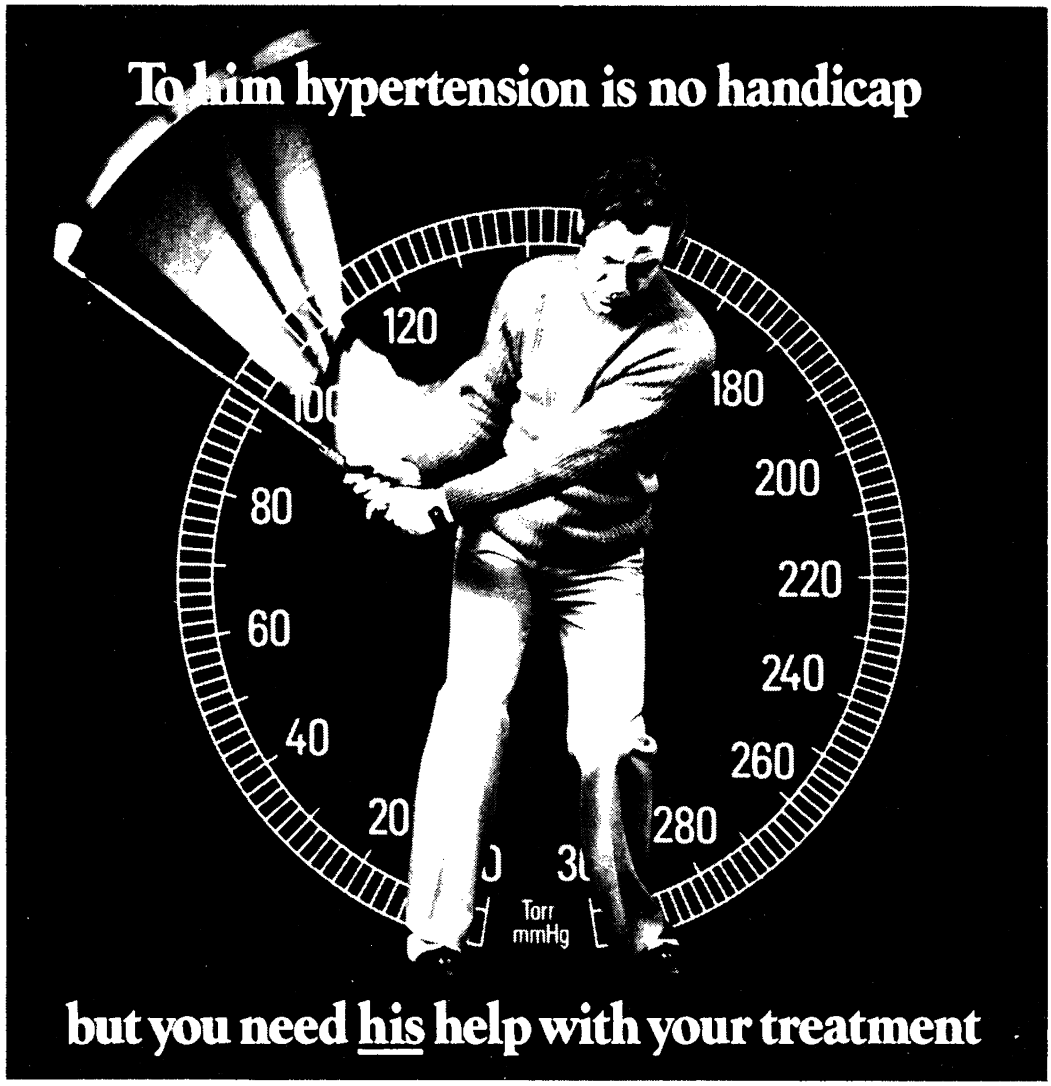
To him hypertension is no handicap



but you need his help with your treatment

Beta-Cardone reduces blood pressure simply by controlling cardiac output. Unlike some earlier hypotensive agents, Beta-Cardone leaves the patient free from side effects such as marked sedation, postural hypotension, sexual difficulties, nasal congestion and dry mouth. **And, because your patient feels well during treatment, he is quite ready to co-operate with you and 'keep taking the tablets.'**

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pure and simple

Beta-Cardone

really does make life worth living

DF Beta-Cardone (Sotalol hydrochloride) is a trade mark of **DUNCAN, FLOCKHART & CO. LTD., LONDON E2 6LA.** Full information is available on request. DF74/193/HN

SOUTH-EAST SCOTLAND REGIONAL COMMITTEE FOR POSTGRADUATE MEDICAL EDUCATION

VOCATIONAL TRAINING FOR GENERAL PRACTICE

Borders, Fife, Lothian (Edinburgh) Health Boards

Applications are invited from Registered Medical Practitioners for 18 vacancies in Vocational Training Schemes for General Practice in South-East Scotland, beginning on 1st August 1975. Applications should be made before 15th March 1975 to the appropriate Health Authority as indicated, stating first and alternative choices between the schemes and giving the names and addresses of two referees.

