His Daily Dose in angina or hypertension, or both.

THE TABLETS

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To facilitate effective once-daily dosage

200mg

new strength now available.

The long action of Beta-Cardone means that one dose in 24 hours is effective in hypertension, angina, or both. This length of action is intrinsic, and does not depend on extrinsic devices such as special coatings or slow release mechanisms.

Beta-Cardone does not accumulate in the body, and does not give rise to impotence, postural hypotension, nasal congestion, or dry mouth. And, to the patient, the once-daily dosage regimen is as easy to remember as his breakfast.

The L-O-N-G acting beta-blocker **Beta-Cardone**

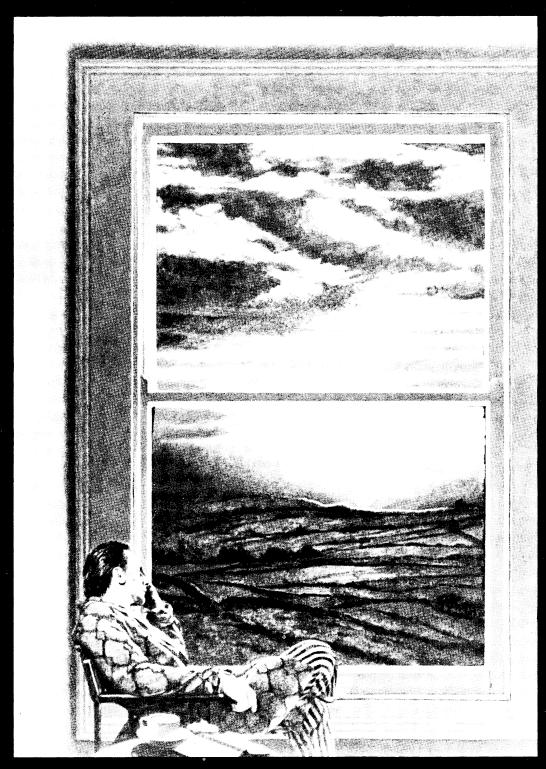
Protects the patient day and night.



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No more wide-awake dawns with REMNOS

First choice Nitrazepam for safer, natural sleep



Remnos is the DDSA trade mark for pharmaceutical preparations containing Nitrazepam BP 5mg Further information is available on request from: DDSA Pharmaceuticals, 310 Old Brompton Road, London SW5 9JQ



the antifungal of choice for even the most recalcitrant of vaginal candidal infections

Full prescribing information available: The Technical Department, E. R. Squibb & Sons Ltd., Regal House, Twickenham, Middlesex, TWI 3QT.



FOCUS ON HYPERISION.

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- * Highly effective control of thiazide-responsive hypertension.
- * Helps conserve potassium; supplements are contra-indicated.
- * Encourages patient compliance.

MODURETIC°

MULTI-PURPOSE DIURETIC

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

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Normacol makes work for idle bowels By incre

By increasing the bulk of the faecal mass Normacol brings about a natural stimulation of the peristaltic reflex. Normacol absorbs up to sixty times its own volume of water—this increase in bulk stimulates peristalsis and the bowels are allowed to function as they should.





SEPTRIN in urinary infections

the clinical superiority that makes sure

In a study of the sensitivities of acute urinary infection isolates to commonly-used oral antibacterials, 99.1% of the pathogens isolated were sensitive to Septrin!

Septrin* has a complete spectrum of activity against the organisms usually responsible for urinary tract infections. With its bactericidal action, speed of patient response and convenient dosage, Septrin has become the most widely-used antibacterial for treating urinary infections.

1. J. int. med. Res (1974), 2, 400.

Septrin contains trimethoprim and sulphamethoxazole.
Full prescribing information is available on request.
Wellcome Medical Division, The Wellcome Foundation Ltd., Berkhamsted, Herts
*Trade Mark





Aureocort*

(Chlortetracycline | Triamcinolone Acetonide)

Cream-Ointment-Spray

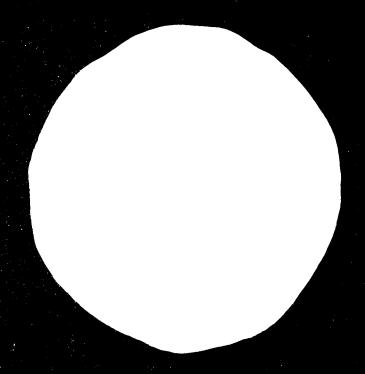
The Classical answer to infected dermatoses

