The simple solution to the complicated problem of treating anxiety

Whenever advice alone is not enough, you can trust Ativan to relieve the symptoms of anxiety simply and effectively in a wide variety of patients. Ativan tends not to accumulate so sedative effects are less frequent than with diazepam! And its direct, one step metabolism makes it useful even in patients with impaired liver function.²
NINE OUT OF TENORETIC
HYPERTENSIVES ARE CONTROLLED WITH ONE TABLET DAILY

atenolol 100mg and chlorthalidone 25mg

Prescribing Notes
Uses: In mild to moderate hypertension. Dosage: One tablet daily.
Precautions: Untreated cardiac failure, bradycardia, renal failure, anaesthesia, pregnancy and gout. 'Tenormin' is beta-selective and can be used with caution in obstructive airways disease. Changes in serum potassium are minor and probably clinically unimportant in uncomplicated hypertension. Care should be taken in patients receiving digitalis and those liable to hypokalaemia from other causes. In diabetes, chlorthalidone may decrease glucose tolerance.
Side Effects: Coldness of extremities and muscular fatigue. Sleep disturbances rarely seen. Rashes and dry eyes have been reported with beta-blockers—consider discontinuation if they occur. Cessation of therapy with a beta-blocker should be gradual. With chlorthalidone, occasional nausea and dizziness and rarely idiosyncratic drug reactions such as thrombocytopenia and leucopenia. Pack size and Basic NHS cost: 28s £7.92. Pl. 0029/0139.
'Tenoretic' and 'Tenormin' are trademarks.

Full prescribing information is available on request to the Company
Stuart Pharmaceuticals Limited
Carr House, Carrs Road, Cheadle, Cheshire SK8 2BG.
Prescribing Information

Indications Sensitive bacterial infections of the lower respiratory, urinary and genital tracts, sinusitis, otitis media, skin infections, septicaemia, typhoid and parathyroid fevers, and other infections caused by sensitive organisms.

Dosage Septrin Forte Tablets. Adults and children over 12 years: 1 forte tablet twice daily. Maximum dosage for particularly severe infections: 1 1/2 forte tablets twice daily. In acute infections Septrin should be given for a minimum of five days or until the patient has been symptom-free for two days.

Contra-indications Septrin is contra-indicated in patients with marked liver parenchymal damage, blood dyscrasias or severe renal insufficiency.

Septrin should not be given to patients hypersensitive to sulphonamides, trimethoprim or co-trimoxazole; should not be given during pregnancy or to neonates.

Precautions In renal impairment a reduced dosage is indicated and an adequate urinary output should be maintained. Regular blood counts are necessary whenever long-term therapy is used. Caution is advised in patients with folate deficiency. Care should be taken when giving Septrin to patients receiving oral anticoagulants of the coumarin group, pyrimethamine or sulphonyluracils.

Adverse Reactions Occasionally, nausea, vomiting, glossitis and skin rashes may occur with normal doses and, very rarely, haematological reactions.

Presentation Septrin Forte Tablets each contain 160 mg Trimethoprim BP and 800 mg Sulphamethoxazole BP.


Septrin Forte 1b.d.

*co-trimoxazole

Further information is available on request.

Wellcome Medical Division
The Wellcome Foundation Ltd., Crewe, Cheshire

*Trade Mark
A fresh approach to peptic ulcers

Prescribing Information

Presentation Antepsin Tablets 1 gram are white, oblong, bi-convex, uncoated tablets scored and embossed 1239 on one side and Ayerst on the other. Each tablet contains 1 gram sucralfate. Uses For the treatment of duodenal ulcer, gastric ulcer and chronic gastritis. Dosage and Administration For oral administration. Adults – Usual dose 1 gram 4 times a day. Maximum daily dose 8 grams. Four to six weeks treatment is usually needed for ulcer healing but up to twelve weeks may be necessary in resistant cases. Antacids may be used as required.