All the schemes:—

(i) are approved by the Royal College of General Practitioners;
(ii) are associated, in the " General Practice " year, with a half-day release course organised by Edinburgh University Department of General Practice;
(iii) provide monthly seminars throughout the course;
(iv) provide opportunities for additional experience in E.N.T., Dermatology and Opthalmology.

I BORDERS SCHEME (2 VACANCIES)

First year: Twelve months ..... General Medicine; Peel Hospital (including Geriatric and Paediatric experience)
Second year: Six months ..... Orthopaedics and Casualty; Peel Hospital
and Six months ..... Obstetrics and Gynaecology; Elsie Inglis Hospital, Edinburgh
Third year ..... Spent in General Practice in the Borders Area.

Residential Accommodation is available.
Applications should be made to:— The Secretary, Borders Area Health Board, Newstead, Melrose, Roxburghshire, TD6 9DB.

II FIFE SCHEME (4 VACANCIES)

These are two sets of hospital posts rotating each six months. The first and third year of the scheme are separated by a year in General Practice in a Fife practice.

(a) General Medicine; Milesmark Hospital
Accident and Emergency; Dunfermline and West Fife Hospital
Paediatrics; Victoria Hospital, Kirkcaldy
Obstetrics; Dunfermile Maternity Hospital

(b) Medicine (Infectious Diseases); Cameron Hospital
Accident and Emergency; Victoria Hospital, Kirkcaldy
Geriatrics; Victoria Hospital, Kirkcaldy
Obstetrics; Dunfermline Maternity Hospital.

Residential Accommodation is available.
Applications should be made to:— The Secretary, Fife Health Board, 7 Comely Park, Dunfermline, KY12 7LL.

III EDINBURGH NORTHERN SCHEME (4 VACANCIES)

First year: six months ..... General Medicine; Western General Hospital *or* Leith Hospital
and three months ..... Accident and Emergency; Western General Hospital
and three months ..... Psychiatry; Western General Hospital
Second year: six months ..... Obstetrics and Gynaecology; Western General Hospital *or* Eastern General Hospital
and six months ..... Paediatrics; Western General Hospital
or six months ..... Geriatrics; Royal Victoria Hospital
Third year ..... Spent in General Practice

For details of Application—see below Scheme V.

IV EDINBURGH ROYAL INFIRMARY SCHEME (4 VACANCIES)

First year: six months ..... General Medicine; Royal Infirmary
and three months ..... Accident and Emergency; Royal Infirmary
and three months ..... Psychiatry; Gogarburn and Royal Edinburgh Hospitals
Second year: six months ..... Paediatrics; Royal Hospital for Sick Children *or* Astley Ainslie Hospital
and six months ..... Obstetrics and Gynaecology; Royal Infirmary
or six months ..... Geriatrics; Royal Infirmary
Third year ..... Spent in General Practice

For details of application—see below Scheme V.

V WEST LOTHIAN (BANGOUR/LIVINGSTON) SCHEME (4 VACANCIES)

There will be four vacancies in a new Vocational Training Scheme offering a selection of posts from General Medicine, Psychiatry, Obstetrics and Gynaecology, Neonatal Paediatrics, Accident and Emergency, and E.N.T.
The second year of the Scheme is based in General Practice either in West Lothian or in a Livingston Health Centre.
In the third year, it will be possible for two of the successful applicants to pursue an interest in a specialty either within the West Lothian District or elsewhere.
Residential Accommodation is available.
Applications for Schemes III, IV and V should be sent to:— The Secretary, Lothian Health Board, 11 Drumsheugh Gardens, Edinburgh, EH3 7QQ.

M.R.C. Post

In addition, on completion of any of the above schemes there exists, for a suitably qualified applicant with an interest in medical research in General Practice, the opportunity of an appointment for a further year at a Medical Research Council Unit in the Western General Hospital, Edinburgh.

Clearly a distressing infection...

In difficult situations, immediate therapy with Magnapen gives a greater certainty of first-time success even when there are no laboratory reports to guide you.

Magnapen destroys all the bacteria commonly met in general practice, so it can be used with confidence to treat distressing infections rapidly and with the safety of a penicillin.

