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



At best, antacids provide only temporary relief. Maxolon not only relieves the symptoms effectively, it also prevents them arising – something antacids cannot achieve. A month's treatment with Maxolon offers freedom from symptoms in 4 out of 5 dyspepsia patients,1 and it is much more convenient to take.

So next time a patient presents with dyspepsia, prescribe Maxolon. That way he can stop worrying about his symptoms, and so can you.

1 Based on published reports in over 1,100 patients.

Full prescribing information is available on request.

PL 0038/0095, 0098, 5040, 5041

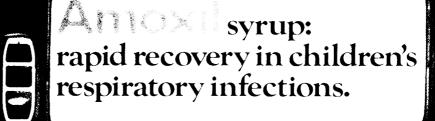


Maxolon* (metoclopramide) is a product of **Beecham Research Laboratories,** Brentford, England.

BRLOO5 *regd.







Rapid Recovery.

Of 243 children with various upper and lower respiratory tract infections 84° responded to Amoxil within 3 days, "... a speed of action that would prevent any permanent damage from the infective process within the respiratory tract."¹

Amoxil Syrup-"well liked by all the children."1

Simple trouble free dosage.

Low incidence of side effects?

makes all the difference everywhere





Aureocort*

(Chlortetracycline / Triamcinolone Acetonide)

Cream-Ointment-Spray

The Classical answer to infected dermatoses

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*Aureocort is a Registered Trademark



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.

(lab

AUNIQUEPROFILE

Concurrent alpha- and be

Produces a more

Labetalol (Trandate) Propranolo!

Diagram to illustrate the unique profi

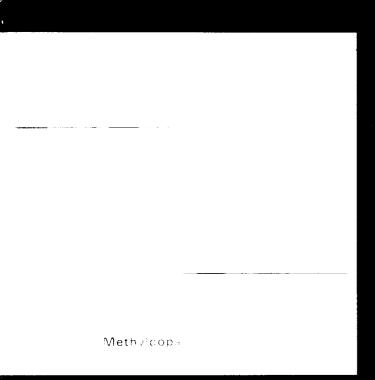
"The major haemodynamic dysfunction in un-complicated essential hypertension is an increased peripheral vascular resistance associated with unchanged cardiac output. The desirable treatment, therefore, is to use drug treatments aimed at reducing peripheral resistance. The ideal

alol)

IN HYPERTENSION

a- adrenoceptor blockade

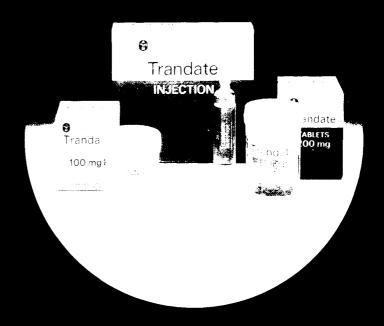
normal circulation



of action of Trandate in hypertension.

antihypertensive drug should therefore be a vasodilator 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.

Limitate officer argumentally a house agencies processes.

 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

Piriton is available in a wide range of 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

Full prescribing information is available on request. Piriton and Spandet are trade marks of ALLEN & HANBURYS LTD LONDON E2 6LA

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.

THE LONDON HOSPITAL MEDICAL COLLEGE (University of London)

"PSYCHOTHERAPY IN GENERAL PRACTICE"

A new series of fortnightly seminars will be held at The London Hospital on Thursdays at 2.15 p.m., starting on 1st September, 1977. These seminars are run on 'Balint' lines and are conducted by Dr. Murray Cox, Consultant Psychotherapist, Broadmoor Hospital and Hon. Lecturer in Psychotherapy, The London Hospital Medical College. Dr. Cox was a General Practitioner for ten years. Interested applicants should write as soon as possible to:

Secretary to Professor Pond, Department of Psychiatry, The London Hospital Medical College, Turner Street, London, E1 2AD.

IPSWICH HEALTH DISTRICT (Suffolk Area Health Authority)

VOCATIONAL TRAINING FOR GENERAL PRACTICE THE IPSWICH SCHEME

A single vacancy is available on the Ipswich Vocational Training Scheme commencing on 1st August, 1977. Please apply to Clinical Tutor, Dr M. Edwards, Heath Road Wing, Ipswich Hospital, Ipswich, Suffolk.

ACCOMMODATION IN LONDON

Australian general practitioner, planning to visit Britain, wishes to rent a house for three adults and three children, in or near London (preferably St John's Wood area), for part or all of December 1977 and January 1978. If preferred, would exchange family home in Melbourne for this period. References can be provided. Enquiries should be directed to Dr Howard Goldenberg, Station Street, Diamond Creek 3089, Victoria, Australia.

UNIVERSITY OF NOTTINGHAM 'MEDICAL SCHOOL

M.R.C.G.P. COURSE & FUTURE ROLE OF THE GENERAL PRACTITIONER

29th September — 1st October 1977

A course for G.P. principals designed to familiarise G.Ps. with the current form and structure of the M.R.C.G.P. exam, and explore the present and future role of family practice. It is approved under Section 63 for 5 sessions.

The course will be residential in a Nottingham University Hall of Residence, and the number of places will be limited to 50.

Further information and application forms can be obtained from the Postgraduate Office, University Hospital and Medical School, Clifton Boulevard, Nottingham NG7 2UH. Telephone (0602) 700111, ext. 3461. The registration fee, including full residence, will be £25.

Newport, Isle of Wight — vocationally trained fifth partner sought by established group practice in this pleasant market town. Purpose converted surgery held on lease. Appointments system and full ancillary staff. All partners have appointments in hospitals or local authority. Practice is recognised for vocational training and the teaching of medical students from Southampton University. Vacancy is from mid-August. For further details contact Dr. Sandiford and Partners, 27 Pyle Street, Newport, I.W., PO30 1JR, Tel. Newport 3525.

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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 treatment with frusemide had proved either unsatisfactory or too slow.55

"An impressive diminution of the signs of pulmonary oederna 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."7 "Our study...confirms that burnetanide 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 a busy hospital milieu."5

The correct amount of K

"It is known from short-term studies that 1 mg. of burnetanide 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 I 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