*ANTEPSIN is a registered Trade Mark.

for relief of pain. Contra-indications, Precautions, Warnings, etc. Contra-indications There are no known contra-indications. Precautions 1. Concomitant administration with some oral anti-infectives such as tetracyclines may interfere with absorption of the latter. 2. The product should only be used with caution in patients with renal dysfunction. 3. As with all medicines Antepsin should not be used in early pregnancy unless considered essential. Side Effects A low incidence of mild side effects, e.g. constipation, has been reported. Legal Category POM. Package Quantities Antepsin 1 gram – Securities of 100. Pharmaceutical Precautions No special further information is available on request to the Company.

requirements for storage are necessary. Product Licence Numbers PL No. 060796045 PA No. 1494/V2. Basic N2/20. Price Average daily cost 50p.

Ayerst International
ICI announce 'Inderex'.

'Inderex' is designed to give full 24-hour control of blood pressure from a single daily dose.

'Inderex' combines the world's most widely prescribed beta-blocker, 'Inderal' - in the form of 'Inderal' LA, with one of the world's most widely used diuretics, bendroflumazide.

'Inderex', the next logical step in the treatment of hypertension.

ICI

INDEREX
Propranolol Hydrochloride in long-acting formulation and Bendroflumazide.

The next logical step
Anxiety is a perfectly normal response to stress but there are times when it gets out of hand and becomes mentally and physically disabling.

Then, a short course of drug treatment is required to help the patient to cope. New LEXOTAN is a good choice for the short-term treatment of anxiety states offering as it does advantages over its predecessor, diazepam.

LEXOTAN combines the effectiveness of diazepam with less sedation and better patient compliance.1

1. Royal College of General Practitioners' study, data on file, Roche Products Limited.

WHEN ANXIETY GETS OUT OF PROPORTION

NEW LEXOTAN
bromazepam
CUTS IT DOWN TO SIZE

Prescribing Information
Indications: Short-term treatment of anxiety and associated symptoms such as tension and agitation.
Dosage: Dosage should be determined on an individual basis. Some patients may respond to doses as low as 1 mg three times daily. Usual dose for mild to moderate anxiety is 1 mg to 3 mg three times daily. Elderly patients are more sensitive to the actions of LEXOTAN. The safety of LEXOTAN for use in the elderly has not been established and therefore its use should be avoided. Contra-indications: Patients with known sensitivity to benzodiazepines, acute pulmonary insufficiency, respiratory depression. Precautions: Use during pregnancy and lactation should be avoided. Patients should be advised to avoid alcohol whilst under treatment with Lexotan. Patients' reactions, e.g. driving ability, may be modified. Sedative effects of other centrally-acting drugs may be intensified. The use of high doses of benzodiazepines, especially over prolonged periods, can sometimes lead to dependence, particularly in patients with a history of alcoholism or drug abuse. Treatment in these cases should be withdrawn gradually. Side-effects: Drowsiness, sedation, unsteadiness and ataxia may occur. They usually disappear after the first few days of treatment or with reduction of dosage. Presentation: Film, hexagonal tablets containing 1 mg of bromazepam in packings of 100 and 500. Basic NHS Cost: £1.00 three times daily. 15p per day ex 500 pack Product licence number 0031/0128

Roche Products Limited, PO Box 8, Welwyn Garden City, Hertfordshire AL7 3AY.
Children's infections deserve Augментin too

More likely to work first time than other oral antibacterials
Whenever you are dealing with infections in children - acute bronchitis, otitis media and other respiratory infections - it is vital that the antibiotic you choose should work first time to avoid the risk of complications.

A national sensitivity survey has confirmed that Augментin is active against more of the pathogens likely to occur in general practice infections than other oral antibacterials such as ampicillin, amoxycillin, erythromycin and co-trimoxazole.

Pleasant and easy to take
Children are far more likely to take their medicine if it has a pleasant taste. Augментin, with its highly acceptable flavour, is readily taken by children and the simple tds dosage means that there is no late night dose either - a real plus for children and their mothers.

