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SUPERINTENDENCIA DE INDUSTRIA Y COMERCIO



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SUPERINTENDENCIA DE INDUSTRIA Y COMERCIO
DIVISION DE NUEVAS CREACIONES

E. S. D.

Re: Expediente No. 07.034.649

Solicitud de patente a nombre de **DR. WILLMAR SCHWABE GMBH & CO. KG.**

Yo, DILLA MARIA RODRIGUEZ D'ALEMAN identificada como aparece al pie de mi firma, domiciliada en la carrera 11 A No. 86-53, piso 6, obrando como apoderada de la sociedad **DR. WILLMAR SCHWABE GMBH & CO. KG.** domiciliada Karlsruhe, Alemania, solicitante de la patente de la referencia, en respuesta al oficio No. 11306 notificado por fijación en lista el 3 de septiembre de 2010, relacionado con el concepto técnico de fondo No. 2193, nos permitimos manifestar lo siguiente:

1. Con fundamento en la facultad que confiere el artículo 34 de la Decisión 486 al solicitante para modificar la solicitud de patente en cualquier momento del trámite, presento junto con este memorial nueva descripción y nuevo capítulo reivindicatorio que consta de 2 reivindicaciones en donde se realizaron las siguientes modificaciones:

1.1 Se cancelaron las antiguas reivindicaciones 1 a 4.

1.2 Las nuevas reivindicaciones 1 y 2 se encuentran dirigidas al medicamento o alimento dietético que contienen lavanda de acuerdo con lo manifestado en la página 1 de la memoria descriptiva, específicamente en las últimas tres líneas del primer párrafo.

Sobre este particular nos permitimos manifestar que las anteriores modificaciones no involucran ampliación alguna de la materia originalmente presentada y se dan como respuesta a las objeciones expuestas por el señor examinador en su concepto técnico No. 2193.

Teniendo en cuenta el concepto técnico emitido por el Señor Superintendente Delegado para la propiedad intelectual GianCarlo Marcenaro Jiménez a la doctora Ana Maria Castro Wey, que da alcance a las comunicaciones No. 09-001524 y 09-012566, no se presenta una tasa adicional, toda vez que la solicitud fue presentada con anterioridad al 1 de enero de 2009 y tiene menos de diez reivindicaciones.

2. Reivindicaciones relativas a un uso o a un segundo uso.

Sobre este particular, respetuosamente nos permitimos decir que con las modificaciones anteriormente mencionadas queda superada la objeción presentada por el señor examinador en este sentido.

3. **Novedad**

El señor examinador manifiesta en el folio 76 de su concepto técnico que: *“D1 divulga una composición tipo medicamento de administración oral (capsula o tableta sublingual) que contiene una mezcla de aceites entre los cuales se encuentre el **aceite de lavanda** (Pág 3, línea 19) y componentes farmacéuticamente aceptables, y que puede ser utilizada para el tratamiento de las condiciones del nerviosismo, de la tensión y de la fatiga y en el apoyo del sistema inmune del paciente. (Pág 1. Líneas 5 a 8; Pág 4, líneas 15 a 19).*

Teniendo en cuenta lo anterior, las características esenciales de las reivindicaciones 5 y 6 eran conocidas en D1 por lo cual dichas reivindicaciones no son nuevas.”

En cuanto al requisito de novedad, nos permitimos manifestar que el artículo 16 de la Decisión 486 establece que: **“Una invención *se considera nueva cuando no está comprendida en el estado de la técnica.*”**

El estado de la técnica comprenderá todo lo que haya sido accesible al público por una descripción escrita u oral, utilización, comercialización o cualquier otro medio antes de la fecha de presentación de la solicitud de patente o, en su caso, de la prioridad reconocida....”(el resaltado es nuestro).

Si de acuerdo con el espíritu de la norma legal indicada, la invención no se considera como nueva si está **“comprendida”** en el estado de la técnica, dicha norma se está refiriendo, naturalmente, a la **totalidad del invento** y no a alguno o a algunos de los componentes que hacen parte de la nueva solicitud.

En efecto, para que la invención pierda su calidad de novedosa, es claro que ella, TODA ELLA, ha de estar contenida en el *“conjunto de conocimientos existentes que son aplicables al proceso industrial”* como define el estado de la técnica el Tribunal de justicia del Acuerdo de Cartagena (Proceso No. 6-IP-89, sentencia de 31 de octubre de 1989, publicada en Jurisprudencia del

Tribunal de Justicia del Acuerdo de Cartagena, Tomo 11, BID-INTAL, Buenos Aires, 1994, página 60).

