Long term illness is unpleasant.

Long term debt is unnecessary.

You have to face the fact that when you can’t work your income soon drops.

But when illness or accident strikes you the bills still have to be paid.

Too often illness means long term debt. Which is unnecessary. For a small monthly sum you could ensure that when your income falls due to incapacity the Medical Sickness Society will start sending you a monthly cheque to replace it.

And the cheques will continue either until you’re fit enough to return to work or until normal retirement age, whichever is earlier. And we can’t cancel the policy because of long or frequent claims.

If you have not got around to ensuring that we take over your financial worries when incapacity stops you working write to us today quoting reference number 5014. You will be surprised how little this essential cover will cost.

Medical Sickness Society
P.O. Box 449, 7/10 Chandos Street, Cavendish Square, London, W1M 0AD.

a member of the Medical Sickness Group.
Transform the Parkinsonian patient with

'KEMADRIN'

in Paralysis Agitans and Drug-induced Parkinsonism

'Kemadrin' (Procyclidine Hydrochloride)
Tablets of 5 mg. Ampoules of 10 mg. in 2 ml.
Full information is available on request.

Burroughs Wellcome & Co., Dartford, Kent.
(The Wellcome Foundation Ltd.)
Stemetil stops the vertigo

'Smetetil' not only relieves specific symptoms in vertigo, nausea, vomiting, and migraine but also has a calming, stabilizing effect. This helps the patient to take a more relaxed, confident view of his condition and allays the fears which may precipitate further attacks.

'Smetetil'* preparations of prochlorperazine are available as tablets, syrup, injection solution and suppositories.

An M&B brand Medical Product
Full information available on request
May & Baker Ltd
Dagenham Essex RM10 7XS
*trade mark
Aserbine and your District Nurse

Cleaning up skin ulcers, bed-sores and the like is not the pleasantest of jobs, but it is the constant task of the District Nurse. And even the most experienced nurse may need your guidance when slough is the main reason for delay in healing. When this is the case, Aserbine Cream and Solution will often be the best answer.

If she is technically minded, it can be explained that both Aserbine Cream and Aserbine Solution maintain a pH of 2·4 at the tissue surface. This pH is ideal for the differential hydration of protein and cleavage between dead and living tissue results.

If she is more interested in the practicalities, she’ll appreciate that Aserbine Cream for dressings with Aserbine Solution for washing between dressings is a remarkably effective way of removing slough.

Aserbine’s unique action in cleaning-up slough can make even the unpleasant jobs rewarding.

Aserbine* is available in jars containing 100 G. cream and in polythene bottles containing 500 ml. solution. Aserbine Cream is prepared from malic acid, 0·36%; benzoic acid, 0·024%; salicylic acid, 0·006%; propylene glycol, 1·7%. Aserbine Solution is prepared from malic acid, 2·25%; benzoic acid, 0·15%; salicylic acid, 0·0375%; propylene glycol, 40·00%.

Full information is available on request.

* Regd.
in bronchitis
more effective than ampicillin
or tetracycline

Compared with ampicillin
In a controlled single-blind trial involving 50
patients with chronic bronchitis SEPTRIN* was
shown to be more effective than ampicillin,
with reference to reduction of sputum volume
and purulence.

Sputum volume reduction
There was a significantly greater reduction
in mean sputum volume after treatment with
SEPTRIN than after treatment with ampicillin.

Sputum purulence reduction
23 out of 24 cases with purulent sputum
receiving SEPTRIN improved as compared with
16 out of 22 cases with purulent sputum
receiving ampicillin. (Sputum was graded
according to MRC criteria). The success rate
for SEPTRIN was significantly higher than for
ampicillin.

Clinical improvement
Clinically, 24 out of 25 cases receiving SEPTRIN
responded as compared with 19 out of 25
receiving ampicillin.

Compared with tetracycline
In a trial designed to compare the effect of SEPTRIN
with that of tetracycline in the treatment of chronic
bronchitis, it was found that a week’s course with
SEPTRIN was more beneficial than a week’s
course of tetracycline.
24 patients received SEPTRIN and 22 received
tetracycline. Objective data was collected from the
two groups at the beginning and at the end of
treatment.

Sputum Volume
The decrease in mean sputum volume after treat-
ment, as a fraction of the initial measurements, was
significantly larger for the SEPTRIN group.

