Increased exercise tolerance.

Beta-Cardone significantly prolongs the duration of exercise effort in patients with angina pectoris. The illustration below, based on six case studies, demonstrates this effect in patients exercised on a bicycle ergometer.

In this test the protective effect of Beta-Cardone was shown by a marked reduction in ST segment depression throughout: at rest, at the point of pain, and after exercise.

![Graph showing increased exercise tolerance](image)

Adapted from Pract. med. J (1970) Nov Suppl. 77

Fewer anginal attacks, reduced trinitrin dependence.

The increased exercise tolerance induced by sotalol results in fewer anginal attacks and reduced need for trinitrin. The graph summarises the results of a double-blind, crossover, multi-centre study involving 146 patients. 92% were given a dose of between 240mg and 480mg per day; 93% reported fewer attacks during sotalol therapy and 71% had a reduction of 50% or more. Compared with the baseline period, the lowered attack rate was confirmed by the parallel reduction in the usage of trinitrin tablets.


Beta-Cardone helps the anginal patient to live with his condition.

The anginal patient lives under the constant threat of painful attack. Beta-Cardone, with its pure beta-blocking activity, takes him step by step toward the enjoyment of a less troubled, more normal life.

- Heart rate reduced
- Myocardial contraction velocity slowed
- Reduced cardiac work
- Myocardial oxygen consumption reduced
- Exercise tolerance increased
- Nearend-to-normal life for the patient

Beta-Cardone preparations of sotalol hydrochloride are available as TABLETS 40mg (basic NHS cost £2.93 per 100 tablet pack), TABLETS 80mg (£4.35 per 100), and INJECTION 10mg in 5 ml (£4.41 per 10 ampoules)

BETA-CARDONE preparations of sotalol hydrochloride are available as TABLETS 40mg (basic NHS cost £2.93 per 100 tablet pack), TABLETS 80mg (£4.35 per 100), and INJECTION 10mg in 5 ml (£4.41 per 10 ampoules).

Adapted from the classification in Clin. Pharmac. Ther. 10, 292

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"Fesovit" timed release capsules replace iron stores depleted by poor eating habits, and help to meet the daily requirements for essential vitamins B and C. The unique 'Spansule' Capsule is formulated to release the majority of the iron not in the stomach where it can cause gastric irritation but in the duodenum and jejunum where the absorption of iron is optimal.

This is not a clinical diagnosis. It is merely a convenient and familiar way of describing those anaemias caused by poor eating habits, e.g. a diet made up almost exclusively of tea and toast.

"Fesovit' and 'Spansule' are trade marks.
Full information is available upon request.
"Fesovit' contains ferrous sulphate, vitamin B complex and vitamin C.

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Full prescribing information about ESBAT AL (benthaline sulphate) is available on request.

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*Trade Mark
One thing you shouldn't

Dermatophagoides pteronyssinus scanning electron micrograph

Migen

asthma immunisation made easy.
Because, no matter what you do, you can't get rid of Dermatophagoideas pteronyssinus, the house dust mite, "...the most common cause of allergic asthma in this country". Brit. med. J., 1970, 2, 501.

The mite is an extremely potent allergen. In fact, it has been calculated that the inhalation of mite material in an amount weighing less than one whole live mite would be capable of precipitating an allergic reaction.

In 1696, Floyer in his "Treatise on Asthma", stated that, "all asthmatics are offended by the least dust made by the sweeping of a room, or making of a bed". But it wasn't until 1964 that the significance of this tiny, semi-transparent creature was first appreciated.

Today, although only 0.3 mm in length, the common house dust mite has proved to be a major cause of a disease that disables over 300,000 Britons.

A Thriving Subculture
Although the mites will live and breed in any house dust they are most often found on the mattresses and pillows of our beds, close to their staple diet - human skin scales. For most people this thriving subculture means little. But for the allergic asthmatic it could mean the difference between a dream and a nightmare.

Avoidance is Impossible
In the home, it is virtually impossible to remove every trace of the mite. The ubiquitous creature exists in beds, carpets, curtains, cushions - anywhere that human beings and domestic dusts come together. Even immaculate dwellings produce dust samples rich in live mites, their excreta and dead remains - all potent allergens. This is why the most effective way of controlling house dust mite sensitivity is immunisation.

Migen - for the prevention of Asthma
Migen is a new short course vaccine which immunises against the house dust mite.

So it does not simply treat the symptoms of asthma - it prevents them. Immunisation against the powerful house dust mite allergen can raise the patient's overall level of tolerance. If he is multi-sensitive he may well find that he no longer reacts to contact with other allergens which have previously provoked attacks. And the stress caused by the fear of attack is reduced.

Migen is the first treatment that gives you, the family doctor, real control over asthma.

Migen and Simplicity
There was a time when immunisation was both a complicated and lengthy business. Not so with Migen. Just six injections form a course of treatment for asthma and perennial rhinitis. With each syringe pre-filled to ensure easy administration and accurate dosage.