Esto se conoce como **NOVEDAD ABSOLUTA**, de conformidad con lo cual para desvirtuar el requisito de novedad de una invención será necesario que lo reivindicado por la invención bajo estudio corresponda de **forma total** con lo revelado en un documento o anterioridad señalada, conclusión a la que se llega después de un análisis exhaustivo mediante una comparación entre el capítulo reivindicatorio de la invención en estudio y la divulgación citada por ese despacho como anterioridad.

Ahora bien, si un determinado elemento, condición o circunstancia de la nueva creación ya hace parte del estado de la técnica no quiere ello decir, desde luego, que la invención deba ser rechazada por carecer del requisito de novedad. No sin razón ha dicho el mencionado Tribunal: *“hay que advertir que toda creación es en cierta forma, producto del estado de la técnica existente, en el sentido de que el inventor ha de tener en cuenta un conjunto de conocimientos técnicos que le permitan crear nuevos procedimientos aplicables a la industria”* (Ibidem, páginas 53 y 54) (El subrayado es nuestro).

Por lo tanto y teniendo en cuenta lo anteriormente expuesto, como mínimo la novedad debe contemplar los siguientes aspectos:

-Que la invención en estudio esté contenida de forma **TOTAL** y **ABSOLUTA** en el documento que se menciona como anterioridad; y

-Que la invención en cuestión puede partir de conocimientos conocidos, caso en el cual habrá que hacer la comparación no de lo conocido sino de lo inédito y novedoso, teniendo que analizarse el **valor agregado** que aporta la invención con sus nuevas características al campo técnico al cual pertenece la solicitud en estudio.

Aplicando lo anterior al caso concreto, para que las razones que aduce ese despacho para desvirtuar la novedad fuesen ciertas, sería forzoso que se demostrara que la invención de mi mandante está comprendida en el estado de la técnica de forma **TOTAL**, lo cual no sucede debido a que D1 hace referencia a combinaciones de plantas, extractos de las semillas, hojas, tallos y otras partes de las plantas, entre las cuales se nombra la lavanda, como se puede apreciar en la página 3 a continuación mostrada:

6. Impaired Glucose Tolerance (IGT).

The invention is based on combining certain well-known plants, and/or their oils. It has been found through intensive efforts that this combination is effective in reconstitution of the cells of the pancreas and able to treat and manage the diabetes mellitus as well as other diseases.

The plants are:

1. Coriandrum Sativum: family Apiacea) Leaves, seeds, roots and/or the oil.
2. Lavender: family Lamiaceae) Leaves, seeds, roots, flowers and/or the oil.
3. Pelargonium Graveolens: (Family Geraniaceae) Leaves, seeds, roots and flowers and/or the oil, or Basil (Ocimum basilicum and Ocimum kilimand). Family Labiatae.
4. Rosemary: (Family Labiatae) Leaves, seeds, roots and flower, and/or the oil.
5. Negella Sativa: Leaves, seeds, roots and flowers and/or the oil.
6. Lepidium Sativum: Leaves, seeds, and flower, and/or the oil.
7. Commiphora Myrrh.

In a first aspect of the invention, there is provided a composition comprising Coriandrum Sativum; lavender, Pelargonium Graveolens or basil (Ocimum Basilicum and/or Ocimum Kilimand) or any mixture thereof; rosemary; Negella Sativa; Lepidium Sativum; and

Así las cosas, el documento D1 no menciona ni reporta un medicamento o producto alimenticio dietético que tenga como agente activo aceite de lavanda y opcionalmente adyuvantes farmacéuticamente aceptables en la forma de una cápsula, como el señor examinador podrá constatar en la divulgación completa de D1 que se adjunta al presente escrito.

Así las cosas, la presente invención a la luz del nuevo juego de reivindicaciones cumple con el requisito de novedad de acuerdo con el artículo 16 de la Decisión 486 de la Comunidad Andina.

