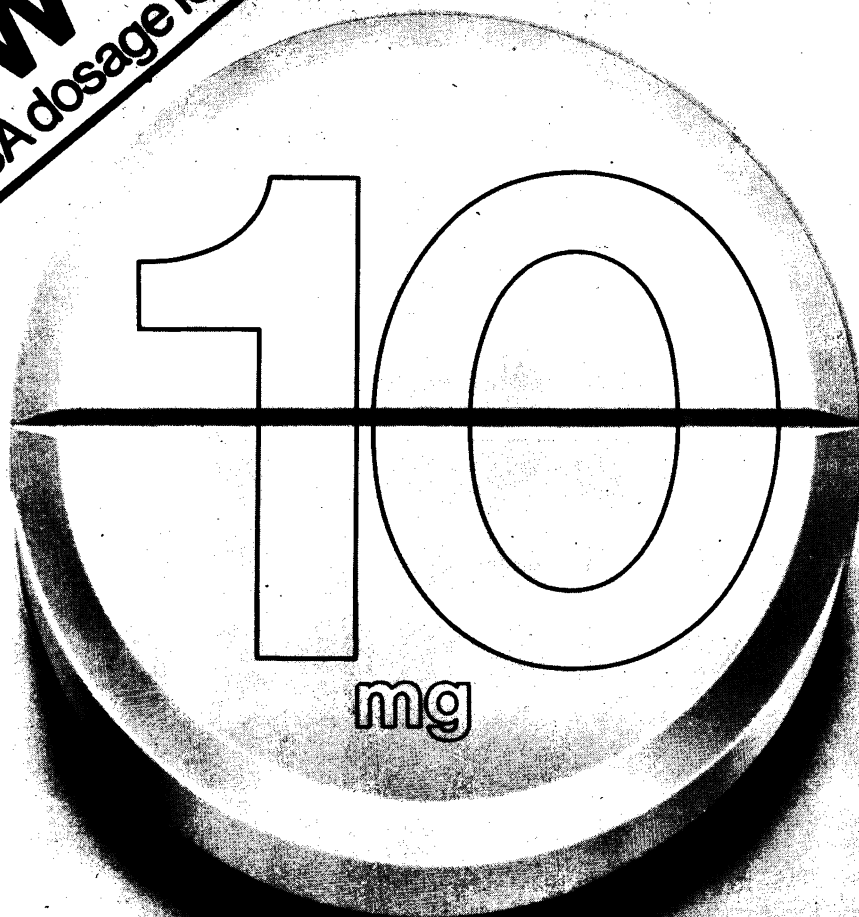


NEW
unique DDSA dosage form



Nitrazepam 10 mg tablets
now available, prescribed as

REMNOS 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 10mg fulfills this need

Prescribing convenience

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

Cost saving*

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

Nitrazepam 10mg only available as tablets Remnos 10mg

Availability:

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

*100 tablets Remnos 10mg cost £2.50

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.

