Introducing a unique 12-hour treatment course for cystitis.

Complete in two doses
Now you can treat cystitis with unparalleled simplicity.

With the new Amoxil Twinpack you have a complete course for cystitis – in only 2 x 3g sachets. The two doses are taken 10 to 12 hours apart.

Proven to be just as effective as a conventional 10 day treatment course, Amoxil Twinpack provides rapid and complete symptomatic relief. With a promise of patient compliance that's simply unique.

Amoxil 3g x 2
amoxycillin
TwinPack

Prescribing Information
Indications: Amoxil Twinpack (3g x 2) is indicated for the treatment of simple, acute urinary tract infections such as cystitis in adults.

Dosage: Adults: Two 3g doses, 10-12 hours apart.

Presentation: Carton containing 2 sachets. Each sachet provides 3g amoxycillin (as trihydrate) for reconstitution to approximately 50ml in water.

Contraindications: Amoxil Twinpack is contraindicated in those with a history of severe penicillin hypersensitivity, and in patients with penicillin allergy.

Side Effects: Side effects, as with other penicillins, are usually of a mild and transitory nature, they may include diarrhoea, indigestion, or occasionally rash, oedema of the face, or urticaria. An unequivocal case of penicillin hypersensitivity is an exclusion criterion.
The third in a series of Hibernating animals. The Brown Bear (Ursus arctos arctos) hibernates from mid November

For safe, natural, undisturbed sleep...

REMNOs
Nitrazepam/DDSA

- Rapidly induces natural sleep
- Increases the duration of sleep and reduces the number of nocturnal awakenings
- No hangover or confusion on waking
- Minimum changes in REM pattern
- Small dependence risk
- High comparative safety in overdosage
- Well tolerated and producing no unwanted systemic effects
- Uniquely available in two strengths (5mg & 10mg)

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

SYNALAR fluocinolone acetonide
Your first line topical steroid

Additional Information
PRESENTATION: ‘Synalar’ preparations contain fluocinolone acetonide B.P. 0.025%. The steroid is dissolved in a small quantity of propylene glycol and incorporated in either a water-miscible cream, greezy ointment or clear, water-miscible gel.
ADMINISTRATION. A small quantity of the preparation should be applied lightly to the affected area two or three times a day, and massaged gently and thoroughly into the skin. ‘Synalar’ Gel should be massaged into the scalp, or other affected area, morning and night. For maintenance therapy, treatment should be repeated once or twice a week.
CONTRAINDICATIONS. As with all topical steroids, ‘Synalar’ is contraindicated in tuberculosis, syphilitic and most viral infections of the skin, and in acne rosacea. ‘Synalar’ preparations should not be used on associated bacterial or fungal infections unless adequate anti-bacterial cover is also given.
PRECAUTIONS. In pregnant animals topical administration of corticosteroids can cause abnormalities of fetal development. Although the relevance of this finding to human beings has not been established, when topical steroid treatment is considered necessary during pregnancy both the amount applied and the length of treatment should be minimised. Long-term continuous topical steroid therapy should be avoided since adrenal suppression can occur, particularly when infants are being treated or where occlusive dressings are applied. SIDE EFFECTS. In normal usage side effects are extremely rare but, as with all drugs, the occasional patient may react unfavourably. In such a case treatment should be stopped. A few instances of atrophic striae after extensive treatment with ‘Synalar’ have been reported.
NHS PRICE: Synalar Cream, Ointment, Gel (30g tube) £0.96.
P/IL Mkt: Synalar Cream 0029/5037; Synalar Ointment 0029/5041; Synalar Gel 0029/5039.

‘Synalar’ is a trade mark.

The ‘Synalar’ Lines

Cream Ointment Gel

Further information is available on request. ICI Pharmaceuticals Division Macclesfield Cheshire SK10 4TF
A delicate skin problem
but one that must be solved

When prescribing a topical steroid to treat a delicate area, a major consideration is to avoid the risk of untoward effects.

Eumovate fulfils the need for a topical steroid with a wide margin of safety, providing significant anti-inflammatory activity without a corresponding increase in the risk of side effects.

Clinical evidence\(^1,2\) has shown that the minimal effect on HPA function observed with Eumovate was in definite contrast to that seen with other preparations.


Prescribing information

Uses
Eumovate is suitable for treating the milder forms of eczema, seborrhoeic dermatitis and other steroid responsive skin conditions.

Dosage and administration
Apply up to four times a day until improvement occurs, when the frequency may be reduced.

Side effects
With all topical corticosteroids local atrophic changes may possibly occur following prolonged and intensive treatment. Also prolonged use of large amounts or treatment of extensive areas may produce the features of hypercorticism. This is more likely to occur in infants and children, and with occlusion. In infants, the napkin may act as an occlusive dressing. In the unlikely event of signs of hypersensitivity appearing, application should stop immediately.