En consecuencia, de manera atenta solicitamos a ese despacho reconocer la novedad y la altura inventiva del capítulo reivindicatorio y conceder el privilegio de patente de invención para la solicitud en estudio o si es el caso, solicitamos a ese despacho pronunciarse en relación con todos los argumentos presentados en este memorial dando estricta aplicación al principio del debido proceso consagrado en el artículo 29 de la Constitución Nacional. De igual forma, si el examinador considera que subsisten razones para objetar la presente invención ruego expedir otro examen de fondo con los debidos motivos y razones que sustenten su objeción con el fin de que mi mandante tenga la posibilidad de exponer sus argumentos con base en la interpretación de los artículos 45 de la Decisión 486 -el cual otorga la facultad al examinador para emitir los exámenes de fondo-, 35 y 59 del Código Contencioso Administrativo que señala que: *“habiéndose dado oportunidad a los interesados para expresar sus opiniones, y con base en las pruebas e informes disponibles, se tomará la decisión que será motivada al menos en forma sumaria si afecta a particulares”* y *“(.) deberá proferirse la decisión definitiva. Esta se motivará*

en sus aspectos de hecho y de derecho, y en los de conveniencia si es el caso”,
respectivamente (El subrayado es nuestro).

Señor Superintendente,


DILIA MARÍA RODRÍGUEZ D'ALEMAN
C.C. 41.654.882 de Bogotá.
T.P. 20824 CSJ

REIVINDICACIONES

1. Un medicamento o alimento dietético como una forma de administración
5 oral para la aplicación en la profilaxis o tratamiento de problemas de
somatización y trastornos de tensión post-traumática, CARACTERIZADO
PORQUE contiene aceite de lavanda y opcionalmente adyuvantes
farmacéuticamente aceptables y porque dicho medicamento o alimento dietético
se encuentra en la forma de una cápsula.

10

2. El medicamento o alimento dietético como una forma de administración
oral de cápsula de acuerdo con la reivindicación 1 CARACTERIZADO
PORQUE la cápsula es de gelatina o derivados de celulosa.

15

GB 2 355 189 A

(57) A composition comprising *Coriandrum Sativum*; lavender, *Petarponium Graveolens* or basil (*Ocimum Basilicum* and/or *Ocimum Kilimand*) or any mixture thereof; rosemary; *Nigella Sativa*; *Lepidium Sativum*; and *Commiphora Myrrh* any may include the leaves, seeds, roots, flowers or all of the above. The composition may be formulated as a pharmaceutical for the treatment of the following: diabetes mellitus, serum cholesterol disorder, serum triglycerides disorder, uric acid disorder, primary or essential hypertension, neuroanxiety, stress, fatigue, or in supporting the immune system.

The claims were filed later than the filing date but within the period prescribed by Rule 25(1) of the Patents Rules 1995.

5

10 Diabetes is a condition that occurs because of a lack of insulin or because of the presence of factors opposing the action of insulin. The result of insufficient action of insulin is an increase in blood glucose (hyperglycaemia). Many other metabolic abnormalities occur, notably an increase in ketone bodies in the blood when there is a severe lack of insulin.

Insulin is the major hormone secreted by the pancreas. It is a small protein comprising 51 amino acid residues and is synthesised in the beta cells of the Islets of Langerhans via its precursor, proinsulin. One molecule of proinsulin is cleaved by enzymes to give one molecule of insulin and one molecule of C-peptide (which is physiologically inert). C-peptide can be measured in some diabetic patients to show that insulin production has occurred.

Insulin acts in several ways to reduce circulating blood glucose levels. It enhances cellular uptake of glucose from the blood in many tissues, particularly skeletal muscle and adipose tissue. It also stimulates glycogen production and inhibits glycogen breakdown in muscles and hepatocytes.

Patients suffering from diabetes can show a wide range of symptoms such as, excessive thirst and appetite (polydipsia), excessive urination (polyuria), pruritus or balanitis, weight loss, lethargy, nausea, blurred vision. In women, frequent vaginal infection e.g. Candida

infection can occur. Diabetic men may suffer from impotence.

The World Health Organisation recognises five categories of diabetes. In addition there is a sixth condition.

