pharmacopoeias. In *Eur.* (see p.vii) and *Jpn.*

Ph. Eur. 6.2 (Sodium Picosulfate). A white or almost white, crystalline powder. Freely soluble in water; slightly soluble in alcohol.

Adverse Effects and Precautions

As for Bisacodyl, p.1710 and p.1710.

Bowel evacuation. Sodium picosulfate with magnesium citrate was considered a safe and effective bowel cleansing agent in adults¹ and children² with inflammatory bowel disease. They tolerated the preparation as well as patients with other colonic disorders with no adverse effect on their disease symptoms. Patients should be kept well hydrated (it may be appropriate to carry out bowel preparation in hospital in frail or elderly patients to avoid the risks of over- or underhydration^{3,4}), and this procedure should not be used in suspected toxic dilatation of the colon.

In Australia, the Adverse Drug Reactions Advisory Committee has warned that low volume sodium picosulfate solutions may cause marked dehydration, hyponatraemia, other electrolyte abnormalities, and associated complications. Patients at particular risk include infants, the elderly, the frail, and those with congestive heart failure or with renal impairment.⁵

A grand mal seizure in a 64-year-old female given sodium picosulfate with magnesium citrate was assumed to have been caused by hyponatraemia; the patient had normal electrolyte concentra-

tions in the period before taking the bowel preparation. Care is needed when sodium picosulfate solutions are used in those with a low seizure threshold or potential sodium depletion.⁶

1. McDonagh AJG, et al. Safety of Picolax (sodium picosulfate-magnesium citrate) in inflammatory bowel disease. *BMJ* 1989; **299**: 776–7.
2. Evans M, et al. Safety of Picolax in inflammatory bowel disease. *BMJ* 1989; **299**: 1101–2.
3. Lewis M, et al. Bowel preparation at home in elderly people. *BMJ* 1997; **314**: 74.
4. Hanning CD. Bowel preparation at home in elderly people. *BMJ* 1997; **314**: 74.
5. Adverse Drug Reactions Advisory Committee (ADRAC). Electrolyte disturbances with sodium picosulfate bowel cleansing products. *Aust Adverse Drug React Bull* 2002; **21**: 2. Also available at: <http://www.tga.health.gov.au/adr/aadrb/aadr0202.pdf> (accessed 03/07/08)
6. Frizelle FA, et al. Hyponatremia and seizures after bowel preparation: report of three cases. *Dis Colon Rectum* 2005; **48**: 393–6.

Pharmacokinetics

Like bisacodyl (p.1710), sodium picosulfate is metabolised by colonic bacteria to the active compound bis(*p*-hydroxyphenyl)pyridyl-2-methane. Only a small amount of sodium picosulfate is absorbed after an oral dose; this is subsequently excreted in the urine.

Uses and Administration

Sodium picosulfate is a stimulant laxative related to bisacodyl (p.1710) used for the treatment of constipation (p.1693) and for evacuation of the colon before investigational procedures or surgery. When taken orally it is metabolised by colonic bacteria to an active form that stimulates bowel movements. It is usually effective within 6 to 12 hours although when used with magnesium citrate for bowel evacuation an effect may be seen within 3 hours.

For constipation it is given as a single oral dose of 5 to 10 mg, usually at bedtime. (For doses in children see below.)

For bowel evacuation, a dose of sodium picosulfate 10 mg with magnesium citrate (p.1743) is given in the morning and again in the afternoon of the day before examination.

Administration in children. In the UK, the following oral doses of sodium picosulfate have been recommended for children in the treatment of constipation; the dose is usually given at night:

- 1 month to 4 years: 250 micrograms/kg (maximum 5 mg)
- 4 to 10 years: 2.5 to 5 mg
- over 10 years: 5 to 10 mg

Most UK licensed product information gives similar doses to those above for **bowel cleansing**. Alternatively, some recommend that children may be given the following doses of a sachet containing sodium picosulfate 10 mg (with magnesium citrate):

- 1 to 2 years: / sachet in the morning and / sachet in the afternoon
- 2 to 4 years: / sachet in the morning and / sachet in the afternoon
- 4 to 9 years: 1 sachet in the morning and / sachet in the afternoon
- over 9 years: 1 sachet in the morning and 1 sachet in the afternoon

Preparations

BP 2008: Compound Sodium Picosulfate Powder for Oral Solution; Sodium Picosulfate Oral Solution.

