

NEW
unique DDSA dosage form



Nitrazepam 10 mg tablets
now available, prescribed as

REM NOS 10 mg

In addition to the Remnos 5 mg strength



Remnos 5 mg tablets



Remnos 10 mg tablets

For Patient convenience

— many patients require 2x5 Nitrazepam tablets at night. Now one tablet Remnos 10 mg fulfills this need

Prescribing convenience

— the distinctive yellow colour of tablets Remnos 10 mg clearly distinguishes this dosage form from tablets Remnos 5 mg thus avoiding the likelihood of confusion

Cost saving*

1x100 Remnos 10 mg tablets costs 10% less than 2x100 Remnos 5 mg

Nitrazepam 10 mg only available as tablet Remnos 10 mg

Availability:

packs of 100 and 500 tablets each containing Nitrazepam BP 10 mg

* 100 tablets Remnos 10 mg cost £2.50

Further information available on request from DDSA Pharmaceuticals, 310 Old Brompton Road, London SW5 9JQ



NystanTM-tp

(nystatin)

**for even the most recalcitrant of
vaginal candidal infections**

NYSTAN and NYSTAVESCENT are Trade Marks of E. R. Squibb and Sons Limited

Full prescribing information available: The Technical Services Department, E. R. Squibb and Sons Limited,
Regal House, Twickenham, Middlesex, TW1 3QT.