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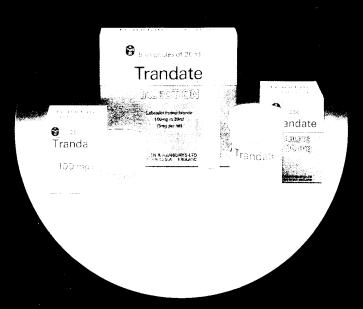
(labetalol)

A UNIQUE PROFILE IN HYPERTENSION



CONCURRENT ALPHA- AND BETA-ADRENOCEPTOR BLOCKADE

THE USE OF TRANDATE IS BEING MONITORED IN THE UNITED KINGDOM



IN PRINCIPLE

In essential hypertension, the peripheral resistance is increased and the cardiac output normal. The most desirable way to lower blood pressure is, therefore, to decrease the peripheral resistance and not adversely affect cardiac function. Unfortunately, the available antihypertensive drugs which reduce peripheral resistance by impairing sympathetic nerve activity or by other means, cause side effects that are unpleasant to patients.

TRANDATE lowers the blood pressure primarily by blocking alpha-adrenoceptors in peripheral arterioles and thereby reducing the peripheral resistance. The drug differs from simple alpha-adrenoceptor blockers in that it concurrently blocks beta-adrenoceptors in the heart.

This beta-blockade protects the heart from the reflex sympathetic drive normally induced by peripheral vasodilatation and so the reduction in blood pressure is achieved without cardiac stimulation. Conversely increased reflex activity modulates the beta-blocking effect of the drug on the heart and the resting cardiac output is not significantly changed.

The resultant effects of TRANDATE are that the blood pressure is decreased, the cardiac output is maintained at rest and after moderate exercise, and the barostatic reflexes remain sufficiently active to avoid side effects associated with postural hypotension in most patients.

A further advantage of TRANDATE is that it does not cause the sedation or lethargy often associated with centrally-acting antihypertensive agents.

(labe

A NEW KIND OF A

Produces a more

Labetalol (Trandate)

Propranolol

Diagram to illustrate the unique profil

"The major haemodynamic dysfunction in uncomplicated essential hypertension is an increased peripheral vascular resistance associated with unchanged cardiac output. The desirable treatment, therefore, is to use drug treatments aimed at reducing peripheral resistance. The ideal

alol) TIHYPERTENSIVE

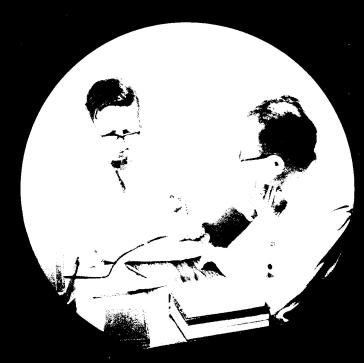
ormal circulation

Methyldopa

of action of Trandate in hypertension.

ntihypertensive drug should therefore be a asodilator with minimal cardiac effects. Pre-liminary reports indicate that labetalol provides such effects. Therefore, this compound must be considered a positive development on the older beta-adrenoceptor blockers."

Brit. J. clin. Pharmacol., 1976, 3 (Suppl.3), 757



IN PRACTICE

Trandate, the first alpha- and beta-adrenoceptor blocker, was specifically developed to treat hypertension.

Trandate Tablets (100mg and 200mg) are indicated in all grades of hypertension when oral anti-hypertensive therapy is desirable.

Trandate Injection is for intravenous use in hospitalised patients when rapid reduction of blood pressure is essential.

Trandate offers important advantages in practice

 High efficacy across the whole spectrum of hypertension

From the recently diagnosed mild hypertensive to drug-resistant cases including patients in hypertensive crisis.

- Low incidence of dose-limiting side effects The side effects usually associated with antihypertensive therapy are greatly reduced or absent.
- Minimum physiological disturbance
 Cardiac output is maintained and renal function is not adversely affected.
- Single drug therapy