Proprietary Preparations (details are given in Part 3)

Arg.: Agarol; Cirulaxia; Dagol; Dulcolax; Factor Laxante; Feen-A-Mint; Gotalax; Granulax†; Kritel; Laxamin; Modaton; Modernel†; Opalino; Rapilax; Rogelina†; Trali; Verilax; Yodolin; **Austral.:** Durolax SP; **Austria:** Agaffin; Agiopic; Guttalax; Laxasan; **Belg.:** Dulcolax Picosulphate; Fructines; Guttalax†; Laxoberon; Picolaxine; **Braz.:** Cronoplex; Dilitin; Guttalax; Picolax†; Rapilax; **Chile:** Aguala; Cronolax; Guttalax; Laxantil; Laxoberal; **Cz.:** Agiolax Pico; Darmol†; Guttalax; Laxygal; Progut; Regulax Picosulfat; **Denm.:** Actilax; Laxoberal; Picolon; **Fin.:** Laxoberon; **Fr.:** Fructines; **Ger.:** Agiolax Pico; Darmol Pico; Darmol†; Dulcolax NP; Laxans-ratiopharm Pico; Laxoberal; Liquidepur mit Natriumpicosulfat; Midro Pico†; Regulax Picosulfat; **Gr.:** Guttalax; Laxatol; **Hong Kong:** Sur-Lax; **Hung.:** Darmol; Guttalax; Laxygal; **India:** Cremalax; **Indon.:** Laxoberon; **Irl.:** Dulcolax Perles; Laxoberal; **Ital.:** Eucnessina CM; Falquigut; Gocce Lassative Aicardi; Guttalax; **Jpn.:** Laxoberon; **Mex.:** Anara; Laxoberon; **Neth.:** Dulcodruppels; Dulcoperals; **Norw.:** Laxoberal; **Philipp.:** Laxoberal; **Port.:** Fructines; Guttalax; Laxodal;

Picolax; **Rus.:** Guttalax (Гутталакс); Laxygal (Лаксигал); **Spain:** Contumax; Evacuol; Ezon; Guttalax; Lubrilax; Skilax; **Swed.:** Claxoral; Laxoberal; **Switz.:** Fructines; Laxoberon; **UK:** Dulcolax; Laxoberal; **Venez.:** Lasoberon.

Multi-ingredient: **Arg.:** Agarol; Cascara Sagrada Oligoplex; **Austral.:** Colonprep†; Picolax†; PicoPrep; Prep Kit-C; **Belg.:** Pilules de Vichy; **Braz.:** Agarol; Forlax; **Canad.:** Pico-Salax; **Irl.:** Picolax; **Malaysia:** PicoPrep; **NZ:** PicoPrep; **Spain:** Emuliquen Laxante; **Switz.:** Laxasan; **UK:** CitraFleet; Picolax.

Anhydrous Sodium Sulfate

Anhydrous Sodium Sulphate; Dried Sodium Sulphate; Exsiccated Sodium Sulphate; Natrii Sulfas; Natrii sulfas anhydricus; Natrio sulfatas; bevandenis; Natrium Sulfuricum Siccatum; Natriumsulfat†; vedetön; Natriumsulfat, vattenfritt; Síran sodný; Sodium (sulfate de) anhydre; Sodu siarczan bezwodny; Sulfato de sodio anhidro; Vízmentes nátrium-szulfát.

Безводный Сульфат Натрия

$Na_2SO_4 = 142.0$.

CAS — 7757-82-6.

ATC — A06AD13; A12CA02.

ATC Vet — QA06AD13; QA12CA02.

Pharmacopoeias. In *Chin.*, *Eur.* (see p.vii), *Int.*, and *Viet.*

US includes a single monograph for both the anhydrous form and the decahydrate.

Ph. Eur. 6.2 (Sodium Sulphate, Anhydrous). A white or almost white, hygroscopic powder. Freely soluble in water. Store in airtight containers.