Sputum purulence
Objective grading of reduction in purulence of the
sputum showed better results with SEPTRIN than
with tetracycline at the end of treatment.

Reference:
SEPTRIN Tablets, SEPTRIN Paediatric Suspension and
SEPTRIN Paediatric Tablets contain trimethoprim and
sulphamethoxazole.
Full information is available on request.

for bacterial infections

Septrin

an advance on the antibiotics
Emergencies from ventricular arrhythmias call for priority treatment—fast. Xylocard 2% is specifically designed to meet such emergencies. Ready for instant use in a disposable syringe, Xylocard 2% provides a bolus I.V. injection for treatment in ventricular arrhythmias associated with myocardial infarction, cardiac surgery and certain diagnostic procedures.

To prolong the therapeutic effect of the Xylocard 2% bolus injection, an infusion of Xylocard 10% should be given in hospital.

XYLOCARD 2%
Bolus injection for immediate use for hospital and general practice.

Each syringe contains Xylocaine 2%. Each ml contains 20 mg Xylocaine, and 6 mg Sodium chloride B.P. Packs: 5 x 5 ml disposable syringes in sterile safety pack.

XYLOCARD 10%
for infusion
for hospital use only.

Each syringe contains Xylocaine 10%. Each ml contains 100 mg Xylocaine in 1 ml of water for injection B.P. Packs: 10 x 5 ml disposable syringes in sterile safety pack. MUST NOT BE USED UNDILUTED.

Further information available on request from our Medical Department.

ASTRA
Astra Chemicals Ltd., Watford, Herts.
In hay fever
Pro-Actidil
Good for up to 24 hours

Each PRO-ACTIDIL* Tablet is specially formulated
in 3 layers for prolonged antihistamine action lasting 19-24 hours.
Full information about PRO-ACTIDIL Tripolidine Hydrochloride Tablets
is available on request.

*TRADE MARK
Burroughs Wellcome & Co.,
(The Wellcome Foundation Ltd.) Dartford, Kent.
Halt at the flashing light

Flashing lights and visual disturbances, classically early warnings of migraine, are signals for arresting all manifestations of an attack—at onset.

MIGREL® acts in the minutes between initial warning and the otherwise inevitable full-blown attack. As well as containing an effective dose of ergotamine (2 mg in each tablet), enhanced by caffeine, MIGREL® contains the anti-emetic, cyclizine. Nausea and vomiting, due to migraine itself or to ergotamine, are very effectively relieved.

MIGREL®, taken at the first warning of an attack, provides a specific treatment that the patient will learn to rely on. Full information is available on request.

* Trade Mark

Burroughs Wellcome & Co.
The Wellcome Foundation Ltd.
St Albans, Herts.

Migril masters migraine
1948 will be remembered as the year in which the National Health Service came into being.

It may also be remembered as the year in which Roter tablets first became available to the Medical Profession in the United Kingdom.

In the intervening 21 years Roter has provided superlative service to those suffering from peptic ulcer and it's sequelae, and has not been superseded.

The record is impressive. Hundreds of thousands of chronic cases, both of the duodenal and gastric varieties—resistant to conventional treatment—have been relieved of their pains and miseries and given a new lease of life. Equally good service has been rendered to post-operative relapse cases.

Roter is still the most effective and economical therapy available. N.H.S. basic cost of initial treatment is 5/-d. per week and maintenance – where needed – only 2/6d. per week or less.

Roter treatment is ambulant and produces no side effects.

Literature and samples available on request from:

F.A.I.R. Laboratories Ltd., Twickenham, Middlesex
Inflammatory dermatoses are capricious.

But 19 out of 20 will respond to Synalar.

Every doctor knows how unpredictable certain skin conditions can be; and the difficulty of ensuring certain response to treatment. Look first to the ‘Synalar’ range and you’ll find the answer. ‘Synalar’ succeeds in 95% of inflammatory dermatoses.

It also brings rapid relief of physical discomfort and its attendant anxiety.

‘Synalar’ is available in a wide variety of formulations: cream, ointment, gel, lotion and aerosol. Further information available on request.

Synalar
FLUCINOLENE ACETONIDE B.P. 0.031%

Imperial Chemical Industries Limited, Pharmaceuticals Division, Alderley Park, Macclesfield, Cheshire.
If it is a gastric ulcer the way to heal it is with Biogastrone.