Excellent absorption, rapid action

The safety and tolerance of a penicillin-based therapy
Augментin is well tolerated, as would be expected from a penicillin based therapy.

Two Sugar-free Preparations for Children

<table>
<thead>
<tr>
<th>Age</th>
<th>Augментin</th>
<th>Augментin</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-6 years</td>
<td>Suspensions</td>
<td>Junior Suspension</td>
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<tr>
<td>6-12 years</td>
<td></td>
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<tr>
<td>Under 2 years</td>
<td>5 ml tds</td>
<td>5 ml tds</td>
</tr>
</tbody>
</table>

Beecham Research Laboratories, Bracknell, England

Prescribing Information

Upper Respiratory tract - Bronchitis, acute sinusitis, upper respiratory tract infections. Otitis media and tonsillitis. Dermatological and conjunctivitis infections. Does not treat diarrhoea. Children and adolescents aged 12 years or over: Augментin 250mg three times daily for 3-5 days. Children and adolescents aged 5-12 years: Augментin 125mg three times daily for 3-5 days. Children under 5 years: Augментin 62.5mg three times daily. As a guide Children under 5 should receive Augментin Jeltec. In severe infections the above doses may be doubled. For children under 2 years see data sheet. Treatment with Augментin should not be extended beyond 14 days without review. Co-infections Pseudomonas pseudointestinalis. Premedication before use in patients receiving Augментin for the first time is not usually required, although high dose oral antibiotics may cause an ileus. Dose need not be reduced in patients with renal impairment, unless the serum creatinine is severe enough to require donotic. Sulfonamide Allergic. There are contraindications. Edema and urticaria may occur. Special care needed in patients with a history of allergy. Profuse sweating and pruritus may occur in patients with a history of allergy. Profuse sweating and pruritus may occur in patients with a history of allergy. Profuse sweating and pruritus may occur in patients with a history of allergy. Profuse sweating and pruritus may occur in patients with a history of allergy. Treatment should be discontinued if other type of rash appears. Availability and Basis NRB Plant. (Print correct at time of printing). W Augментin Tablets and Dispersible Tablets, each containing potenti- clavulanate (equivalent to 125mg clavulanic acid) with amoxycillin (equivalent to 250mg amoxycillin). Augментin Tablets (10ml x 30). Cost per tablet: £0.55. Augментin Dispersible Tablets (10ml x 30). Cost per tablet: £0.55. Augментin Junior Suspension (15ml x 30). Cost per bottle: £0.60. Augментin Junior Suspension (15ml x 30). Cost per bottle: £0.60. Augментin Pediatric Suspension (5ml x 30). Cost per bottle: £0.30. Augментin Pediatric Suspension (5ml x 30). Cost per bottle: £0.30. Augментin Pediatric Suspension (5ml x 30). Cost per bottle: £0.30. Augmentin Pediatric Suspension (5ml x 30). Cost per bottle: £0.30. Augmentin Pediatric Suspension (5ml x 30). Cost per bottle: £0.30. Augmentin Pediatric Suspension (5ml x 30). Cost per bottle: £0.30.

Novel information is available on request from the Company.

November 1982

Beecham Research Laboratories, Bracknell, England

The safety and tolerance of a penicillin-based therapy
Augmentin is well tolerated, as would be expected from a penicillin based therapy.
Zantac makes peptic ulcer treatment this simple

and maintenance this simple

and retains its selective action throughout
Simple!

Simply right in peptic ulcer treatment
Simply right in maintenance
An important additional benefit for Hypovase*

...restoring the plasma lipid ratio.

Hypovase, the booster anti-hypertensive to first line therapy has now been shown to have an additional beneficial property... the restoration of the plasma lipid ratio.1

This is important because the use of first line anti-hypertensives such as β-blockers and diuretics has not reduced the incidence of ischaemic heart disease (IHD).2-5

One possible reason is that their beneficial effects on blood pressure, one risk factor for IHD, have been offset by their effect on another major risk factor – the plasma lipid ratio (HDL: LDL+VLDL).6-9

Hypovase when added to these first line anti-hypertensives restores the plasma lipid ratio, providing yet another good reason for adding Hypovase to your first line therapy.

