

# Lucky Jim - he's been on ROTER

Jim had a peptic ulcer. His diet was hopelessly monotonous, he couldn't work and he was due for surgery.

On Roter he got almost immediate relief of pain, his ulcer healed quickly, and hospitalisation and surgery were avoided.

Lucky Jim is back at work. He's on a normal diet; is enjoying his meals and putting on weight.

Roter: available on E.C.10 in packs of 40 and 120 tablets. Dispensing packs of 360 and 720 tablets

Roter: Bismuth subnitrate Roter 300 mg., Magnesium carbonate 400 mg., Sodium bicarbonate 200 mg., Cortex rhamni frangula 25 mg.

Literature and abstracts of clinical trials available on request F.A.I.R. Laboratories Limited, Twickenham, Middlesex



Even in the first  
trimester a working  
mother-to-be has  
no time for  
morning sickness

## Avomine last night and no sickness this morning

"A great variety of drugs are used in  
pregnancy vomiting . . . promethazine  
should be regarded as the drug of  
first choice."

*Br. med. J.*, i, 481, 1970.

'Avomine' brings the  
assurance of over  
twenty years'  
world-wide use

'Avomine'\* is available as tablets of 25 mg

\*trade mark of May & Baker Ltd for its  
preparations of promethazine theoclate



Further information is available on request

May & Baker Ltd Dagenham Essex RM10 7XS  
England



**May & Baker**

*Posed photograph*

MAR054

# The Beecham Penicillins

Beecham research has produced an outstanding range  
of semi-synthetic penicillins including :

<b>Penbritin*</b>	(ampicillin)	<b>Floxapen*</b>	(flucloxacillin)
<b>Orbenin*</b>	(cloxacillin)	<b>Pyopen*</b>	(carbenicillin)
<b>Celbenin*</b>	(methicillin)	<b>Broxil*</b>	(phenethicillin)
<b>Ampiclox*</b>			
(ampicillin and cloxacillin)			

BRL also produce Maxolon\*(metoclopramide) — a modifier of gastric motility.

Full information on all products is available on request.



**Beecham Research Laboratories Brentford England**

\*regd.



# Day after day of freedom from asthmatic attack



The unique mode of action of disodium cromoglycate offers the asthmatic patient outstanding benefits. A prophylactic treatment, it prevents the onset of asthmatic episodes - thus minimising long-term damage to lung tissue. Freedom from asthma attacks permits a happier, more normal life for the asthmatic patient.

Published clinical reports confirm that with INTAL COMPOUND, the incidence and severity of acute attacks is considerably reduced - even in patients on conventional therapy such as bronchodilators, antihistamines and corticosteroids. Less time is lost from work or school, exercise tolerance is improved and a consistent clinical comment on disodium cromoglycate has been the total absence of serious side effects.

INTAL COMPOUND - supplied in SPINCAPS (each containing 20 mg disodium cromoglycate, and 0.1 mg Isoprenaline Sulphate BP in powder form, together with an inert carrier). For use in a special insufflator - SPINHALER.

Full information is available on request. The Technical Services Department, Fisons Limited-Pharmaceutical Division, Loughborough, Leicestershire.