Migen and Safety
In Migen the active material is adsorbed on to tyrosine - a naturally occurring amino acid which is metabolised in the human body. The active material is therefore released slowly but completely for maximum effectiveness and minimum risk of adverse effects.

Diagnosis
Migen may usually be prescribed on the basis of a careful case history alone. A Diagnostic Aid has been devised to help identify, by case history, those patients who are most suitable for Migen treatment. If the diagnosis is still in doubt after the case study then the Migen Skin Test Kit may be used for confirmation. Both the Diagnostic Aid (which also includes notes for the guidance of patients) and the Skin Test Kit are available on request from Bencard.

Migen
Many products have been advocated for use in the treatment of asthma. Most have drawbacks that you and your patients suffer for the sake of some relief. Now Migen offers you an opportunity to treat the most common form of allergic asthma. From your surgery.

Migen - Bencard
Migen is a tyrosine adsorbed vaccine prepared from pure extract of Dermatophagoideas pteronyssinus. Full information on Migen (regd.) is available on request from Bencard, Freepost, Brentford, TW8 8BF.
This is what we call practising medicine.

A career in Naval medicine can be a rewarding experience. Opportunities to specialise abound. And perhaps above all else, there is an immense satisfaction to be gained from the wide variety of work you will be involved in.

At sea, for instance, you could be anywhere from the Mediterranean to the Pacific Ocean. Looking after the health and well being of the company of a modern warship.

And though you could spend as long as the first eighteen months of your five year Short Service Commission on board different ships, you need have no fear of losing contact with mainstream medicine. For no matter where you are, you will be kept informed of current medical opinion.

After this, the choice is yours. Post graduate medical training and a career in the clinical disciplines at one of our naval district general hospitals. Haslar or Plymouth, for instance, with their wide spectrum of clinical material drawn from naval personnel, their dependants and the local civilian population as well. There are also naval hospitals in Malta, Gibraltar and Mauritius, with opportunities for exchange appointments elsewhere.

Or you might prefer occupational medicine in our research orientated naval dockyards. Aviation medicine with its accent on rotary wing support of the Fleet. And for those with an administrative turn of mind, community medicine.

Royal Naval expertise in maritime medicine is recognised world wide and research into underwater medicine, nuclear medicine and the closed submarine environment is centred at the Institute of Naval Medicine at Alverstoke.

Naval general practice in well staffed and equipped medical centres extend as far afield as Hong Kong and Singapore. And new training schemes are now under way in the United Kingdom.

Should you be moved or sent abroad at any time, all expenses will be paid by us. We will help you with accommodation (at very reasonable rents) and provide allowances for the education of your children, if you have a family.

If you enter the Royal Navy immediately after registration you will be given the rank of Surgeon Lieutenant and a salary of £4,099, rising to £4,249 after four years.

On the other hand, if you are older (up to the age of forty) and more experienced, we can offer you a number of opportunities in general practice and the specialities. And, depending on your post-registration experience, you could enter as a Surgeon Lieutenant Commander at a salary of £5,161, rising to £5,658.

Then, at the end of your five year Short Service Commission you could leave with a tax free gratuity of £3,000.

But if it is mutually agreeable, you could apply for a Full Career Commission or a 16 year pensionable commission. The choice is yours.

In the meantime if you would like further information, write giving details of your age and qualifications to Surgeon Commander L.C. Banks, R.N., Department of the Medical Director General (Naval), Empress State Building, Fulham, London SW6.
The Eleventh Edition of

DAVIDSON’S PRINCIPLES AND PRACTICE OF MEDICINE

Edited by JOHN MACLEOD

1974  1096 pages  101 illustrations  limp binding  £4.50

Davidson’s Principles and Practice of Medicine has now appeared in eleven editions and eighteen reprints since it was first published in 1952.

In this edition new co-authors have been introduced to the sections on infection, nutrition, digestive disorders, liver diseases, endocrinology, and diseases of the connective tissues; these areas particularly have been extensively rewritten. The remainder has been thoroughly revised and the book has been reduced in size mainly by discarding material which has been superseded.

In preparing the eleventh edition the primary objective has been to ensure that this book continues to reflect the constantly evolving pattern of clinical practice.
Some people take barbiturates because they can't face another day

Every year many thousands of people attempt to kill themselves with barbiturates. Some die. Most survive. But usually only after intensive treatment, in hospital.

Virtually all of these patients could be transferred to Mogadon, which is much safer, but just as effective in inducing sleep. Moreover, it causes few of the barbiturates' many other problems.

Patients may still try to kill themselves. But with Mogadon few, if any, would succeed and most would recover in less than 12 hours without treatment.

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in bronchitis
highly effective
sometimes vital

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morning just in case of an emergency.
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but you never know...

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MINOCIN (minocycline) protects against the
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broad-spectrum and semi-synthetic penicillins it is also
highly effective against resistant staphylococci – the
bacteria with which could threaten your patient's life.