1. Type one diabetes mellitus occurs in about 20% of all diabetic patients. This is characterised by insulin deficiency resulting from immune-mediated pancreatic beta-cell destruction. Type 1 diabetes results from the destruction of the pancreatic beta-cells, through an autoimmune process of unknown aetiology, leading to insulin deficiency and associated ketoacidosis. Pancreatic beta-cell destruction eventually results in absolute insulin deficiency. The pathological process occurs in genetically predisposed individuals over many years and appears to be triggered by environmental factors such as viral infections and nutritional factors such as ingestion of cows milk in early childhood.
2. This type of diabetes mellitus occurs in about 75% of all diabetic patients. It is generally characterised by peripheral insulin resistance and relative insulin deficiency which may range from predominant insulin secretory defect with insulin resistance. Some patients develop severe insulin deficiency. Obesity is common in patients with type 2 diabetes and itself causes insulin resistance. Peripheral plasma insulin levels are usually high with relative insulin deficiency being characterised by a delayed initial phase insulin response with second phase insulin response being weakened over several years. Resistance to the action of insulin takes the form of a decrease in the ability of skeletal muscle to store glucose (due to a reduction in activity of the enzyme glycogen synthase) and oxidise glucose (due to a reduction in pyruvate dehydrogenase activity). The risk of developing type 2 diabetes increases with age, obesity (particularly central obesity), family history of diabetes or cardiovascular disease (particularly hypertension or dyslipidaemia) and a lack of physical activity.

3

3. Malnutrition related diabetes mellitus (MRDM).
4. Diabetes associated with other conditions and syndromes such as pancreatic disease, disease of hormonal aetiology, drug-induced or chemical-induced diabetes, abnormalities of insulin or its receptors, certain genetic syndromes and miscellaneous syndromes.
5. Gestational diabetes.
6. Impaired Glucose Tolerance (IGT).

The invention is based on combining certain well-known plants, and/or their oils. It has been found through intensive efforts that this combination is effective in reconstitution of the cells of the pancreas and able to treat and manage the diabetes mellitus as well as other diseases.

The plants are:

1. *Coriandrum Sativum*: family Apiaceae) Leaves, seeds, roots and/or the oil.
2. Lavender: family Lamiaceae) Leaves, seeds, roots, flowers and/or the oil.
3. *Pelargonium Graveolens*: (Family Geraniaceae) Leaves, seeds, roots and flowers and/or the oil, or Basil (*Ocimum basilicum* and *Ocimum kilimand*). Family Labiatae.
4. Rosemary: (Family Labiatae) Leaves, seeds, roots and flower, and/or the oil.
5. *Negella Sativa*: Leaves, seeds, roots and flowers and/or the oil.
6. *Lepidium Sativum*: Leaves, seeds, and flower, and/or the oil.
7. *Commiphora Myrrh*.

In a first aspect of the invention, there is provided a composition comprising *Coriandrum Sativum*; lavender, *Pelargonium Graveolens* or basil (*Ocimum Basilicum* and/or *Ocimum Kilimand*) or any mixture thereof; rosemary; *Negella Sativa*; *Lepidium Sativum*; and

One litre of Pyrogen-free distilled water was poured into large beaker or any Pyrex-glass or stainless steel container that was previously cleaned and washed by pyrogen free distilled water and sterilised in an oven at 125°C for one hour.

- 5 The water was heated up and kept at 35 degree Celsius on an electrical cooker equipped with accurate thermostat.

10 The 100 grams of the plant material was added to the water and kept at that temperature for 12 hours and stirred every hour using a glass stirrer. After that the extract was allowed to stay at the room temperature for about one hour. The contents of the beaker were processed through a coarse filter and then through a medical filter and decanted into 100ml bottle with tight lid.

15 In order to prepare an extract for use in injection form, the oral form of the extract was subject to filtration using medical filter paper with porosity from about 2.5 microns to about 4.5 microns.

20 The extract was allowed to remain at room temperature for approximately 5 hours after which the extract was kept in the refrigerator at 2 to 4 degrees Celsius.

The extract can be used for mixing with other extracts after taking it out from the refrigerator and keeping at the room temperature for 5 hours.

25 F. A one litre extract from the *Pelargonium Graveolens*, leaves and flowers was prepared by following the same procedure as in E above.

G. A one litre extract from the leaves and flowers of Lavender was prepared by following the same procedures as in E above.

H. The extracts were mixed together using an electrical stainless steel mixer by adding each extract according to the percentage required.

10 to 20ml, 2 to 3 times daily (orally).

The injection form is 0.3ml I.M. once daily to an average 70kg body weight.

Example 4 - Animal experiments

5 The preparation was tested on Australian rabbits of the weight specified in the Tables below (measured in grams). The rabbits were given a high concentration glucose I.V. and blood samples were taken (this was taken as zero time). A dosage of the extract prepared in Example 3 was given to each animal S.C. and blood samples were taken at 1, 4, 6 and 24 hours. The blood glucose levels were measured (in mg/dl) and the results are shown in Tables 1 to 3 below.