Precautions
Long-term continuous therapy should be avoided, particularly in infants and children in whom adrenal suppression can occur even without occlusion. Appropriate chemotherapy should be used whenever infection of the skin is present. Any spread of infection requires withdrawal of topical corticosteroid therapy. With all corticosteroids, prolonged application to the face is undesirable.

Topical steroids should not be used extensively in pregnancy, i.e., in large amounts or for prolonged periods.

Contra-indications
Bacterial, fungal or viral diseases of the skin.

Basic NHS cost
(exclusive of VAT)
Eumovate Cream or Ointment 25 gram tube £1.23 (also available in 100 gram tubes)
Product Licence number
cream: 4/0233
ointment: 4/0254

Glaxo
Leaders in topical steroid therapy
Glaxo Laboratories Ltd
Greenford, Middlesex UB6 0HE
Eumovate is a trade mark.

Eumovate
(clobetasone butyrate)
An investment in safety and efficacy
"Good blood pressure control was obtained easily and the treatment regimen was simpler than that with previous therapy received by the patients. Few incremental changes in dosage were required and all but six (10%) patients were controlled by labetalol alone."

(Current Medical Research and Opinion, 1978, 5, 618)
simplifies the management of hypertension

for the doctor

- Trandate provides effective control of the hypertension
- Trandate is suitable for a wide range of patients
- Trandate obviates the need for multi-drug regimens or fixed combination products
- Trandate needs few incremental changes in dosage for control of most patients.

and for the patient

- The overall incidence of side effects is low
- Trandate avoids unwanted effects such as sedation and lack of energy
- The dosage regimen is simple – just one tablet two or three times a day
- Patients feel better on Trandate and the treatment does not restrict activity

"It is therefore particularly encouraging that 74% of patients in this study reported that they were much less tired, more energetic, more active physically and more mentally relaxed than when on their previous antihypertensive therapy."

*Practitioner, 1979, 222, 131*
VENTOLIN ROTACAPS
(salbutamol sulphate BP inhalation cartridges for use with the Ventolin Rotahaler)

Improved control of asthma

VENTOLIN INHALER is widely accepted as primary therapy in the treatment of reversible airways obstruction in asthma and chronic bronchitis.

However, until the advent of VENTOLIN ROTACAPS a number of patients have been denied, for one reason or another, the benefits of inhaled Ventolin.

The Rotacaps/Rotahaler system was developed with these patients in mind. The dry powder contents of Ventolin Rotacaps are inhaled from the Ventolin Rotahaler which cuts the capsules into halves which rotate and release the drug when the patient inhales. This breath actuation is very sensitive and the drug is fully available even at the lowest inspiratory flow rates thus providing a more reliable drug delivery system for many patients although a larger unit dose relative to Ventolin Inhaler is necessary for the same therapeutic effect.

"This device (Ventolin Rotacaps and Rotahaler) should increase the value of the sympathomimetic drugs to the minority of asthma patients who cannot use conventional aerosols correctly."


SUITABLE CANDIDATES

- Poor co-ordinators – those patients who despite adequate instruction in the correct technique, cannot co-ordinate the action of breathing in with the actuation of a pressurised aerosol.
- Elderly and arthritic patients – who have difficulty in handling pressurised aerosols. For these patients the Rotahaler may be kept loaded ready for the next required dose.
BECOTIDE ROTACAPS
(beclomethasone dipropionate BP inhalation cartridges for use with the Becotide Rotahaler)

for a wider range of patients

BECOTIDE INHALER has revolutionised the treatment of chronic asthma where inflammatory changes within the lungs reduce the response to bronchodilators.

However, there are a number of patients who have failed to obtain maximum effectiveness from Becotide Inhaler or have been considered unsuitable for inhaled steroid therapy.

BECOTIDE ROTACAPS are now available as a dry powder breath-actuated alternative to Becotide Inhaler. Used in conjunction with the Becotide Rotahaler they extend the benefits of inhaled steroid therapy to a wider range of patients with chronic asthma.

As with Ventolin Rotacaps a larger unit dose of drug relative to Becotide Inhaler is necessary to obtain the same therapeutic effect. Two strengths of Rotacaps are again available combining flexibility of dosage with a convenient regimen facilitating patient compliance.

"It was concluded that this new way of administering the drug (beclomethasone dipropionate) was effective in chronic asthma, and should allow most patients who cannot use conventional pressurised aerosols efficiently to benefit from inhaled corticosteroid treatment."


FOR ROTACAPS INCLUDE:

- Young children – where breath-actuated dry powder drug delivery systems appear to be more reliable. Rotacaps may be pre-loaded into the Rotahaler by the parent.