USP 31 (Sodium Sulfate). It contains 10 molecules of water of hydration or is anhydrous. The decahydrate loses between 51 and 57% of its weight on drying and the anhydrous form loses not more than 0.5% of its weight. Large, colourless, odourless, transparent crystals or a granular powder. It effloresces rapidly in air, liquefies in its water of hydration at about 33°, and loses all of its water of hydration at about 100°. Freely soluble in water; insoluble in alcohol; soluble in glycerol. Store in airtight containers, preferably at a temperature not exceeding 30°.

Sodium Sulfate

E514; Glauber's Salt; Natrii sulfas decahydricus; Natrii Sulphas; Natrio sulfatas decahydricus; Natrium Sulfuricum Crystallissimum; Natriumsulfatidekahydraat†; Natriumsulfatidekahydrat; Nátrium-szulfát-dekahidrárt; Síran sodný dekahydrát; Sodium (sulfate de) décahydraté; Sodium Sulphate; Sodium Sulphate Decahydrate; Sodu siarczan dziesięciowodny; Sulfato de sodio.

Глауберова соль; Сульфат Натрия

$Na_2SO_4 \cdot 10H_2O = 322.2$.

CAS — 7727-73-3 (sodium sulfate decahydrate).

ATC — A06AD13; A12CA02.

ATC Vet — QA06AD13; QA12CA02.

Pharmacopoeias. In *Chin.*, *Eur.* (see p.vii), *Int.*, and *Viet.*

US includes a single monograph for both the anhydrous form and the decahydrate.

Ph. Eur. 6.2 (Sodium Sulphate Decahydrate; Sodium Sulphate BP 2008). A white or almost white, crystalline powder or colourless, transparent crystals. Freely soluble in water; practically insoluble in alcohol. It partly dissolves in its own water of crystallisation at about 33°. It loses between 52.0 and 57.0% of its weight on drying.

USP 31 (Sodium Sulfate). It contains 10 molecules of water of hydration or is anhydrous. The decahydrate loses between 51 and 57% of its weight on drying and the anhydrous form loses not more than 0.5% of its weight. Large, colourless, odourless, transparent crystals or a granular powder. It effloresces rapidly in air, liquefies in its water of hydration at about 33°, and loses all of its water of hydration at about 100°. Freely soluble in water; insoluble in alcohol; soluble in glycerol. Store in airtight containers, preferably at a temperature not exceeding 30°.

Profile

Sodium sulfate has been used as an osmotic laxative (p.1693). It is also given in dilute solution (about 0.5%) with a high molecular weight macrogol for prompt bowel evacuation before investigational procedures or surgery (see Macrogols, p.2336).

Sodium sulfate is also used as an additive in foods.

For the general properties of sodium salts, see p.1686.

Preparations

USP 31: Sodium Sulfate Injection.

Proprietary Preparations (details are given in Part 3)

Austral.: Celloids SS 69.

Multi-ingredient: **Arg.:** Magnesia Phosphorica I Oligoplex; **Austral.:** Duo Celloids SPSS; Duo Celloids SSMP; Duo Celloids SSFC; Duo Celloids SSS; Iron Compound†; Liv-Detox†; Silybum Complex†; **Canad.:** Normo Gastryl; **Fr.:** Actisoufre; Digidryl; Hepargitol; Normogastryl†; Oxyboldine; Prefagy†; **Ital.:** Argioferdina†; **Pol.:** Sal Emis Artificialia; Sal Emis Factitium; Sal Vichy Factitium; **Spain:** Darnen Salt; Digestovital†; Leberite; Lebersal; Salcedol; **Switz.:** Padma-Lax; Padmed Laxan; **Thai.:** Ulgastrin; **USA:** Triv; **Venez.:** Topdent†.

The symbol † denotes a preparation no longer actively marketed

Sodium Tartrate

Disodium L-Tartrate; E335 (sodium tartrate or monosodium tartrate); Sodiu winian; Tartrato de sodio.

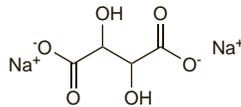
Виннокислый Натрий

$C_2H_4O_2(CO_2Na)_2 \cdot 2H_2O = 230.1$.