Full prescribing information on Magnapen for the treatment of severe ENT, respiratory and soft tissue infections is available on request.

Magnapen* (flucloxacillin with ampicillin in equal parts) is a British product originated by:

Beecham Research Laboratories
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*Reg'd

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Magnapen

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by Mr. N.S. Painter MS FRCS FACS.

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...the best alternative is Normacol.'*

A high residue diet with added fibre in the form of unprocessed bran is rapidly being recognised as the most effective treatment for diverticular disease. However, there are patients who cannot tolerate bran or who find it unpalatable. And of course there are always those who will not take something unless it's 'medicine'. For them, the best alternative to bran is Normacol.

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*Painter NS, Paper read at the Annual Meeting of the Association of Surgeons of Great Britain and Ireland, Aberdeen 4th February 1973.

Normacol

Normacol Standard brown coated granules containing Sterculia BPC 62% and Frangula BPC 1949 8%
Normacol Special white coated granules containing Sterculia BPC 62% alone
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Normacol Diabetic brown coated granules is identical with Normacol Standard except for the absence of sugar
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Patients with familial hypercholesterolaemia (Type II) are particularly at risk. Moreover, the family and relatives of affected individuals are also prone to premature death from IHD.[2]

Prompt identification and treatment offer the only opportunity to prevent early onset of the condition.[2] The most significant therapeutic advance is QUESTRAN.[3,4] QUESTRAN restores the normal lipid balance, reducing plasma cholesterol by as much as 40%.[5] In this respect QUESTRAN is superior to Clofibrate.[6,7]

QUESTRAN*

Restores lipid balance and protects your patients at risk from IHD

References:
1. *On the State of the Public Health* (1973) p.31, H.M.S.O.
2. Slack, J. (1969) *The Lancet* **2**: 1380
3. West, R. J. and Lloyd J. K. (1973) *Arch. Dis. Childhood* **48**:370
4. Fredrickson, D. S. (1971) *Brit. Med. J.* **2**: 187
5. *Lipids & Heart Disease*. (1968) p. 71
6. Levy, R. et al (1972) *Annals Int. Med.* **77**: 267
7. Lloyd, J. K. et al (1973) *Lipid Metabolism and Atherosclerosis, (Excerpta Medica)* p. 71

BRISTOL

Further information available on request from:

BRISTOL LABORATORIES,
Division of Bristol-Myers Company Ltd.,
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*QUESTRAN is the Bristol trade mark for the only palatable form of cholestyramine

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Minocin* has a specific action against staphyloccocci.
Minocin also reaches the target site in greater concentration
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This means that the eradication of any soft tissue infection
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when staph breaks cover...

MINOCIN

...puts an end to soft tissue infections

Presentation: Blister packs of 9 and 45 tablets, each containing 100mg Minocycline.

Full information is available on request.

Lederle Laboratories Research for British Medicine

A division of Cyanamid of Great Britain Ltd., Fareham Road, Gosport, Hants.

*Trademark.

In the treatment of parkinsonism

SINEMET®

Carbidopa/MSD and levodopa/MSD

puts levodopa in its place–in the brain

Levodopa therapy is aimed at replenishing dopamine, which is deficient in the corpus striatum of patients suffering from parkinsonism. But extensive metabolism of levodopa takes place in extracerebral tissues, often producing troublesome side effects.

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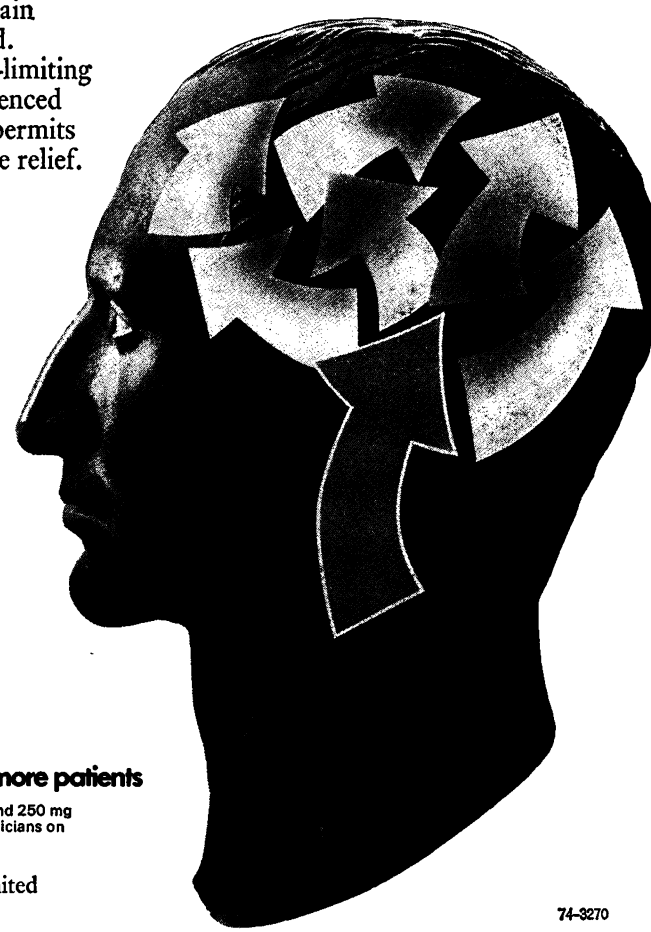
'Sinemet' is a combination of levodopa and carbidopa. With a *lower* dose of levodopa in 'Sinemet', *higher* brain dopamine levels can be achieved. By reducing certain of the dose-limiting adverse reactions usually experienced with plain levodopa, 'Sinemet' permits more patients to obtain adequate relief.