Hypovase* prazosin HCL
boosts anti-hypertensive action, restores the plasma lipid ratio.

Prescribing information:
Indications: hypertension of varied aetiology and all grades of severity.
Contra-indications: sensitivity to Hypovase.
Precautions: A small percentage of patients may react more rapidly and to a greater extent than the majority. In some cases this may lead to sudden loss of consciousness generally lasting a few minutes. Subsequent treatment may be satisfactory. Hypovase is not recommended in pregnancy, during lactation, or in children under 12 years of age.
Side-effects: dizziness, drowsiness, and lack of energy are the most common.
Dosage: starting dose 0.5mg two to three hours before retiring; thereafter, up to 20mg/day in divided doses.
Basic NHS Cost: b.d. Starter Pack containing 8 x 0.5mg Hypovase tablets and 32 x 1mg Hypovase tablets. £2.70 0.5mg tablet (PL57/0149), pack of 100, £4.08, 1mg tablet (PL57/0106), pack of 100, £5.25, 2mg tablet (PL57/0107), pack of 100, £6.98, 5mg tablet (PL57/0108), pack of 100, £15.58.
Cuts fat in half.

St. Ivel Gold contains only half the fat of butter, margarine or even polyunsaturated margarine. Most authorities agree that reducing total dietary fat is an important measure in reducing the risks of obesity and heart disease.23

Changing to polyunsaturated margarine does not decrease the calorie or fat intake. Moving to St. Ivel Gold does.

<table>
<thead>
<tr>
<th></th>
<th>Butter</th>
<th>Polyunsaturated Margarine</th>
<th>St. Ivel Gold</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total fat g</td>
<td>80</td>
<td>80</td>
<td>39</td>
</tr>
<tr>
<td>Saturated fat g</td>
<td>47</td>
<td>14</td>
<td>11</td>
</tr>
<tr>
<td>Calories Kcal</td>
<td>750</td>
<td>750</td>
<td>390</td>
</tr>
</tbody>
</table>

But this is only half the story. St. Ivel Gold is a unique low fat blend of buttermilk and vegetable oil with a satisfying buttery taste.

So when you are recommending a weight reducing or lower fat diet, St. Ivel Gold can make a healthy contribution that patients enjoy.

References
IN ANXIETY
ANXON
ketazolam
CLINICALLY SUPERIOR

SIGNIFICANTLY MORE EFFECTIVE THAN DIAZEPAM.¹

A recent double-blind study demonstrated that Anxon was more effective than diazepam in the treatment of anxiety. Another study showed "...on the Hamilton Anxiety Rating Scale in direct comparison with diazepam, ketazolam [Anxon] was significantly superior in anxiolytic effect."³

Anxon vs. clorazepate and lorazepam.

Further double-blind studies have compared Anxon with clorazepate and lorazepam and the authors commented,... "Ketazolam [Anxon] appears, therefore, to be more effective than clorazepate in treating symptoms of anxiety..."² In comparison with lorazepam: "Therapeutic effects, although similar for both drugs, showed a slight superiority in favour of ketazolam [Anxon]. Also ketazolam [Anxon] was better tolerated in that patients in that group reported fewer side effects than those in the lorazepam group."⁶

References
5. Abstract of 12th CINP Congress, Göteborg, Sweden, June 1980

Prescribing Information
Indications
Anxiety, tension, instability and similar stress-related symptoms.

Dosage and Administration
For many adult patients a dosage of 30mg nocte is appropriate. This dosage may be adjusted to suit the needs of each individual patient within the range of 15-60mg per day.

Children: Not recommended. Elderly: Reduced dosage initially until tolerance and efficacy have been assessed. Patients undergoing therapy with Anxon should be periodically reviewed.