As ten years' experience has shown, a few weeks' treatment with Biogastrone will heal most gastric ulcers while the patient continues to work and enjoy a normal life. Ulcers that do not respond to this treatment are unlikely to heal subsequently, with bed-rest in hospital.

Biogastrone therapy, convenient and economical, is a decisive treatment for the early ulcer.

Right from the start

Full information is available on request.

Berk Pharmaceuticals Limited Godalming & Shalford, Surrey

His mother is sick of it. So is he

Now—effective treatment for many enuretic patients
Many cases of enuresis without organic involvement respond favourably to ‘Tryptizol’, the well-known antidepressant with tranquillising properties. Most enuretics responding to ‘Tryptizol’ begin to do so in the first few days of treatment and the tendency is for increasing improvement as therapy is continued. In one trial on 74 enuretic children, a recovery rate of 72.9% was reported.*

*T. Therapy, 1963, 45, 72 (Jan)

Tryptizol® Syrup in enuresis

Supplied as a pleasant-tasting syrup, containing 10 mg amitriptyline (as the embonate) per 5 ml spoonful; also as 10 mg and 25 mg tablets. Detailed information is available to physicians on request. © denotes registered trademark

Merck Sharp & Dohme Limited, Hoddesdon, Hertfordshire
Telephone, Hoddesdon 67123
An advance in the treatment of Parkinson's Disease

"Functional disability, tremor, assessment of limb dexterity, and the timing of walking and of writing, all improved significantly."
Lancet. 1 7641 259 (1970)

Symmetrel® Geigy

Availability
Symmetrel® is available as capsules containing 1-adamantanamine (Amantadine) hydrochloride 100 mg

Further information will be sent on request.
Geigy (U.K.) Limited, Pharmaceuticals Division, Macclesfield, Cheshire
A UNIQUE ORAL GEL
WITH STRIKING ANALGESIC AND
ANTISEPTIC PROPERTIES

Bonjela has been shown in formal
American trials to bring rapid relief
from pain in 90% of all cases of oral
ulceration, herpes labialis, gingivitis
and denture sores. By rapid relief is
meant marked alleviation of pain
within 2-3 minutes.

These results have now been con-
firmed by a controlled trial conducted
recently by a British dental surgeon.*
89.3% of the patients receiving
Bonjela experienced relief from pain
which lasted in 59.5% of these
patients for 3 hours or more. Among
the conditions treated were recurrent
aphthae, denture trauma, herpetic
lesions and soft tissue trauma.

*Marshall, K. F., “A topically applied salicylate

FORMULA: Choline Salicylate
8.7%, Cetalkonium Chloride 0.01%,
Alc. (95%) 39.0%, Menthol 0.057%,
Glycer. 4.6%.

INDICATIONS: Herpes labialis,
gingivitis, oral ulcerations, cheilosis
denture sores, infant teething dis-
orders.

PRESENTATION: Bonjela is avail-
able in 10 g. tubes at a basic N.H.S.
cost of 2/9d. per tube.

LLOYD'S PHARMACEUTICALS LTD.,
103 Mount Street, London, W.1.
An associate of Lloyd-Hamul Ltd.

Literature and samples are available on request.
LOW BACKACHE

Transvasin –
more to it than
meets the eye –
redness - warmth.

RELIEVES PAIN

Transvasin
30gms.

Highly active and
economical –
1d a treatment!

Tetrahydrofurfuryl
salicylic acid
penetrates skin
3 TIMES FASTER
than pure
salicylic acid.

Deep action increases
circulation in underlying
tissues at same segmental
level – removing unwanted
metabolites – reducing anaerob
RELIEVING PAIN!

MARGARET!
Samples and
literature please
from

Lloyd-Hamot Ltd.,
103, MOUNT STREET
LONDON, W.I.
there's more to hypertension than meets the eye

'All raised arterial pressure of any degree will damage the kidney inevitably, and the longer the hypertension persists, the more damage occurs.'
*Practitioner*, 1964, 193, 14 (Jul)

The damage caused by hypertension is evidenced by the illustrations of corrosion specimens of (left) a kidney in a case of hypertension, and (right) a normal kidney. *Drawings by courtesy of Paul Peck.*

treat earlier with 'Aldomet'
to help preserve renal function while lowering blood pressure

'Aldomet' is supplied as tablets marked 'MSD 401' containing 250 mg methyldopa MSD and, for emergency use, as an injection. Detailed information is available to physicians on request. 'Aldomet' is a registered trademark.

