a wall or lie flat on a surface, are available to faculties who wish to borrow them for meetings: practice information systems, A4 folders (Dr Metcalfe), Shipston-on-Stour Medical Centre, health centres, problem orientated records (Southampton University), A4 folders (RCGP exhibit), stencilled labels, smoking and health, social workers, Wellingborough Medical Centre (constructed by the architects), problem orientated medical records (Dr

Metcalfe), and Norton Medical Centre (Dr G. N. Marsh). To obtain any of these loan exhibits, please contact Mrs J. Mant, Secretary to the Practice Organization Committee at 14 Princes Gate, London SW7 1PU.

### MEDICAL NEWS

#### **CHIEF SCIENTIST**

Professor A. J. Buller, ERD, B.SC, FRCP, Professor of Physiology and Dean of the Faculty of Medicine at the University of Bristol, has been appointed Chief Scientist to the Department of Health and Social Security on secondment from the University.

Professor Buller succeeds Sir Douglas Black, who has relinquished the post on being elected President of the Royal College of Physicians of London. Professor Buller took up his appointment, initially on a part-time basis, on 3 January 1978.

#### **TEL AVIV UNIVERSITY**

Dr P. Freeling, FRCGP, Senior Lecturer at the General Practice Teaching and Research Unit, St George's Hospital Medical School, London, was appointed Visiting Senior Lecturer in the Department of Family Medicine at the University of Tel Aviv in December 1977/January 1978.

# ROYAL AUSTRALIAN COLLEGE OF GENERAL PRACTITIONERS

The 1977 Rose Hunt Award of the Royal Australian College of General Practitioners has been made to Dr R. F. F. Harbison of Richmond, Victoria, Australia. Dr Harbison has been actively associated with the Royal Australian College for many years and was the first Director of Training and later the first Chairman of the Family Medicine Programme.

## REIMBURSEMENT FOR ANCILLARY STAFF

The Department of Health and Social Security has agreed that the employer's

contributions for National Insurance and superannuation in respect of general practitioners' ancillary staff will be reimbursed under the Ancillary Staff Scheme from 1 April 1978.

### COLLEGE OF FAMILY PHYSICIANS OF CANADA

College of Family Physicians Research Award

The annual award of \$1,000, sponsored by Canadian Family Physician, for the author of the best article on original research published during the previous year in Canadian Family Physician has been awarded to Dr A. S. Dixon of Hamilton, Ontario, for his series of articles "Survey of a Rural Practice: Rainy River 1975".

Honorary membership

Honorary membership of the College of Family Physicians of Canada has been conferred upon Dr N. J. Pisacano, Executive Director of the American Board of Family Practice in Lexington, Kentucky and Dr R. B. Salter, President of the Royal College of Physicians and Surgeons of Canada and Chief of Orthopaedics at the Hospital for Sick Children, Toronto.

Family Physician of the Year Award

Recipients of this award are physicians who have been in family practice for a minimum of 15 years and who have been members of the College of Family Physicians of Canada for at least ten years. The 1977 winner is Dr Claude Murphy of Winnipeg.

# JOINT COMMITTEE ON POSTGRADUATE TRAINING FOR GENERAL PRACTICE

The Joint Committee on Postgraduate Training for General Practice and the

Royal College of General Practitioners have approved the vocational training scheme at St George's Hospital, Tooting.

The following vocational training schemes have been reapproved: Reading Vocational Training Scheme 3, St Mary's Hospital, London, Preston, Wigan, Stockport, Fife, and the Lothians. These schemes are recognized by the Royal College of General Practitioners for the purpose of the MRCGP examination.

### BRITISH TUBEROUS SCLEROSIS ASSOCIATION

A British Tuberous Sclerosis Association has been formed and those interested should write to Mrs Ann Hunt, Church Farm House, Church Road, Northleigh, Oxfordshire OX8 6TX.

### WORLD HEALTH ORGANIZATION

A Working Group of the World Health Organization on the Organization and Operation of Long-term Care Services met at Uppsala from 12 to 15 April 1977

A summary of its report is now available from the WHO Regional Office for Europe, 8 Scherigsevej, DK2100, Copenhagen, Denmark.

## NHS SUPPLY WORKING PARTY

The NHS Department of Health Working Group on NHS Supplies has held its first meeting with Mr Brian Salmon as Chairman.