Table 1 - Group I
Dosage 0.2ml/kg

Animal No.	Weight	Initial Glucose	1hr Time Glucose	4hr Time Glucose	6hr Time Glucose	24hr Time Glucose
1	275	318	300	190	95	81
2	275	320	315	175	105	76
3	280	260	260	136	92	84
4	270	290	270	148	108	74

Table 2 - Group II
Dosage 0.4ml/kg

Animal No.	Weight	0 Time Glucose	1hr Time Glucose	4hr Time Glucose	6hr Time Glucose	8hr Time Glucose	24hr Time Glucose
1	295g	370	350	190	118	89	81
2	270g	350	310	179	126	76	83
3	298g	318	240	128	94	84	80
4	280	408	305	214	136	94	75

1 At first, the *Coriander sativum* extract was put in the mixer, then followed by the Lavender extract, the *Pelargonium graveolens* the Rosemary, the *Negella sativa*, the *Lepidium sativum* and the *Myrrh commiphora* extracts, subsequently allowing 10 to 15 minutes mixing time interval between the addition of each new extract.

- 5 J. The mixture was also mixed in the mixer for another 20 minutes. After that the mixture was allowed to stay in the room temperature for about 5 hours.

K. The preparation was dispensed into 100ml medical dark brown bottles and after sterilisation the bottles were kept in the refrigerator at 2 to 4 degrees Celsius

10 Dosage and administration

The preparation is indicated as an effective treatment and prophylactic therapy against all types of diabetes mellitus, Hypercholesterolaemia, Hypertriglyceridaemia, Hyperuricaemia, essential hypertension and as immune modulator agent able to induce the body's own defence mechanisms in a non-specific or even specific manner. The effect of the immunostimulants may be direct or indirect, via the complementary system or the lymphocytes.

20 According to the experimental results a 3 to 6 month course is sufficient to treat diabetes mellitus, while after one month of using the therapy the complication of the disease will be eliminated. For diabetes associated with the conditions and syndromes, the duration of taking the preparation depends on the severity of the disease. However, even in terminal cases with serious complications, the patients had a good life style.

Suggested intake:

- 25 1. Herbal mixture
10 gm twice daily (orally) with water.
2. Oil mix
0.5ml twice daily sublingually. Or in capsules.
3. Herbal extract

Table 3 - Group III
Dosage 0.6ml/kg

Animal No.	Weight	0 Time Glucose	1hr Time Glucose	4hr Time Glucose	6hr Time Glucose	8hr Time Glucose	24hr Time Glucose
1	291	360	160	90	76	71	78
2	298	290	116	85	67	60	50
3	230	285	115	66	45	Died	-
4	260	295	105	60	43	48	-

5 Example 5 - Animal experiments

The oil formula prepared in Example 2 was also given to animals using the same procedure as in Example 4. The blood glucose levels (measured in mg/dl) are shown in Tables 4 and 5 below:

Table 4 - Group I
Dose Used 0.4ml/kg

Animal No.	Weight	0 Time Glucose	1hr Time Glucose	4hr Time Glucose	6hr Time Glucose	24hr Time Glucose
1	329	154	167	118	80	98
2	298	158	327	210	81	67
3	315	346	181	177	20	Died
Average	307	186	225	126.3	60.3	94.5

Table 5 - Group 1

Dose Used 0.2ml/kg

Animal No.	Weight	0 Time Glucose	1hr Time Glucose	4hr Time Glucose	6hr Time Glucose	24hr Time Glucose
1	340	122	102	63	171	99
2	371	251	136	106	170	102
3	372	268	131	87	92	94
4	368	175	145	128	148	93
Average		204	128.5	96.3	145.2	97

Example 6 - Clinical trials

The preparation was administered to more than 100 volunteers that had diabetes mellitus in different ages and stages. The fasting blood sugar (FBS) and the glycosylated Hb, (Hb A1C) was tested before and after the administration of the preparation. Depending on the severity of the cases, in 3 months up to 6 months of treatment both the FBS and the Hb A1C returned to normal ranges gradually. Patients started to reduce their insulin intake accordingly by the advice of their Doctors due to the significant improvement in their cases until the medication was not needed any longer. All patients from 2 weeks after the beginning of the treatment started to feel good, active, and have fewer urination intervals.

The results for four individual patients are shown in Tables 6 to 9 below. In the tables:

FBS is measured in mg/dl. The normal reference range is 74-110 mg/dl.

HbA1C is measured by percentage and the normal reference range is 4.2-6.2%.