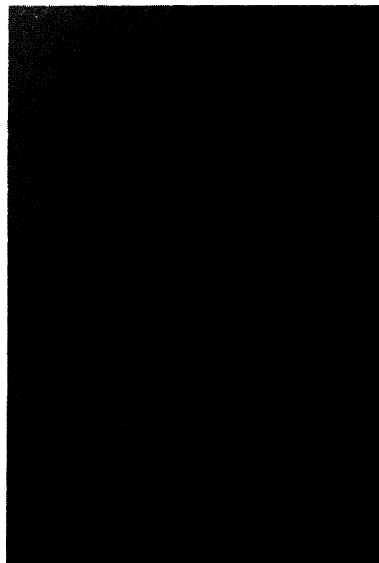
References

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



Hot flushes, sweating



Irritability, anxiety, depression

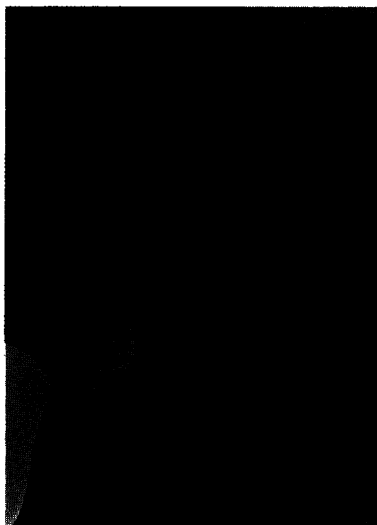


Endometrial hyperplasia

Below the surface of the climacteric



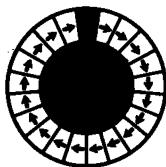
Dry vagina



Irregular periods



Osteoporosis
(affects one
patient
in three¹)



Cyclo-Progynova

The all-round treatment for menopausal problems

1. *Modern Medicine* 45, 10, 1977 Presentation Circular memo-pack holding 11 white tablets each containing 2mg oestradiol valerate and 10 orange tablets each containing 2mg oestradiol valerate and 0.5mg norgestrel. All tablets are sugar-coated with 'BP' in a regular hexagon printed on each side. **Uses:** i) The alleviation of symptoms characteristic of the menopause. Cyclo-Progynova may be used both before and after the menopause. ii) The correction of irregularities of the menstrual cycle caused by abnormal oestrogen production and diminishing corpus luteum function as the menopause approaches. **N.B.** Cyclo-Progynova should not be used as an oral contraceptive. **Dosages and administration:** Patients still having periods may start tablet-taking on the fifth day of the cycle, counting the first day of bleeding as day one. Patients whose periods are very irregular or non-existent may start taking the tablets at any time. The memo-pack sticker should be attached so that the starting day is correctly indicated in the red section. One white tablet is taken daily for eleven days, followed by one orange tablet daily for ten days. An interval of seven days follows each pack, during which bleeding will normally occur. **Contra-indications:** Severe disturbances of liver function, jaundice or persistent itching during a previous pregnancy; Dubin-Johnson syndrome; Rotor syndrome, existing or previous thromboembolic processes (including strokes), sickle-cell anaemia, existing or treated cancer of the breast or endometrium, endometriosis, mastopathy, myomatous uterus, congenital disturbances of lipid metabolism, a history of herpes of pregnancy, otosclerosis with deterioration in previous pregnancies. **Warnings/Side effects:** Use with caution in patients who have a history of congenital abnormalities of lipid metabolism. Some women are predisposed to cholestasis during steroid therapy. Uterine fibroids may be affected by oestrogens and should be checked frequently. **Note:** Treatment should be stopped at once if jaundice or pregnancy occurs or if advised for patients receiving long-term treatment with Cyclo-Progynova. In patients with chronic liver disease, liver function with an oral contraceptive is not recommended. **Overdosage:** Toxic effects of overdosage have not been reported, but, if desired, gastric lavage can safely be used. There are no special antidotes, and further treatment should be symptomatic. **Legal category:** POM. **Basic NHS price:** £2.24. **Product licence number:** 0053/0053. Further information on Cyclo-Progynova is available on request.



Schering Chemicals Limited, Pharmaceutical Division, Burgess Hill, West Sussex RH15 9NE.



The powerful one

Because DF 118 is a powerful analgesic it works well in small doses, leaves your patient alert and allows him to go about his everyday tasks normally, without the need for follow-ups until a repeat is necessary.

Transfer a chronic patient to DF118 and notice how dramatically you reduce his analgesic intake. The effective dose, once established, will remain steady and any concomitant therapy is simpler for him to control.

Acute patients, too, benefit from DF118 since

the fully active oral route lessens the need for injections. For patients who cannot swallow tablets Elixir DF 118 offers an alternative form with greater flexibility of dosage.

Low dosage leads to low cost and the basic cost of 28 tablets (an average week's supply) is only 37 1/2p.