Merck Sharp & Dohme Limited, Hoddesdon, Hertfordshire
*Telephone, Hoddesdon 67123*
YOU'RE RIGHT TO CHOOSE NEGRAM (right from the start)

Since Negram was introduced, many investigators have compared its activity with that of other antibacterials. Studies of in vitro sensitivity of common urinary pathogens have consistently shown it to be more effective than any other agent in routine use.

So when you choose Negram as first line treatment for urinary tract infections, nine times out of ten you'll have made the right choice.

---

**E. coli**

<table>
<thead>
<tr>
<th>NEGRAM</th>
<th>Nitrofurantoin</th>
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<tr>
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<td>Chloramphenicol</td>
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<td>Tetracycline</td>
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<td></td>
<td>Ampicillin</td>
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<td>Sulphonamide</td>
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**Proteus**

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<tr>
<th>NEGRAM</th>
<th>Nitrofurantoin</th>
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<td>Sulphonamide</td>
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<td></td>
<td>Tetracycline</td>
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**Klebsiella/Aerobacter**

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<th>NEGRAM</th>
<th>Nitrofurantoin</th>
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<td>Sulphonamide</td>
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</table>

The figures on these charts show the average findings of the following studies:

Take the pain your way

Slipped Disc  Malignancy  Osteoarthritis  Trigeminal Neuralgia

NON

FORT

wherever pain calls for ordinary treatment

Fortral Tablets Dosage: usually 2 tablets (50 mg.) four hourly after meals, adjustable within the range of 1-4 tablets 3-4 hourly. Each Fortral tablet contains 25 mg. pentazocine hydrochloride. Basic NHS cost: 100 tablets 33/2.

Fortral Injection Dosage: 45-80 mg. for severe pain; 30 mg. for moderate pain. Fortral injection contains 60 mg. pentazocine per 2 ml.

Basic NHS cost: 10 x 1 ml. ampoules 20/8d. 10 x 2 ml. ampoules 39/4d.

Side Effects Dizziness, nausea and vomiting sometimes occur, but tend to decrease after a few doses.
pain out of practice

Coronary  Herpes Zoster  Sprains and Strains  Fractures

DDA TRAL

n is too great
y analgesics

Precautions  Caution in severe renal, hepatic and respiratory impairment and in patients previously on large doses of narcotics. Ambulatory patients should not drive nor operate machinery. Until further information is available Fortral should be given with caution in the first trimester of pregnancy, to children under 12 and to patients receiving MAO inhibitors.

Contra-Indications  Established respiratory depression, Raised intracranial pressure, Severe head injury or pathological brain conditions. Convulsive disorders.

Fortral is a registered trade mark. Full information on request from The Beyer Products Company, Surbiton-upon-Thames, Surrey.
Negram Tablets
Formula: Each tablet contains 500 mg. nalidixic acid.
Adult Dosage: For acute infections, 2 tablets q.i.d. for at least 7 days, reducing to 1 tablet q.i.d. for chronic infections.
Basic NHS Cost: (2 q.i.d.) 5/10d. a day. Availability: Containers of 56 tablets.

Negram Suspension
Formula: Each 5ml. spoonful contains 300 mg. nalidixic acid.
Paediatric dosage: 1 ml. Suspension (60 mg.), per kg. body weight (25 mg./lb.) daily for at least 7 days.
For children of average weight and development:
1 month-1 year: 2.5 ml. (150 mg.) 2-4 times daily
1-2 years: 5 ml. (300 mg.) 2-3 times daily
2-6 years: 5 ml. (300 mg.) 3-4 times daily
6-14 years: 10 ml. (600 mg.) 2-4 times daily
Basic NHS Cost: (5 ml. t.i.d.) 1/10d. per day.
Availability: Bottles of 150 ml. and 500 ml.

Side Effects:
Gastro-intestinal or subjective visual disturbances may occur but are readily reversible on reduction or discontinuation of therapy.

Precautions:
Use with caution in patients with liver disease and raised intracranial pressure. Patients should avoid excessive exposure to sunlight. Possible risks should be carefully weighed against benefits in the first trimester of pregnancy.
Not recommended for infants less than 1 month old.

