

TEXTROOK OF MEDICAL TREATMENT

Edited by STANLEY ALSTEAD, ALASTAIR G. MACGREGOR and RONALD H. GIRDWOOD

1971 Twelfth Edition
708 pages 36 illustrations £4.25

EMERGENCIES IN MEDICAL PRACTICE

Edited by C. ALLAN BIRCH

1971 Ninth Edition

844 pages 99 illustrations £6.00

MORAL DILEMMAS IN MEDICINE

An Introduction to Ethics for Doctors and Nurses ALASTAIR V. CAMPBELL 1972 224 pages £1.00

DISEASES OF THE NOSE, THROAT AND EAR

A Handbook for Students and Practitioners ION SIMSON HALL and B. H. COLMAN 1973 Tenth Edition 480 pages 93 illustrations £2.50

THE EYE IN GENERAL PRACTICE

C. R. S. JACKSON

1972 Sixth Edition

188 pages 48 illustrations £2.00

LEGAL ASPECTS OF MEDICAL PRACTICE

BERNARD KNIGHT

1972 288 pages 61 illustrations £3.00

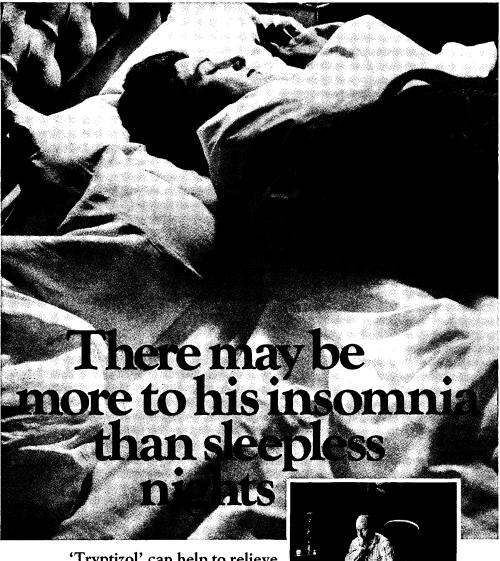
PHYSIOLOGY FOR PRACTITIONERS

Edited by IAN C. RODDIE 1971 208 pages £1.50

CHURCHILL LIVINGSTONE

Teviot Place

Edinburgh



'Tryptizol' can help to relieve the anxiety-depression that disturbs sleep.

Insomnia is one of the most frequent presenting symptoms of the anxiety-depressive syndrome. In addition to its antidepressant action, 'Tryptizol' has a rapidly apparent anti-anxiety effect. It can quickly relieve the sleep disturbance associated with depression, usually obviating the need for hypnotics. While the patient is encouraged by this early improvement, 'Tryptizol' can effectively treat other distressing symptoms of the illness, such as agitation, anorexia, lack of interest, and lowered mood.



Merck Sharp & Dohme Limited, Hoddesdon Hertfordshire Telephone Hoddesdon 67123



a single solution to a dual problem

'Tryptizol' is supplied as tablets containing 10 mg, 25 mg, and 50 mg amitriptyline hydrochloride/MSD. The 50 mg tablet is especially convenient when a relatively large dose is prescribed at bedtime. 'Tryptizol' is also available as a syrup, and as an injection. Detailed information is available to physicians on request. & denotes registered trademark.



eria e a traditi e e e il SEPPRICESS!

SPECIAL COMMENS EFFECTIVES BIGGETHERERS WITH SIFTED EXACT OF IV LOSSINGS

CONTRACTOR CONTRACTOR AND CONTRACTOR CONTRAC



Salpas qui pratiti pratiti pre de la presenza de la companda de Premisso de specime del albemento se como visicame (**)

CONTROL DE TRE DE MOCCO PREMIETA DE PERENCIONES. LE RECEPTOR SE CONTROL DE TRE DE VOCANT SE PERENCION LE RECEPTOR DE CONTROL DE TRE DE VOCANT SE PERENCIONES. LE RECEPTOR DE CONTROL DE TRE DE TRE DE VOCANT SE PERENCIONES.