Each DF 118 tablet contains Dihydrocodeine tartrate BP 30mg.

Each 5 mL Elixir DF 118 contains Dihydrocodeine tartrate BP 10mg.

DF 118 subdues the pain, but not the patient.



Full information is available from **DUNCAN, FLOCKHART & CO. LTD., LONDON E2 6LA.**

Number 2
in a series

Gastric ulcer

reduce acid...improve healing



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

Healing

'Tagamet', by its unique action in selectively reducing gastric acid secretion, achieves remarkable results in the treatment of gastric ulcer.¹⁻⁶ In clinical trials, 79% of 'Tagamet'-treated patients have shown complete healing in 4-6 weeks compared with only 45% in the placebo group.⁶ In addition, in a comparative controlled trial with carbenoxolone,⁵ preliminary results have shown that 'Tagamet' produced healing in 73% of patients (11/15) compared with 50% in the carbenoxolone group (8/16).

Symptomatic Relief

In gastric ulcer, overall experience has shown that more rapid and greater relief of pain is experienced in those patients receiving 'Tagamet'.⁶ However, symptomatic relief, whilst very good, is not as predictable in onset as it is in duodenal ulcer.^{3,4} For patients who experience pain during the early stages of treatment, antacids should be made available.

Tagamet



reduces gastric acid secretion

References

1. Healing of gastric ulcer during treatment with cimetidine. (1976) *Lancet*, 1, 337.
2. Treatment of gastric ulcer by cimetidine. (1977) Proceedings of the Second International Symposium on Histamine H₂-Receptor Antagonists. *Excerpta Medica*, p. 287.

3. A controlled trial of cimetidine in the treatment of gastric ulcer. (1977) Proceedings of the Second International Symposium on Histamine H₂-Receptor Antagonists. *Excerpta Medica*, p. 283.
4. Cimetidine in patients with gastric ulcer: a multicentre controlled trial. (1977) *Brit. med. J.*, 2, 795.
5. Double-blind trial comparing

cimetidine with carbenoxolone in the treatment of benign gastric ulcer. (1977) *Gut*, 18, A420.

6. Data on file. Smith Kline & French.

'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:AD28



When dyspepsia repeats....

Maxolon

Unlike the traditional antacid therapies, Maxolon protects the gastric mucosa from over-long exposure to gastric acid¹ by promoting normal peristalsis and gastric emptying^{2,3}. By restoring the stomach's normal control, symptoms described by the patient as fullness, pain, heartburn and discomfort can be effectively treated and their recurrence prevented.⁴

To the patient, Maxolon is the simple and convenient therapy to replace his repetitive antacid prescriptions.

1. Gut, (1969), 10, 678-680. 2. Postgrad. med. J., (1973), 49, (Suppl), 29.
3. Gut, (1974), 15, 462-467. 4. Brit. med. J., (1971), 2, 25.



Full prescribing information is available on request.
Maxolon® (metoclopramide) is a product of
Beecham Research Laboratories, Brentford, England.



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."¹

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**

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

Trandate

(labetalol)

the first alpha-beta-blocker

A SIGNIFICANT

I

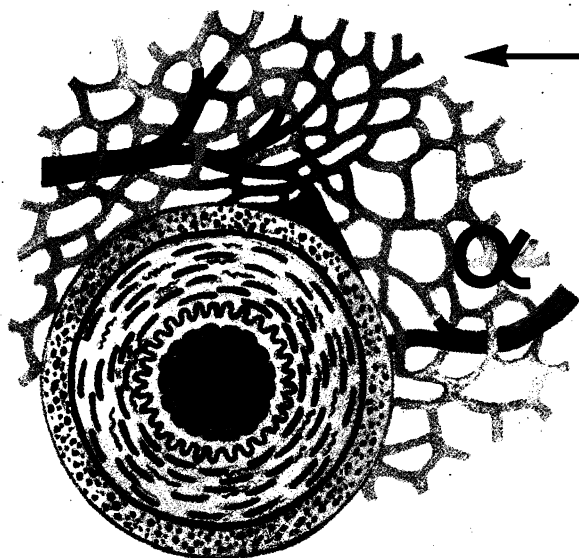
FURTHER INFORMATION APPEARS OVERLEAF

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.