Reflux oesophagitis

the role of gastric acid

Number 1
in a series

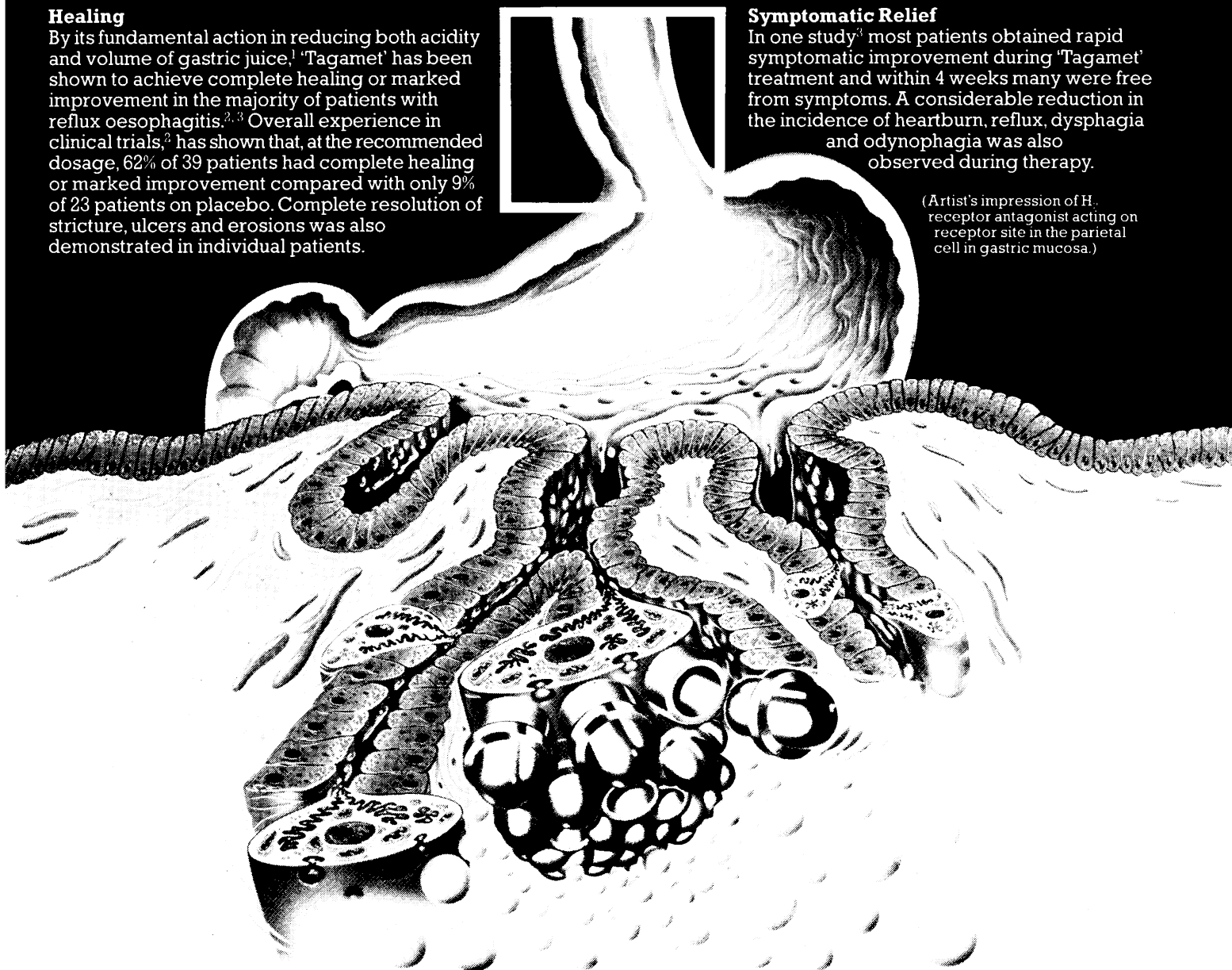
Healing

By its fundamental action in reducing both acidity and volume of gastric juice,¹ 'Tagamet' has been shown to achieve complete healing or marked improvement in the majority of patients with reflux oesophagitis.^{2,3} Overall experience in clinical trials,² has shown that, at the recommended dosage, 62% of 39 patients had complete healing or marked improvement compared with only 9% of 23 patients on placebo. Complete resolution of stricture, ulcers and erosions was also demonstrated in individual patients.

Symptomatic Relief

In one study³ most patients obtained rapid symptomatic improvement during 'Tagamet' treatment and within 4 weeks many were free from symptoms. A considerable reduction in the incidence of heartburn, reflux, dysphagia and odynophagia was also observed during therapy.

(Artist's impression of H₂ receptor antagonist acting on receptor site in the parietal cell in gastric mucosa.)



Tagamet

 reduces gastric acid secretion

References

1. Pharmacological evaluation of cimetidine, a new Histamine H₂-Receptor Antagonist. (1975) Brit. J. clin. Pharmacol., 2, 481.
2. Data on file (March 1977) Smith Kline & French.

3. Cimetidine in the treatment of oesophagitis. (1977) Proceedings of the Second International Symposium on Histamine H₂-Receptor Antagonists. Excerpta Medica, p. 297.

'Tagamet' (cimetidine) is available as 200mg film-coated tablets, 200mg/5ml syrup and 200mg/2ml ampoules.

'Tagamet' is a trade mark.
Full prescribing information is available from:-

SK&F
a SmithKline company

Smith Kline & French Laboratories Limited
Welwyn Garden City
Hertfordshire AL7 1EY
Telephone: Welwyn Garden 25111

TG:AD18

Vertigo

the inside view*

Vertigo, tinnitus, hearing loss

* Photomicrography of hair cells and semicircular canals of the inner ear by Lerner and Nits

- Serc** Reduces the frequency of vertigo attacks in double-blind trials
- Serc** Reverses Meniere's Disease - vertigo, tinnitus and deafness
- Serc** Restores labyrinthine circulation

The wealth of long-term clinical studies supporting these findings is available on request

Serc®

betahistine

restorative treatment in Meniere's Disease

For further information, contact your doctor or pharmacist.
Serc is a registered trademark of the Searle Corporation, USA.
Searle Corporation, 2900 Central Expressway, Kenilworth, NJ 07033, USA.
Searle Corporation, 2900 Central Expressway, Kenilworth, NJ 07033, USA.
Searle Corporation, 2900 Central Expressway, Kenilworth, NJ 07033, USA.

Prescribing data

Indications: Vertigo, tinnitus and/or hearing loss, associated with Meniere's disease. **Action:** Betahistine is an orally effective treatment for Meniere's syndrome which appears to exert its effect by restoring the endolymphatic balance. Long-term controlled trials have established the efficacy of betahistine on all the principal symptoms of Meniere's syndrome, not only reducing vertiginous episodes and tinnitus, but also arresting hearing loss. **Dosage:** 1 or 2 tablets three times a day, taken preferably with meals. Clinical evidence is based on 3 months continuous treatment. **Contra-indications:** Phaeochromocytoma. **Precautions:** Clinical intolerance to Serc in bronchial asthma patients has not been shown, but caution should be exercised when administering this histamine analogue to such patients. High dosage animal tests have shown no teratogenic properties, but the usual precautions should be observed when administering Serc to patients in pregnancy. **Presentation:** Each tablet contains 8 mg betahistine dihydrochloride, available in bottles of 100 tablets at basic NHS of 7.8p per tablet. **Product licence number:** 0512/5005.

food ...or thought

A sensible diet is an important factor in the management of gastro-intestinal complaints. Sensible medication is another. This is where Libraxin comes in.

Psychological factors are considered important in the management of many illnesses, but perhaps no more so than in gastro-intestinal complaints. In some, for example irritable colon, the emotions

are thought to have an aetiological role; in others, for example peptic ulcer, they may influence the clinical manifestations and the subsequent treatment of the patient.

Libraxin helps to improve the prognosis by altering the patient's outlook whilst at the same time relieving the physical symptoms by decreasing hypermotility and hypersecretion in the gut.

LIBRAXIN

For the treatment of a wide range of gastro-intestinal disorders with an emotional component, including nervous dyspepsia, peptic ulcer, cardiospasm, pylorospasm, nervous or irritable colon.