- Patients currently receiving oral therapy – because of concern over possible irresponsible use of pressurised aerosols. Rotacaps are also more appropriate for routine prophylaxis for those patients who might misunderstand the role of inhalers.
VENTOLIN ROTACAPS 200mcg & 400mcg
PRESCRIBING INFORMATION

PRESENTATION AND BASIC NHS COST
Ventolin Inhaler is a metered-dose aerosol delivering 100mcg salbutamol BP per actuation. Each canister contains 200 inhalations.
Basic NHS cost £1.98.
Ventolin Rotacaps 200mcg & 400mcg each contain a mixture of the stated amount of microfine salbutamol BP (as sulphate), and larger particle lactose in light blue-coloured or dark blue-coloured hard gelatine capsules, respectively. Contains of 100.
Basic NHS cost £2.96 and £4.00, respectively.
Ventolin Rotahaler for use in conjunction with Ventolin Rotacaps.
Basic NHS cost 85p.

INDICATIONS
Routine control of bronchospasm in bronchial asthma, bronchitis and emphysema, as required to relieve attacks of acute bronchospasm. Doses may also be taken before exertion to prevent exercise-induced asthma or before exposure to a known unavoidable challenge.

DOSE AND ADMINISTRATION
As single doses for the relief of acute bronchospasm, for managing intermittent episodes of asthma and to prevent exercise-induced bronchospasm.

Using Ventolin Inhaler – Adults: one or two inhalations.
Children: one inhalation increasing to two if necessary.

Using Ventolin Rotahaler – Adults: one or two Ventolin Rotacaps 200mcg or 400mcg.
Children: one Ventolin Rotacaps 200mcg.

For chronic maintenance or prophylactic therapy.

Using Ventolin Inhaler – Adults: one or two inhalations three or four times a day.
Children: one inhalation three or four times a day increasing to two inhalations if necessary.

Using Ventolin Rotahaler – Adults: one or two Ventolin Rotacaps 200mcg three or four times a day.
Children: one or two Ventolin Rotacaps 200mcg three or four times a day.

CONTRA-INDICATIONS
Ventolin Preparations should not be used for the prevention of threatened abortion.

PRECAUTIONS
If a previously effective dose of inhaled Ventolin fails to give relief lasting at least 3 hours, the patient should be advised to seek medical advice. Ventolin should be administered cautiously to patients suffering from thyrotoxicosis. Unnecessary administration of drugs during the first trimester of pregnancy is undesirable.

SIDE EFFECTS
No important side effects have been reported following treatment with inhaled Ventolin.

PRODUCT LICENCE NUMBERS
Ventolin Inhaler 0045/5022; Ventolin Rotacaps 200mcg 0045/0116; Ventolin Rotacaps 400mcg 0045/0117.

BECOTIDE ROTACAPS 100mcg & 200mcg
PRESCRIBING INFORMATION

PRESENTATION AND BASIC NHS COST
Becotide Inhaler is a metered-dose aerosol delivering 50mcg beclomethasone dipropionate per actuation. Each canister contains 200 inhalations. Basic NHS cost £2.90.
Becotide Rotacaps 100mcg & 200mcg each contain a mixture of the stated amount of microfine beclomethasone dipropionate BP and larger particle lactose in buff or chocolate-brown colourless hard gelatine capsules, respectively. Contains of 100.
Basic NHS cost £4.41 & £5.88, respectively.
Becotide Rotahaler, for use in conjunction with Becotide Rotacaps.
Basic NHS cost 85p.

INDICATIONS
Bronchial asthma especially in patients whose asthma is not adequately controlled by bronchodilators and patients with severe asthma who would otherwise be dependent on systemic corticosteroids or adreno-corticotropic hormone (ACTH) or its synthetic equivalent.

DOSE AND ADMINISTRATION
Using Becotide Inhaler – Adults: Two inhalations three or four times a day is the usual maintenance dose. In severe cases dosage may be started at twice to sixteen inhalations per day and subsequently reduced when the patient begins to respond.
Children: One or two inhalations, two, three or four times a day according to the response.

Using Becotide Rotahaler – Adults: One 200mcg Becotide Rotacaps three or four times a day is the usual maintenance dose.
Children: One 100mcg Becotide Rotacaps two, three or four times a day according to the response.

For optimum results inhaled Becotide should be administered regularly.

CONTRA-INDICATIONS
No specific contra-indications to inhaled Becotide are known but special care is necessary in patients with active or quiescent pulmonary tuberculosis.

PRECAUTIONS
The maximum daily intake of beclomethasone dipropionate should not exceed 1mg. Inadequate response after the first week of inhaled Becotide therapy suggests that excessive mucus is preventing penetration of inhaled drug to the target area. A short course of systemic steroid in relatively high dosage should be given and therapy with inhaled Becotide continued.