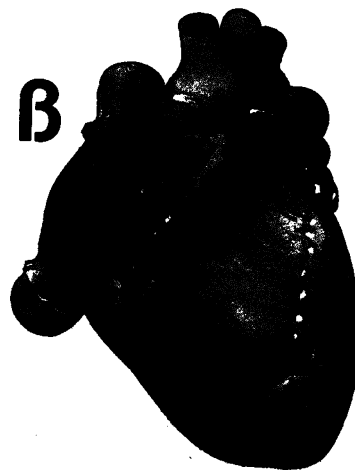
Trandate lowers the blood pressure primarily by incomplete competitive blockade of the alpha-adrenoceptors in peripheral arterioles thereby reducing peripheral resistance. Sufficient sympathetic activity remains to avoid symptoms associated with postural hypotension in most patients.



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

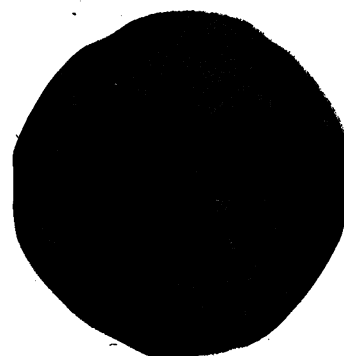
(labetalol)

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.





successful scriptwriting

A FIRST CHOICE IN CHEST INFECTIONS

Complete diuretic



ALDACTIDE 50

New Aldactide 50 is today's answer for those patients with early hypertension. New Aldactide 50 is the once-a-day way gently to lower blood pressure without postural hypotension or loss of potassium.

On its own, or in combination with other antihypertensives, new Aldactide 50 offers tailor-made therapy for your patients with early hypertension.

NEW Aldactide 50 the diuretic for early hypertension

Prescribing Information

Presentation

Aldactide 50 is presented as scored, cream-coloured tablets stamped "SEARLE 180" on one side containing Spironolactone B.P. 50mg with Hydroflumethiazide B.P. 50mg.

Uses

Hypertension.

Dosage and Administration

Aldactide 50- one or two tablets with breakfast or the first main meal of the day.

Contra-indications, Warnings etc.

Aldactide should not be given in acute renal insufficiency, rapidly

progressing impairment of renal function, anuria, hyperkalaemia or in the presence of sensitivity to either component.

Administration not recommended if serum potassium is raised. Thiazides have been reported to decrease glucose tolerance and to induce hyperuricaemia. Spironolactone has been reported to induce gastrointestinal upsets, drowsiness, headache and mental confusion. Potentiation of the action of other antihypertensive drugs occurs.

Thiazides as well as canrenone, a metabolite of spironolactone, appear in breast milk. Acute overdosage may be manifested by drowsiness, mental confusion, nausea, vomiting, dizziness or diarrhoea.

The use of any drug in women of childbearing potential requires that the benefits of therapy be weighed against its possible hazards to the mother and foetus.

Product Licence Holder and Number

G.D. Searle & Co. Ltd. 0020/0082

Basic N.H.S. Cost

40 tablets £6.38.

cover in hypertension

ALDACTONE 100

100

90

Aldactone 100 is the key to the management of advanced hypertension. By its unique action, Aldactone 100 provides highly effective control of blood pressure without postural hypotension or loss of potassium.

On its own, or in combination with other antihypertensives, Aldactone 100 provides reliable antihypertensive therapy for your patients with advanced hypertension.