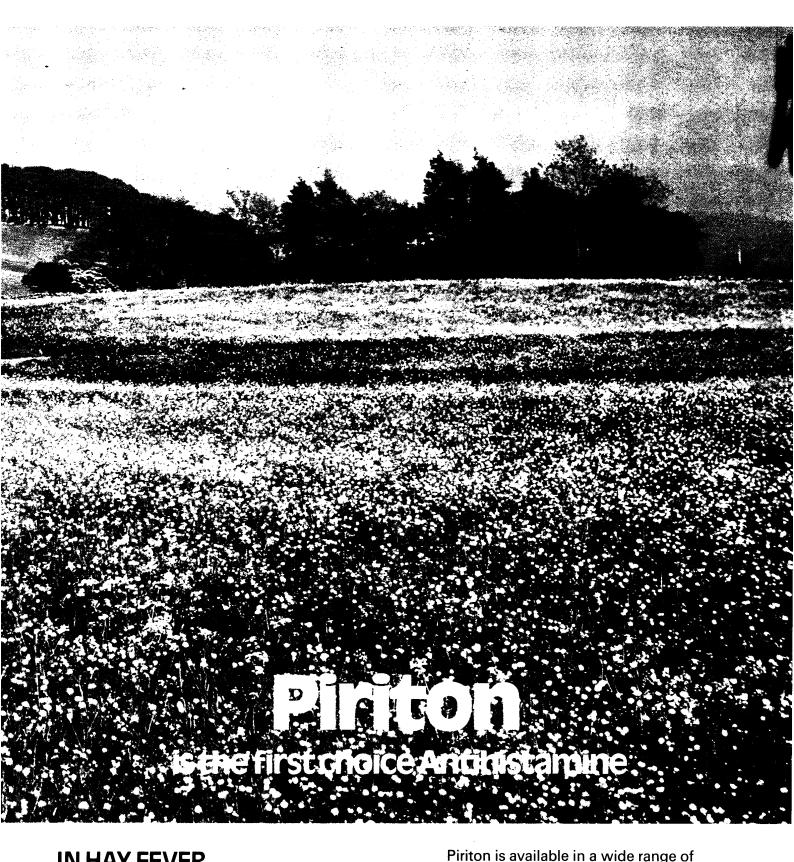
Hypertension is usually controlled with Trandate alone and complicated regimens involving other antihypertensives are unnecessary.

The use of Trandate Tablets in the United Kingdom is being monitored.

Full prescribing information and details of the procedure involved in monitoring patients on Trandate are available on request.



Trandate is a trade mark of ALLEN & HANBURYS LTD LONDON E2 6LA



IN HAY FEVER
INSECT BITES AND STINGS
FOOD ALLERGIES URTICARIA
ALLERGIC DERMATOLOGICAL
DISORDERS

preparations to suit each individual patient and each individual need:—
Piriton Tablets for routine therapy
Piriton Spandets for sustained action
Piriton Syrup for paediatric use

Piriton Injection for emergencies All Piriton preparations contain chlorpheniramine maleate BP.

Piriton-still setting the standards in Antihistamine therapy





Fybranta in diverticular disease

In a recent clinical trial published in the British Medical Journal,* a comparison was made between three forms of treatment for patients with symptomatic diverticular disease. The authors concluded from this study that Fybranta Tablets are more effective than a high-residue diet or a bulking agent.

Fybranta did not merely improve the symptoms, the paper states that Fybranta also normalized the pathophysiological changes which diverticular disease brings about.

60% of the patients were entirely symptom free after only one month on the Fybranta regime. In addition, in all patients stool weight increased significantly; transit time was reduced by nearly a half and intracolonic pressure was reduced to within normal limits.

Fybranta tablets are easily carried when the patient cannot eat at home. Chewed with a drink, they supply a day's cereal fibre in a highly acceptable form. Each tablet contains: Bran 2g.

*Brit med J (1976) 1, 989-990.



Convenient, chewable, prescribable bran tablets

CLASSIFIED ADVERTISEMENTS AND NOTICES

Classified advertisements are welcomed and should be sent to: Mr Robert Clarke, Advertisement Manager, *The Journal of the Royal College of General Practitioners*, Update Publications Ltd., 33/34 Alfred Place, London WC1E 7DP. Copy must be received by 1st of the month preceding the month of issue to ensure inclusion. Every effort will be made to include advertisements received after this date but publication cannot be guaranteed and the advertisement may have to be held over to the following issue.

The charge for space in this section is £5 per single column centimetre, plus 25p if a box number is required. Fellows, members and associates of the Royal College of General Practitioners may claim a ten per cent reduction.

The inclusion of an advertisement in this Journal does not imply any recommendation and the Editor reserves the right to refuse any advertisement. All recruitment advertisements in this section are open to both male and female applicants.

Readers are asked to mention The Journal of the Royal College of General Practitioners when replying to all advertisements.

DEVON AREA HEALTH AUTHORITY
PLYMOUTH HEALTH DISTRICT
VOCATIONAL TRAINING FOR
GENERAL PRACTICE

Applications are invited from fully registered doctors for five posts in this three year scheme commencing on the 1st September, 1977.