The control of the co

En jang Palament (Mari Surape super Trepulation Surape super sur-culture Commission (Maria Surape super Surape super sur-culture Commission (Maria Surape super super

Sell (Democratic) is available on regions our reagns. Melecunic & Co 7 NY Net Featre Foundarism Co.), Berkheltisten, Herts.



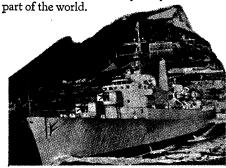


AS A NAVAL DOCTOR, YOU'D GETA WHOLE LOT MORE OUT OF LIFE.

(AND SO WOULD YOUR FAMILY)

Right from the start, you'd have a complete change of scene.

Serving either with the Navy at sea or among service personnel and their families at a naval establishment. Very likely in another



Either way, you'd never find yourself short of assistance. (Every naval doctor is fully supported by medical staff).

Equally important, you'd never find yourself getting into a rut – for in two years or so you'd receive a new appointment.

In a new place. Doing a different job. Perhaps with the chance to learn something of the special problems of diving, aviation, or tropical medicine for example.

It's a stimulating life. Not only for yourself but for your family too.

For in most cases they'd accompany you. And wherever you go there are usually married quarters – fully furnished houses or flats, equipped with everything you need. And at very reasonable rents.

What's more, a generous education



allowance is made for your children if they are at boarding school. £363 p.a. for a first child, £432 p.a. for a second, £519 p.a. for a third. On top of this, removal and other allowances are also provided.

Add this to the salary and you'll see how well a naval doctor's pay compares with a civilian doctor's.

For instance, with five years' post registration experience you would join us as a Surgeon Lieutenant-Commander on £4,767 a year.

And any specialist qualifications/experience you have could increase your salary



There are opportunities, too, to keep up with the latest developments in medicine. For the Navy fully recognises the need for such opportunities both in the interests of naval medicine and a doctor's professional advancement.

That's not all. You can join on a 3-year or 5-year commission (each carrying a tax-free terminal gratuity of £1,500 and £3,000 respectively) and you can transfer to a full 16-year pensionable commission if you wish.

To find out more, write to Surgeon Cdr. L. C. Banks, M.B., B.Ch., R.N. (\$11AB2), Dept. of the Medical Director-General (Navy), Empress State Building, London S.W.6.

Hygroton®

- reduces blood pressure significantly
- provides effective day-long control of B.P. without adverse autonomic or CNS effects
- enhances the effect of other antihypertensive agents

so why not use Hygroton[®] as your basic treatment for hypertension?

Availability

Hygroton[®] is available as white, scored compressed tablets containing 100 mg and as pale yellow. scored, compressed tablets containing 50 mg 3-(4-chloro-3-sulphamoylphenyl)-3-hydroxyisoindolin-1-one (Chlorthalidone B.P.)

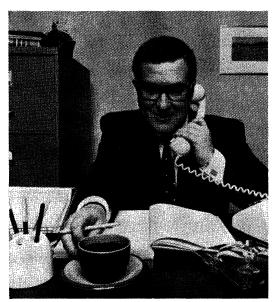
Geigy

Detailed literature describing any Geigy product will be supplied on request. Geigy Pharmaceuticals, Macclesfield, Cheshire SK10 2LY.

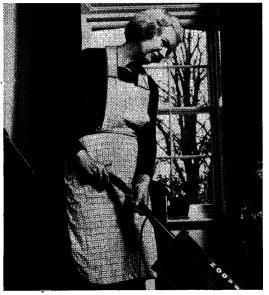
ESBATAL*

(Bethanidine Sulphate)

Controls all grades of hypertension







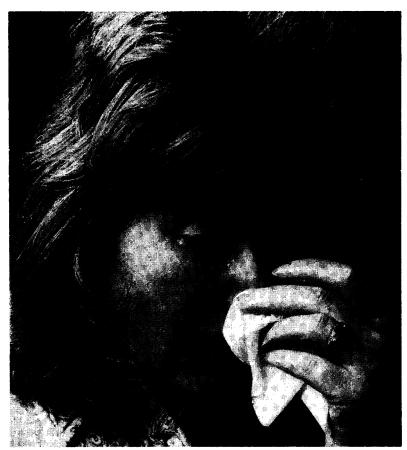
Simple Dosage Few Side Effects Low Cost Effective Control of Hypertension

Full information is available on request.