There's  
nothing else like

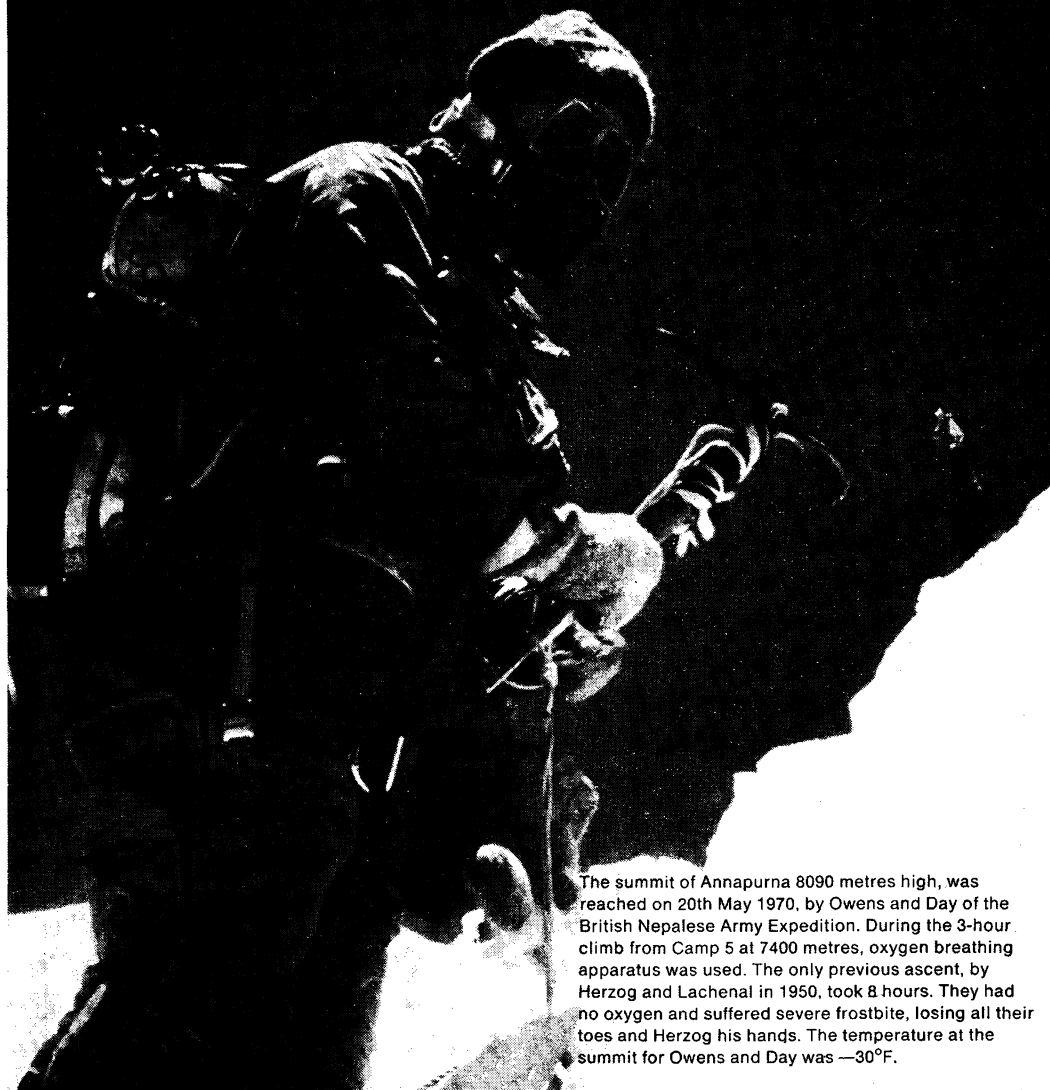
## INTAL Co.

Prophylaxis  
in asthma

 **FISONS**

INTAL, INTAL COMPOUND, SPINCAP and SPINHALER are Fisons trade marks.

# Transvasin at the summit



The summit of Annapurna 8090 metres high, was reached on 20th May 1970, by Owens and Day of the British Nepalese Army Expedition. During the 3-hour climb from Camp 5 at 7400 metres, oxygen breathing apparatus was used. The only previous ascent, by Herzog and Lachenal in 1950, took 8 hours. They had no oxygen and suffered severe frostbite, losing all their toes and Herzog his hands. The temperature at the summit for Owens and Day was  $-30^{\circ}\text{F}$ .

**ON ANNAPURNA** the members of the British Nepalese Army Expedition chose Transvasin to relieve muscular pain. Three British climbers used it:

"One suffered badly strained back and chest muscles following involvement in an avalanche. The second developed severe intercostal fibrositis, and the third had badly bruised himself after falling 30 feet and jamming in a crevasse. Transvasin gave considerable relief to all three climbers."

Personal communication, 3rd September 1970.

Transvasin was also used with great success by many other members of the party who complained of various other aches and pains.

**IN GENERAL PRACTICE** too, Transvasin provides effective relief from muscular and rheumatic pains. It contains esters of nicotinic and salicylic acids which ensure a rapid hyperaemic and analgesic effect.

Available in 30 g. tubes.

Basic NHS price 12½p, plus P.T.

Full information is available on request.

Lloyd-Hamol Ltd., London W.1

**Transvasin — always in action**  
against muscular and rheumatic pain

# What is the word for emotional distress?

The presenting symptoms? "Can't sleep... irritable... no appetite... tired... aches and pains"—consultation after consultation.

The task? To penetrate behind the facade to the underlying condition.

The aim? To make the patient feel better quickly and reveal the problem, without unnecessary consultations.

Tranquillizers or hypnotics may deal with part of this aim, but only part.

Prothiaden can meet all the requirements. It is rapidly effective in both anxiety and depression. One ingredient, a single-strength capsule means straightforward dosage.

Prothiaden is well tolerated even by the elderly.

Prothiaden can mean trouble-free treatment of anxiety, depression, in fact any manifestation of emotional distress.