CAS — 868-18-8 (anhydrous sodium tartrate); 6106-24-7 (sodium tartrate dihydrate).

ATC — A06AD21.

ATC Vet — QA06AD21.



(anhydrous sodium tartrate)

Pharmacopoeias. In *USNF*.

USNF 26 (Sodium Tartrate). Transparent, colourless, odourless crystals. Freely soluble in water; insoluble in alcohol. pH of a 10% solution in water is between 7 and 9. Store in airtight containers.

Profile

Sodium tartrate has been used as an osmotic laxative. It is used as a food additive.

For the general properties of sodium salts, see p.1686.

Preparations

Proprietary Preparations (details are given in Part 3)

Canad.: Limonade Aseptia.

Multi-ingredient: **Arg.:** Oral-B Enjuague Bucal Aмосant.

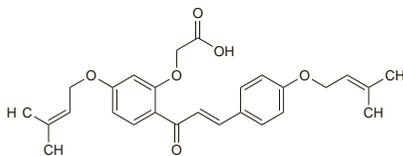
Sofalcone (pINN)

Sofalcona; Sofalconum; SU-88. {5-[(3-Methyl-2-butenyl)oxy]-2-[p-[(3-methyl-2-butenyl)oxy]cinnamoyl}phenoxy}acetic acid.

Софалькон

$C_{27}H_{30}O_6 = 450.5$.

CAS — 64506-49-6.

**Profile**

Sofalcone is reported to possess cytoprotective properties and is used in the treatment of gastritis and peptic ulcer disease (p.1702). An oral dose of 100 mg is given 3 times daily.

♦ **References.**

1. Isomoto H, *et al.* Sofalcone, a mucoprotective agent, increases the cure rate of *Helicobacter pylori* infection when combined with rabeprazole, amoxicillin and clarithromycin. *World J Gastroenterol* 2005; **11**: 1629–33.

Preparations

Proprietary Preparations (details are given in Part 3)

Jpn: Solon.

Sterculia

E416; Goma esterculia; Indian Tragacanth; Karaya; Karaya Gum; Sterculia Gum; Sterkülia.

Камедь Карайи; Стеркулия Жгучая (*Sterculia urens*)

CAS — 9000-36-6.

ATC — A06AC03.

ATC Vet — QA06AC03.

Pharmacopoeias. In *Br* and *Fr*.

BP 2008 (Sterculia). The gum obtained from *Sterculia urens* and other species of *Sterculia*. Irregular or vermiform pieces, greyish-white with a brown or pink tinge, with an odour resembling that of acetic acid. It contains not less than 14.0% of volatile acid (or not less than 10.0% if supplied in powdered form), calculated as acetic acid. Sparingly soluble in water, but swells into a homogeneous, adhesive, gelatinous mass; practically insoluble in alcohol. Store at a temperature not exceeding 25°.

Adverse Effects and Precautions

As for Ispaghula, p.1737. There is a risk of intestinal or oesophageal obstruction and faecal impaction, especially if such compounds are swallowed dry. Therefore they should always be taken with sufficient fluid and should not be taken immediately before going to bed. They should be avoided by patients who have difficulty swallowing.

Uses and Administration

Sterculia is used similarly to ispaghula (p.1737) as a bulk laxative and for adjusting faecal consistency. It has also been used as an aid to appetite control in the management of obesity (p.2149) but there is little evidence of efficacy. It is usually taken in the form of granules containing sterculia 62%; the dose is 1 to 2 sachets or 1 to 2 heaped 5 mL spoonfuls orally once or twice daily after meals. (For a dose in children see below.) The granules are washed down without chewing with plenty of water. They may also be taken sprinkled onto soft foods such as yogurt.

Sterculia is used topically, as a paste or powder, for skin protection and sealing in the fitting of ileostomy and colostomy appliances. It has also been used in dental fixative powders, and as an emulsifier and stabiliser in foods.

