Upjohn Travelling Fellowships 1980

As in previous years Upjohn is pleased to announce that Travelling Fellowship Awards are available in 1980.

These Awards are made to general practitioners wishing to further their postgraduate training (outside Section 63 of the National Health Act 1958) by taking a course of study at a hospital or centre of their choosing in the British Isles.

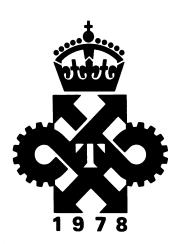
Applications for Awards are considered by the Royal College of General Practitioners within the terms of the Fellowship Rules.

We have mailed application forms and brochures to doctors on our mailing list. Applications *must* be in the hands of the Honorary Secretary of the Royal College of General Practitioners, 14 Princes Gate, Hyde Park, London SW7 1PU, by 31st May, 1980.

Upjohn

Upjohn Limited, Fleming Way, Crawley, West Sussex

A Mark of Recognition



Two years ago, Smith Kline and French Research Institute received the Queen's Award for Technological Achievement resulting from H₂ receptor antagonist research and the development of cimetidine.

Since it became generally available over three years ago, 'Tagamet', by its unique action in reducing gastric acid, has revolutionised the treatment of disorders such as

gastric ulcer and reflux oesophagitis, where acid plays a part.

For many patients it has brought a new standard of pain relief and healing. In the United Kingdom alone 'Tagamet' has been prescribed for an estimated one million patients.

PRESCRIBING INFORMATION

Presentation
Tagamet Tablets PL0002:0063 each containing
200 mg cimetidine. 100, £13.22; 500, £64.75.
Tagamet Syrup PL0002/0073 containing 200 mg
cimetidine per 5 ml syrup. 200 ml, £6.29.
Indications

duodenal ulcer, benign

Duodenal ulcer, benign gastric ulcer, reflux oesophagitis.

Dosage
Duodenal ulcer: Adults, 200 mg tds with meals and
400 mg at bedtime (1.0 g/day) for at least 4 weeks
(for full instructions see Data Sheet). To prevent
relapse, 400 mg at bedtime or 400 mg morning and
evening for at least 6 months.
Bening agstric ulcer: Adults, 200 mg tds with meals
and 400 mg at bedtime (1.0 g/day) for at least 6 weeks
(for full instructions see Data Sheet).
Reflux oesophagitis: Adults, 400 mg tds with meals
and 400 mg at bedtime (1.6 g/day) for 4 to 8 weeks.