FBS pp is measured in mg/dl and the normal reference range is less than 140 mg/dl.

Insulin is measured in mU/ml and the normal reference range is 5-20mU/ml.

Cholesterol (total) is measured in mg/dl and the normal reference range is up to 200 mg/dl.

Table 6

Test	Initial	1 month	2 months	3 months	4 months	5 months
FBS	280	220	120	120	115	108
Hb A1C	9.8	9	8.4	7.6	6.7	5.9
Insulin fasting	10	10	10	10	10	10
FBS pp	390	380	225	220	180	172
Insulin pp	30	35	55	59	71	72

Table 7

Test	Initial	1 month	2 months	3 months	4 months	5 months
FBS	300	220	133	120	110	101
Hb A1C	10	9.3	8.1	7.6	6.4	5.7
Insulin fasting	46	23	22	22	22	20
FBS pp	537	378	220	186	180	185

Table 8

Test	Initial	1 month	2 months	3 months	4 months	5 months	6 months
FBS	530	424	338	270	216	151	121
Hb A1C	16	14.4	10.2	9.6	9	7.7	6.2

Table 9

Test	Initial	1 month	2 months	3 months	4 months	5 months	6 months
FBS	152	148	137	135	120	106	80
Hb A1C	8.2	8	7.8	7.4	6.5	6.67	6.2
2hrs pp blood sugar	213	208	198	160	172	160	148
Cholesterol (total)	231	218	194	155	150	155	148

CLAIMS

1. A composition comprising Coriandrum Sativum; lavender, Pelargonium Graveolens or basil (Ocimum Basilicum and/or Ocimum Kilimand) or any mixture thereof; rosemary; Negella Sativa; Lepidium Sativum; and Commiphora Myrrh.

2. A composition as claimed in claim 1, which comprises both lavender and any one of Pelargonium Graveolens or basil (Ocimum Basilicum and/or Ocimum Kilimand).

3. A composition as claimed in claim 1 or 2, wherein the amount of Coriander Sativum is from 30 to 50%, preferably about 40%.

4. A composition as claimed in any preceding claim, wherein the amount of lavender, Pelargonium Graveolens or basil (Ocimum Basilicum and/or Ocimum Kilimand) or any mixture thereof is from 10 to 50%, preferably about 20%.

5. A composition as claimed in any preceding claim, wherein the amount of rosemary is from 5 to 20%, preferably about 10%.

6. A composition as claimed in any preceding claim, wherein the amount of Negella Sativa is from 5 to 30%, preferably about 15%.

7. A composition as claimed in any preceding claim, wherein the amount of Lepidium Sativum is from 5 to 15%, preferably about 7.5%.

8. A composition as claimed in any preceding claim, wherein the amount of Commiphora Myrrha is from 5 to 15%, preferably about 7.5%.

9. A composition as claimed in any preceding claim in combination with a pharmaceutically acceptable vehicle, carrier or diluent.

10. A composition as claimed in any preceding claim for use in a method of treatment of the human or animal body by surgery, therapy or diagnosis.

11. The use of a composition as claimed in any preceding claim in the manufacture of a medicament for treatment of diabetes mellitus; serum cholesterol disorder; serum triglycerides disorder; uric acid disorder; primary or essential hypertension; in the treatment of nervousness, stress and fatigue conditions; or in supporting the immune system of the patient.



Application No: GB 9919811.1
Claims searched: 1-11

Examiner: J. P. Bellia
Date of search: 9 February 2001

Patents Act 1977
Search Report under Section 17

Databases searched:

UK Patent Office collections, including GB, EP, WO & US patent specifications, in:	
UK CI (Ed.S):	A5B (BE)
Int CI (Ed.7):	A61K45/00, A61K35/78
Other:	ONLINE: EPODOC, WPI, JAPIO

Documents considered to be relevant:

Category	Identity of document and relevant passage	Relevant to claims
A	WPI Abstract Accession No. 1982-05044J [25] & FR 002504551 A (DEHAIS) See abstract	
A	WPI Abstract Accession No. 1985-100923 [37] & FR 002551972 A (MOUSSAAD) See abstract	

X Document indicating lack of novelty in inventive step	A Document indicating technological background and/or state of the art
Y Document indicating lack of inventive step if combined with one or more other documents of same category	P Document published on or after the declared priority date but before the filing date of this invention
A Member of the same patent family	E Patent documents published on or after, but with priority date earlier than, the filing date of this application

An Executive Agency of the Department of Trade and Industry