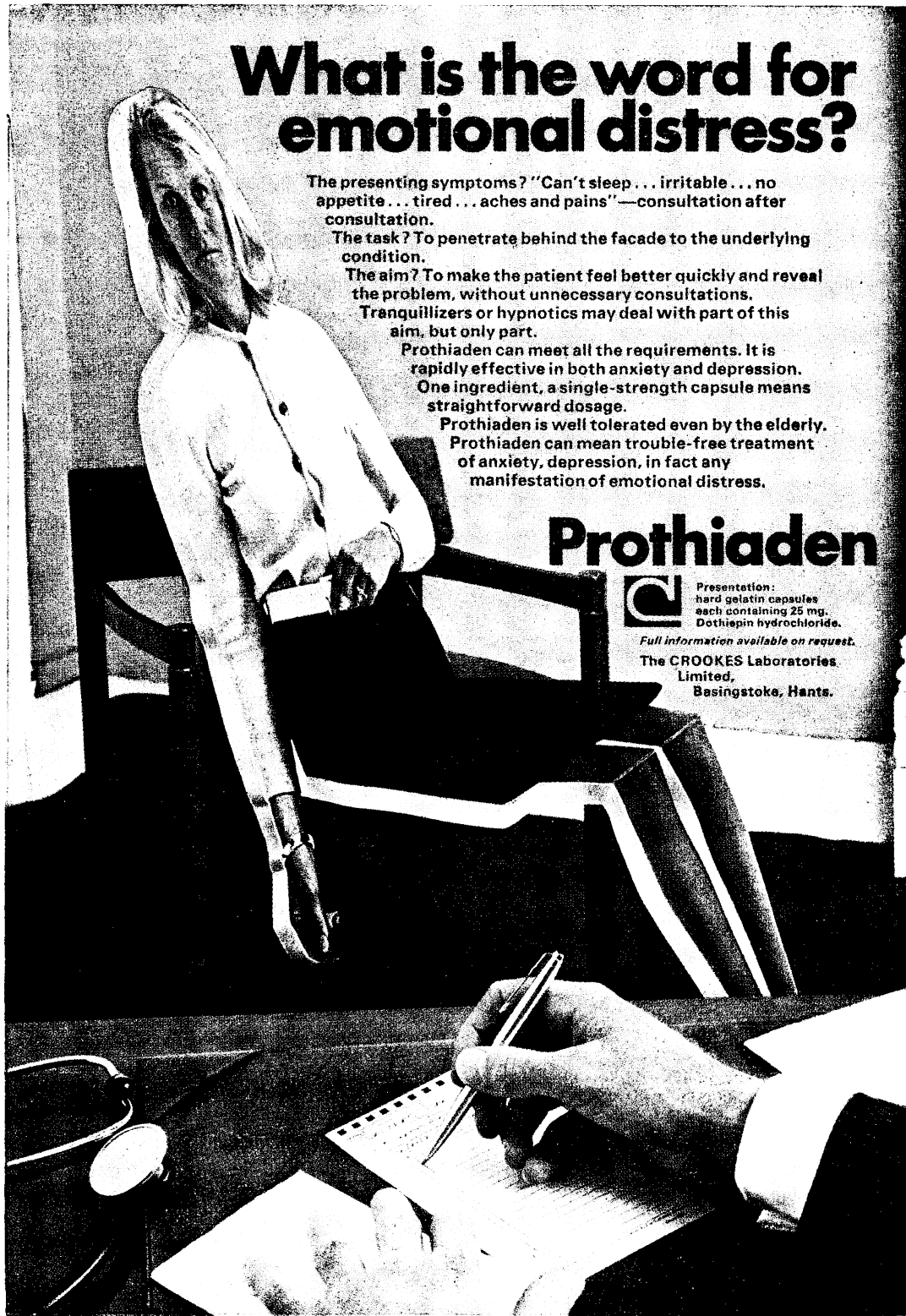
## Prothiaden



Presentation:  
hard gelatin capsules  
each containing 25 mg.  
Dothiepin hydrochloride.

Full information available on request.

The CROOKES Laboratories  
Limited,  
Basingstoke, Hants.



# First in bronchitis

**Septrin\*** bactericidal to respiratory tract pathogens including *Haemophilus influenzae*.

**Septrin** quickly reaches effective blood levels and produces an exceptionally rapid clinical response.

**Septrin** was more effective compared with antibiotics (ampicillin and tetracycline) in reducing sputum purulence and sputum volume.<sup>1,2</sup>

**Septrin** first utilisation of antibacterial synergy between trimethoprim and a sulphonamide.

\*Trade Mark

#### References

1. *Brit med J*, (1969), 4, 470.
2. *Postgrad med J*, (1969), 45, Supplement, (November) 91.