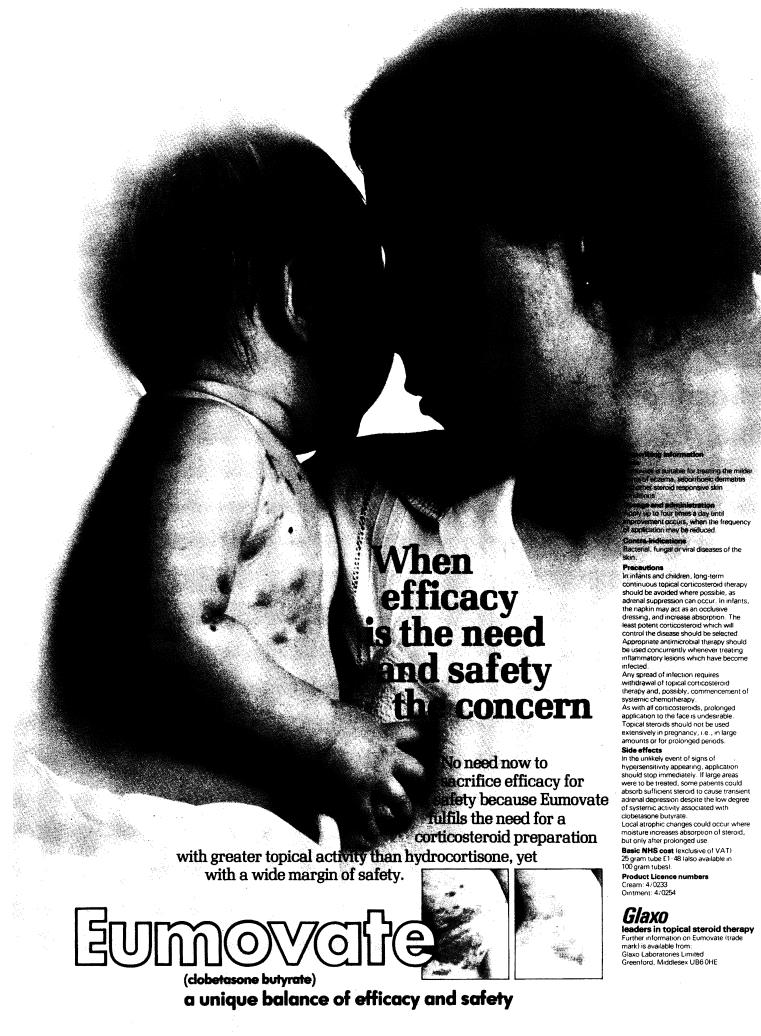
cimetidine

Cautions
Impaired renal function: reduce dosage (see Data Sheet). Potentiation of oral anticoagulants (see Data Sheet). Protonged treatment: observe patients periodically. Malignant gastric ulcer may respond symptomatically. Avoid during pregnancy and lactation.

Adverse reactions
Diarrhoea, dizziness, rash, tiredness. Rarely, mild gynaecomastia, reversible liver damage, confusional states (usually in the elderly or very ill), interstitial nephritis.

Smith Kline Company
Smith Kline & French Laboratories Limited
Welwyn Garden City, Hertfordshire AL7 TEY
Telephone: Welwyn Garden 25111
Tagamer is a trade mark
© Smith Kline & French Laboratories Limited 1980

TG:AD140



Becotice (beclomethasone dipropionate BP)

Controls the inflammatory processes in more severe asthma

Restores the response to bronchodilators

Avoids the side effects associated with systemic steroids

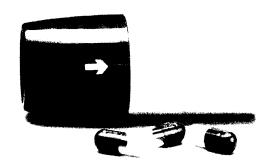
Eliminates or greatly reduces the need for systemic steroids in steroid-dependent patients

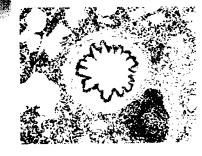
Obviates physical disfigurement and stunting of growth in children

Available as metered-dose aerosol and Rotacaps with Rotahaler



Becoti le





Cross-section of bronchiole illustrating bronchospasm complicated by bronchial mucosal oedema and hypersecretion of mucus.

To support this claim of extraordinary activity (of Becotide), there are not only statistically valid comparisons but also numerous validated individual experiences. These include the impressive therapeutic results in patients with severe asthma not controllable with high daily doses of systemic steroids; the beneficial responses of those refractory to adrenergic agonists and unable to tolerate even suboptimal doses of theophylline; the suppression of asthma unresponsive to mediator-release inhibitors, such as cromolyn sodium; and, importantly, the high level of acceptance and compliance among people who do not comply with other standard therapeutic routines. (Lancet, 1979, i, 932-933)



Paramol-118 is routinely effective in relieving pain commonly encountered in general practice e.g., arthritis, muscular rheumatism, vertebral and low back pain.

A single tablet of Paramol-118 provides relief by the joint action on pain of 500mg paracetamol and 10mg dihydrocodeine tartrate. This combination effectively treats pain with minimum intake of drug - particularly advantageous in long term therapy.

paracetamol BP and dihydrocodeine tartrate BP

JUST THE ONE for mild-to-moderate pain

PRESCRIBING INFORMATION

Presentation and basic NHS cost
White tablets engined DF/P each tablet containing.
Paracetarnel BP 500 mg
Divdrococleine bertrate BP 10 mg
25 tablets (ex 500) cost 37.8g

Dosage and administration Paramol-118 tablets should, if possible, be taken

raramori-16 tablets should, it possible, be taken during or after meals.
Adults and children over 12 years; One tablet every four hours. This may be increased to two tablets four times a day if necessary.
Paramol-118 is not recommended for children

under 12

Contra-indications, warnings, etc.
Precautions: Paramol-118 should be given with caution to patients with aflergic disorders and should not be given during an attack of asthma.
Caution if there is marked impairment of liver function or advanced kidney disease. Unnecessary administration of drugs during the first trimester of pregnancy is undesirable.