Administration in children. In the UK, the recommended oral dose of granules, containing sterculia 62%, for constipation in children aged 6 to 12 years is / to 1 sachet, or / to one 5 mL spoonful, once or twice daily after meals. Children over 12 years may be dosed as for adults, see Uses and Administration, above. The granules are washed down without chewing with plenty of water. They may also be taken sprinkled onto soft foods such as yogurt.

Preparations

BP 2008: Sterculia Granules.

Proprietary Preparations (details are given in Part 3)

Austral.: Normafibe; **Belg.:** Normacol†; **Braz.:** Corega; **Canad.:** Normacol; **Fr.:** Inolaxine†; Normacol; **Ger.:** Decorpa†; Granamon†; **Hong Kong:** Normacol; **Irl.:** Normacol; **Ital.:** Normacol; **Malaysia:** Normacol†; **Neth.:** Normacol; **NZ:** Normacol; **S.Afr.:** Normacol; **Singapore:** Normacol; **Swed.:** Inolaxol; **Switz.:** Colosan mite; Inolaxine; Normacol; **Thal.:** Normacol†; **UK:** Normacol.

Multi-ingredient: **Austral.:** Alvercol†; Granocol†; Normacol Plus; **Belg.:** Normacol Antispasmodique†; Normacol Plus†; **Fr.:** Kaologeais; Karayal; Normacol a la Bourdaine†; Poly-Karaya; **Hong Kong:** Normacol Plus; **India:** Kanomal; **Irl.:** Normacol Plus; **NZ:** Granocol; Normacol Plus; **Port.:** Normacol Plus; **S.Afr.:** Alvercol†; Normacol Plus; **Singapore:** Normacol Plus; **Spain:** Normacol Forte; **Switz.:** Colosan plus; Normacol avec bourdaine nouvelle formule†; **UK:** Normacol Plus; Spasmonal Fibre†; **Venez.:** Polifix†.

Sucralfate (BAN, USAN, rINN)

Sucralfato; Sucralfatum; Sukralfaatti; Sükralfat; Sukralfat. Sucrose hydrogen sulphate basic aluminium salt; Sucrose octakis(hydrogen sulphate) aluminium complex; β-D-Fructofuranosyl-α-D-glucopyranoside octakis (hydrogen sulphate) aluminium complex.

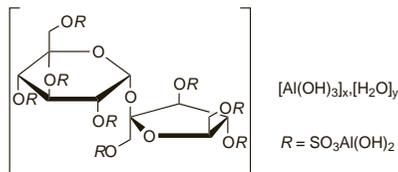
Сукральфат

$C_{12}H_{21}Al_8O_{20}S_8$.

CAS — 54182-58-0.

ATC — A02BX02.

ATC Vet — QA02BX02.



$[Al(OH)_3]_x \cdot [H_2O]_y$

$R = SO_3Al(OH)_2$

Pharmacopoeias. In *Chin.*, *Jpn.* and *US*.

USP 31 (Sucralfate). The hydrous basic aluminium salt of sucrose octasulfate. Store in airtight containers.

Adverse Effects and Precautions

Constipation is the most frequently reported adverse effect of sucralfate although diarrhoea, nausea, vomiting, flatulence, or gastric discomfort may also occur. Other adverse effects include dry mouth, dizziness, drowsiness, headache, vertigo, back pain, and skin rashes. Hypersensitivity reactions such as pruritus, oedema, urticaria, respiratory difficulty, rhinitis, laryngospasm, and facial swelling have been reported.

Great caution is needed in patients with renal impairment (below) as absorption and accumulation of aluminium may cause adverse effects.

Bezoar formation. As of March 1999, the UK CSM was aware of 7 reports worldwide of bezoar formation associated with sucralfate use in intensive care patients.¹ It advised caution in the use of sucralfate in seriously ill patients because of the risks of bezoar formation and intestinal obstruction.¹ Patients with delayed gastric emptying or receiving concomitant enteral feeds may be at increased risk. A report by the French Pharmacovigilance System at about the same time made similar recom-

mendations but also contra-indicated the use of sucralfate in premature and immature neonates.²

1. Committee on Safety of Medicines/Medicines Control Agency. Bezoar formation with sucralfate [sic] (Antepsin). *Current Problems* 1999; **25**: 6. Also available at: http://www.mhra.gov.uk/home/idcplg?IdcService=GET_FILE&DocName=CON2023235&RevisionSelectionMethod=LatestReleased (accessed 07/11/06)
2. Guy C, Ollagnier M. Sucralfate et bézoard: bilan de l'enquête officielle de pharmacovigilance et revue de la littérature. *Therapie* 1999; **54**: 55–8.

