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The Journal of the Royal Australian College of General Practitioners

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Practice management
Research — into diseases; social and family problems
Preventive medicine
Reports of seminars and conferences
Original articles

The Chairman of the Editorial Committee is . . .

DR J. G. SIMPSON

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BRITISH POSTGRADUATE MEDICAL FEDERATION  
(UNIVERSITY OF LONDON)  

COURSES FOR GENERAL PRACTITIONERS AND LOCAL AUTHORITY MEDICAL OFFICERS,  
JANUARY—AUGUST, 1970.  

Applications for places on the following INTENSIVE COURSES should be made to the Secretary, British Postgraduate Medical Federation, 14 Millman Mews, London, W.C.1, unless otherwise indicated. They should state if the application is or is not made under the Scheme for N.H.S. Practitioners.

It is regretted that, owing to the increasing number of applications to be dealt with in the space of a few weeks, we can no longer accept TELEPHONE APPLICATIONS or ENQUIRIES, so please WRITE to us. Your letter will be dealt with in strict order of application.

INTENSIVE COURSES

<table>
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<tr>
<th>Date</th>
<th>No. of days</th>
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<td>23rd—27th February</td>
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<td>Cardiology</td>
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<tr>
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<td>13th—17th April</td>
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<td>General</td>
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<td>4th—8th May</td>
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<td>General</td>
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<td>11th—15th May</td>
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<td>5</td>
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<tr>
<td>11th—15th May</td>
<td>5</td>
<td>General</td>
<td>Sussex Postgraduate Medical Centre, Brighton.</td>
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<tr>
<td>11th—15th May</td>
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<td>13th May</td>
<td>1</td>
<td>Rheumatology &amp; Paediatrics</td>
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<td>14th May</td>
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<td>Cardiology</td>
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<td>15th May</td>
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<td>Dermatology</td>
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<td>1st—5th June</td>
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<td>Gastroenterology &amp; Renal Disorders</td>
<td>Royal Free Hospital, W.C.1</td>
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<tr>
<td>1st—5th June</td>
<td>5</td>
<td>General</td>
<td>Central Middlesex Hospital, N.W.10</td>
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<tr>
<td>1st—5th June</td>
<td>5</td>
<td>Dental Anaesthesia</td>
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<tr>
<td>1st—5th June</td>
<td>5</td>
<td>General</td>
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<td>Teaching Course for General Practitioner Trainers</td>
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<td>15th—19th June</td>
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<td>Obstetrics &amp; Gynaecology</td>
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<td>13th—17th July</td>
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<td>General</td>
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<td>20th—24th July</td>
<td>5</td>
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<td>5</td>
<td>Dental Anaesthesia (for General Practitioners with limited experience)</td>
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*Specialty designed as a TRAINING COURSE. Principals and Assistants as well as Trainees may attend.

INDIVIDUAL ATTACHMENTS in:—
(a) OBSTETRICS—residential  (b) OTHER SPECIALTIES—non-residential
   (Applications to Secretary, British Postgraduate Medical Federation)
(c) VENEREOLOGY (Applications to Dr. C. S. Nicol, St. Thomas' Hospital, S.E.1.)
(d) LARYNGOLOGY & OTOLARYNGOLOGY (Applications to the Institute of Laryngology and Otology, Royal National Throat, Nose and Ear Hospital, Gray's Inn Road, London, W.C.1.)

Applications for places on the following COURSES & CONFERENCES should be made to the Hospitals unless otherwise indicated.

WEEKEND COURSES & ONE-DAY CONFERENCES

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<td>&quot;Emergencies&quot;</td>
<td>West Kent General Hospital, Maidstone.</td>
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<td>7th—8th February</td>
<td>Child Psychiatry</td>
<td>Queen Mary's Hospital for Children, Carshalton, Surrey.</td>
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<tr>
<td>7th—8th February</td>
<td>Psychiatry</td>
<td>Postgraduate Medical Centre, St. Helier, Carshalton, Surrey.</td>
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<tr>
<td>15th February</td>
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<td>General Hospital, Rochford, Essex.</td>
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<tr>
<td>21st February</td>
<td>Rheumatic Diseases</td>
<td>Harefield &amp; Northwood Postgraduate Medical Centre, Mount Vernon Hospital, Northwood, Middlesex.</td>
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<tr>
<td>21st—22nd February</td>
<td>Obestrics</td>
<td>Kent Postgraduate Medical Centre at Canterbury, Kent &amp; Canterbury Hospital, Canterbury.</td>
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<tr>
<td>21st—22nd February</td>
<td>Psychiatry</td>
<td>Severalalls Hospital, Colchester.</td>
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<tr>
<td>Date</td>
<td>Subject</td>
<td>Hospital</td>
</tr>
<tr>
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<tr>
<td>28th February</td>
<td>Rheumatic Diseases</td>
<td>Princess Alexandra Hospital, Harlow.</td>
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<tr>
<td>28th February</td>
<td>“Family, Community &amp; Mental Health”</td>
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<td>28th February</td>
<td>General</td>
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<td>28th February</td>
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<td>7th March</td>
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<td>7th March</td>
<td>Rheumatology</td>
<td>Tunbridge Wells Postgraduate Medical Centre, Kent &amp; Sussex Hospital, Tunbridge Wells.</td>
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<td>7th-8th March</td>
<td>Obstetrics</td>
<td>Hackney Hospital, E.9.</td>
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<td>7th-8th March</td>
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<td>14th March</td>
<td>General</td>
<td>Luton Medical Centre, Luton &amp; Dunstable Hospital, Luton.</td>
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<td>Redhill Medical Centre, Redhill General Hospital, Redhill.</td>
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<td>14th March</td>
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<td>Runwell Hospital, Nr. Wickford, Essex.</td>
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<td>Alcoholism &amp; Drug Dependence</td>
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<td>Obstetrics</td>
<td>Epsom Medical Centre, Epsom District Hospital, Epsom.</td>
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<td></td>
<td>*Additional Tuition Fee payable by doctors attending.</td>
<td>Queen Mary’s Hospital for Children, Carshalton, Surrey.</td>
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</tbody>
</table>