For the whole family—SEPTRIN Tablets, SEPTRIN Adult Suspension, SEPTRIN Paediatric Tablets and SEPTRIN Paediatric Suspension containing trimethoprim and sulphamethoxazole.

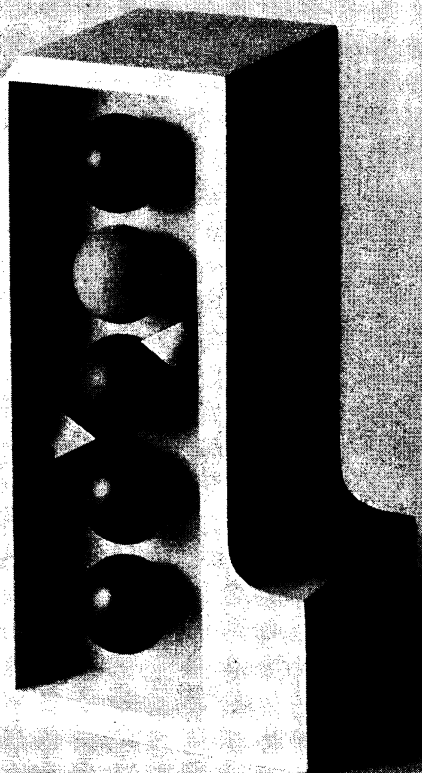
Full information is available on request.



Burroughs Wellcome & Co.  
(The Wellcome Foundation Ltd.)  
Dartford, Kent.

# Septrin

an advance on  
the antibiotics



SEPTRIN eradicates infection by a double blockade of bacterial metabolism.



# New assisted passage scheme

The formula which really assists and maintains free mucus flow in bronchial conditions—that is new **LINCTIFED\* EXPECTORANT**.

**LINCTIFED EXPECTORANT:**  
loosens thick tenacious sputum;  
decreases mucosal congestion;  
controls irritating, unproductive cough.

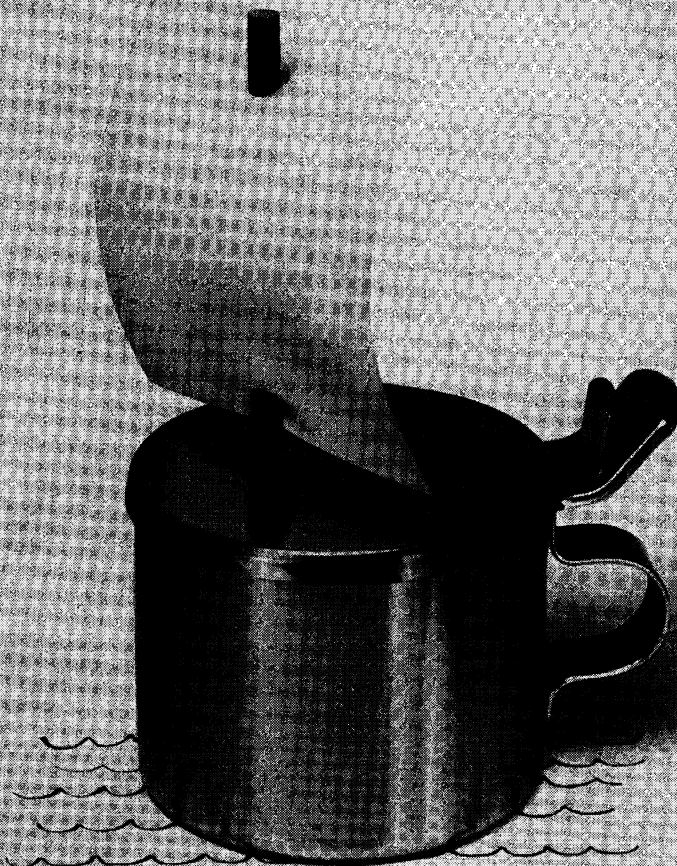
\*Trade mark

Available in two forms —

**LINCTIFED EXPECTORANT** and  
**LINCTIFED EXPECTORANT PAEDIATRIC**  
containing guaiphenesin, pseudoephedrine,  
triprolidine and codeine in a balanced  
formulation. **LINCTIFED EXPECTORANT**  
controls cough and clears the way for  
easier breathing.

Full information available on request.