Unnecessary administration of drugs during the first trimester of pregnancy is undesirable.

SIDE EFFECTS
Occasional candidiasis of the mouth and throat (thrush) occurs in some patients, particularly those with high blood levels of Candida precipitans. Topical therapy with antifungal agents usually clears the condition without withdrawal of Becotide.

PRODUCT LICENCE NUMBERS
Becotide Inhaler 0045/0072; Becotide Rotacaps 100mcg 0045/0119; Becotide Rotacaps 200mcg 0045/0120.

PATIENT INSTRUCTION
It is important to ensure that patients receiving inhalation therapy are correctly instructed in the use of the device being prescribed.

For this purpose demonstration units are available on request from Allen & Hanbury Ltd. The patient's acquired technique should be monitored by re-checking at suitable intervals.

Generally speaking, patients unable to use pressurised aerosols efficiently can be satisfactorily treated using the alternative Rotacaps/Rotahaler system which, for them, provides a greater degree of certainty and a better guarantee of effectiveness. Any initial problems with the manipulation of the Rotahaler are usually overcome as the patient becomes more familiar with its use.

In the case of young children and patients with arthritis of the hands it may be preferable for the device to be loaded by the parent or other person. When Ventolin Rotacaps are being used for the relief of acute bronchospasm it may be convenient to load a Rotacap into the device so that the dose is readily available. Ventolin and Becotide Rotahalers are supplied in plastic boxes for carrying in the pocket or handbag. The daily requirement of Rotacaps may be inserted into the spaces provided in the box to encourage compliance. A replacement Ventolin or Becotide Rotahaler should be prescribed at approximately six-month intervals.

Who are the candidates for Rotacaps in your practice?

Full prescribing information is available on request.
Ventolin, Becotide, Rotacap, Rotahaler, are trade marks of Allen & Hanbury Ltd., London E2 6L A.
VENTOLIN ROTACAPS
(salbutamol sulphate BP inhalation cartridges for use with the Ventolin Rotahaler)

Improved control of asthma

VENTOLIN INHALER is widely accepted as primary therapy in the treatment of reversible airways obstruction in asthma and chronic bronchitis.

However, until the advent of VENTOLIN ROTACAPS a number of patients have been denied, for one reason or another, the benefits of inhaled Ventolin.

The Rotacaps/Rotahaler system was developed with these patients in mind. The dry powder contents of Ventolin Rotacaps are inhaled from the Ventolin Rotahaler which cuts the capsules into halves which rotate and release the drug when the patient inhales. This breath actuation is very sensitive and the drug is fully available even at the lowest inspiratory flow rates thus providing a more reliable drug delivery system for many patients although a larger unit dose relative to Ventolin Inhaler is necessary for the same therapeutic effect.

"This device (Ventolin Rotacaps and Rotahaler) should increase the value of the sympathomimetic drugs to the minority of asthma patients who cannot use conventional aerosols correctly."

SUITABLE CANDIDATES

- Poor co-ordinators – those patients who despite adequate instruction in the correct technique, cannot co-ordinate the action of breathing in with the actuation of a pressurised aerosol.

- Elderly and arthritic patients – who have difficulty in handling pressurised aerosols. For these patients the Rotahaler may be kept loaded ready for the next required dose.
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(beclomethasone dipropionate BP inhalation cartridges for use with the Becotide Rotahaler)

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As with Ventolin Rotacaps a larger unit dose of drug relative to Becotide Inhaler is necessary to obtain the same therapeutic effect. Two strengths of Rotacaps are again available combining flexibility of dosage with a convenient regimen facilitating patient compliance.

"It was concluded that this new way of administering the drug (beclomethasone dipropionate) was effective in chronic asthma, and should allow most patients who cannot use conventional pressurised aerosols efficiently to benefit from inhaled corticosteroid treatment."


FOR ROTACAPS INCLUDE:

- **Young children** – where breath-actuated dry powder drug delivery systems appear to be more reliable. Rotacaps may be pre-loaded into the Rotahaler by the parent.

- **Patients currently receiving oral therapy** – because of concern over possible irresponsible use of pressurised aerosols. Rotacaps are also more appropriate for routine prophylaxis for those patients who might misunderstand the role of inhalers.
VENTOLIN ROTACAPS 200mcg & 400mcg
PRESCRIBING INFORMATION

PRESENTATION AND BASIC NHS COST
Ventolin Inhaler is a metered-dose aerosol delivering 100mcg salbutamol BP per actuation. Each canister contains 200 inhalations.
Basic NHS cost £1.96.
Ventolin Rotacaps 200mcg & 400mcg each contain a mixture of the stated amount of microfine salbutamol BP (as sulphate), and larger particle lactose in light blue/colourless or dark blue/colourless hard gelatine capsules, respectively. Containers of 100.
Basic NHS cost £2.96 and £4.00, respectively.
Ventolin Rotahaler for use in conjunction with Ventolin Rotacaps.
Basic NHS cost £6.56.