An introductory month in General Practice will precede two years to be spent in rotating hospital posts:

Rotations 1, 2 and 3 will be of 4 months' posts in Geriatrics, Accident and Emergency and Psychiatry, and 6 months posts in Obstetrics and Paediatrics.

Rotation 4 will be 6 months' posts in Accident and Emergency, General Medicine, Paediatrics and Obstetrics.

Rotation 5 will be 6 months' posts in General Medicine, Accident and Emergency, Psychiatry and Geriatrics.

The final 11 months will be spent in an approved training practice.

A half-day release course will be held in the academic term during the three years. A full programme of meetings is available at the Plymouth Postgraduate Medical Centre. Excellent library facilities are available

The Scheme is recognised for M.R.C.G.P., D.Obst.R.C.O.G., and D.C.H.

Single and married accommodation will be available during the hospital period.

Application forms and full details obtainable from Miss A. M. Ling, Senior Administrative Assistant, Plymouth General Hospital, North Friary House, Greenbank Terrace, Plymouth PL4 8QQ.

Forms should be returned by the 21st June; the short list will be drawn up on the 29th June, and it is hoped to interview on the 8th July, 1977.

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.

MERSEY REGIONAL COUNCIL FOR POSTGRADUATE MEDICAL EDUCATION AND

LIVERPOOL UNIVERSITY DEPARTMENT OF CHILD HEALTH

"CHILD DEVELOPMENT AND HANDICAP IN CHILDHOOD"

A day-release course will commence in October 1977 and continue over three University Terms. The course meets the requirements of the Department of Education and Science, providing appropriate training for School Medical Officers, and is also suitable for junior hospital staff and General Practitioners.

Further details and application forms from:

The Postgraduate Office, Faculty of Medicine, University of Liverpool, PO Box 147, LIVERPOOL L69 3BX. Tel: 051-709 3114

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UPDATE ART GALLERY



The Jerusalem Folio

This folio contains a selection of 34 of the drawings by Brian Lalor which were used to illustrate 'The Jerusalem Guide', reproduced in their original size. There are 8 panoramas, including views of the Old and New Cities, The Mount of Olives and Mount Zion, plus drawings of some of the famous churches, gates, fountains and other places of architectural and historical interest to be found in this fascinating city.

Large drawings $19\frac{1}{2}$ in x $14\frac{1}{2}$ in; Small drawings $14\frac{1}{2}$ in x $9\frac{1}{2}$ in.

Price £3.00, including postage and packing.

Rowlandson's Medical Caricatures

The medical caricatures of Thomas Rowlandson have been appreciated and sought after by doctors from his own time to the present day, but original prints are expensive and difficult to obtain. So it is with pleasure that Update Publications are able to offer a limited number of sets of facsimiles of four of Rowlandson's best known prints — 'Medical Dispatch', 'The Anatomist', 'A-going, A-going' and 'Bath Races' — taken from originals executed between 1800 and 1812, which are in their own collection. These facsimiles were printed by the ancient craft process of collotype, on a high quality, rag-based paper specially made for this edition, in order to reproduce the colour and texture of Rowlandson's original etchings as closely as possible.

The four facsimiles are presented in the original size in matched coloured mounts, each measuring 18½ in x 13½ in, ready for framing.

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LEICESTERSHIRE AREA HEALTH AUTHORITY (Teaching)

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Applications are invited from recently qualified Medical Graduates for a course of training starting November this year. This is a three year programme recognised by the Royal College of General Practitioners comprising:

- 1. An introductory period in a teaching general practice.
- 2. Four successive six month hospital appointments at Senior House Officer grade in any combination of the following specialties: General Medicine, Paediatrics, Obstetrics, Accident & Emergency Surgery with Orthopaedics, Psychiatry, Anaesthetics and General Medicine with Geriatric Medicine, E.N.T./ Dermatology. These posts are at the Leicester Royal Infirmary, Leicester Royal Infirmary Maternity Hospital, Leicester General Hospital, The Towers Hospital and Groby Road Hospital, Leicester.
- 3. A final period in a teaching General Practice with day release for training in Ophthalmology, Dermatology, E.N.T. and Paediatrics.

A half day study programme will be continuous throughout the hospital period with the General Practitioner Trainers and the Academic Departments at the University of Leicester Medical School.

Single accommodation will be available throughout the hospital appointments. Married accommodation may be available.

Application forms and further details to be obtained from the District Administrator, South West District, The Leicester Royal Infirmary, Infirmary Square, Leicester LE1 5WW.