**LINCTIFED EXPECTORANT**  
**LINCTIFED EXPECTORANT PAEDIATRIC**



Burroughs Wellcome & Co. (The Wellcome Foundation Ltd.) Dartford, Kent



# Her confidence in oral contraception depends on yours.

The low bio-activity of both progestin and oestrogen components<sup>1, 2</sup> in Norinyl-1 produce a combination which, while providing high contraceptive reliability, can reduce the incidence of troublesome side-effects<sup>3</sup> and maintain high usage rates.<sup>4</sup>

Norinyl-1, which has now been in world-wide use for several years, is used with satisfaction by nearly 1 million women in Britain alone and prescribed as first choice oral contraceptive by over 2,000 U.K. doctors.

## NORINYL-1

provides the confidence  
you both need.



**Norinyl-1**  
contains Mestranol 50 mcg.  
Norethisterone 1.0 mg.

#### REFERENCES

1. Medical Science (1967) May p. 37-49.
2. Contraception (1970) 1: 57.
3. Lancet (1967) (2): 612.
4. Multi-centre trial data available to F.D.A. (1968).

Full prescribing information  
available on request.



## SYNTEX

Syntex Pharmaceuticals Ltd.,  
St. Ives House,  
Maidenhead, Berkshire.

**“significantly  
superior to  
diazepam”**

**Curr. Therap. Res. (1971) 13:561**

**INTEGRIN**  
**capsule 10mg**

# INTEG

capsule

INTEGRIN  
10

INTEGRIN  
10

**unlike other  
tranquillizers,  
Integrin combats the  
basic biochemical  
disturbance  
associated with  
anxiety.**

**MA**  
**10mg**

**the 'fundamental'  
treatment  
for anxiety**

## ● Found effective in 90% of patients

In recent G.P. studies improvement was shown in 9 out of 10 patients within 2 weeks. In double-blind comparisons with chlordiazepoxide, Integrin gave relief to nearly 10% more patients.

## ● Gives more profound relief from anxiety

Seventy eight patients, most of whom were already on tranquillo-sedatives, were switched to Integrin. Their average anxiety-rating dropped to less than one third of its previous level.

In another trial, Integrin gave complete—as opposed to partial—relief from anxiety within 4 weeks to as many as 35% of patients: nearly twice the rate of chlordiazepoxide.

## ● Lifts any depressive overlay

In contrast to the tranquillo-sedatives, Integrin actually enhances mood and restores a normal sense of well-being.

## ● Fast action—fast clinical response

Integrin answers the need for a faster acting tranquillizer. Clinical trials show that up to 90% of patients improve within the first week of treatment.

---

drowsiness not a serious problem

---

virtually free from toxicity

---

one single strength capsule with simple dosage

---

unlike the benzodiazepines, no reports of dependence

---

relieves depressive overtones

---

no effect on reaction-time at normal dosage

---

well tolerated even at 10 times normal dosage

---

# INTEGRIN

capsule 10mg

## THE 'FUNDAMENTAL' TREATMENT FOR ANXIETY

### *Indications:*

Acute and chronic anxiety states and psychosomatic conditions whether or not accompanied by depressive overlay; tension, apprehension, agitation and sleep disturbances.

### *Dosage:*

The usual adult dose is one 10mg capsule three times daily, with a further capsule at bedtime if required. In certain cases up to 60mg daily may be needed. Should a milder effect be required the midday dose may be omitted.

### *Side Effects:*

Even in high doses, Integrin is well tolerated, with only minor, often transient, side effects. Some patients may experience some drowsiness. Dry mouth and dizziness have also been reported.

### *Precautions:*

Alcohol or other tranquillizers may potentiate the effect of Integrin and patients intending to drive should be made aware of this. Where MAO inhibitors have been used, 2-3 days should elapse before Integrin is started.

### *Safety Margins:*

No substantiated reports of toxicity have been received, even where patients have taken up to the equivalent of 56 capsules in 24 hours. Neither dependence nor withdrawal symptoms have been reported.

### *Presentation:*

Containers of 100 capsules. Each grey/green capsule contains 10mg oxypertine.