Calmic Medical Division, (The Wellcome Foundation Ltd.) Berkhamsted, Herts. HP4 2DY. *Trade Mark





HELP PREVENT CRUELTY TO ADULTS

Every adult with a cruel, hacking, useless cough deserves the full treatment afforded by ACTIFED COMPOUND LINCTUS. Codeine—to suppress the cough reflex by central action. Triprolidine and pseudoephedrine—to clear congestion and dry up that cough triggering post-nasal drip. Blackcurrant flavour—one of the few fruity flavours with universal adult appeal.

Be as kind to adults as you are to children.

*Trade Mark

Full information is available on request.



Burroughs Wellcome & Co. (The Wellcome Foundation Ltd.) Berkhamsted, Herts.

R ACTIFED COMPOUND LINCTUS FOR COUGH

A good friend in

Amoxil can be relied on to treat commonly occurring bacterial infection of the ear, nose and throat. This was demonstrated in a recent clinical trial¹ involving 150 children where Amoxil was clinically successful in 94% of cases.

Amoxil's broad spectrum of activity coupled with its outstanding oral absorption² ensure that high bactericidal serum levels are available to act quickly and decisively at the site of infection.

Add to this the convenience of a three times daily dosage regime, the degree of safety associated with penicillin therapy, treatment costing as little as 16p per day, and a wide range of highly acceptable oral

presentations - further good reasons why Amoxil represents practical antibiotic therapy at its best.

Amoxil is a good friend in throat infections – this happy eight year old certainly thinks so.

Further information on Amoxil regd (amoxycillin) is available from: Bencard.

Freepost, Great West Road, Brentford, Middx. Bencard

Prescribing information.

Dosage: Adults 250 mg three times a day.

Children - up to ten years: 125 mg three times a day. In the case of severe infections the dosage should be

Presentation: Amoxil capsules 250 mg. Amoxil syrup 250 mg/5 ml, 100 ml bottle. Amoxil syrup 125 mg/5 ml, 100 ml bottle.

Amoxil Paediatric Suspension 125 mg/1.25 ml, 20 ml bottle with pipette.

Amoxil presentations contain amoxycillin as the

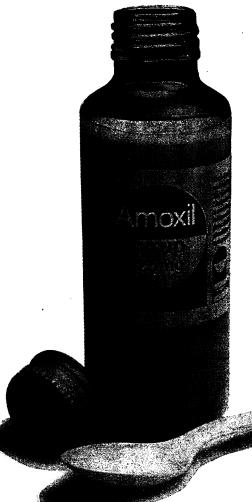
trihydrate.

Contra-indication: Amoxil is a penicillin and should not be given to penicillin-hypersensitive patients.

Side effects: In clinical trials involving more than 1,500 patients no serious side effects were reported. Those side effects which were encountered were of a mild transitory nature.

> **URTI Chest infections** UTI Skin and soft tissue infections

an excellent antibiotic for routine treatment



1. Practitioner (1972) 209, 363

throat infections.





'... in the management of hypertension, the major clinical advantage to be obtained from combination thiazide-amiloride therapy (in comparison with thiazide drug alone) is the occurrence of moderate antikaliuresis and diuretic-antihypertensive efficiency.'

J. clin. Pharmacol., 1969, 9, 217 (Jul-Aug)

'Moduretic' provides thiazide antihypertensive therapy—alone or as adjunctive therapy—whilst conserving body potassium. In fact, potassium supplements should not be given concurrently.

'Moduretic' combines amiloride hydrochloride, a potassium-conserving agent, with hydrochlorothiazide, the well established thiazide antihypertensive.

Many physicians are already recognising the advantages of 'Moduretic' in the treatment of thiazide-responsive hypertension.



