Below the surface of the climacteric

- Hot flushes, sweating
- Endometrial hyperplasia
- Dry vagina
- Osteoporosis (affects one patient in three)
- Irregular periods

Cyclo-Progynova

The all-round treatment for menopausal problems

1. Moderate doses 45, 50, 75 mg Progynova, each containing 2 mg conjugated oestrogens and 0.005 mg progesterone. Both tablets are sugar-coated with W in a regular brownish-orange granular coating. 2. Progynova may be used both before and after the menopause. 3. The treatment of irregularities of the ovulatory cycle caused by abnormal oestrogen production and diminishing corpus luteum function is the ovulatory type. 4. Ovulation will be initiated by treatment with a single 10 mg tablet 5. Patients with histories of hypertension or cerebrovascular insufficiency may take this medication if the patient is under the guidance of a physician. 6. The dose may be reduced if necessary. 7. Treatment with Cyclo-Progynova should not be used in pregnancy or in the presence of endometrial hyperplasia or other diagnoses that may indicate the need for premature menopause. 8. Further information on Cyclo-Progynova is available on request.

Prescribing information: Progynova tablets should be taken daily for 21 days, followed by pill-free days, then repeated. This cycle may be repeated every 7 days, followed by pill-free days. Further information on Cyclo-Progynova is available on request.

Cyclo-Progynova 45 mg: 30 tablets. Cyclo-Progynova 50 mg: 30 tablets. Cyclo-Progynova 75 mg: 30 tablets. Further information on Cyclo-Progynova is available on request.

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Cyclo-Progynova 45 mg: 30 tablets. Cyclo-Progynova 50 mg: 30 tablets. Cyclo-Progynova 75 mg: 30 tablets. Further information on Cyclo-Progynova is available on request.

Cyclo-Progynova 45 mg: 30 tablets. Cyclo-Progynova 50 mg: 30 tablets. Cyclo-Progynova 75 mg: 30 tablets. Further information on Cyclo-Progynova is available on request.
Talpen the routine antibiotic that won't upset your patients' routine

Effective Your main consideration is to help your patient to get better quickly. Talpen is highly effective across a wide range of indications. For example, a published clinical trial produced a 93.0% success in bronchitis; a 94.3% success in UTI; and a 95.6% success in ENT.1

Easy To Take Just one Talpen tablet three times a day. And Talpen's reliable absorption means it can be taken with or without food.2 So your patients find it easy to remember and are more likely to take the full prescribed course of treatment.

Furthermore, Talpen is very well tolerated.1,3 (The incidence of diarrhoea, for example, is only 4%).1 So your patients can carry on their normal daily routine.

Economical Talpen is effective, reliable, easy to take—and it's economical at an average daily cost of 26p.4

Talpen

Everything your routine antibiotic should be

Prescribing Information. Typical indications include: Acute and Chronic Bronchitis, Pneumonia, ENT infections, UTI. Usual Oral Dosage: Adults: 1 tablet three times a day. Each tablet contains 250 mg of the ampicillin ester; talampicillin hydrochloride equivalent to 169 mg of ampicillin.

Contra-indication: Penicillin hypersensitivity. Precaution: Talpen is not recommended for patients with severe renal or hepatic impairment.


Talpen* (talampicillin) is a product of British research from Beecham Research Laboratories, Brentford, England. A branch of Beecham Group Limited. "Regd. PL 0038/0209 BRL 020"
Otitis media
Amoxil is quoted as 'the treatment of choice' in otitis media in children under five in a recent expert review in the Practitioner.

Bronchitis
"In my opinion, the most straight-forward treatment of this condition, in patients not allergic to penicillin, is amoxycillin...taken at the first sign of increasing sputum purulence."

Other respiratory infections
In various upper and lower respiratory infections, Amoxil has been shown to achieve 84% response within three days of the commencement of treatment in 243 children studied.