The terms of reference are: "To examine the present arrangements for procuring NHS supplies (excluding drugs and other items prescribed under

the Family Practitioner Services) and to make recommendations on how to make better use of resources by improving these arrangements, with particular regard to the proposal to establish a Supply Board."

#### **GROUP PRACTICE PREMISES**

Dr Gerard Vaughan, Conservative Party health spokesman, in an interview with the Pharmaceutical Society, is reported to have said: "I should like to see a reversal of the trend towards health centres, which have in too many cases damaged the close relationship which should exist between patient, general practitioner, and pharmacist. I believe this would mean that a Conservative Government would have to make it easier financially for general medical practitioners to set up group practices outside health centres. This might even involve giving them help towards staffing."

#### Reference

The Pharmaceutical Journal (1977). 219, 368.

#### **LEVONORGESTREL**

The World Health Organization and the

British Pharmacopoeia Commission have officially adopted the name 'Levonorgestrel' for the active isomer of the progestogen, norgestrel, which was formerly known as D-norgestrel. For products containing both the active and inactive isomers of norgestrel the term DL-norgestrel is used.

#### Reference

Family Planning Association (1977). Reviewed List of Contraceptives 1977-1978, p.2. London: FPA.

### COMPLAINTS AGAINST GENERAL PRACTITIONERS

The number of appeals by patients to the Secretary of State for Social Services against decisions adverse to the patient by family practitioner committees were as follows: 1975—65, of which three were successful; 1976—52, of which six were successful.

#### COST OF THE NHS

Mr Roland Moyle, Minister of State (Health) reported that Government spending on the NHS in England per head of population has been as follows:

£ p 35.75

1971-2	40.19
1972-3	45.57
1973-4	51.44
1974-5	72.06
1975-6	97.69

#### Reference

Hansard (1977). Official Report. No. 1074, 931, col. 450.

### PATENT FOR MICRO-ORGANISMS

The United States Appeal Court on 6 October 1977 allowed the Upjohn Company to patent the micro-organism Streptomyces vellosus.

This organism is used in the production of lincomycin. It had been argued previously that forms of life did not conform to the United States' patent law categories.

The Appeal Court ruled, however, that micro-organisms had become "important tools" in the pharmaceutical industry and there was no reason to deprive such a tool's "creator or owner" of the protection and advantages of the patent system.

#### Reference

Pharmaceutical Journal (1977). 219, 370.

### LETTERS TO THE EDITOR

### MEDICATION FOR THE MENOPAUSE

Sir,

We read with great interest your editorial on "Medication for the Menopause" (October *Journal*, p.579). However, we should like to clarify one point regarding the effects on blood clotting of hormone replacement therapy.

The only published double-blind trial on the effects of oestrogen replacement therapy at the menopause on blood clotting has been our own report on 'Premarin', to which you refer (Coope et al., 1975). This indicated that there was acceleration of certain blood clotting tests after three months. Your other reference to clotting studies was to a letter by Aylward et al. (1976) which appeared in the British Medical Journal. This contained the interesting and important suggestion that piperazine oestrone sulphate ('Harmogen') might

not accelerate these clotting tests.

As a result of this preliminary communication, we began, 12 months ago, a double-blind cross-over trial on this preparation in menopausal patients. Meanwhile, we would suggest that your readers should regard the absence of accelerating effects on blood clotting by piperazine oestrone sulphate as a possibility which has not yet been proven.

J. COOPE L. POLLER

The Waterhouse Bollington Nr Macclesfield SK10 5JL.

#### References

Aylward, M., Maddock, J. & Rees, P. (1976). British Medical Journal, 1, 220.
Coope, J., Thomson, J. M. & Poller, L. (1975). British Medical Journal, 4, 139-143.

Sir,

In your editorial (October Journal, p.579) you state that the General Practitioner Research Group (1977) found no clinical difference in effective treatment of menopausal symptoms between piperazine oestrone sulphate ('Harmogen') and ethinyl oestradiol; yet it concludes that the former is clearly preferred on the grounds of safety.

For over 20 years I have prescribed ethinyl oestradiol in doses of 0.01 mg (one fifth of the amount in the majority of contraceptive pills) per day or alternate days, and have found it to be effective in controlling menopausal symptoms. The minute dose has yielded tremendous dividends in terms of relief to the patient and gratitude at minimum cost, and no adverse effects have been reported.

The commonest, most embarrassing and uncomfortable symptom of 'flushing' is easily controlled and the dose