Amiloride hydrochloride and hydrochlorothiazide

a highly effective diuretic/antihypertensive that helps to conserve the body's natural potassium

'Moduretic' is available as peach-coloured, diamond-shaped tablets containing 5mg amilloride hydrochloride and 50 mg hydrochlorothiazide. Detailed information is available to physicians on request. ® denotes registered trademark.

Merck Sharp & Dohme Limited, Hoddesdon, Hertfordshire Telephone Hoddesdon 67123



JOURNAL PUBLICATIONS

The following have been published by *The Journal of the Royal College of General Practitioners* and can be obtained, while still in print, from the Longman Group Ltd., 43 Annandale Street, Edinburgh EH7 4AT, Scotland.

REPORTS FROM GENERAL PRACTICE

No. 1 Special vocational Training					• •	25p
No. 5 Evidence of the Royal College of Gene	eral Pr	actitio	ners to	the R	toyal	
Commission on Medical Education	• •		• •	• •		33p
No. 6 Implementation of Vocational Training				• •		20p
No. 10 The Practice Nurse			• •	• •		50p
No. 11 General Practice Teaching of Undergrade	ıates in	Britis	h Med	ical Scl	hools	52p
No. 13 Present State and Future Needs (second of	edition)	٠		• •		60p
No. 14 The Future General Practitioner—Part o	ne					25p
No. 15 Teaching Practices						100p
No. 16 Present State and Future Needs (third ed						£1.50
•	•					
OUDDIEMENTS TO THE IOUDNAL O	ar artan	e DO	VAT 4		CF ()E
SUPPLEMENTS TO THE JOURNAL OF THE ROYAL COLLEGE OF						
GENERAL PRACT	ITION	EKS				
Classification of Disease						25p
Mental Health and the Family Doctor	••	• •	• •	• •	• •	25p
4 45 45 4		••				30p
Accident Management Training for General Practice (first edition)	• •	••	• •	• •	••	22p
	• •	• •	• •	• •	• •	38p
Nutrition in General Practice	• •	• •	• •	• •	• •	Зор 25р
Arthritis in General Practice	••	• •	• •	• •	• •	_
The Hazards of Middle Age	• •	• •	• •	• •	• •	25p
Rehabilitation	• •	• •	• •	• •	• •	25p
The Aetiology of Congenital Abnormalities	• •	• •	• •	• •	• •	38p
The Problems of Sex in General Practice	• •	• •	• •	• •	• •	30p
The Art and the Science of General Practice	• •	• •	• •	• •	• •	38p
Preventive Medicine and General Practice	• •	• •	• •	• •	• •	52p
The Early Stages of Chronic Bronchitis	• •	• •	• •	• •		52p
The Quality of Medical Care	• •	• •				25p
The Clinical Problems of Practice	• •	• •	• •	• •	• •	43p
Training for General Practice (second edition)	• •	• •	• •	••	• •	22p
Anaemia in General Practice			• •	• •		30p
Group Practice, Ancillary Help and Government	Contro	ols	• •	• •		38p
The Age of Discretion 20-40		• •	• •			38p
The Early Detection of Imported and Endemic D	isease			• •		38p
Rheumatology in General Practice						52p
The Management of Staff in General Practice				• •		52p
Man, Milieu and Malady						52p
A Future in General Practice						52p
Transport Services in General Practice						75p
The Prescribing of Psychotropic Drugs						75p
General Practitioners and Abortion						75p
General Practitioners and Contraception						75p
General Practice in the London Borough of Cam						75p
The Renaissance of General Practice						75p
University Departments of General Practice	• •	••	••			75p
						-

31-year-old M.R.C.G.P., leaving R.A.F. after 6 years family medicine is looking for vacancy in 3-5 man group practice. Doing obstetrics July-Dec., 1973, available from Jan., 1974. Prefer Gloucs., Wilts., Dorset, Somerset. Reply to J. D. Simpson, 119 Pintail Court, Lyneham, Chippenham, Wilts.