Libraxin is the trade mark for pharmaceutical preparations containing chlordiazepoxide and clidinium bromide.

References

Cromwell, H.A., *Med.Tms*(NY), 1968, 96, 933
Head, H.B., and Hammond, J.B., *Amer.J. dig. Dis.*, 1968, 13, 540
McHardy, G., *et al.*, *Gastroenterology*, 1968, 54, 508

Full prescribing information is available



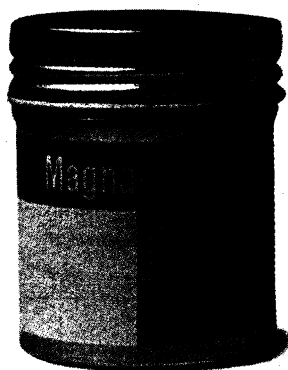
Roche Products Limited
PO Box 2LE, 15 Manchester Square, London W1A 2LE

J486012/577

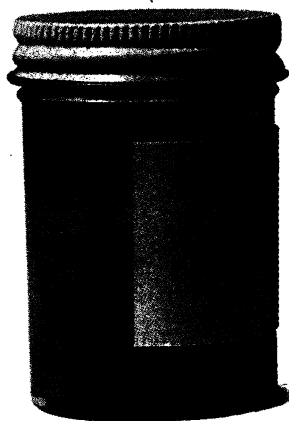


successful scriptwriting

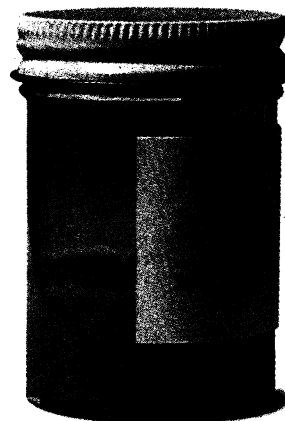
A FIRST CHOICE IN CHEST INFECTIONS



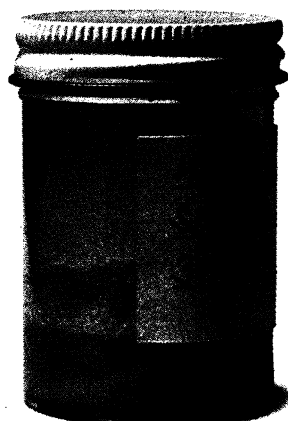
Magnapen :



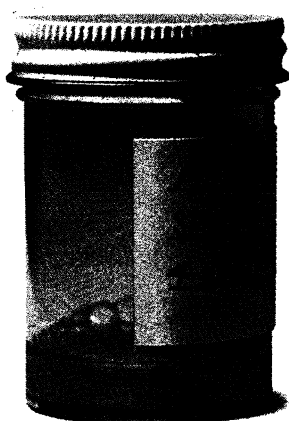
rapid ...



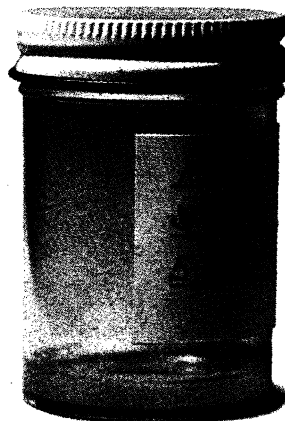
reliable ...



resolution ...



of infection ...



in bronchitics

Rapid: Magnapen's powerful bactericidal action resolves infective episodes quickly, and helps to minimise lung damage. Magnapen works to get the patient back to normal life as fast as possible.

Reliable: Magnapen provides the broad spectrum activity of ampicillin *plus* reliable anti-staphylococcal activity. Magnapen deals with all the pathogens likely to cause problems, including the staphylococci frequently implicated in post-influenzal infection.

Magnapen: Magnapen (ampicillin and flucloxacillin in equal parts) is available as capsules, vials for injection, and fruit flavoured syrup.

Full prescribing information on the use of Magnapen* in severe infections is available on request.

Magnapen



Beecham Research Laboratories Brentford, England. A branch of Beecham Group Limited

PL 0038/0089, 0090, 0120 *regd.