INDICATIONS
Routine control of bronchospasm in bronchial asthma, bronchitis and emphysema, as required to relieve attacks of acute bronchospasm. Doses may also be taken before exertion to prevent exercise-induced asthma or before exposure to a known unavoidable challenge.

DOSEAGE AND ADMINISTRATION
As single doses for the relief of acute bronchospasm, for managing intermittent episodes of asthma and to prevent exercise-induced bronchospasm.
Using Ventolin Inhaler – Adults: one or two inhalations. Children: one inhalation increasing to two if necessary.
Using Ventolin Rotahaler – Adults: one Ventolin Rotacap 200mcg or 400mcg.
Children: one Ventolin Rotacap 200mcg.
For chronic maintenance or prophylactic therapy.
Using Ventolin Inhaler – Adults: one or two inhalations three or four times a day. Children: one inhalation three or four times a day increasing to two inhalations if necessary.
Using Ventolin Rotahaler – Adults: one Ventolin Rotacap 400mcg three or four times a day.
Children: one Ventolin Rotacap 200mcg three or four times a day.
For optimum results in most patients inhaled Ventolin should be administered regularly.

CONTRA-INDICATIONS
Ventolin Preparations should not be used for the prevention of threatened abortion.

PRECAUTIONS
If a previously effective dose of inhaled Ventolin fails to give relief lasting at least 3 hours, the patient should be advised to seek medical advice. Ventolin should be administered cautiously to patients suffering from thyrotoxicosis. Unnecessary administration of drugs during the first trimester of pregnancy is undesirable.

SIDE EFFECTS
No important side effects have been reported following treatment with inhaled Ventolin.

PRODUCT LICENCE NUMBERS
Ventolin Inhaler 0045/5022; Ventolin Rotacaps 200mcg 0045/0116; Ventolin Rotacaps 400mcg 0045/0117.

BECOTIDE ROTACAPS 100mcg & 200mcg
PRESCRIBING INFORMATION

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Becotide Inhaler is a metered-dose aerosol delivering 50mcg beclomethasone dipropionate per actuation. Each canister contains 200 inhalations. Basic NHS cost £2.90.
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Basic NHS cost £4.41 & £5.88, respectively.
Becotide Rotahaler, for use in conjunction with Becotide Rotacaps.
Basic NHS cost £6.85.

INDICATIONS
Bronchial asthma especially in patients whose asthma is not adequately controlled by bronchodilators and patients with severe asthma who would otherwise be dependent on systemic corticosteroids or adreno-corticotropic hormone (ACTH) or its synthetic equivalent.

DOSEAGE AND ADMINISTRATION
Using Becotide Inhaler – Adults: Two inhalations three or four times a day is the usual maintenance dose. In severe cases dosage may be started at twice to sixteen inhalations per day and subsequently reduced when the patient begins to respond.
Children: One or two inhalations, two, three or four times a day according to the response.
Using Becotide Rotahaler – Adults: One 200mcg Becotide Rotacap three or four times a day is the usual maintenance dose.
Children: One 100mcg Becotide Rotacap, two, three or four times a day according to the response.
For optimum results inhaled Becotide should be administered regularly.

CONTRA-INDICATIONS
No specific contra-indications to inhaled Becotide are known but special care is necessary in patients with active or quiescent pulmonary tuberculosis.

PRECAUTIONS
The maximum daily intake of beclomethasone dipropionate should not exceed 1mg. Inadequate response after the first week of inhaled Becotide therapy suggests that excessive mucus is preventing penetration of inhaled drug to the target area. A short course of systemic steroid in relatively high dosage should be given and therapy with inhaled Becotide continued.
Unnecessary administration of drugs during the first trimester of pregnancy is undesirable.
When transferring patients to Becotide from systemic steroid therapy the possibility of adrenocortical suppression should be considered and patients given a supply of oral steroids for use during periods of stress. Please refer to the detailed procedure described in the data sheets for Becotide Inhaler and Becotide Rotacaps.

SIDE EFFECTS
Occasional candidiasis of the mouth and throat (thrush) occurs in some patients, particularly those with high blood levels of Candida precipitate. Topical therapy with antifungal agents usually clears the condition without withdrawal of Becotide.

PRODUCT LICENCE NUMBERS
Becotide Inhaler 0045/0091; Becotide Rotacaps 100mcg 0045/0119; Becotide Rotacaps 200mcg 0045/0120.