Fortral Tablets
Formula: Each Fortral tablet contains 25 mg. pentazocine hydrochloride.
Dosage: Usually 2 tablets (50 mg.) four hourly after meals, adjustable within the range of 1-4 tablets 3-4 hourly. Basic NHS Cost: 100 tablets 33/2d.

Fortral Injection
Formula: Fortral injection contains 30 mg. pentazocine per ml.
Dosage: 45-60 mg. (1.5-2 ml.) for severe pain; 30 mg. (1 ml.) for moderate pain.
Basic NHS Cost: 10 x 2 ml. ampoules 39/4d., 10 x 1 ml. ampoules 20/8d.

Side Effects
Dizziness, nausea and vomiting sometimes occur, but tend to decrease after a few doses.

Precautions
Caution in severe renal, hepatic and respiratory impairment and in patients previously on large doses of narcotics. Ambulatory patients should not drive nor operate machinery. Until further information is available Fortral should be given with caution in the first trimester of pregnancy, to children under 12 and to patients receiving MAO inhibitors.

Contra-indications
Established respiratory depression. Raised intracranial pressure. Severe head injury or pathological brain conditions. Convulsive disorders.

Negram and Fortral are registered trade marks
Full information available on request from

The Bayer Products Company Surbiton-upon-Thames, Surrey.
the chart and the weight gain entered on the graph. Alternately, the weight can be entered into the box under the graph.

Other indices: e.g. Presentation, position, foetal heart, urine and oedema are entered in separate boxes under the graph.

The spacing of the graph, unlike Dr Taylor's method of 5-week intervals, is along the lines of the normal antenatal visits. Extra visits can be squeezed in or the numbers altered. Any treatment given that is to be recorded is written in pen on the graph. The use of different colours would be helpful.

Conclusions

The advantage of such a chart is that any variations from the normal is more easily discernible. Although there are less home confinements carried out by general practitioners today, there is more antenatal care, with the patient being referred back to the hospital at the 32nd or 34th week. The chart may be sent to the hospital with the patient. It could be completed in hospital and a flimsy photocopy returned to the general practitioner for his records. The front and back of the form could be similar to the EC24 R/2 form, or perhaps these also could be revised. My charts may not be the most acceptable, and the squares are on the small size, but I do feel that charting the findings we obtain at antenatal examinations is a much more satisfactory way of recording results.

---

Publications

Copies of the following publications may be obtained from E. & S. Livingstone, Teviot Place, Edinburgh

| Reports from General Practice                  |      |
| No. 1. Vocational Training                     | 5s.  |
| No. 3. Additional Payments for Wide Experience and Notable Service in General Practice | 1s.  |
| No. 4. General Practice in the New Towns of Britain | 6s.  |
| No. 5. Evidence of the College of General Practitioners to the Royal Commission on Medical Education | 6s. 6d. |
| No. 11. General practice teaching of undergraduates in British Medical Schools | 10s. 6d. |
| No. 12. The General Practitioners work Load in South Wales 1965-1966 | 10s. 6d. |
| No. 13. Present state and future needs of general practice (Second edition) | 12s. 0d. |

| Symposia                                      |      |
| Hazards of Middle Age                        | 5s.  |
| Problems of Sex                              | 6s.  |
| The Art and Science                          | 7s. 6d. |
| Accident Management                          | 6s.  |
| Nutrition in General Practice                | 7s. 6d. |
| Arthritis in General Practice                | 7s. 6d. |
| Migraine in General Practice                 | 5s.  |
| Mental health and the Family Doctor          | 5s.  |
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| The Quality of Medical Care                  | 5s.  |
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| The Age of Discretion                        | 7s. 6d. |
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| Rheumatology in General Practice              | 10s. 6d. |
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| Training for General Practice (2nd Edition) | 4s. 6d. |
| Epidemic Winter Vomiting                    | 1s.     |
| Memorandum for the Guidance of Trainers     | 1s.     |
| Group Practice, Ancillary Help and Government Controls | 7s. 6d. |
CLASSIFIED ADVERTISEMENTS

The charge for this service is 3s. 0d. per line, plus 2s. 6d. if a Box Number is required. Advertisements should be addressed to: The Journal of the Royal College of General Practitioners, Classified Advertisement Department, 5 Bentinck Street, London W1H 4AE.