Renal impairment. Sucralfate under acid conditions can release aluminium ions that may be absorbed systemically. Significant increases in the urinary excretion of aluminium have been seen in healthy subjects given sucralfate 4 g daily,^{1,2} reflecting gastrointestinal absorption of aluminium; aluminium concentrations in serum and urine were significantly higher in patients with chronic renal impairment than in subjects with normal renal function,³ and similar serum increases have been seen in children with acute renal failure.⁴ Aluminium toxicity in patients with normal renal function receiving sucralfate would not be expected, but seizures, muscle weakness, bone pain,¹ and severe aluminium encephalopathy⁵ have been reported in patients with end-stage renal disease requiring dialysis. Sucralfate should be used with caution in patients with renal impairment, especially if other aluminium-containing agents are also taken, and such patients should be monitored for signs of aluminium toxicity.^{4,6}

1. Robertson JA, *et al.* Sucralfate, intestinal aluminium absorption, and aluminium toxicity in a patient on dialysis. *Ann Intern Med* 1989; **111**: 179–81.
2. Allain P, *et al.* Plasma and urine aluminium concentrations in healthy subjects after administration of sucralfate. *Br J Clin Pharmacol* 1990; **29**: 391–5.
3. Burgess E, *et al.* Aluminium absorption and excretion following sucralfate therapy in chronic renal insufficiency. *Am J Med* 1992; **92**: 471–5.
4. Thorburn K, *et al.* Aluminium accumulation in critically ill children on sucralfate therapy. *Pediatr Crit Care Med* 2001; **2**: 247–9.
5. Withers DJ, *et al.* Encephalopathy in patient taking aluminium-containing agents, including sucralfate. *Lancet* 1989; **ii**: 674.
6. Hemstreet BA. Use of sucralfate in renal failure. *Ann Pharmacother* 2001; **35**: 360–4.

Interactions

Sucralfate may interfere with the absorption of other drugs and it has been suggested that there should be an interval of 2 hours between giving sucralfate and other non-antacid medication. Some of the drugs reported to be affected by sucralfate include cimetidine, ranitidine, digoxin, fluoroquinolone antibacterials, ketoconazole, levothyroxine, phenytoin, tetracycline, quinidine, theophylline, and possibly warfarin. The recommended interval between sucralfate and antacids is 30 minutes. An interval of 1 hour should elapse between giving sucralfate and enteral feeding.

Pharmacokinetics

Sucralfate is only slightly absorbed from the gastrointestinal tract after oral doses. However, there can be some release of aluminium ions and of sucrose sulfate; small quantities of sucrose sulfate may then be absorbed and excreted, primarily in the urine; some absorption of aluminium may also occur (see Renal Impairment, above).

Uses and Administration

Sucralfate is a cytoprotective drug that, under acid gastrointestinal conditions, forms an adherent complex with proteins which coats the gastric mucosa and is reported to have a special affinity for ulcer sites. It also inhibits the action of pepsin and adsorbs bile salts.

Sucralfate has been used in the treatment of peptic ulcer disease (p.1702) and chronic gastritis. It is given orally and should be taken on an empty stomach before meals and at bedtime. The usual dose is 1 g four times daily or 2 g twice daily for 4 to 8 weeks; if necessary the dose may be increased to a maximum of 8 g daily. If longer-term therapy is required sucralfate may be given for up to 12 weeks. Where appropriate a maintenance dose of 1 g twice daily may be given to prevent the recurrence of duodenal ulcers.

For prophylaxis of gastrointestinal haemorrhage from stress ulceration the usual dose of sucralfate is 1 g six times daily; a dose of 8 g daily should not be exceeded. For children's doses see below.

Administration in children. Although sucralfate is not licensed in the UK for use in children under 15 years, the *BNFC* recommends the following oral doses for the treatment of peptic