### *Basic NHS Cost:*

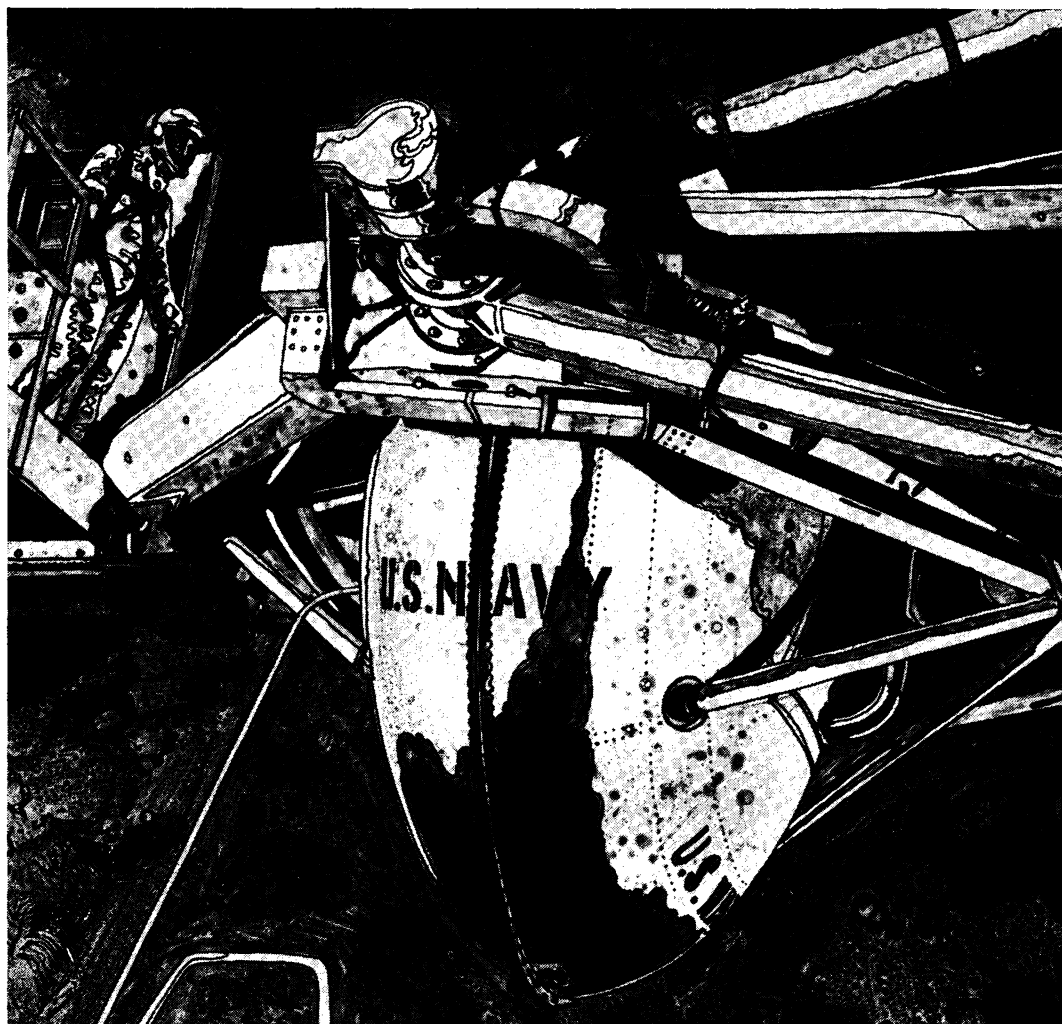
One week's treatment (1 capsule 10mg t.d.s.) is 36p

Integrin is a registered trade mark.

Full information is available from

Winthrop Laboratories, Surbiton-upon-Thames, Surrey.

a product of **WINTHROP** research



## Actifed and Space age Medicine

The astronaut above is about to be subjected to G-forces in a massive centrifuge. In these situations it was thought that G-forces might restrict astronauts from performing vital tasks. To overcome this, an ingenious device which bounces light into the eye, can be made to actuate a switch or system, whenever the pupil crosses the path of the beam. This sight switch has already been adapted to help paraplegics to help themselves.

In the space programme, medical benefit has been a two-way exchange. Of the medicines taken on Apollo flights, ACTIFED\* has been repeatedly chosen as the decongestant. ACTIFED TABLETS and SYRUP contain the decongestant pseudoephedrine and the established antihistamine triprolidine. ACTIFED COMPOUND LINCTUS contains, in addition, codeine. It provides effective and palatable cough control for all age groups.

Full information is available on request.

\*Trade Mark  
Burroughs Wellcome & Co. (The Wellcome Foundation Ltd.) Dartford, Kent.

For Coughs with Congestion

### ACTIFED COMPOUND LINCTUS





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# CHURCHILL LIVINGSTONE

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## EMERGENCIES IN MEDICAL PRACTICE

C. ALLAN BIRCH. 1971. Ninth edition.  
844 pages 99 illustrations £6.00

'This book gives an excellent account of the management of all the possible emergencies that might occur in medical practice from simple poisoning to the more complex problems of respiratory failure, cardiac arrhythmias, shock and cerebral oedema. These are conveniently grouped in chapters orientated to emergencies in the various branches of medicine.