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SEPTRIN contains trimethoprim and sulphamethoxazole.
Full prescribing information is available on request.

References
1. *Med J Aust*, (1973), Special Suppl., **1**, 58.
2. *Practitioner* (1972), **209**, 838.

Wellcome Medical Division,
The Wellcome Foundation Ltd.,
Berkhamsted, Herts.

Wellcome

Sounds right for Septrin

d. in chest infections

Why run the risk of a bacterial chest infection becoming chronic?
Experience increasingly indicates the need for prompt, vigorous treatment.
Whenever chest sounds indicate infection, rely on SEPTRIN:

- more effective than ampicillin or tetracycline[1,2]
- over 30 million treatment courses prescribed worldwide.

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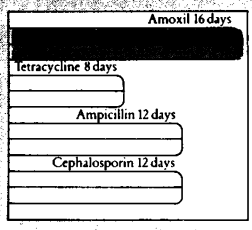
Listen to the difference between Amoxil and other antibiotics



The difference which has given significantly longer periods of relief from acute exacerbations of chronic bronchitis than tetracyclines, ampicillin, and cephalosporin. (fig. 1)[1]

The difference that makes Amoxil more effective than ampicillin in the treatment of chest infections.[1,2,3,4]

The difference which takes over where the tetracyclines have done all you can expect of them in bronchitis—so that significantly greater relief of all clinical symptoms can be demonstrated.[5]

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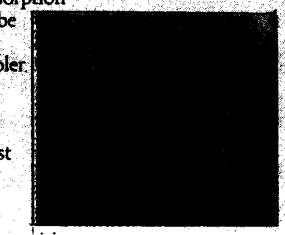
To these differences must be added Amoxil's safety and the fact that it is one of the least expensive therapies for respiratory infections.

No wonder doctors everywhere are recognising that Amoxil makes all the difference.



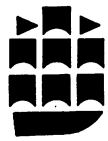
References
1. Chemotherapy, (1973), 18, (Suppl.) 19.
2. Brit. J. Dis. Chest, (1972), 66, 185.
3. S.A. Med J., (1973), 47, 717.
4. Excerpta Medica. I.C.S. (1974), No. 326, 130.
5. Practitioner, (1974), 212, 123.
6. Excerpta Medica I.C.S. (1974), No. 326, 25.

Full prescribing information on Amoxil (regd), amoxycillin, is available from Bencard, Brentford, Middlesex.

Fig. 1 Comparative relapse rates in severe cases.
Fig. 2 Moderate bronchitic lung with emphysema.

Bencard

Makes all the difference in respiratory infections.



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This work describes some of the commoner conditions which are to be found in the eye and points out the many ways in which the eye may reveal disease of other systems, or in which diseases of the body as a whole may manifest themselves in the eye. This edition conforms to the pattern established by its predecessors and describes the commoner diseases of the eye in a way useful to the practitioner as well as the student.

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This book is based on a series of articles contributed to *The Practitioner*. They were originally intended to help the established practitioner keep up to date with the recent developments in physiology. This new edition has been expanded and further new material incorporated.

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WEST GLAMORGAN HEALTH AUTHORITY

(SWANSEA DISTRICT)

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Applications are invited from two registered doctors to enter an approved General Practice Vocational Training Scheme starting on 1 August, 1975.

The three-year course consists of six months of General and Chest medicine and six months of Obstetrics with Gynaecology, both at Morriston Hospital, followed by one year as a General Practice Trainee and the final year consisting of six months in the Paediatric Department at Morriston Hospital and six months in the Accident and Emergency Department at Singleton Hospital.