We require a fifth partner who should be a male British graduate, preferably vocationally trained and under 30 years of age. We have modern premises, appointment system, nurses and health visitors attached, and seven clerical and receptionist staff, there is a busy and efficient general practitioner Hospital, one mile from surgery, with full diagnostic facilities, and staffed by teaching hospital and regional consultants in all specialties, with whom we enjoy a close working relationship. applicant should view general practice with enthusiasm and aspire to be a M.R.C.G.P. Six weeks' leave per annum and one week study leave. A short assistantship is envisaged. Please write to Dr Russell, The Surgery, Edenbridge, Kent.

UNIVERSITY OF BRISTOL VOCATIONAL TRAINING FOR GENERAL PRACTICE

Applications are invited for a three year traineeship in Vocational Training for General Practice, consisting of two years hospital and elective training and one year traineeship in an approved practice.

After a short period of orientation of not more than three months in the training practice, trainees will stant hospital appointments at S.H.O. level in a Bristol Hospital; six months each in Medicine and Obstetrics with gynaecology are offered, followed by two three month periods in Paediatrics and Geriatrics. The remaining six month period in hospital will be partly or wholly elective when opportunities will be given to gain experience in special hospital and other departments. The trainee will complete the year in practice before or after this elective period. There will be a half-day release course during University term time throughout the three years which will contain a special extended course in psychiatry.

The period of orientation should start in June 1973 and the first hospital appointments will start on 1 August 1973.

Applications from suitably qualified practitioners should give details of previous experience, the names and addresses of two referees, and quote a date when they would anticipate being able to start the preliminary orientation period in practice. Applications should be sent as soon as possible.

It may be possible also to assist practitioners wishing to complete requirements for vocational training, who have already in part fulfilled the necessary criteria.

Applications and requests for further information, should be sent to:

The Adviser in General Practice, Medical Postgraduate Department, University of Bristol, Senate House, Tyndall Avenue, Bristol, BS8 1TH

THE UNIVERSITY OF SHEFFIELD

REGIONAL ADVISER IN GENERAL PRACTICE

Applications are invited for the part-time post of REGIONAL ADVISER IN GENERAL PRACTICE to establish and develop vocational and continuing education for general prac-The Regional Adviser will have duties in the Sheffield Hospital Board Region. He will be responsible to the Regional Postgraduate Dean (Professor Sir Charles Stuart-Harris) and will be adviser to the Regional Postgraduate Committee. The appointment will be made for three years in the first instance and the number of half days to be undertaken will be a matter for negotiation but is expected to be about five a week. The conditions of the appointment will conform with the guidance given in the Department of Health and Social Security Circular HM (72) 25, 'Appointment of Regional Advisers in General Practice' dated 17 April, 1972. Candidates should have had experience in general practice. Applications (one copy only) should be sent not later than 12 March, 1973 to the Registrar and Secretary, The University, Sheffield S10 2TN from whom further particulars may be obtained. Quote Ref. R.41/DF.

FIFTH PARTNER required to replace retiring senior partner in July in a practice possessing the full range of ancillary help, equipment and L.A. attachments.

Applicant should be a graduate of a British university aged 33 or under and should preferably have undergone vocational training for general practice.

Apply in writing to: Dr N. Lewis, 106 Stroud Road, Gloucester, GL1 5JN.

Medical Practitioner, Ghanaian male, visiting U.K. in June, seeks locum tenens for 3 months in London area. On overseas list of registered medical practitioners U.K. and an M.R.C.G.P. Willing send photo, address Box 1657, Accra, Ghana.

Married R.A.M.C. Officer, M.B., B.C.L., D.O.G.R.C.O.G. Aged 30, available July 1973. Seeks Assistantship with a view to partnership in a semi rural or suburban area in Scotland. Replies to Capt. C. W. G. Angus, Garrison Medical Centre, B.F.P.O. 20.

East Anglian Committee for Postgraduate Medical and Dental Education

REGIONAL ADVISER IN GENERAL PRACTICE

(Part-time-up to 5 sessions weekly).