BRL 207

1928 Nitrites
1936 Thiocyanates
1949 Ganglion Blockers
1952 Reserpine
1954 Alpha-Blockers
1957 Oral Diuretics
1960 Neurone Blockers
1963 Methyl dopa
1969 Beta-Blockers

Trandate

(labetalol)

the first alpha-beta-blocker

**A SIGNIFICANT ADVANCE IN THE TREATMENT OF
HYPERTENSION**

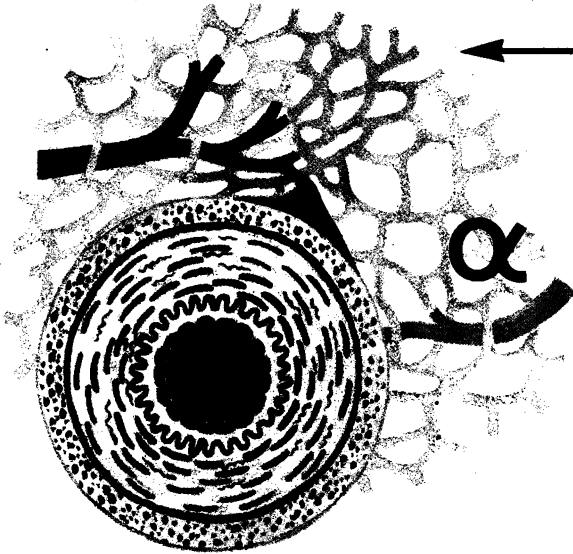
FURTHER INFORMATION APPEARS OVERLEAF

A MORE RATIONAL TREATMENT FOR HYPERTENSION

← THE IMPORTANCE OF ALPHA-BLOCKADE

In uncomplicated essential hypertension, peripheral resistance is raised and cardiac output is normal. The most rational way to lower the blood pressure is, therefore, to decrease the peripheral resistance without adversely affecting cardiac function.

Trandate lowers the blood pressure primarily by incomplete competitive blockade of the alpha-adrenoceptors in peripheral arterioles thereby reducing peripheral resistance. Sufficient sympathetic activity remains to avoid symptoms associated with postural hypotension in most patients.



BALANCED BY BETA-BLOCKADE →

The resulting fall in peripheral resistance would, with simple alpha-blocking drugs and vasodilators, result in a reflex tachycardia which is unpleasant to patients and may be harmful. But the beta-blocking component of Trandate's unique profile of activity counteracts this effect and reduction of blood pressure is achieved without cardiac stimulation.

However, in contrast with simple beta-blocking drugs, the cardiac output is not *reduced* at rest and after moderate exercise because Trandate's beta-blocking action is balanced by the increased reflex sympathetic drive resulting from the main alpha-blocking action.



Trandate

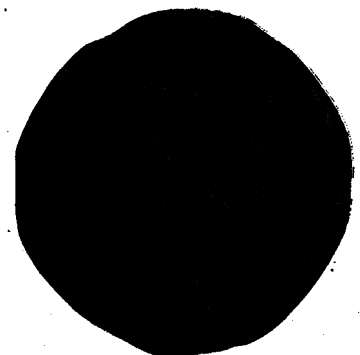
(labetalol)

A UNIQUE PROFILE IN HYPERTENSION

- Produces a more normal circulation
- Is effective in all grades of hypertension
- Has a low incidence of use-limiting side effects
- Permits single-drug therapy improving patient compliance



Full prescribing information is available on request.
Trandate is a trade mark of
ALLEN & HANBURY LTD LONDON E2 6LA.





UPDATE BOOKS



Rehabilitation Today, a new Update book, gives an up-to-date account of all aspects of rehabilitation. The book will be of value to all doctors caring for patients who require rehabilitation, including rheumatologists, orthopaedic surgeons, geriatricians, psychiatrists and, of course, general practitioners. Many other doctors will also be interested in it, as will members of all the ancillary professions related to rehabilitation.

Contents:

1. Introduction *Stephen Mattingly* 2. The Need for Rehabilitation *Michael D. Warren* 3. Hospital Services *Stephen Mattingly* 4. Medical Rehabilitation Centres *Stephen Mattingly* 5. Community Services *A. P. H. Randle* 6. Resettlement in the Community *M. Broome and J. J. McMullan* 7. Voluntary Organisations Concerned with Disabled People *James G. Sommerville* 8. Employment and Training Services *Stephen Mattingly* 9. Special Centres *Stephen Mattingly* 10. Demonstration Centres *George Cochrane and Hugh Glanville* 11. Designing for the Disabled *C. Wycliffe Noble* 12. Aids and Appliances *P. J. R. Nichols and E. Williams* 13. Wheelchairs and Powered Vehicles *C. J. Goodwill* 14. The Handicapped Child *K. S. Holt* 15. The Young Amputee *Ann Hamilton, E. Williams and P. J. R. Nichols* 16. Rehabilitation of the Elderly *A. N. Exton-Smith* 17. The Elderly Lower Limb Amputee *Ann Hamilton, E. Williams and P. J. R. Nichols* 18. The Severely Disabled *P. J. R. Nichols and E. Williams* 19. The Mentally Ill *D. H. Bennett* 20. The Neurological Patient *E. B. Casey and A. D. Tupper* 21. The Newly Blind *Tony Aston* 22. Deafness *D. Garfield Davies* 23. The Arthritic Patient *M. A. Chamberlain and V. Wright* 24. Helping the Injured *M. G. Molloy and C. B. Wynn Parry* 25. Paraplegia *J. R. Silver*

To order your copy of this book, complete the form below and send it with your remittance to :

**Update Publications Ltd,
33/34 Alfred Place,
London WC1E 7DP.**

The low price of **£4.95** + 70p p & p is made possible by our policy of direct sale to the reader. This bypasses the middle-man and enables us to sell the book for considerably less than we would have to charge if it were sold through bookshops.