PATIENT INSTRUCTION
It is important to ensure that patients receiving inhalation therapy are correctly instructed in the use of the device being prescribed. For this purpose demonstration units are available on request from Allen & Hanburys Ltd. The patient's acquired technique should be monitored by re-checking at suitable intervals. Generally speaking, patients unable to use pressurised aerosols efficiently can be satisfactorily treated using the alternative Rotacap/Rotahaler system which, for them, provides a greater degree of certainty and a better guarantee of effectiveness. Any initial problems with the manipulation of the Rotahaler are usually overcome as the patient becomes more familiar with its use.

In the case of young children and patients with arthritis of the hands it may be preferable for the device to be loaded by the parent or other person. When Ventolin Rotacaps are being used for the relief of acute bronchospasm it may be convenient to load a Rotacap into the device so that the dose is readily available. Ventolin and Becotide Rotahalers are supplied in plastic boxes for carrying in the pocket or handbag. The daily requirement of Rotacaps may be inserted into the spaces provided in the box to encourage compliance. A replacement Ventolin or Becotide Rotahaler should be prescribed at approximately six-month intervals.

Who are the candidates for Rotacaps in your practice?

Full prescribing information is available on request. Ventolin, Becotide, Rotacap, Rotahaler, are trade marks of ALLEN & HANBURYS LTD., London E2 8LA.
Medical Aid at Accidents
‘This book covers the basic knowledge required for most aspects of emergency care and rescue organisation by a series of short, relevant, and beautifully illustrated chapters. This is a significant contribution to the discipline of emergency care and can be recommended for use internationally.’ The Lancet

Rehabilitation Today
‘Every medical practitioner, every medical student (and every dean) should... have access to a copy of this book... Its use as a source of reference should become second nature.’ British Medical Journal

Dermatology
‘The first edition of this book was a landmark in medical publishing. The second edition contains 506 new colour illustrations, together with a comprehensive text. It will have immediate practical value to general practitioners, physicians, dermatologists, students and all others with an interest in this field.’

Neonatal Medicine
‘The text is factual, concise and easy to read. It correlates theory with clinical practice, and progresses smoothly from the assessment of the unborn child to care of the newborn, unborn or abnormal... This hardback book gives excellent value for money.’ Nursing Times

Oral Disease
‘Oral Disease would make a very valuable addition to the book collection of the dental student... The book will also serve as a valuable revision text for the general dental practitioner and the general medical practitioner, whose training in oral disease has usually been minimal.’ British Dental Students’ Association Newsletter

Immunisation

Preventive Dentistry
Leon Silverstone, 1978, 74 figures, 176 pp, hardback, ISBN 0 906141 06 0, price £5.95, post and packing free.

Interpreting the Electrocardiogram
James S. Fleming, 1979, 245 figures, 144 pp, hardback, ISBN 0 906141 05 2, price £6.75 post and packing free.

UPDATE BOOKS
Order form on page 487
COLLEGE ACCOMMODATION

Charges for college accommodation are reduced for members (i.e. fellows, members and associates). Members of overseas colleges are welcome when rooms are available. All charges for accommodation include breakfast and are subject to VAT. A service charge of 12½ per cent is added. Members are reminded that children under the age of 12 years cannot be admitted and dogs are not allowed. Residents are asked to arrive before 18.30 hours to take up their reservations.

From 1 September 1978, charges are (per night):

<table>
<thead>
<tr>
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<th>Members</th>
<th>Others</th>
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<tbody>
<tr>
<td>Single room</td>
<td>£5</td>
<td>£12</td>
</tr>
<tr>
<td>Double room</td>
<td>£10</td>
<td>£20</td>
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<td>Flat 1</td>
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<tr>
<td>Flat 3</td>
<td>£20</td>
<td>£35</td>
</tr>
</tbody>
</table>

Charges are also reduced for members hiring reception rooms compared with outside organizations which apply to hold meetings at the College. All hireings are subject to approval and VAT is added.

<table>
<thead>
<tr>
<th></th>
<th>Members</th>
<th>Others</th>
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<tr>
<td>Long room</td>
<td>£40</td>
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<tr>
<td>Damask room</td>
<td>£30</td>
<td>£50</td>
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<tr>
<td>Common room and terrace</td>
<td>£30</td>
<td>£50</td>
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<tr>
<td>Kitchen/Dining room</td>
<td>£10</td>
<td>£20</td>
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<tr>
<td>Seminar room</td>
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<td>Poc room</td>
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<td>£20</td>
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Enquiries should be addressed to:

The Accommodation Secretary,
Royal College of General Practitioners,
14 Princes Gate, Hyde Park,
London SW7 1PU.
Tel: 01-584 6262

Whenever possible bookings should be made well in advance and in writing. Telephone bookings can be accepted only between 9.30 hours and 17.30 hours on Mondays to Fridays. Outside these hours, an Autophone service is available.