This is a new appointment occasioned by the rapid expansion of planned training in general practice, and will be of three years' duration, renewable. Applicants must be registered medical practitioners, preferably under 55 years of age, with not less than five years experience as Principal in general practice. Experience in training and teaching will be an advantage. The successful applicant will be expected to continue in active general practice for the remainder of his time.

Salary will be at the sessional rate of a National Health Service consultant at the maximum of the scale (approx. £3,341 p.a. for 5 sessions).

Full information about the appointment may be obtained from the Regional Director, East Anglian Committee for Postgraduate Medical and Dental Education, Regional Hospital Board Offices, Union Lane, Chesterton, Cambridge, to whom applications should be submitted not later than 26th March, 1973.

University of Bristol

Departments of Mental Health and Extra-Mural Studies

PSYCHOTHERAPY WORKSHOP 20th-25th May, 1973

This workshop is intended for those mental health professionals and general practitioners who have a few years experience, and now seek further training and insight into the processes of psychotherapy. £40.00 resident membership. Further particulars and application forms from: The Assistant Director, Department of Extra-Mural Studies, University of Bristol, 32 Tyndall's Park Road, Bristol BS8 1HR.

Western Regional Committee for Postgraduate Medical Education

Refresher Course for General Practitioners

A two week general course will be held in Glasgow from Monday, 7th May to Friday, 18th May, 1973. It is planned to keep General Practitioners up to date with modern hospital practices and techniques and will consist of lectures/discussions, ward rounds and demonstrations. Meetings will be held in the main teaching hospitals in the city. It has been approved under Section 63 of the Health Services and Public Health Act, 1968.

Further particulars and application forms may be obtained from: The Dean of Postgraduate Medicine, The University of Glasgow, Glasgow G12 8QQ.

MALTA, Ta-Xbiex, Seafront holiday apartments in the sun, £20 weekly. Write Mr. Conti, 68 Naxxar Road, B'kara.

PONTEFRACT, CASTLEFORD and GOOLE HOSPITAL MANAGEMENT COMMITTEE

Vocational Training Scheme for General Practice

A limited number of vacancies on a 3 year vocational training scheme for General Practice commencing 1 August 1973. Rotational experience comprising 4 six-monthly hospital appointments at S.H.O. level in approved specialties at Pontefract General Infirmary and 2 six-monthly posts in selected General Practices. Further information from Group Secretary, Great Northern House, Salter Row, Pontefract, to whom applications should be submitted by 31 May 1973.

GUY'S HOSPITAL MEDICAL SCHOOL DEPARTMENT OF GENERAL PRACTICE

LECTURER IN GENERAL PRACTICE (Part-time)

Applications invited for the above post. The doctor appointed will join three doctors already working at the Lakeside Health Centre, Thamesmead, together with health visitors, nurses, social workers, dentists and others seeking to provide a comprehensive service in this new community, where a teaching unit for Guy's Medical and Dental Students is being developed. Income from the practice, plus part-time salary from the Medical School.

Further particulars and forms of application may be obtained from the Dean, Guy's Hospital Medical School, London Bridge, SE1 9RT.

FAMILY MEDICINE— DEVELOPMENT AND EXPANSION

The Department of Family Medicine of McMaster University, through its expanding programmes, offers opportunities to family physicians interested in team practice, teaching, research and administration.

Five clinical teaching units provide an ideal setting for self-development and involvement in teaching practices with responsibilities in undergraduate, postgraduate and continuing medical education. Major emphasis is placed on clinical skills and preference will be given to physicians certified in Family Medicine or with equivalent qualifications.

McMaster University provides excellent fringe benefits as well as reallocation expenses and extends an open invitation to family physicians to investigate the opportunities offered by the expansion and development of these teaching programmes.

Inquiries and applications may be directed to:

DR JOHN HAY
Professor and Chairman,
Department of Family Medicine,
McMaster University Medical Centre,
1200 Main Street West,
Hamilton,

Ontario, CANADA.

Phone: 416-525-9140, Ex. 2548.