ORDER FORM REHABILITATION TODAY

Please type or print your name and address clearly in block capitals. Cheques or Postal Orders should be made payable to Update Publications Ltd.

Number of copies required

Remittance enclosed
(£5.65 per copy including p&p)

NAME

ADDRESS

.....

.....

His Daily Dose

in angina or hypertension, or both.



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.



Beta-Cardone (sotalol hydrochloride) is a trademark of
DUNCAN, FLOCKHART & CO. LTD., LONDON E2 6LA.
Full information is available on request.



Amoxil success everyday

Otitis media

Amoxil is quoted as 'the treatment of choice' in otitis media in children under five in a recent expert review in the Practitioner.¹

Bronchitis

"In my opinion, the most straightforward treatment of this condition, in patients not allergic to penicillin, is amoxycillin... taken at the first sign of increasing sputum purulence."²

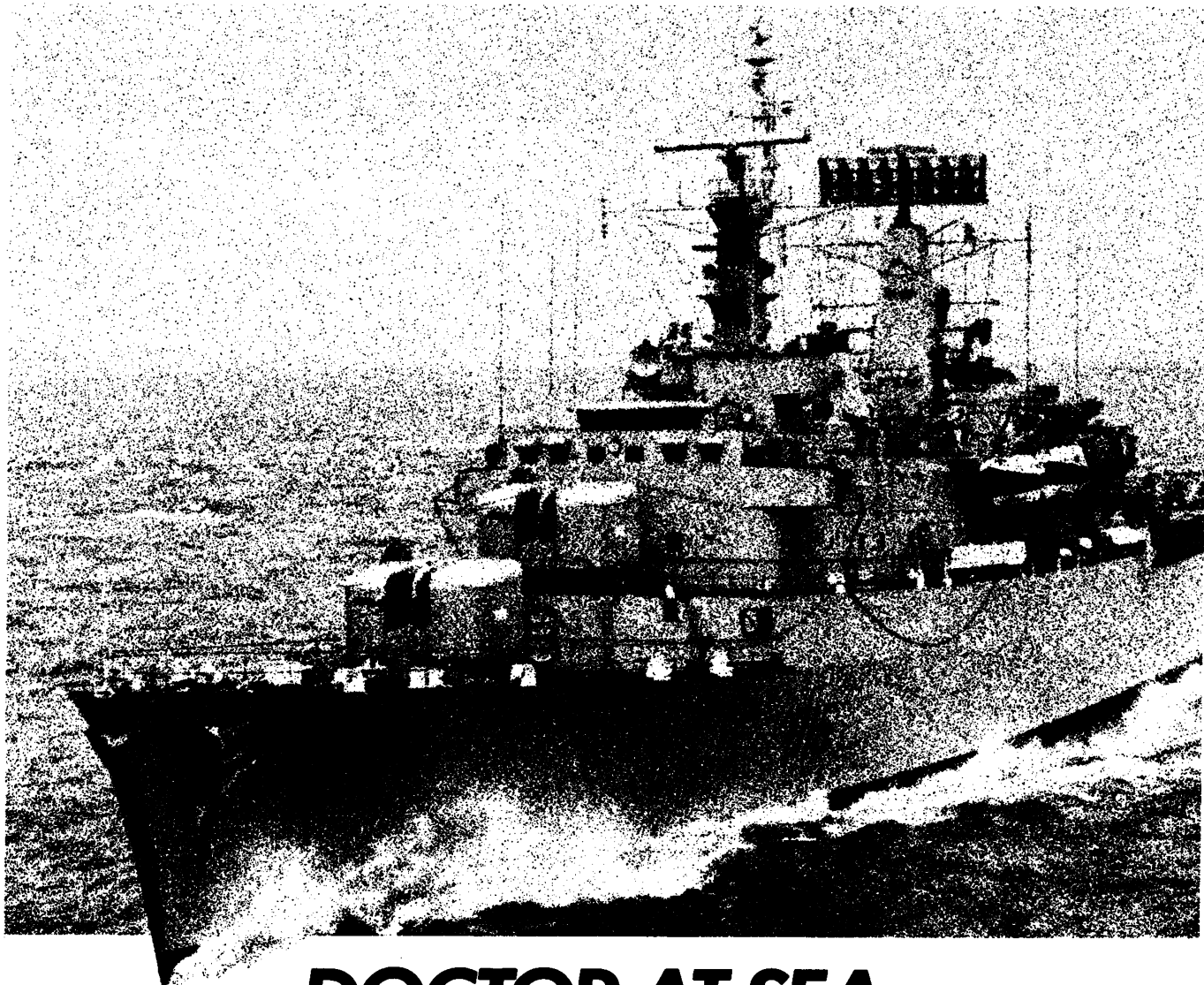
Other respiratory infections

In various upper and lower respiratory infections, Amoxil has been shown to achieve 84% response within three days of the commencement of treatment in 243 children studied.²

References 1. Practitioner (1977) **219**, 449-455. 2. Brit. J. Clin. Pract. (1975), **29**, (8), 203.