COLLEGE APPEAL

Suggested gifts

The following items are offered for sale in aid of the College appeal fund:

<table>
<thead>
<tr>
<th>Item</th>
<th>Price per item</th>
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<tbody>
<tr>
<td>College Ties</td>
<td></td>
</tr>
<tr>
<td>Green silk (with owl motif)</td>
<td>35 0</td>
</tr>
<tr>
<td>Black 100 per cent Terylene (with owl motif)</td>
<td>25 0</td>
</tr>
<tr>
<td>Cuff Links:</td>
<td></td>
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<tr>
<td>Rolled gold with gilt enamel, bearing the owl motif</td>
<td>25 0 per pair</td>
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<tr>
<td>Ash Trays:</td>
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<tr>
<td>Tinted blue glass, decorated in gold with the College crest</td>
<td>7 6</td>
</tr>
<tr>
<td>Fellows Ties: (with a single owl motif)</td>
<td>35 0</td>
</tr>
<tr>
<td>Navy blue silk (Available to Fellows only)</td>
<td>35 0</td>
</tr>
<tr>
<td>Postage and packing 1s. 0d. extra (U.K. and Northern Ireland only)</td>
<td></td>
</tr>
</tbody>
</table>

Orders should be addressed to the Appeal Secretary, The Royal College of General Practitioners, 14 Princes Gate, London, S.W.7.

THE EDUCATION FOUNDATION BOARD

This board holds funds for the furtherance of education in and for general practice, and is prepared to consider projects for personal or corporate education or educational research. They must not be such as would be covered by section 63 of the National Health Service Act, or any other similar provision.

Applications should set out the name of the applicant, the aims of the project, the methods to be employed, the estimated cost, the reasons why no other form of funding is likely to be available, and the anticipated commencing and finishing dates of the project. The board will require a typescript report of the results of the work undertaken.

Applications should be typed and sent to the Secretary, Education Foundation Board, The Royal College of General Practitioners, 14, Princes Gate, Hyde Park, London S.W. 7.
Experience shows
7 out of 8 patients
are trouble-free with

Norinyl-1

...from the very first pack

FIVE IMPORTANT FACTS:
- contains only 50 mcg oestrogen
- used with satisfaction by nearly 200,000 U.K. woman
- lowest oestrogenicity of any 'combined' oral contraceptive
- first choice by over 2,000 U.K. doctors
- four years of U.K. clinical experience

Each Norinyl-1 pack contains 21 tablets of Norethisterone B.P. 1 mg and Mestranol B.P. 50 mcg. Full prescribing information on request.

References:
1. Multi-centre clinical trials involving nearly 6,000 patients, Data available to the United States F.D.A., 1968.

SYNTEX Syntex Pharmaceuticals Ltd., St. Ives House, Maidenhead, Berkshire.
The Journal of the Royal College of Physicians of London

This Journal is concerned with the integration of scientific disciplines in the practice of medicine and, by providing a wide ranging commentary on the growing points of medicine, is an essential complement to the specialised journals.

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A. W. Asscher
“Screening for Urinary Tract Infection.”
F. C. Bartter
“The Syndrome of Inappropriate Secretion of Antidiuretic Hormone.”
W. I. Card
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“Broken Families and Child Behaviour.”
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T. R. Taylor
“Computer-guided Diagnosis.”
P. H. A. Willcox
“The Trial of Dr. W. R. Hadwen.”

Editor
A. Stuart Mason, M.D., F.R.C.P.

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The Royal College of General Practitioners
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and
Printed by The Devonshire Press Limited, Torquay
Fucidin Ointment
the first topical antibiotic proved to penetrate intact skin

now proved to have the most effective penetration

A new comparative study of the penetration through intact skin of erythromycin, ampicillin, penicillin G, tetracycline, showed that "... none of those tested penetrated as well as had been shown previously for sodium fusidate."²

Fucidin® Ointment – the logical topical antibiotic
penetration • clinical effectiveness • freedom from unwanted side-effects

Fucidin Ointment—2% sodium fusidate B.P. in a neutral ointment base; in the treatment of boils and carbuncles use Fucidin Ointment alone, or where indicated in combination with a systemic antibiotic and/or surgery.

1. Paper read to the British Dermatological Association Meeting, Aberdeen, July 1968.
2. Brit. J. Dermat. (1969) 81; Suppl. 4, 88

a study in penetration simulated section through boil and surrounding skin tissues showing penetration deep to the site of infection

Full information is available on request from
LEO LABORATORIES LIMITED. HAYES. MIDDLESEX. TELEPHONE: 573 6224