Contra-indications, Warnings etc.
Precautions: Anxon may potentiate other centrally acting drugs. Patients should be warned to exercise care when
FEWER SIDE EFFECTS THAN DIAZEPAM, CLORAZEPATE AND LORAZEPAM. 

60% fewer than diazepam
"Side effects were markedly less frequent and less severe in patients treated with ketazolam [Anxon] than in those treated with diazepam."¹

28% fewer than clorazepate
"...ketazolam [Anxon] produced side effects in fewer patients, the overall incidence of side effects was less [28%] and the severity of the side effects tended to be milder than with clorazepate."²

14% fewer than lorazepam
"Ketazolam [Anxon] patients reported a total of 124 side effects [35 patients], while the lorazepam patients reported 135 side effects [28 patients]"—14% fewer side effects on Anxon.³

² Reference: (Ref 4)
³ Reference: (Ref 7)
In Angina
restores the balance between coronary oxygen demand and supply for prolonged periods from
one capsule b.d.

Prescribing information

Presentation Isordil Tembids capsules, containing isosorbide dinitrate 40mg in a sustained release formulation, are gelatin capsules with a colourless, transparent body and opaque blue cap for oral administration.

Uses Prophylaxis of angina pectoris.

Dosage and Administration Usual dosage — one Tembids capsule twice a day. Maximum recommended dose — one Tembids capsule three times a day.

Contra-indications, Warnings, etc.

Contra-indications Idiosyncrasy to this drug.

Precautions Tolerance to this drug, and cross-tolerance to other nitrates, and nitrates may occur.

Side Effects Side effects due to Isordil are common to all nitrates used for the treatment of angina pectoris.

1. Cutaneous vasodilation with flushing.
2. Headache is common and in some patients may be severe and persistent. Analgesics have been useful in some cases.
3. Transient episodes of dizziness and weakness and other signs of cerebral ischaemia associated with postural hypotension may occur.
4. This drug can act as a physiological antagonist to noradrenaline, acetylcholine, histamine and many other agents.

Basic N.H.S. Price — 100 Tembids capsules £7.50.

Product Licence Number: PL0607/0041 PA 149/7/4

Ayerst International
Ayerst Laboratories Limited
South Way, Andover, Hampshire SP10 5LT
Telephone: Andover (0264) 58711

Distributed in the Republic of Ireland by:
Ayerst Laboratories Limited
South Circular Road, Islandbridge, Dublin 8
Telephone: 01-772669

© denotes registered Trade Mark. Further information is available on request to the Company.
1966 The need is recognised
If a drug could be produced that had the anti-asthmatic properties of steroids without their side effects, the trials and tribulations of asthmatic patients would be at an end. ¹

1973 The solution is offered
In my experience the aerosol of beclometasone dipropionate is effective in controlling symptoms and avoiding adrenal suppression both in patients with steroid-independent asthma and in most patients with steroid-dependent asthma and therefore seems to be a notable advance in the treatment of asthma. ²

1983 The promise is fulfilled
Inhaled steroids have transformed the management of chronic asthma. All initial promises have been fulfilled and there have been no serious side effects. ³

? A challenge for the future
In the light of the continuing morbidity of asthma, usually from underdiagnosis and undertreatment, and of too frequent asthma fatalities, there is a compelling case for the much wider use of anti-asthma drugs. The contribution that corticosteroids, especially their prophylactic use by inhalation, can make is not yet fully appreciated or employed. ⁴
"Tricyclics are extremely dangerous drugs when taken in overdose"

PRESCRIBING INFORMATION
Indications
Symptoms of depressive illness.

Adult Dosage
For the first few days, 30-40mg/day as a single bedtime dose, or in divided doses. Effective maintenance dosage normally lies between 30mg and 100mg a day. Elderly: initially no more than 30mg a day; thereafter increase with caution under close supervision.