Further information on Amoxil (regd.) amoxycillin is available on request to the company.
Bencard, Great West Road, Brentford, Middx.

 **Bencard**



DOCTOR AT SEA.

As a qualified doctor you can join the Royal Navy on a 5-year Short Career Commission.

You will have the opportunity of serving in ships, in submarines, or with the Royal Marines Commandos, and in a wide variety of Naval Establishments.

Career counselling will help you plan your future.

There are opportunities for approved General and Higher Professional Training in preparation for careers in general practice and the hospital disciplines. Similar opportunities also exist for training in Naval Occupational and Community Medicine which includes aviation, underwater, submarine, nuclear, preventive and industrial medicine.

If you join immediately after registration your salary will be £6,517 as a Surgeon Lieutenant.

You can, however, join at any age up to 39 when your professional experience is taken into account and you could join as a Surgeon Lieutenant Commander earning £8,258 a year.

There is extra pay for certain recognised post-graduate qualifications and for Specialist and Consultant status.

There is a generous Boarding School Allowance for your children.

If you leave at the end of your 5-year Commission you will receive a tax-free gratuity. You may prefer to apply for extension to eight years or transfer to a pensionable Medium or Full Career Commission.

For more information write to: Surgeon Commander D.J. McKay, LM, LS, MRCP, RN, (811 MOI), Medical Directorate General (Naval), Ministry of Defence, Empress State Building, London SW6 1TR.



ROYAL NAVY MEDICAL OFFICER

CLASSIFIED ADVERTISEMENTS AND NOTICES

Classified advertisements are welcomed and should be sent to: Mr Mike Fulton, Advertisement Director, *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.

UNIVERSITY OF AUCKLAND (New Zealand)

SCHOOL OF MEDICINE

Applications are invited for the following vacant position. Conditions of Appointment and Method of Application are available from the Association of Commonwealth Universities (Appts), 36 Gordon Square, London WC1H 0PF, or from the Assistant Registrar (Academic Appointments), University of Auckland. Applications will be accepted at any time up to 28 March 1978.

Commencing salary will be established according to qualifications and experience within the appropriate scale. The present scale is as follows:

Salary range NZ\$23,313—\$26,600 per annum;

At present, salaries are supplemented by a cost-of-living allowance of NZ\$365 per annum.

THE SIR WILLIAM GOODFELLOW DIRECTOR OF CONTINUING MEDICAL EDUCATION IN GENERAL PRACTICE:

The establishment of the post has been made possible by a generous endowment by Amalgamated Dairies Limited in memory of the late Sir William Goodfellow, the founder of the firm.

Candidates must hold a medical qualification registrable in New Zealand. An appropriate higher qualification in General Practice is desirable. It is expected that candidates would have experience in teaching undergraduate and graduate students and be aware of the problems of education in General Practice. Candidates should have a substantial personal experience of General Practice.

It is envisaged that the Director will assume responsibility for the furtherance of continuing medical education for general practitioners in the Auckland area. The successful candidate would be attached to the Department of Graduate Studies at the School of Medicine. The primary responsibility of the Director would be Administration and Research. The successful candidate would also have some clinical and teaching duties.

THE UNIVERSITY OF MANITOBA—Faculty of Medicine invites applications for the position of Head of a new Department of Family Medicine. Candidates should have substantial experience in undergraduate, graduate and continuing medical education and in research as well as in clinical practice.

Applications should be accompanied by a current curriculum vitae and names of three referees and submitted to: Miss Ellen E. McCaw, Executive Secretary, Family Medicine Search Committee, 753 McDermot Ave., Winnipeg, Canada R3E 0W3.

REGIONAL GENERAL-PRACTICE SUB-COMMITTEE COURSE ORGANIZER, TORBAY

Applications are invited for the post of General Practitioner Course Organizer in Torbay.

Applicants must be in active general practice, in receipt of the basic practice allowance, and should practise within 20 miles of the Torbay Postgraduate Medical Centre.

The appointment is for two sessions per week and the remuneration is that of an approved trainer in general practice. The successful applicant will need to become an approved trainer.

Previous experience is not essential but will be an advantage, as will previous attendance at a recognized course for general practitioner trainers or course organizers.