Aldactone 100

the diuretic for advanced hypertension

Prescribing Information

Presentation

Aldactone 100 is presented as buff coloured tablets, stamped "SEARLE" on one side, containing Spironolactone B.P. 100mg.

Uses

Hypertension.

Dosage and Administration

The usual effective dose is 100mg daily. This may be increased to 400mg daily if necessary.

Contra-indications, Warnings etc.

Aldactone should not be given in acute renal insufficiency, rapidly progressing impairment of renal function, anuria or hyperkalaemia.

Administration is not recommended in the presence of a raised serum potassium. Canrenone, a metabolite of spironolactone, appears in breast milk.

Side effects are mild and infrequent. Drowsiness, mental confusion, gastrointestinal intolerance, gynaecomastia, mild androgenic effects and skin rashes have been reported. True toxic effects have not been reported in overdosage.

In the event of hyperkalaemia, discontinue the drug, reduce potassium intake and administer potassium-excreting diuretics and intravenous glucose with insulin or an oral exchange resin as appropriate.

The actions of other antihypertensive drugs may be potentiated and their dosage should first be reduced by at least 50% when Aldactone is added to the regimen, and then adjusted as necessary. The use of any drug in women of childbearing potential requires that the benefits of therapy be weighed against its possible hazards to the mother and foetus.

Product Licence Holder and Number

G.D. Searle & Co. Ltd. 0020/0048

Basic N.H.S. Cost

50 tablets £12.91.

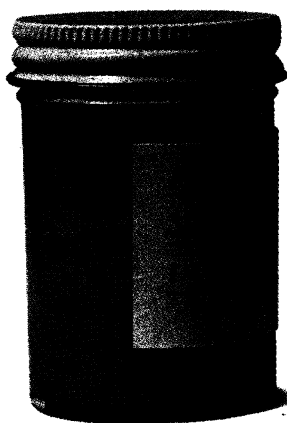
SEARLE

Searle Laboratories, Division of G.D. Searle and Co. Ltd.,
P.O. Box 53, Lane End Road, High Wycombe, Bucks. HP12 4HL.
Telephone: High Wycombe 21124.

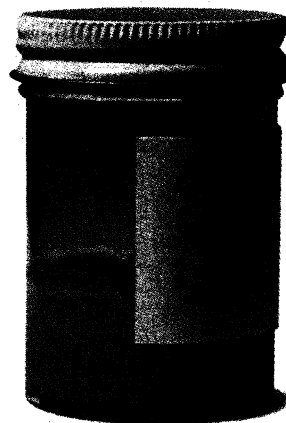
Full prescribing information is available on request. Aldactide, Aldactone and Searle are registered trade marks.



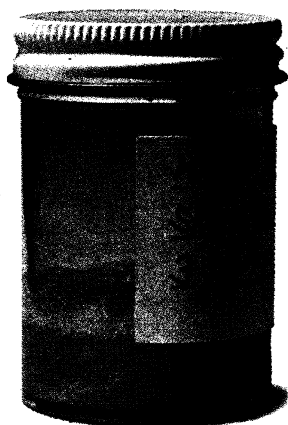
Magnapen :



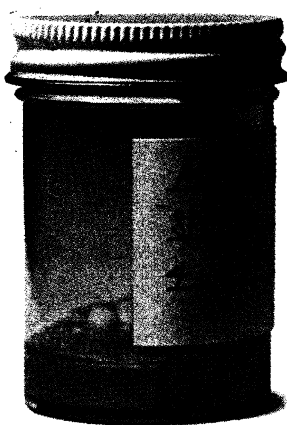
rapid ...



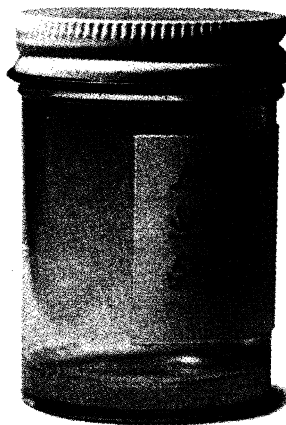
reliable ...