References

Further information on Amoxil (regd.) amoxyccillin is available on request to the company Bencard, Great West Road, Brentford, Middx.
Nystan-tp

for even the most recalcitrant of vaginal candidal infections
The powerful one

Because DF 118 is a powerful analgesic it works well in small doses, leaves your patient alert and allows him to go about his everyday tasks normally, without the need of follow-ups until a repeat is necessary.

Transfer a chronic patient to DF 118 and notice how dramatically you reduce his analgesic intake. The effective dose, once established, will remain steady and any concomitant therapy is simpler for him to control.

Acute patients, too, benefit from DF 118 since the fully active oral route lessens the need for injections. For patients who cannot swallow tablets Elixir DF 118 offers an alternative form with greater flexibility of dosage.

Low dosage leads to low cost and the basic cost of 28 tablets (an average week’s supply) is only 37½p.

DF 118 subdues the pain, but not the patient.
One of a series of hibernating animals: the Dormouse (Micyrus avellanarius) hibernates September to April.

For safe, natural, undisturbed sleep...

REMNOS
Nitrazepam/DOSA

Now available in 2 strengths from DDSA only
Remnos brand of Nitrazepam is now available as tablets 5mg and 10mg

Patient convenience
Many patients require 2x5mg tablets at night. Now one tablet of Remnos 10mg fulfills this need

Prescribing convenience
The distinctive yellow colour of tablets Remnos 10mg clearly distinguishes this dosage form from tablets Remnos 5mg thus avoiding the likelihood of confusion

Cost saving
1x100 Remnos 10mg tablets costs 10% less than 2x100 Remnos 5mg

Further information available on request from DDSA Pharmaceuticals, 310 Old Brompton Road London SW5 9UQ
The mode of action of Trandate (labetalol) is different from that of any other antihypertensive agent currently available. Trandate works primarily by lowering peripheral resistance — the alpha-blocking effect — thereby correcting the basic pathophysiological defect. Unlike earlier alpha-blockers and direct acting vasodilators, reflexly moderated increases in heart rate are prevented by Trandate's beta-blocking action. But in contrast with simple beta-blocking drugs, the cardiac output is not reduced at rest and after moderate exercise1. This means that the circulation is closer to normal and blood flow to the extremities and to vital organs, including the kidney, is satisfactorily maintained. Unlike diuretics, Trandate does not disturb fluid and mineral balance. And in contrast with the centrally-acting antihypertensives, sedation and lethargy are not features of Trandate therapy.

Trandate has now been generally available for the treatment of hypertension for well over a year and clinical experience to date reveals a clear picture of high efficacy and relative lack of side effects.

TRANDATE TABLETS PRODUCT INFORMATION

PRESENTATION AND BASIC NHS COST

Trandate Tablets 100mg or 200mg each contain 100 or 200mg labetalol hydrochloride. Basic NHS cost of 50 Tablets 100mg is £3.44 and of 50 Tablets 200mg is £4.88. Also available in containers of 250.

INDICATIONS

Trandate Tablets are indicated for the treatment of all grades of hypertension (mild, moderate and severe) when oral antihypertensive therapy is desirable.

DOSAGE AND ADMINISTRATION (ADULTS)

The recommended starting dose for all patients is 100mg three times a day after meals. A satisfactory reduction in blood pressure is achieved at this dose level in some patients, especially those already on diuretic therapy, but higher doses are often necessary.

If the fall in blood pressure achieved is less than optimal, weekly or two-weekly dosage increases are advised, the first being to 200mg t.d.s.p.c. and then, if necessary, to 300mg t.d.s.p.c. The majority of patients will be controlled with dosages less than 1200mg per day but severe cases may require up to 2400mg daily and in exceptional cases doses greater than this have been used.

It is important to increase the dosage of Trandate gradually in order to avoid side effects. Trandate Tablets should be taken after food to avoid the possibility of gastric irritation. Once stabilised on an optimum dosage, where desirable, treatment can be changed to a twice daily regime.