Membership of the Royal College of General Practitioners will also be an advantage.

Further details can be obtained from the address below and applications, with a *curriculum vitae*, and the names and addresses of two referees should be submitted no later than 1 March 1978.

Dr D. J. Pereira Gray FRCP

Regional Adviser in General Practice (Devon and Cornwall)

**Department of General Practice
Exeter Postgraduate Medical Centre
Barrack Road
Exeter EX2 5DW**

NORTHERN REGION VOCATIONAL TRAINING FOR GENERAL PRACTICE

Applications are invited from medical graduates for the following programmes of training beginning in August 1978.

Complete 3-year programmes which include:

- A. a 6-month appointment in a carefully chosen teaching practice
- B. successive 6-month appointments in 4 hospital posts of relevance to general practice from a variety of options
- C. a final 6-month appointment in the same or a different teaching practice
- D. a continuing academic course comprising 90 half-day release sessions based on small group methods

OR

Partial—less than 3-year rotations to enable doctors who already have relevant experience to meet the requirements for the M.R.C.G.P. examination and the Vocational Training Allowance.

Three of the four schemes available in the Region are as follows:

EAST CUMBRIA—6 places available.

Scheme Organizer: Dr. N. C. Frame, Vocational Training Office, Cumberland Infirmary, Carlisle CA2 7HY.

The hospital posts available: (from)—casualty, chest medicine (with rheumatology), E.N.T. and skins, psychiatry, geriatrics, obstetrics, gynaecology and paediatrics.

WEST CUMBRIA—1 place available.

Scheme Organizer: Dr. G. M. Thomas, 70 John Street, Workington, Cumbria.

The hospital posts available: (from)—paediatrics, obstetrics, psychiatry, acute geriatrics.

NEWCASTLE—22 places available.

Scheme Organizer: Dr Michael McKendrick, Department of Family and Community Medicine, 23 St Thomas Street, Newcastle upon Tyne NE1 7RU.

The hospital posts available: (from)—casualty, general medicine, obstetrics and gynaecology, paediatrics, geriatrics, psychiatry, community medicine.

Trainees from the region have a consistently successful record in the Examination for Membership of the R.C.G.P., for which all Schemes are recognized. The appropriate hospital posts are approved for the D.C.H. and D.R.C.O.G.

Write now for further details and application forms to the Scheme Organizers.

ROYAL COLLEGE OF GENERAL PRACTITIONERS JUBILEE SPRING MEETING—1978

The Jubilee Spring Meeting of the College will be held at the West Midland College of Higher Education, Gorway Road, Walsall, Staffordshire from 14.30 hours on Friday, 14 April 1978 to 13.00 hours on Sunday, 16 April 1978. The meeting will include the annual William Pickles Lecture which will be delivered by Dr Paul Freeling. Further details and application forms can be obtained from Dr J. D. W. Whitney, The Cottage, Footterley Road, Shenstone, Near Lichfield, Staffordshire, WS14 0NJ.

WORLD CONFERENCE ON FAMILY MEDICINE

The Eighth World Conference on General Practice/Family Medicine will be held at Montreux, Switzerland, from 15-19 May 1978.

This is the first time for several years this World Conference is being held in Europe and a British general practitioner, Dr Stuart Carne, is currently President.

Enquiries can be made to the Royal College of General Practitioners, 14 Princes Gate, Hyde Park, London SW7 1PU. The College is arranging a package tour.

TRAINERS' COURSE

A course for general-practitioner trainers or general practitioners who intend to become trainers will be held at the Department of General Practice, Postgraduate Medical Institute of the University of Exeter from 9 to 14 April 1978.

The course will be residential. The Exeter Department is the only university department of general practice outside an undergraduate medical school.

Applications should be made as soon as possible to:

Dr D. J. Pereira Gray FRCGP
Department of General Practice
Postgraduate Medical Institute
Barrack Road
Exeter EX2 5DW

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.

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 19½ in x 14½ in; Small drawings 14½ in x 9½ 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 13¾ in, ready for framing.

Price £12.75 per set, including postage and packing.

UPDATE PUBLICATIONS LIMITED
33/34 Alfred Place, London WC1E 7DP

University of Washington—Family Medicine, Seattle, Washington: opening for additional faculty member for 1 July 1978 appointment. Responsibilities in area of clinical research and full-time teaching. Requires family physician, ABFP-certified or board-eligible, whose background includes teaching of family practice residents/medical students, and clinical practice. Interest and experience in scholarly work related to family medicine is required. Academic rank, salary dependent on training, experience. The University of Washington is an equal opportunity, affirmative action employer. Inquiries are requested by 1 March 1978, and should be directed to John P. Geyman, MD, Professor and Chairman, Department of Family Medicine RF-30, School of Medicine, University of Washington, Seattle, Washington 98195, USA.