Since bacterial pneumonia is the only really life-endangering
infection present in bronchitis, so whenever you treat bronchitis
by this route, the start with MINOCIN – just in case...


MINOCIN tablets are available in packs of 9 and 48 tablets, each containing 100mg minocycline.

*Trademark
Vocational Training
for
General Practice

Devon Area Health Authority
Exeter University/
Exeter and Mid-Devon Hospitals

Applications are now invited for three places starting on 1 January 1975 on the vocational training scheme being organised by the Department of General Practice in the Postgraduate Medical Institute of Exeter University. This course is recognised for the MRCGP examination.

Trainees will rotate through four six-month posts at senior house officer level at the Royal Devon and Exeter Hospitals in Exeter. The programme will be constructed from acute medicine/dermatology, paediatrics (DCH), accident and emergency, geriatrics and psychiatry.

One year will be spent in a university approved teaching practice and throughout the three years a half-day release course is held.

The Exeter Department of General Practice is the only university department of general practice in the country outside a medical school.

Applications and enquiries should be made as soon as possible to:

Dr D. J. Pereira Gray, Senior Lecturer-in-charge,
Department of General Practice,
Postgraduate Medical Centre,
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... the broad spectrum antibiotic for the effective low cost treatment of all routine respiratory infections. Infections of the upper and lower respiratory tract quickly respond to the triple power of Detecllo, with a minimum of the side-effects commonly experienced with high dose tetracyclines.

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Classified advertisements are welcomed and should be sent to: The Journal of the Royal College of General Practitioners, Longman Group, Burnt Mill, Harlow, Essex.

The charge for this service is 50p per line, plus 25p if a box number is required. Fellows, members and associates of the Royal College of General Practitioners may claim a ten per cent reduction.

The inclusion of an advertisement in this Journal does not imply any recommendation and the editor of the Journal of the Royal College of General Practitioners reserves the right to refuse or stop the insertion of any advertisement.

VOCATIONAL TRAINING SCHEME FOR GENERAL PRACTICE

Whipps Cross, Connaught and Chingford Hospitals

Applications are invited for two posts for fully registered doctors in this three-year scheme, starting on 1 May, 1975.

Both posts begin with an introductory month in general practice, which is followed by two years spent in hospital posts based mainly at Whipps Cross Hospital, London, E11. The posts cover general medicine, accident and emergency, obstetrics and gynaecology, and paediatrics. The final year will be spent in a recognised general practice.

These schemes are recognised for the M.R.C.G.P. (the D.Obst.R.C.O.G. and the D.C.H. as appropriate) and on completion of the appointment the holder qualifies for the vocational training allowance paid to junior principals in the National Health Service.

Included in the trainee year for all schemes is a half-day release course. Trainees are encouraged to attend meetings held at the Medical Education Centre, Whipps Cross Hospital.

Arrangements can be made to visit the Hospital and practices in the area involved in the schemes, through Dr J. L. Hardman, Course Organiser, Vocational Training Medical Education Centre, Whipps Cross Hospital, London, E11 1NR. Telephone 01-539-5522. Ext. 310. Rented accommodation will be available.

Forms of application and full details from the Administrative Assistant, Langthorne Hospital, London, E11 4HJ. Applications should be returned by the 1 January 1975 and interviews are expected to be held on 17 January 1975.

CLINICAL INTERVIEW PROJECT:

RESEARCH OFFICER

Applications are invited from registered medical practitioners for the post of Research Officer in a 3 year project to study clinical and behavioural aspects of doctor-patient encounters.

The person appointed will lead a small team which will also include a social scientist, a technician and a full-time secretary. He will be responsible to a steering group from the Departments of General Practice, Education and Audio-Visual Aids. He will develop and implement a research policy, collaborate with other clinicians in hospital and general practice and be concerned with day-to-day operation of the project.

Applications will be considered from doctors who have completed or are about to complete vocational training for general practice or those in other relevant clinical disciplines who have behavioural as well as clinical interests.

Salary is in the range of £3,900–£4,300 with F.S.S.U. Further particulars may be obtained from Professor J. Knox, Department of General Practice, The University of Dundee, and applications should be submitted by 31st October, 1974.
COLLEGE ACCOMMODATION

Charges for college accommodation are reduced for members (i.e. fellows, members and associates). Members of overseas colleges are welcome when rooms are available. All charges for accommodation include breakfast and are subject to Value Added Tax; a service charge of 12½ per cent is added. Members are reminded that children under the age of 12 years cannot be admitted and dogs are not allowed.

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Charges are also reduced for members hiring reception rooms compared with outside organisations which apply to hold meetings at the College. Allhirings are subject to approval and VAT is added.

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Enquiries should be addressed to the Accommodation Secretary, Royal College of General Practitioners, 14 Princes Gate, Hyde Park, London SW7 1PU. (Tel. 01 584 6262). Whenever possible bookings should be made well in advance.

Epidemiology in Country Practice
by

W. N. Pickles

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Copies are available from the address below and orders will be dealt with in turn while stocks last.

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