Pregnancy
Do not use unless there are compelling reasons.

Contra-indications
Mania; severe liver disease; during breast feeding.

Precautions
Monitor patients carefully during first 2-4 weeks of antidepressant therapy. Avoid, if possible, in patients with epilepsy who are on concurrent anti-hypertensive therapy, phenytion or anticoagulants. Do not use with or until 1 week after cessation of MAOI therapy. Norval may potentiate the central nervous depressant action of alcohol. Care should always be exercised when treating the following: the elderly; suicidal patients; patients with diabetes, hepatic or renal insufficiency, recent or acute myocardial disease. Monitor patients with narrow angle glaucoma or symptoms suggestive of prostaglandin hyperplasia, even though anticholinergic side-effects are not anticipated with Norval therapy.

Side-effects
Drowsiness may occur initially; alcohol and activities which demand constant alertness should be avoided. Serious adverse effects are uncommon. A small number of case of bone marrow depression, generally reversible on stopping treatment, have been reported; if a patient develops symptoms of infection, treatment must be stopped and a full blood count obtained. Jaundice (usually mild), hypomania and convulsions have been reported: discontinuine treatment under such circumstances. Breathing disorders (gynaecomastia, nipple tenderness and non-puerperal lactation, dry, staring, postural hypotension, polyarthritis, skin rash, swelling and tremor may also occur.

Overdosage
There is no specific antidote. Treatment is by gastric lavage with appropriate supportive therapy. Symptoms of overdose are normally confined to prolonged sedation. Cardiac arrhythmias, severe hypotension, convulsions and respiratory depression are unlikely to occur.

Availability and price
10mg, 20mg and 30mg mianserin hydrochloride tablets. Basic NHS cost per day (30mg dosage) is £1. (price correct at time of printing).

References

Self-poisoning with amitriptyline, and other tricyclic antidepressants is now implicated in some 10,000 hospital admissions\(^1\) and 400 deaths\(^2\) per annum—a tragic waste of human life on a scale equivalent to one death every day.

Norval is an effective antidepressant which, in contrast to the tricyclics, has a high safety margin in overdose.\(^3\) In the treatment of depressed patients, where the possibility of deliberate or accidental self-poisoning cannot easily be ruled out, the difference between Norval and the tricyclics can be life-saving.

Norval
mianserin hydrochloride
Effective in depression without tricyclic overdose risks.

Further information is available from Bencard, Brentford, Middlesex TW8 9BD. Norval and the Bencard logo are trade marks. PL0038/0230R, 0247R, 0248R.
Effective in acute as well as chronic conditions

Recent clinical studies show Feldene is effective in acute musculoskeletal disorders.

A single daily dose of Feldene provides round-the-clock relief of pain, inflammation and stiffness.

Feldene
*piroxicam

Continuous relief with a single daily dose

Warnings:
the safety of Feldene used during pregnancy and lactation has not yet been established. Dosage recommendations and indications for use in children have also not yet been established.

Side Effects:
Feldene is generally well tolerated. Gastrointestinal symptoms are the most common, if peptic ulceration or gastrointestinal bleeding occurs Feldene should be withdrawn. As with other non-steroidal anti-inflammatory agents, oedema mainly ankle oedema has been reported in a small percentage of patients; the possibility of precipitation of congestive cardiac failure in elderly patients or those with compromised cardiac function should therefore be borne in mind; various skin rashes have been reported.

Dosage:
in rheumatoid arthritis, osteoarthritis, ankylosing spondylitis - starting dose of 20 mg as single daily dose; the majority of patients will be maintained on 20 mg daily; in acute gout, start with a single dose of 40 mg followed on the next 4-6 days with 40 mg daily in single or divided doses; Feldene is not indicated for long term management of gout.

In acute musculoskeletal disorders, start with a loading dose of 40 mg daily in single or divided doses for the first 2 days. For the remainder of the 7 to 14 day treatment period the dose should be reduced to 20 mg daily.