Department of Clinical Epidemiology in General Practice (Cardiothoracic Institute, Brompton Hospital) 11 Birkenhead Avenue, Kingston upon Thames

A vacancy will occur imminently in this extramural department of the Cardiothoracic Institute which is based on an NHS group practice in Kingston upon Thames. The appointee must have undergone vocational training for general practice but previous research experience is not essential. In addition to the usual duties of a general practitioner he or she would participate in the Department's teaching and research into common respiratory diseases and their better treatment in general practice. Income, depending upon previous experience, would be derived from NHS sources and from the Cardiothoracic Institute. Prospective applicants may obtain further information by writing to Dr Ian Gregg at the above address.

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

INDEX TO ADVERTISERS

	page		page
Allen & Hanburys Ltd <i>Trandate</i>	89/90	Leo Laboratories Ltd <i>Burinex K</i>	outside back cover
Beecham Research Laboratories <i>Magnapen</i>	82	Roche Products Ltd <i>Libraxin</i>	78
Bencard Ltd <i>Amoxil</i>	96	Royal Navy	102
Dales Pharmaceuticals Ltd <i>Cutisan</i>	77	Smith Kline & French <i>Tagamet</i>	68
DDSA Ltd <i>Remnos</i>	inside front cover	E. R. Squibb & Sons Ltd <i>Nystan</i>	66
Duncan Flockhart & Co Ltd <i>Beta Cardone</i>	94	The Wellcome Foundation Ltd <i>Seprin</i>	80/81
Duphar Laboratories Ltd <i>Serc</i>	70	Loose Inserts Napp Laboratories Ltd <i>Phyllocontin</i>	
		Riker Laboratories <i>Disalcid/Dorbanex</i>	

Without the usual hassle

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."¹
 "Its (Burinex Injection) onset of action is within 10 min."²
 "Bumetanide is rapidly absorbed from the gut."³

Clinically Effective

"Fourteen patients showed a good diuretic response on bumetanide where previous treatment with frusemide had proved either unsatisfactory or too slow."⁵
 "An impressive diminution of the signs of pulmonary 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 bumetanide 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 bumetanide is a potent diuretic effective over a wide dose range and in a variety of clinical conditions."¹

Well tolerated

"Burinex was extremely well tolerated."¹²
 "Bumetanide was well tolerated by patients."¹
 "Overall, bumetanide showed itself to be a safe and effective diuretic when administered to severely ill patients in a busy hospital milieu."⁵

The correct amount of K

"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 bumetanide 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."¹¹

Patients prefer Burinex K

"These results indicate that when long-term 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 separately."¹³
 "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

* Burinex is a trade mark

... But of course the decision is yours.

urine

For more information on Burinex K, a potent diuretic with a slow release rate of 35% mg (1 tablet) of potassium chloride.

1. J. Am. Med. Ass. 235, 1070 (1974)
2. J. Am. Med. Ass. 235, 1070 (1974)
3. J. Am. Med. Ass. 235, 1070 (1974)
4. J. Am. Med. Ass. 235, 1070 (1974)
5. J. Am. Med. Ass. 235, 1070 (1974)
6. J. Am. Med. Ass. 235, 1070 (1974)
7. J. Am. Med. Ass. 235, 1070 (1974)
8. J. Am. Med. Ass. 235, 1070 (1974)
9. J. Am. Med. Ass. 235, 1070 (1974)
10. J. Am. Med. Ass. 235, 1070 (1974)
11. J. Am. Med. Ass. 235, 1070 (1974)
12. J. Am. Med. Ass. 235, 1070 (1974)
13. J. Am. Med. Ass. 235, 1070 (1974)
14. J. Am. Med. Ass. 235, 1070 (1974)

15. J. Am. Med. Ass. 235, 1070 (1974)
16. J. Am. Med. Ass. 235, 1070 (1974)
17. J. Am. Med. Ass. 235, 1070 (1974)
18. J. Am. Med. Ass. 235, 1070 (1974)
19. J. Am. Med. Ass. 235, 1070 (1974)
20. J. Am. Med. Ass. 235, 1070 (1974)
21. J. Am. Med. Ass. 235, 1070 (1974)
22. J. Am. Med. Ass. 235, 1070 (1974)
23. J. Am. Med. Ass. 235, 1070 (1974)
24. J. Am. Med. Ass. 235, 1070 (1974)
25. J. Am. Med. Ass. 235, 1070 (1974)
26. J. Am. Med. Ass. 235, 1070 (1974)
27. J. Am. Med. Ass. 235, 1070 (1974)
28. J. Am. Med. Ass. 235, 1070 (1974)
29. J. Am. Med. Ass. 235, 1070 (1974)
30. J. Am. Med. Ass. 235, 1070 (1974)

For prescribing information available from
 Leo Laboratories Limited,
 1000 Glenview, Niles, Illinois.