'At the end there is a valuable section entitled *Practical Procedures*. Here, various procedures from blood sampling and lumbar puncture to sternal puncture, pericardial aspiration and tracheostomy are adequately described with illustrated diagrams and reference to appropriate hazards'.—*The New Zealand Medical Journal*

## TEXTBOOK OF MEDICAL TREATMENT

Edited by STANLEY ALSTEAD, ALASTAIR MACGREGOR and RONALD GIRDWOOD.  
1971. Twelfth edition. 108 pages 36 illustrations £4.25

**Contents**—Antibiotics and Chemotherapy. Infectious Diseases. Tuberculosis. Diseases of the Heart and Circulation. Diseases of the Blood Vessels of the Limbs and the Effects of Cold. Disorders of the Blood. Anti-coagulant Therapy. Diseases of the Respiratory System. Diseases of the Alimentary System. Disturbances in Water and Electrolyte Balance and in Acid-base Equilibrium. Renal Diseases. Hormone Therapy and Diseases of the Endocrine Glands. Metabolic Diseases—Diabetes Mellitus, Obesity, Nutritional Disorders. Diseases of the Nervous System. Psychiatry in General Practice. Analgesics and Hypnotics. Chronic Rheumatic Diseases. Some Common Disorders in Infancy and Early Childhood. The Care of Old People. Common Tropical Diseases and Helminthic Infections. Pesticides and Repellents. Acute Poisoning. Ill-health due to Drugs. Industrial Diseases. Common Diseases of the Skin. Venereal Diseases. Diseases of the Eye. Principles of Prescribing. Technical Procedures. Glossary of Official Equivalents of the Proprietary Drugs. Index.

'The reason for its popularity is not far to seek. It is written by clinicians and carefully edited so that the emphasis throughout is on what the man in practice requires. Its aim is to provide the clinician—whether consultant or general practitioner—with a sound, reliable and up-to-date account of methods of treatment which have proved of value'.—*Practitioner*

## PHYSIOLOGY FOR PRACTITIONERS

Edited by IAN C. RODDIE. 1971. 208 pages  
£1.50

This book consists of a series of twenty-four articles which Professor Ian C. Roddie and members of the staff of his Department of Physiology in the Queen's University, Belfast, contributed to *The Practitioner*. Its aim is to provide an up-to-date account of the essentials for the clinician. In other words, it is written for the clinician who has a basic knowledge of physiology but wishes to have this brought up to date. In this respect it fills a gap in current medical publications. It is not intended for professional physiologists, though they may well find it useful for teaching purposes. Its primary aim is to help the practising doctor by providing him with an authoritative, readable and compact account of current views on physiology.

## CALLING THE LABORATORY

Edited by W. A. R. THOMSON, Editor of *The Practitioner*; Foreword by PROFESSOR ROBERT CRUICKSHANK. 1971. Third edition. 160 pages 6 illustrations £1.50

One of the major problems facing the general practitioner today is the discriminate use of the laboratory. There is such a large variety of tests nowadays that it is often difficult

to decide which are of real value in any one particular case. Even when the practitioner has decided that a given test would be of value, he has still to decide what material is required for it. Equally difficult may be the interpretation of the result produced by the laboratory. Further, if the practitioner is to retain an intelligent interest in his work, and not be a mere robot, it is essential that he should know the principles of the different tests, even though the technical details of how they are done may be beyond his understanding.

To help the practitioner in dealing with this problem, throughout 1960 and 1961 a series of articles was published in *The Practitioner*, under the title of *Calling the Laboratory*. These proved so popular that it was decided to publish them in book form.

'For a busy general practitioner wishing to avail himself of laboratory services it provides not only a quick study, but simple, explicit descriptions of essentials. It is also valuable to the trainee in laboratory medicine, providing a wide-ranging view of the hard, practical core of his discipline. There would be few of the medical profession who would not find something of value with its covers'.—*The Ulster Medical Journal*

## THE PRACTICE OF FAMILY MEDICINE

D. F. COULTER and D. J. LLEWELLYN.  
1971. 434 pages 14 illustrations £3.50

This book provides a comprehensive description of general practice, covering all aspects of the subject, from the pattern of diseases and their management to the administration of a comprehensive family doctor service. The twenty-two contributors, all of whom are members of the Royal College of General Practitioners, write about those subjects in which each has a special interest. The book is intended primarily for new entrants into general medical practice and those training for a career in family medicine, but doctors in charge of training practices will find it very useful as a basis for tutorials and group discussions.