Hypertension is usually controlled by Trandate alone. Diuretic therapy is not usually necessary in patients receiving Trandate Tablets, but may be introduced or continued if required. Diuretics usually increase the antihypertensive action of Trandate.

If Trandate Tablets are prescribed together with another antihypertensive drug, such as methyldopa or clonidine, an additive effect may be expected in patients who are responsive to both drugs. When transferring patients from other drugs Trandate Tablets should be introduced as recommended above and the dosage of the existing therapy progressively decreased.

PRECAUTIONS

There are no known contra-indications to the use of Trandate Tablets. Heart failure should be controlled with digitalis and diuretic therapy before treatment is initiated. Trandate should not normally be given to patients with digitalis-resistant heart failure or atrio-ventricular block.

Caution must be observed if Trandate is used to treat asthmatic patients or individuals prone to bronchospasm. Any resultant bronchospasm may be controlled by an inhaled selectively-acting bronchodilator such as salbutamol: the required dose may be greater than the normal anti-asthmatic dose. If further treatment is required, intravenous atropine 0.5mg should be given.

It is not necessary to discontinue Trandate Tablets in patients requiring anaesthesia but they should be given intravenous atropine prior to induction; the effect of halothane on blood pressure may be enhanced by Trandate.

Unnecessary administration of drugs during the first trimester of pregnancy is undesirable.
mild, moderate and severe

- For the newly-diagnosed hypertensive
- When control is inadequate on existing therapy
- When side effects are causing problems
- To replace complicated multi-drug regimens

References
3. Material on file Allen & Hanburys Research Ltd.

SIDE EFFECTS
Trandate is usually well tolerated.
Symptoms of postural hypotension may occur if the initial dosage is too high or if the dose is increased too rapidly but are uncommon, except at very high doses, if the drug is used as recommended. Patients with difficulties at first, usually tolerate the drug well after a few weeks' treatment.
Nasal stuffiness, vivid dreams and failure of ejaculation have been reported in a few patients. Epigastric pain has occurred in some individuals on high doses of the drug. Headache, nausea, lethargy, tiredness and cramp have also been reported but are usually transient and disappear after a week or so. Seldom has it been necessary to discontinue treatment with Trandate.

PRODUCT LICENCE Nos.
Trandate Tablets 100mg 0045/0106
Trandate Tablets 200mg 0045/0107

Trandate is also available as Trandate injection for intravenous use in hospitalised patients.

Further information is available on request.
Trandate is a trade mark of the product licence holder
ALLEN & HANBURYS LTD LONDON E2 6LA

TRANDATE
a unique profile in hypertension
A sensible diet is an important factor in the management of gastro-intestinal complaints. Sensible medication is another. This is where Libraxin comes in.

Psychological factors are considered important in the management of many illnesses, but perhaps no more so than in gastro-intestinal complaints. In some, for example irritable colon, the emotions are thought to have an aetiological role; in others, for example peptic ulcer, they may influence the clinical manifestations and the subsequent treatment of the patient.

Libraxin helps to improve the prognosis by altering the patient’s outlook whilst at the same time relieving the physical symptoms by decreasing hypermotility and hypersecretion in the gut.

LIBRAXIN

For the treatment of a wide range of gastro-intestinal disorders with an emotional component, including nervous dyspepsia, peptic ulcer, cardiospasm, pylorospasm, nervous or irritable colon.

Libraxin is the trade mark for pharmaceutical preparations containing chloridiazepoxide and cimetidine bromide.

References
Cromwell H.A. Med.Tms.1968,96,933
Head H.B. and Hammond J.B. Amer. J. Dig. Dis. 1968,13,940

Full prescribing information is available

Roche Products Limited
PO Box 213, 15 Manchester Square, London W1A 2LE
Medical Aid at Accidents
'This book covers the basic knowledge required for most aspects of emergency care and rescue organisation by a series of short, relevant, and beautifully illustrated chapters... This is a significant contribution to the discipline of emergency care and can be recommended for use internationally.' The Lancet

Rehabilitation Today
'Every medical practitioner, every medical student (and every dean) should... have access to a copy of this book... Its use as a source of reference should become second nature.' British Medical Journal

Dermatology
'The first edition of this book was a landmark in medical publishing. The second edition contains 506 new colour illustrations, together with a comprehensive text. It will have immediate practical value to general practitioners, physicians, dermatologists, students and all others with an interest in this field.'