JOURNAL OF THE ROYAL COLLEGE OF PHYSICIANS OF LONDON

This Journal is concerned with the integration of scientific disciplines in the practice of medicine and, by providing a wide ranging commentary on the growing points of medicine, is an essential complement to the specialised journals.

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Journal of the Royal College of General Practitioners, August 1979 507
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 the first 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 £5.75 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.

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.

DUNDEE UNIVERSITY
DEPARTMENT OF GENERAL PRACTICE

Applications are invited from registered medical practitioners holding the Diploma of MRCGP for a new post of SENIOR LECTURER in the above department.

Experience of teaching and research in general practice is desirable.
Salary on the Senior Clinical Lecturer scale with initial placing dependent on qualifications and experience.
Superannuation under USS or continuation of FSSU. Grant toward removal expenses to Dundee.

Further particulars of the appointment may be obtained from The Secretary, The University, Dundee DD1 4HN with whom applications (12 copies or, if posted overseas, one copy) quoting reference EST/71/79R and containing the names of two referees should be lodged as soon as possible.

Notification of change of address
Members changing their address are asked to let the Registrar of the Royal College of General Practitioners know as soon as possible, with the effective date, so that the Journal can continue to be sent to them without delay.

Please write to: The Registrar, Royal College of General Practitioners, 14 Princes Gate, Hyde Park, London SW7 1PU.

Old address:  

New address:  

Health and the Family
C. Wood
June/July 1979
xiv + 240pp.
£11.60
0.12.794913.5 (Academic Press)
0.8089.1180.5 (Grune & Stratton)

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London New York San Francisco
A Subsidiary of Harcourt Brace Jovanovich, Publishers
24-28 Oval Road, London NW1 England
111 Fifth Avenue, New York, NY 10003, USA

Journal of the Royal College of General Practitioners, August 1979

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Vocational Training for General Practice Taunton Scheme

Exciting opportunities for doctors planning their careers ahead and seeking training posts beginning February or August 1980.

Applications are now invited for 4 posts in these 3-year programmes which have been carefully planned in every detail.

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Organization will be by The Somerset Postgraduate Centre and includes half-day release training in Ophthalmology, Community Medicine, Laboratory Medicine, Family Planning, Organization and Methods of Practice and the many ‘fringe’ medical activities — with continuous ‘feed-back’ involvement.

Recognized for: The DHSS regulations regarding Vocational Training Allowance
                The RCGP Examination for Membership
                The D RCOG
                The DCH

Married accommodation is offered throughout the Scheme.

Applications by Wednesday, 26 September for appointment (interviews mid-October) to the Sector Administrator, Musgrove Park Hospital, Taunton. Tel. 3444 Ex. 4063.

(No application forms — please give full curriculum vitae).
JOURNAL PUBLICATIONS

The following have been published by the Journal of the Royal College of General Practitioners and can be obtained, while still in print, from the Royal College of General Practitioners.

REPORTS FROM GENERAL PRACTICE

No. 17 The Assessment of Vocational Training for General Practice £2.25

SUPPLEMENTS TO THE JOURNAL OF THE ROYAL COLLEGE OF GENERAL PRACTITIONERS

General Practice in the London Borough of Camden 75p
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Visit to Australia and the Far East £1.00
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No. 4 A System of Training for General Practice £2.75
No. 5 Medical Records in General Practice £2.75
No. 6 Some Aims for Training for General Practice £2.75
No. 8 Patients and their Doctors 1977 £3.00

Please send your orders to:

The Royal College of General Practitioners,
14 Princes Gate, Hyde Park,
London SW7 1PU.

OCCASIONAL PAPERS

The Journal of the Royal College of General Practitioners has introduced a new series of publications called Occasional Papers. The prices shown include postage and copies can be obtained while stocks last from 14 Princes Gate, Hyde Park, London SW7 1PU.

OCCASIONAL PAPER 1
An International Classification of Health Problems in Primary Care

The World Organization of National Colleges and Academies of General Practice (WONCA) has now agreed on a new, internationally recognized classification of health problems in primary care. This classification has now been published as the first Occasional Paper. Price £2.25.

OCCASIONAL PAPER 4
A System of Training for General Practice

The fourth Occasional Paper by Dr D. J. Pereira Gray is designed for trainers and trainees and describes the educational theory being used for vocational training in the Department of General Practice at the University of Exeter. Price £2.75.

OCCASIONAL PAPER 5
Medical Records in General Practice

The fifth Occasional Paper by Dr L. Zander and colleagues from the Department of General Practice at St Thomas's Hospital Medical School describes a practical working system of record keeping in general practice which can be applied on ordinary records or on A4 records. Price £2.75.