**Contents**—Part 1: The practice. The range of general practice. The administration of the family doctor service. Managing the practice. Legal pitfalls. The art of prescribing. Research. Part 2: The patient, his doctor and the community. Communication between the doctor and his patient. Hospitals, consultants and nurses. Family planning. Preventive medicine. Occupational medicine. Health education. Part 3: The Clinical problem. Medicine. Paediatrics. Infectious diseases. Sexually transmitted diseases. Diseases of the skin. Psychiatry. Dealing with the psychoneurotic. Geriatrics. Surgery. Orthopaedic medicine. The ear, nose and throat problems of general practice. The eye. Obstetrics and gynaecology. Office pathology. Using the radiological services. Agencies available to assist the patient in the community. Equipment for family practice. Vocational training for general practice as a postgraduate discipline. Index.

## BEDSIDE DIAGNOSIS

CHARLES SEWARD. 1971. Ninth edition.  
552 pages £3.00

**Contents**—Introduction. Psychogenic Symptoms. Some General Considerations Regarding Pain. Head Pain. Thoracic Pain. Epigastric Pain. Umbilical Pain. Hypogastric Pain. Lateral Abdominal Pain. Dysphagia. Vomiting. Diarrhoea. Jaundice. Anaemia. Epistaxis. Haematemesis. Haemoptysis. Haematuria. Haemorrhagic Disease. Cough. Dyspnoea. Tachycardia. Debility and/or Loss of Weight. Pyrexia. Coma. Drugs Considered as Causes of Symptoms. Normal Values. Index.

'This book is in the clinical tradition for which British medicine is justly renowned. Each of the chapters is devoted to an important presenting symptom. After a brief description of the physiological background, the symptom is analysed as it would be by the clinician at the bedside. The conditions which can cause the symptoms are described, and last of all—in their proper place—come the pathological and radiological investigations.

Doctors in all fields of medicine will find much of value here; the newly qualified, in particular, will find no better book for learning the art and science of diagnosis'.—*Journal of the Royal College of General Practitioners*

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CHURCHILL LIVINGSTONE, Teviot Place, Edinburgh

#### **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.

#### **Church of the Province of South Africa Department of Medical Missions**

#### **DOCTORS NEEDED FOR MISSION HOSPITALS**

Three grades of posts are available:

1. Senior House Officer Grade
2. Registrar Grade
3. Senior or Specialist Grade

Applications from recently retired practitioners will also be welcomed.

Appointment will normally be for a period of one year or longer as agreed.

Information on salaries, terms of service, living conditions, etc., may be obtained from: THE DIRECTOR, DEPARTMENT OF MEDICAL MISSIONS, 646 DUNCAN STREET, PRETORIA, SOUTH AFRICA.

#### **Oxford Regional Committee for Postgraduate Medical Education and Training**

Applications are invited for appointment as

#### **Regional Organizer for Postgraduate Education and Training in General Practice**

The Organizer will deputize for the Director of Postgraduate Medical Education in matters connected with general practice and will be Secretary of the Postgraduate Subcommittee for General Practice. He will be expected also to advise on careers in general practice and to assist the Director of Clinical Studies in the Oxford Medical School in connection with the undergraduate curriculum and student attachments. The Organizer would have an honorary attachment in the Department of the Regius Professor of Medicine and would be eligible for honorary appointment as Clinical Lecturer in the Faculty of Medicine.

The appointment will be part-time. The successful candidate would be expected to continue in active general practice within a reasonable distance of Oxford *or* to be prepared to move to a practice within the Oxford region. Candidates should be not more than 55 years of age and should have not less than 5 years' experience as principal. Salary in the range of £2,000 to £2,500 p.a.

Further particulars may be obtained from the Director of Postgraduate Medical Education. Applications, with the names of two referees, should be sent to the Director at the Old Radcliffe Observatory, The Medical School, 43, Woodstock Road, Oxford, to reach him not later than 30 November, 1971.

# Fucidin Ointment

2% sodium fusidate B.P. in a neutral ointment base.

## The logical topical antibiotic for primary and secondary bacterial skin infections.

Fucidin Ointment has proved clinically effective in a wide variety of common skin infections. Its rapid, reliable, bactericidal action against most strains of staphylococcus and streptococcus combined with its good skin tolerance and proven penetration,\* make it a logical topical treatment wherever infection is present or threatens the skin.

Available in packs of 10g and 25g.

### References:

1. *Clin. Tri. J.*, (1966) 3: 591
2. *Brit. J. clin. Pract.*, (1967) 21: 529
3. *Ugeskrift for Laeger*, (1966) 128: 204
4. *Clin. Tri. J.*, (1966) 3: 529
5. Paper read to the British Dermatological Association Meeting, Aberdeen, July 1968.



Full information available on request from:



LEO LABORATORIES LIMITED, Hayes, Middlesex. Telephone 01-573 6224