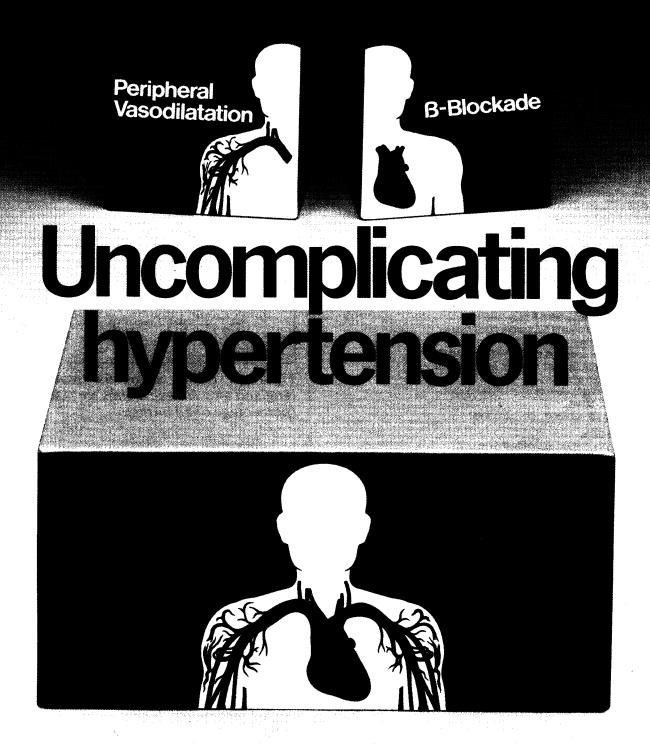
Side effects
Constipation, nausea and giddiness

0021/5056.

Further information is available on request.



Paramol is a trade mark of Duncan, Flockhart & Co. Limited, London E2 6LA.



Trandate offers a unique means of controlling hypertension by combining the benefits of both beta-blockade and peripheral vasodilatation in just one drug.

Suitable for all grades of hypertension, control can usually be achieved with Trandate alone simply by increasing the dose.

With a low incidence of side effects, Trandate provides simple and logical therapy avoiding the complexities of multi-drug regimens or fixed-dose combination products.

Trandate uncomplicates hypertension for both doctor and patient.

Trandate Induction labetalol hydrochloride

Dual action, singular efficacy.

CLASSIFIED ADVERTISEMENTS AND NOTICES

Classified advertisements are welcomed and should be sent to: Sue Cain, Production Department, 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 men and women.

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.

TAMAR FACULTY

A new faculty of the College has been formed covering the counties of Devon and Cornwall and will be called the Tamar Faculty. The first Annual General Meeting will be held in Plymouth on Saturday, 10 May 1980 starting at 09.30 hours. Dr R. J. F. H. Pinsent, OBE, will be installed as the first Provost.

The President of the College, Dr J. P. Horder, OBE, PRCGP, FRCP, MRC.Psych, General Practitioner, London, will deliver the first McConaghey Memorial Lecture at 11.45 hours.

In the afternoon there will be a course which will be approved under Section 63 on the theme of the family doctor's family. Topics to be considered will include conflict between the family doctor's practice and home and family; who should answer the telephone; and the choice of general practitioner for the family doctor's family. The first annual dinner of the new faculty will be held in Plymouth in the evening (lounge suits).

This will be the first meeting of the faculty and it will be held at the Plymouth Postgraduate Medical Centre. All general practitioners and their spouses are welcome at the lecture, the course, and the dinner, whether associated with the College or not.

Further details and applications can be obtained from Dr J. D. Etherington, 21 Mile House Road, Mile House, Plymouth, Devon.

ROYAL COLLEGE OF GENERAL PRACTITIONERS

HISTORY OF MEDICINE FELLOWSHIP

This research fellowship to study the historical aspects of general practice is open to all general practitioners in the UK. The award will amount to £1500 per year for up to three years. The successful applicant will be expected to devote approximately one and a half sessions per week to this study.

Apply:

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

CAMDEN & ISLINGTON AREA HEALTH AUTHORITY (T) Whittington Hospital, Highgate Hill, N19 5NF

Applications are invited for the post of Trainee General Practitioner at the Whittington Hospital and a local training practice, from 1 September 1980. The appointment is for three years and one month and is intended for a doctor who has completed his/her pre-registration training. On completion of this appointment the doctor will be entitled to the vocational training allowance. The post may commence on 1 August 1980 with one month in General Practice. There will then be a period of eighteen months at the Whittington Hospital, starting with six months in General Medicine and Gastroenterology (as Post Registration House Officer) followed by six months as SHO in Paediatrics, and six months as House Surgeon in Obstetrics. The next six months will be as SHO in a Psychiatric Day Hospital and will include some training in Child Psychiatry. There will then be a year in General Practice. There is a half-day release course for all trainees in the area. On completion of the relative posts, the holders will be eligible to sit the MRCGP, DCH, and DRCOG. Application forms from Mrs V. Silbiger Hospital Personnel (Medical Staffing) Tel. 01-272 3070 ext. 569 or direct line 01-263 5752, returnable by 28 April, 1980.