**CONDTIONS FOR DEPARTMENT OF HEALTH AND SOCIAL SECURITY GRANT**

All the courses and attachments are open to PRINCIPALS and ASSISTANTS in General Practice in the National Health Service, and tuition fees and allowances (subsistence and travelling expenses) are provided for courses equivalent to 22 half-day sessions in each academic year, subject to certain conditions.

Doctors travelling from Scotland or Northern Ireland will only be eligible for a grant to attend intensive courses of 10 or more sessions.

Other doctors may attend on payment of a fee of £15.0s. for one week or otherwise pro-rata. **TRAINEE GENERAL PRACTITIONERS** are not eligible to attend refresher courses designed for General Practitioners. They are, however, eligible to attend orientation courses for new entrants. They are also eligible for individual attachments to study the services of local health authorities, occupational health authorities or other special aspects. The maximum entitlement for this type of attachment for trainees will be 60 sessions in an academic year.

**NOTES**

The attendance of general practitioners is drawn to the necessity for signing attendance registers at each of the sessions which they attend. This is essential to ensure payment of allowances and expenses by the Department of Health and Social Security.

**SENIORITY PAYMENTS & POSTGRADUATE TRAINING ALLOWANCE**

All attendees by General Practitioners at teaching periods advertised in this programme count towards the number of sessions required for Seniority Payments and the Postgraduate Training Allowance. General Practitioners must be careful to sign the register of attendance provided to substantiate their claims.

All enquiries on this subject should be directed to Executive Councils or to the Department of Health and Social Security and NOT to the British Postgraduate Medical Federation.
THE PRACTITIONER
The Leading Monthly Medical Journal
Founded in 1868

JANUARY 1970
SPECIAL NUMBER
on
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This combination, available as SEPTRIN\(^\text{a}\), swiftly eradicates a wide range of organisms including the pathogens common in bronchitis—H. influenzae, Pneumococci and Klebsiella sp.

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flu can be a killer

Influvac can save lives

Chronic lung disease
Chronic heart disease
The Elderly

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‘Flu can be a life-threatening infection in patients with chronic or debilitating disease. The danger is that ‘flu will be succeeded by secondary infection such as pneumonia. It is in those patients whose resistance is already compromised by pre-existing disease that the mortality is highest.
This is why health authorities in many countries now strongly recommend that such high-risk patients be protected against ‘flu by routine vaccination.

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Patients with chronic heart and lung conditions and those in the age group 50+ must be protected from the ‘flu viruses. Prophylactic immunization is the only effective measure. Mortality from influenza may be reduced dramatically by routine vaccination.

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Influvac is a potent, highly purified, aqueous vaccine containing inactivated influenza virus. It confers a maximal degree of protection against the same or closely related strains of influenza virus as those included in the vaccine. The amount of antibody formation is quantitatively related to the amount of antigen in the vaccine. There is a limit to the amount of antigen necessary for optimal antibody formation so that more antigen will not increase the antibody titre. Influvac contains this maximum, distributed over those strains that are likely to circulate in the coming season. Thus it offers the best possible protection. Vaccination produces a maximum level of antibodies within approximately two weeks. The period of immunity may extend to 12 months, but is at least 6 months.
Injections of Influvac are almost painless due to its high purity and to the fact that the virus has been inactivated by means of L-propiolactone instead of formaldehyde. Local or general reactions after inoculation are rare, since Influvac contains a minimal amount of protein (measured as nitrogen).

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Influvac administered by hypodermic jet injection (per dose) 12/6.
Quantity rates available on application.

Composition
Total virus content 17,500 H.A. units.
Full information is available on request.

Duphar Laboratories Ltd
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SEPTRIN has been compared in a trial with ampicillin in treating exacerbations of chronic bronchitis. SEPTRIN produced a significantly greater reduction in sputum volume and of sputum purulence and the trial also showed that SEPTRIN produced a better overall clinical response in the bronchitic patients.¹

² Postgrad med J, (1969) 45 Supplement (November) B6

SEPTRIN Tablets, SEPTRIN Paediatric Suspension and SEPTRIN Paediatric Tablets contain trimethoprim and sulphamethoxazole.