THE UNIVERSITY OF SHEFFIELD FACULTY OF MEDICINE

Intensive G.P. Refresher Course Monday, 19 — Friday, 23 September, 1977

PAEDIATRICS

This course, organised by the University Departments of Paediatrics and Community Medicine, will be held at the Children's Hospital, Sheffield.

The Hospital will be thrown open to the participants and will seek to bring them into close contact with a wide range of modern paediatric practice.

Accommodation will be available in a University Hall of Residence.

This course is organised under Section 63 of the Public Health Act, 1968. The fee for those not eligible under Section 63 will be £25.00.

The course is limited to 25 doctors and enquiries and applications (stating whether or not residential accommodation is required) should be addressed to:

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

Closing date: 1 July, 1977.

Shortest Acting

"With doses up to 1 mg, the natriuresis was largely complete within 3 hrs."3 "It (Burinex) has a short duration of action, being virtually complete in 3 hrs."4

Fast Acting

"The rapid absorption from the gastrointestinal tract is reflected in the brisk diuresis established within the hour. "Its (Burinex Injection) onset of action is

within 10 min."2

"Burnetanide is rapidly absorbed from the gut."3

Clinically Effective "Fourteen patients showed a good diuretic response on burnetanide where previous response on ounceannee where previous treatment with frusemide had proved either unsatisfactory or too slow.5 "An impressive diminution of the signs of

bnimousta oedema was seen in most patients and in some the clearance of alveolar oedema was dramatic."6

"Based upon our experience with the use of burnetanide in several hundreds of patients and the detailed studies reported above, it may be concluded that this new diuretic agent is a very useful drug in the treatment of congestive cardiac failure.77

"Our study... confirms that bumetanide is a potent diuretic effective over a wide dose range and in a variety of clinical conditions."

Well tolerated

"Burinex was extremely well tolerated." 12

"Bumetanide was well tolerated by patients." "Overall, burnetanide showed itself to be a safe and effective diuretic when administered to severely ill patients in a

The correct amount of K

a busy hospital milieu."5

"It is known from short-term studies that 1 mg. of bumetanide increases the excretion of potassium by 10-15 mmol daily (Asbury et al, 1972; Olesen et al, 1973; Davies et al, 1974). Two tablets of the combined preparation Burinex K contain 1 mg. of burnetanide and 16 mmol of potassium."8

At the correct time

"35% of the potassium chloride is released by one hour, the rest being released over a period of six hours."4

The Morning OR Evening diuretic

"The rapid onset and short duration of action of loop diuretics are clearly desirable when a rapid diuresis is indicated, and when given in the evening to patients with chronic heart failure, the short duration of action can ensure a good nights sleep undisturbed by nocturia or breathlessness,"9

"The use of potent and short-acting diuretics such as bumetanide allow the Physician and patient scope to decide upon the most appropriate time for administration and so reduce major disruptions in the patient's daily routine."10

"Patients who go out to work may find Burinex K given in the evening more socially acceptable."

Patients prefer Burinex K

"These results indicate that when longterm diuretic/potassium supplement therapy is required, Burinex K is a more acceptable regimen to the patients than one in which diuretic + Slow K are given

"Patients showed a highly significant preference to take two tablets on one occasion (Burinex K) rather than two different types of tablet on three separate occasions (Lasix + K)."14

But of course the decision is yours.



Tablets contain 0.5 mg burnetanide with a slow release core of 573 mg (7.7mEq) of potassium chloride.

- 1. Postgrad. Med. J., 51, 10, (1975)
- 2. Danish Med. Bull., 21, 63, (1974)
- 3. Clin. Pharm. Ther., 15, 141, (1974)
- 4. J. Int. Med. Res., 2, 314, (1974)
- 5. Brit. J. Chin. Prac., 28, 311, (1974)
- 6. Brit. J. Clin. Prac., 29, 7, (1975) 7. Postgrad. Med. J., 51, (Suppl. 6), 54, (1975)
- 8. Brit. J. Clin. Prac. 30, 11-14 (1976)
- 9. Leading Article, Brit. Med. J., 2, 521, (1975)
- 10. J. Int. Med. Res., 3, 241, (1975)
- 11. Postgrad. Med. J., 51, (Suppl. 6), 71, (1978) 12. Acta. Med. Scand., 193, 119, (1973)

- 13. J. Int. Med. Res., 3, 104, (1975) 14. J. Int. Med. Res., 4, 37-41 (1976)

Full prescribing information available from



Leo Laboratories Limited. Hayes Gate House, Hayes, Middx.