The Scheme is approved by the Regional Post Graduate Education Committee and the Obstetric post is recognised for the Diploma in Obstetrics.

Applications forms are available from: District Administrator, Swansea Health District, 137/139 St Helen's Road, Swansea.

Further information is available from Dr R. B. Parker, 78 Newton Road, Mumbles, Swansea. Area Tutor in General Practice. Tel.: Swansea 66955.

AN INDIVIDUALLY STYLED THREE STOREY 1961 BUILT DOCTOR'S RESIDENCE, Eastern Southampton City Outskirts. Close to yachting facilities at Bursledon and Hamble. Five bedrooms, bathroom, separate w.c,. fine lounge 20′, spacious hall, dining room, kitchen/breakfast room 23′, cloakroom and w.c., separate suite of three rooms for professional use. Integral double garage, oil fired central heating, greenhouse, large garden about 80′ × 170′. £22,000 FREEHOLD.

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

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

Journal of the Royal College of Physicians of London

This Journal is concerned with the integration of scientific disciplines in the practice of medicine and, by providing a wide ranging commentary on the growing points of medicine, is an essential complement to the specialised journals.

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The initial and closing periods of the three-year scheme will be spent in General Practice and there will be four six-month Senior House Officer posts in the hospital—in Medicine/Geriatrics, Paediatrics/Dermatology, Obstetrics/Gynaecology, and Psychiatry. The last of these will include a good deal of work within the community

A day release scheme operates which includes participation in a continuing course at the Kent Postgraduate Medical Centre at Canterbury. The Centre, and the scheme itself, have close links with the Health Service Research Unit at the University of Kent.

Throughout the three-year period each trainee will be in continuous touch with his own General Practitioner. The post in Obstetrics/Gynaecology and Paediatrics are recognised for the Membership and Diploma of the Royal College of Obstetricians and Gynaecologists and Diploma in Child Health respectively. Fluidity within the organisation will allow an alternative post such as Anaesthesia. Trainees will be encouraged to sit for the Membership of the Royal College of General Practitioners.

The post will begin on 1 July, 1975. Further details of the scheme and application forms can be obtained from the Postgraduate Tutor at Buckland Hospital, Dover. Telephone enquiries can be made to Mrs. Howard, telephone number Dover 201624. Closing date for applications: 30 April, 1975.

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

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Single room	3.50	4.50
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Enquiries should be addressed to the Accommodation Secretary, Royal College of General Practitioners, 14 Princes Gate, Hyde Park, London SW7 1PU. (Tel. 01 584 6262). Whenever possible bookings should be made well in advance.

PRESENT STATE AND FUTURE NEEDS OF GENERAL PRACTICE

Reports from General Practice Number 16

Wherever general practice or family medicine is studied the *Present State and Future Needs of General Practice* series is read. The latest edition was published in March 1973 and surveys the problems and position of general practice. It was produced by the Royal College of General Practitioners and is available now from The Longman Group, 43-45 Annandale Street, Edinburgh, EH7 4AT, Scotland. Price: £1·50 ($5).

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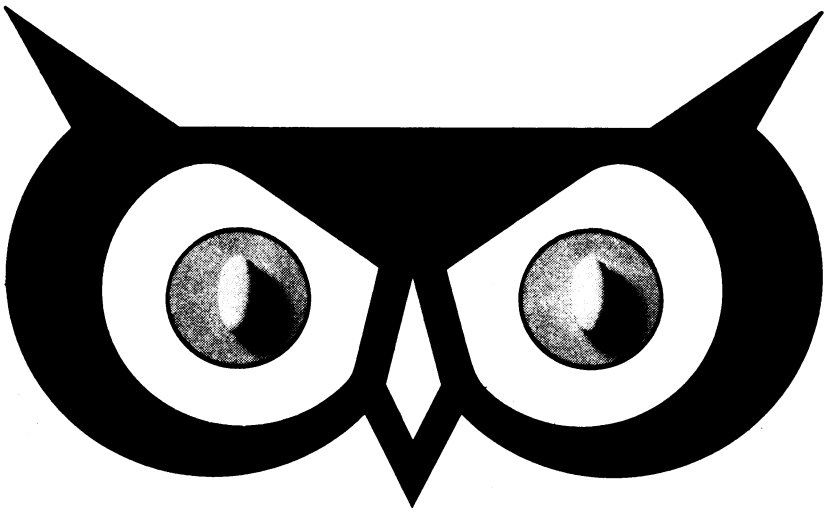

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