Basic NHS Cost: capsules 10 mg coded PEL 10 pack of 60 £9.00 (PL 0053702158). Full information on request.

References:

Pfizer Limited
Sandwich, Kent.
THE MSD FOUNDATION

Educational Programmes for General Practitioners

Our 1983 Handbook will be available in April. This will include an up-to-date catalogue of our current programmes and information about a new format for our tutors' notes. In addition there will be a description of some of our courses and other educational services. Among these is an 'open access' facility for the making of future programmes.

Open Access

A number of general practitioners, among them course organizers, trainers and trainees, have in the past made suggestions about important topics which might form the basis for some of our programmes.

The Foundation is keen to develop such ideas, and accordingly I would like to invite individual doctors, groups of general practitioners or others concerned in general practice education to submit their plans for a future programme. This should include a very brief description of the aims, the use of supporting material like video recording, the sort of notes for tutors or group leaders that might be written, and any practical exercises such as a limited clinical audit.

The topic should be one not so far sufficiently covered in our catalogue, and it should be seen as making an important contribution to vocational training courses and/or small groups of doctors concerned with their own continuing education.

Successful applicants will be given a realistic budget, and the support of the Foundation's technical and educational resources. If you are interested, please do not hesitate to write to me at the Foundation to discuss the idea, and the form in which you might want to submit it. I would hope to be in a position to choose two such programmes for production in 1983.

Marshall Marinker
Director, MSD Foundation

Videocassettes which are part of our teaching programmes are available for sale on U-matic, VHS, Philips 1500 or Betamax formats, and the average cost is about £20-£25. Tape/slide programmes cost about £30 per session.

Further information, and a handbook, can be obtained by writing to:

The MSD Foundation
Tavistock House
Tavistock Square
London WC1
Tel: 01-387 6881
Opinions expressed in *The Journal of the Royal College of General Practitioners* and the supplements should not be taken to represent the policy of the Royal College of General Practitioners unless this is specifically stated.

**THE BALINT SOCIETY**

**RESIDENTIAL WEEKEND AT PEMBROKE COLLEGE, OXFORD**

*From 7 p.m. Friday 23 September to 1 p.m. Sunday 25 September 1983*

General practitioners, both principals and trainees, are invited to sample the experience of being in a Balint group for a weekend. There will be opportunities to discuss the experience, and the problems of learning and teaching in small groups.

The cost of the weekend will be allowable under Section 63, together with travelling expenses. Further details available from: the Secretary, Dr Peter Graham, 149 Altmore Avenue, London E6.

**MRCGP CANDIDATES**

New practice exams now available. Two MCQ papers (120 questions) covering the new subject areas as required by the Royal College. (This includes social and legal aspects, epidemiology, statistics and practice organization.) Answers and detailed teaching explanations provided together with computer sheets and free marking service. MEQ and TEQ papers have sample answers, explanations, marking schedules references and practical examination advice. Also hints on log diary, oral and reading suggestions. Send cheque now for £15 plus 60p p & p.

**PARTNERSHIP WANTED**

Do you have a partnership vacancy that would suit a young married vocationally trained English graduate (Birmingham 1975) who is looking for the opportunity to practice good family medicine in a friendly environment?

I am willing to wait for the right practice.

All replies welcome to: Box No. 30, JRCPG, The Update Group, 33-34 Alfred Place, London WC1E 7DP.

**DEPARTMENT OF FAMILY & COMMUNITY MEDICINE**

**COLLEGE OF MEDICINE & MEDICAL SCIENCES**

**KING FAISAL UNIVERSITY**

**DAMMAM, SAUDI ARABIA**

Applications are invited from qualified men and women for the Academic Year 1983/84. Successful applicants will participate in an expanding programme teaching undergraduates, interns and residents (research activities when applicable). Main satisfaction will derive from being part of an innovative and exciting teaching/service programme, vertically integrated from undergraduate through vocational training.