Neonatal Medicine
'An up-to-date, down-to-earth text which makes clear to the occasional neonatologist, whether he or she be a general practitioner, a paediatrician or obstetric resident, or a midwife, how common problems should be handled in the light of current knowledge.' Professor J. A. Davis, University of Manchester

Oral Disease
'A practical, profusely illustrated guide to diseases of the mouth, written specifically for a medical audience. It will contribute to the early recognition, prompt referral and treatment of such diseases and will be of great value to all doctors who look in the mouth, and to dentists and dental students.'

The following Update books are in preparation. Further details will be announced in this journal soon.

Immunisation

Preventive Dentistry
Leon Silverstone, autumn 1978.

Interpreting the Electrocardiogram

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The charge for space in this section is £3.00 per single column centimetre, 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 reserves the right to refuse any advertisement. All recruitment advertisements in this section are open to both male and female applicants.

THE RUDOLF FRIEDLANDER MEMORIAL FUND

The Trustees of the Rudolf Friedlander Memorial Fund are able to provide annual grants of up to £500 (a) to enable General Practitioners to travel within the UK or abroad to study new medical treatments or clinical techniques; (b) to enable General Practitioners to prepare for publication information concerning medical treatments acquired in the course of their practices, by paying for necessary secretarial or other services and expenses incidental to such publications.

Application Forms available from: Dr E. H. Kroch, Rudolf Friedlander Memorial Fund, 8 Regent Street, Eccles, Manchester M30 0AP.

THE UNIVERSITY OF SHEFFIELD
FACULTY OF MEDICINE

GENERAL REFRESHER COURSE FOR
GENERAL MEDICAL PRACTITIONERS
18-22 SEPTEMBER, 1978

An intensive general refresher course general medical practitioners will be held at various hospitals in Sheffield and the programme will include the following:

- Non malignant disease of the gastrointestinal tract
- Beta blockers
- Medical emergencies
- Day care of terminally ill
- Behavioural problems in children
- Medical screening
- Breast cancer
- Drug treatment of the elderly
- Coronary artery surgery
- Case and small group discussions
- Ward rounds
- Visit to the Hallamshire Hospital

The course is approved under Section 63 of the Health Service and Public Health Act, 1968. Accommodation will be available in a University Hall of Residence. Enquiries and applications (stating whether or not residential accommodation is required) should be sent to:

The Associate Postgraduate Dean
University of Sheffield Medical School
Faculty of Medicine
Beech Hill Road
Sheffield S10 2RX

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ENGLISH GRADUATE, Aged 32, Married with family.
Vocationally Trained, MRCPG, DRCOG, recently returned from two year’s General Practice experience in New Zealand and Canada, seeks partnership.
Rural, semi-rural well equipped group-practice sought, with access to Maternity and GP medical beds and offering high standards of personal care. Please write or phone: Dr. Philip R. Evans, “Little Coombe”, Clive Road, Esher, Surrey. Tel: 0372 67379 from July 10th onwards.

The Avery Jones Postgraduate Medical Centre
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A Refresher Course in recent advances in subjects related to General Practice,
September 25-29 (incl)

The course will cover aspects of the RCGP examination. Lectures will be informal and members of the course will be able to participate; because of this there will be only a limited number of places available. Preference will be given to principals in General Practice who have not got the RCGP examination (even if they are members of the College).

Applications should be made to the Postgraduate Secretary, The Avery Jones Postgraduate Medical Centre, Central Middlesex Hospital, Acton Lane, London NW10. Tel: 01-965 2339. (Some accommodation may be available).
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