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

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.

**BARKING AND HAVERING
AREA HEALTH AUTHORITY
BARKING HEALTH DISTRICT**

**ROMFORD GENERAL PRACTICE
VOCATIONAL TRAINING SCHEME**

Applications are invited for a post in a 3 year General Practice Vocational Training Scheme in the Barking and Havering Area commencing on 1 August, 1978.

There are 2 years in Hospital posts followed by one year in General Practice with an option of 1 month in a Practice before commencing the 3 year period.

There is a fully structured $\frac{1}{2}$ day release course covering the full 3 year period.

Oldchurch Hospital is 20 minutes from London by main line train and is adjacent to pleasant Essex country-side.

Trainees are given ample opportunities to meet their colleagues from other Vocational Training Schemes and there is a Regional Trainee organisation.

Trainees will be appointed to the Senior House Officer grade in Accident and Emergency, Obstetrics and Gynaecology, Paediatrics and Psychiatry. The jobs are recognised for DCH, D.Obs., RCOG and MRCP.

Applications, giving full names, age and marital status together with curriculum vitae, to the District Personnel Administrator, Oldchurch Hospital, Romford, Essex.

Closing date 21 March, 1978.

**GP CONSULTATIONS WITH
PREGNANT WOMEN AND MOTHERS
OF YOUNG CHILDREN**

A groups of GPs, a child psychotherapist, and two psychoanalysts, are meeting to investigate GP consultations with pregnant women and with mothers and infants. Those interested in joining this project should contact Dr S. Tischler or Dr B. Barnett at the Child Guidance Training Centre, 120 Belsize Lane NW3 (435 7111). The group will meet on Tuesday evenings from 8.15—9.30 pm.

**University of Bristol
Departments of Mental Health and
Extra-Mural Studies**

**PSYCHOTHERAPY WORKSHOP
14—19 May, 1978**

This workshop, is intended for psychologists, psychiatrists, social workers, and general practitioners who have a few years' experience of psychotherapy and possibly (but not necessarily) some training.

£85.00 resident membership.

Further particulars and application forms from: The Assistant Director, Department of Extra-Mural Studies, University of Bristol, 32 Tyndall's Park Road, Bristol, BS8 1HR. (Tel: Bristol 24161 ext. 649).

**UNIVERSITY OF DUNDEE
POSTGRADUATE MEDICAL EDUCATION**

*Courses and Attachments for
General Practitioners 1978*

1. Course in Family Planning, 21 and 22 March, 1978.
2. Residential attachments in obstetrics, mid-June to mid-July 1978.
3. Refresher course in medicine for general medical practitioners 3-7 July, 1978.
4. Refresher course in medicine for general medical practitioners 4-8 September, 1978.
5. Recent advances in occupational medicine for industrial medical officers and general practitioners, 18-22 September, 1978.
6. Course in geriatric medicine for general practitioners, 25-29 September, 1978.

These courses and the residential attachments in obstetrics have been approved by the Scottish Home and Health Department under Section 63 of the Public Health and Social Services Act (1968).

Further particulars of the courses and attachments may be obtained from the Postgraduate Dean, Faculty of Medicine and Dentistry, University of Dundee Medical School, Ninewells Hospital, Dundee DD1 9SY.

BARNSELY AREA HEALTH AUTHORITY

WELL ESTABLISHED

VOCATIONAL TRAINING SCHEME FOR GENERAL PRACTICE

Centred on the new Barnsley District General Hospital
(832 beds)

Applications are invited from practitioners with full registration for the above scheme commencing 1 August, 1978. The scheme, recognised by the Royal College of General Practitioners for the MRCGP, includes two six month periods in a training Practice ranging from urban to rural, and four six monthly S.H.O. posts in four of the following specialties: General Medicine, Geriatrics, Paediatrics, Obstetrics and Gynaecology, E.N.T./Ophthalmology with day release in Psychiatry and Paediatrics, Accident and Emergency.