Prerequisites: Applicants must be Members or Fellows of the Royal College of General Practitioners or have American Boards in Family Practice. Several years teaching experience.

Salaries are highly competitive and negotiable. Contracts are for one year and renewable. Instruction is in English. Benefits include furnished housing, air tickets to and from Saudi Arabia once per year for a family of four, 60 days paid annual leave, monthly transport allowance, generous luggage overweight allowance and educational allowance for children.

No Saudi Income Tax.

Please send curriculum vitae quoting ref. FM/RC with current telephone number and the names and addresses of three referees to:

Dr. Tawfiq Tamimi, Dean,
College of Medicine and Medical Sciences

or

c/o U.S. Recruiting Office
King Faisal University
2425 West Loop South
Suite 540
Houston, Texas 77027
USA

c/o U.K. Recruiting Office
King Faisal University
29 Belgrave Square
London SW1X 9QB
UK

Journal of the Royal College of General Practitioners, May 1983 319
YORK HEALTH AUTHORITY
Vocational Training Scheme for General Practice

Applications are invited for 12 months vocational training in general practice, beginning 1 August 1982, based on the training practices in the York Health District. Vacancies are suited to those candidates arranging their own vocational training scheme (B Scheme) in order that they can satisfy the requirements for vocational training. The attachments will consist of two periods of six months, to run consecutively. An active trainer/trainee group is in operation with half-day release facilities and a comprehensive Postgraduate Medical Education programme based on the York District Hospital. An excellent postgraduate medical library exists. Successful applicants will have to make their own accommodation arrangements.

A curriculum vitae giving full details of education, qualifications, past experience and general interests, together with the names and addresses of two referees, should be sent to the District Personnel Officer, York Health District, Bootham Park Hospital, York YO3 7BY.

Closing date: 10 May 1983.

INNER CITIES
Occasional Paper 19

The problems of general medical practice in inner cities are becoming increasingly well known and some important reports have recently been published, particularly about general practice in London.

Occasional Paper 19 by Dr K. J. Bolden, Senior Lecturer at the Department of General Practice, University of Exeter, is based on the report for which the author won the 1980 Upjohn Prize, and analyses problems of general practice in several inner cities in different parts of the country.

Whereas many are critical of doctors working in these areas, Dr Bolden illustrates vividly some of the difficulties which practitioners encounter and makes a number of suggestions as to how they can be overcome.

Inner Cities, Occasional Paper 19, is available now, price £3.00 including postage, from the Royal College of General Practitioners, 14 Princes Gate, Hyde Park, London SW7 1PU. Payment should be made with order.

FOURTH NATIONAL TRAINEE CONFERENCE
REPORT, RECOMMENDATIONS AND QUESTIONNAIRE
Occasional Paper 18

How much teaching do vocational trainees really get? What do they think about their trainers and how easily can they talk to them? This Occasional Paper reports on the proceedings of the Fourth National Trainee Conference held at Exeter in July 1980 and analyses the results of a questionnaire which was returned by 1,680 trainees throughout the country. This is the most detailed information so far published about the opinions of trainees, and from them a new 'value for money' index has been derived, based on sophisticated statistical analysis, which now makes it possible for the first time to rate a general practitioner trainer.

Fourth National Trainee Conference, Occasional Paper 18, is available now from the Publication Sales Department, Royal College of General Practitioners, 14 Princes Gate, Hyde Park, London SW7 1PU, price £3.75 including postage. Payment should be made with order.

PATIENT PARTICIPATION IN GENERAL PRACTICE
Occasional Paper 17

Patient participation has been one of the more radical innovations in general practice in the last few years and has led to the formation of many different kinds of patient groups attached to practices all over Britain.

Patient Participation in General Practice stems from a conference held on this subject by the Royal College of General Practitioners in January 1980 and was compiled by Dr P. M. M. Pritchard, who was one of the first general practitioners to set up a patients' association. It brings together in one booklet a large number of current ideas and gives much practical information about patient groups.

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