OCCASIONAL PAPER 6
Some Aims for Training for General Practice

The sixth Occasional Paper includes the educational aims agreed by the Royal College of General Practitioners, with the specialist organizations in psychiatry, paediatrics, and geriatrics, as well as the Leeuwenhorst Working Party's aims for general practice as a whole. Price £2.75.
FAMILY PRACTITIONER
REQUIRED

The Canadian Community of Notre Dame de Lourdes, Province of Manitoba, is accepting 'off-shore' applications from medical doctors interested in re-establishing in Canada. Applicants must have, or be eligible to write for, their LMCC and be willing to register with the Manitoba College of Physicians and Surgeons.

This rural community encompasses a population base of 1,200 and is serviced by a hospital and a nursing home facility situated in the village of Notre Dame de Lourdes. Located 80 miles from Winnipeg, the provincial capital of Manitoba, Notre Dame de Lourdes offers housing, medical office space, and the option to work in private practice or as a salaried physician. Applicants should have experience in obstetrics as well as an interest in gerontology.

Please address all inquiries or applications to the following address:

Mr Roger Sala, Chairman,
Notre Dame Hospital Board,
Notre Dame de Lourdes, Manitoba,
R0G 1MO, Canada.
Telephone 248-2379.

SUPPLEMENT TO THE JOURNAL
OF THE ROYAL COLLEGE OF
GENERAL PRACTITIONERS

Prescribing in general practice

The cost of the drugs prescribed by British general practitioners now exceeds the cost of the doctors’ own income and expenses combined. The number of prescriptions for psychotropic drugs has doubled between 1964 and 1974 and the applications of prescribing in general practice are bedevilled by factors quite unrelated to clinical pharmacology, such as the symbolic use of drugs, patient and doctor expectations and attitudes, and pressures from advertising.

Who are the high cost prescribers? What, if any, is the influence on a doctor’s prescribing of being trained overseas? What are the facts and what are the trends?

Prescribing in General Practice is one of the most comprehensive booklets ever issued on prescribing in British general practice; it was published as a Supplement to this Journal and sponsored by the Department of Health and Social Security.

Prescribing in General Practice is available now from 14 Princes Gate, Hyde Park, London SW7 1PU, price £3.00, post free.

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Update Books are now on display and for sale at the Update offices in central London. You can call into the 2nd floor reception, Update Publications, 33-34 Alfred Place, London WC1E 7DP, to inspect or purchase Update books any time between 9.30 a.m. and 5.30 p.m. Monday to Friday. This map shows how to find Alfred Place. The Update building is clearly recognisable by the display of books in the front window at street level.
Fluvirin contains only the protective haemagglutinin and neuraminidase antigens of the virus, adsorbed on to aluminium hydroxide and virtually none of the other viral components.

For this reason it has been described as "the ultimate in purified antigens" and an October '78 issue of BMJ endorses the use of surface antigen vaccines like FLUVIRIN against influenza: "Surface antigen vaccines seem to cause fewer minor side effects, such as sore arms and febrile reactions, than zonally purified whole virus vaccines, and in the view of many they are preferable, especially for children and when two doses have to be given."


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FLUVIRIN

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PREScribing INFORMATION. Presentation: Fluvirin, adsorbed surface antigen influenza vaccine, contains in 0.5ml dose, the strains of influenza virus currently recommended. Each 0.5ml dose contains the haemagglutinin and neuraminidase antigens prepared from: 200 Units of A/USSR/92/77 (H1N1) 200 Units of A/England/321/77 (H1N1), 200 Units of B/Hong Kong/8/73 adsorbed on to aluminium hydroxide. Uses: Protection against influenza. Dosage: Adults aged over 24 years: Single dose of 0.5ml by deep subcutaneous or intramuscular injection; it must NOT be given intradermally. Children aged 4 to 9 years: 2 doses of 0.5ml, one month apart (if previously primed with H1N1 sub-type one dose of 0.5ml is sufficient). If the vaccine has been stored in a refrigerator it must be allowed to reach room temperature before use; the container should be well shaken immediately before making the injection. Unused contents of multidose vials should be discarded at thend of the day's session. Warnings: Contra-indicated in persons sensitive to egg protein. The potential risk of adverse reaction to vaccines should be taken into account in patients with a personal or family history of allergy. Spirit should not be allowed to come in contact with the vaccine. Side effects: Redness and soreness at the site of injection, headache, pyrexia and a feeling of malaise may occur. Package quantities: Single dose ampoules of 0.5ml, disposable syringe pack of 0.5ml at a basic NHS cost of £1.70 and multidose vials of 5ml.

Further information is available on request.
Fluvirin is a trade mark of Duncan, Flockhart & Co. Limited, London E2 6LA
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