Also release for Dermatology: Orthopaedics: and Surgery, etc. Multiple postgraduate lunch time and evening meetings, case demonstrations, Tutorials, and guest lectures are held to cover every discipline. There will be Seminars on clinical and other problems associated with general practice. Opportunities to visit and spend time in other dissimilar practices will be arranged. Single accommodation provided, married accommodation subject to availability.

Shorter courses may be available by the Course Organizer for those having completed S.H.O. posts beyond their registration.

Sheffield postgraduate facilities and association with neighbouring V.T. Schemes are readily available.

Further details and application form from the Area Personnel Officer, Barnsley Area Health Authority, 118 Gawber Road, Barnsley.

Closing date for applications two weeks from the appearance of the advertisement.

UNIVERSITY OF SOUTHAMPTON

FACULTY OF MEDICINE

PRIMARY MEDICAL CARE LECTURESHIPS

Applications are invited from registered Medical Practitioners for posts in Primary Medical Care. Two of these posts are replacements and there is one new appointment. The successful applicants will have a service role in one of the two University practices, will have a substantial teaching commitment and will be given every opportunity to carry out research in any field linked to Primary Medical Care. Salary on scale £5,211-£7,203 (9 increments) plus an annual supplement of £312. Initial salary will depend on qualifications and experience and an allowance will also be paid for expenses incurred in practice. Superannuation. Further particulars may be obtained from the Administrative Secretary (Ext. 2804), University of Southampton, Highfield, Southampton, SO9 5NH, to whom applications (7 copies from applicants resident in the UK and one from others) should be sent not later than 25 February 1978 quoting Ref: GP/8/78/A. Applicants are also advised to telephone Profesor J. A. Forbes (Southampton 783111, Ext. 28).

TRAINEE VACANCY SEPTEMBER— MERSEYSIDE

In 3 man and 2 woman practice (all under 42), working from own premises and Health Centre in small South Lancs towns adjacent to Liverpool (20 mins). Centrally-placed DGH provides PGC (4-day release). X-ray, Path, ECG, Physio, O.T. access. Plenty of Ancil. staff, including two audiotypists, attached Nurses etc. Family Planning, Maternity, Student Health, Hospital Occupational Health, Hospital Occupational Health experience provided. Duty rota allows plenty of time off (for study etc.) but extra work attracts extra pay. (Cover by Trainer as needed). Help with accommodation if required.

Write to Dr. M. F. N. O'Ryan MRCGP,
6 Aspinall St., Prescott, L34 5QH
051 426 5253

WEST OF SCOTLAND COMMITTEE FOR POSTGRADUATE MEDICAL EDUCATION

Course for General Practitioners

15 to 19 May, 1978

A nine session general course will be held in Glasgow hospitals from 15 to 19 May, 1978.

The programme will consist of lecture/discussions, ward rounds and demonstrations and will include sessions on:

Paediatrics
Ophthalmology
Gynaecology
Orthopaedics
Plastic Surgery
Gastroenterology
Urology
Traffic Accidents
Dermatology

The Course is approved under Section 63.

Further particulars and application forms may be obtained from:

The Dean of Postgraduate Medicine,
The University of Glasgow,
Glasgow, G12 8QQ.

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Leo Laboratories Ltd		Riker Laboratories	
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**Somebody has prescribed
30,000,000
tubes of fucidin...**



**is it
YOU?**

In boils, dirty wounds, impetigo and most other soft tissue bacterial infections- Fucidin works.

Topical Fucidin is available as Fucidin Gel, Fucidin H Gel, Fucidin H Ointment, Fucidin Tulle and Caviject... and of course

fucidin^{*} ointment

Full prescribing information available from



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

*Fucidin is a trade mark for sodium fusidate.