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Septrin—an advance on the antibiotics
flu can be a killer
Influvac can save lives

High Risk
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Composition Ag/Hong Kong 1/1968 10, 500 H.A. units. B/Netherlands 78/1966 7,000 H.A. units. Total virus content 17,500 H.A. units. Full information is available on request.

duphar Laboratories Ltd
Basingstoke - Hampshire
(infanticide, battered babies and so on), but also ordinary family and personal relationships.

Perhaps we must learn to distrust and compensate for such superficial instinctive reactions to discover the underlying true parental love; in the same way that we must learn to distrust the superficial attractions of the dumb blonde to discover the more stable underlying love of the true Darby and Joan 'pair-bond'. Thus I have travelled full circle to my original theme.

Animal studies are a most wonderful and stimulating preparation for the study of human behaviour but extrapolation from animals to humans requires adequate validation. If anyone is going to liken my behaviour to that of a frustrated baboon or a homosexual duck, I want to be certain that such similes have been adequately shown to apply to human beings.

Human behavioural studies and the validation of animal studies in humans presents a great scientific challenge. I believe that the general practitioner in the community is in a unique position to accept this challenge seriously, methodically and wholeheartedly—never forgetting that animals are animals and humans are humans.

The field is wide open, the challenge is great and the rewards could be far reaching.

REFERENCES


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**ACCOMMODATION AT COLLEGE HEADQUARTERS**

Temporary residential accommodation for members and associates and their families is provided at college headquarters. This building, overlooking Hyde Park on one side and Princes Gardens on the other, is central and easily accessible.

The charges, including breakfast, are as follows:

For single rooms £2 10s. 0d. per night
For double rooms £4 5s. 0d. per night
For a flatlet (bed-sitting room for two, bathroom and dressing room) £6 per night or £36 per week
For a self-contained flat (double bedroom, sitting room, hall, kitchen and bathroom) £42 per week

Children under the age of 12 years cannot be admitted, and dogs are not allowed.

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Long room (will seat 100) 25 guineas for each occasion
Damask room (will seat 50) 15 guineas for each occasion
Common room and terrace 15 guineas for each occasion

A service charge of 10 per cent is added to all accounts to cover gratuities to domestic staff.

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'(b) the saturated sleeper'

These are the descriptive titles given by one author* to two main groups of enuretic children. The 'soaker and waker' he describes as timid and apprehensive, though often intelligent. The 'saturated sleepers' are madcaps or tomboys who overexert themselves physically and mentally; they are often defiant and misinterpret attempts at control as lack of love. They are distinguished by their behaviour — 'Those in the first group awake, howling, immediately after wetting the bed. Those in the second group having exhausted themselves, sleep deeply and do not awake till the morrow'.

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*Lancet, 1956, ii, 1336 (29 Dec)

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_Practitioner_, 1964, 193, 306 (Sep)

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THE IAN DINGWALL GRANT AWARD

The Scottish Council of The Royal College of General Practitioners invites application for the Ian Dingwall Grant Award which was created at the request of, and with funds generously donated by, The Caledonian Medical Society. The second award of £100 will be made in June, 1970. Applications should reach the Secretary to the Scottish Council, The Royal College of General Practitioners, Livingstone House, 39 Cowgate, Edinburgh, EHI IJS on or before 1 May 1970.

Those eligible to apply are doctors who by the date of application have completed a minimum of six months as a trainee or an assistant in general practice in Scotland and who are still so employed at the time of application.

The award is intended to encourage young postgraduates preparing for a career in general practice, by permitting them while still employed as an assistant or trainee to add to their experience in one of the following ways:

1. By spending a period of two weeks or so in a medical laboratory, library or university department reviewing a specific subject—perhaps in order to prepare a pilot study or to design a programme of continuing study or research which the applicant would be completing later on in his career. This might include, for example, preparation back-ground reading with a view to commencing a study which would eventually lead to the submission of an M.D. thesis.

2. The young postgraduate could use his prize money in order to plan visits to selected practices, health centres, academic departments or other institutions in the United Kingdom.

3. Where an individual has already planned a visit abroad the prize money might be used to supplement such a visit if deemed appropriate.

These suggestions are by no means all inclusive. An applicant is free to submit other proposals which will be considered by the selection committee provided they satisfy the broad intentions for which their prize was created.

Any applicant should consult with his principal before making a submission. Trainees and assistants should be thoroughly conversant with the existing provisions for extended and intensive courses, as application merely to support each attendance at a course would not be considered.

The form of application will be four typed copies of a statement prepared by the applicant indicating the ways in which, if he is successful, he would use the prize money. To his statement he should attach a brief *curriculum vitae*.

Any request for further information should be addressed to the Secretary to the Scottish Council, The Royal College of General Practitioners, Livingstone House, 39 Cowgate, Edinburgh, EHI IJS.

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