

direct 'one step' metabolism and short action make Ativan preferable to diazepam

short-acting Ativan tends not to accumulate, therefore sedative effects are less frequent than with diazepam!

the straightforward metabolism is another reason to prefer Ativan - for example, when liver function is impaired?

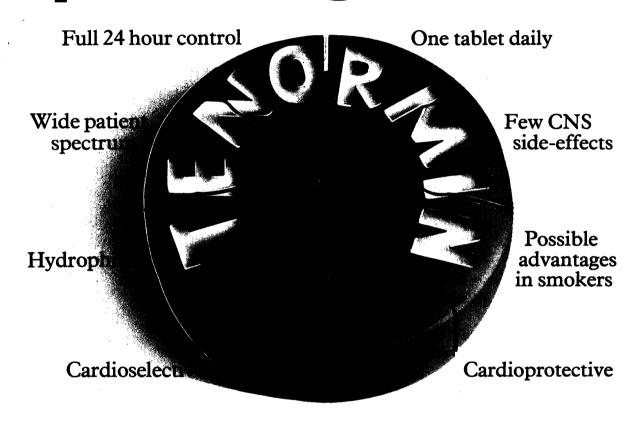
Prescribing Information. Presentation: ATIVAN presented as black driving tablet with containing ting (pragram and as velow fablets, inflaming) ting (pragram and as velow fablets, inflaming). Fig. (presented as black driving) and the presentation of the presentation



# In hypertension

# **TENORMIN**

The only beta-blocker to put it all together in one.



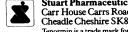
**Tenormin fits the profile of the** ideal beta-blocker for hypertension.

# ENORM

A unique combination of hydrophilicity and cardioselectivity

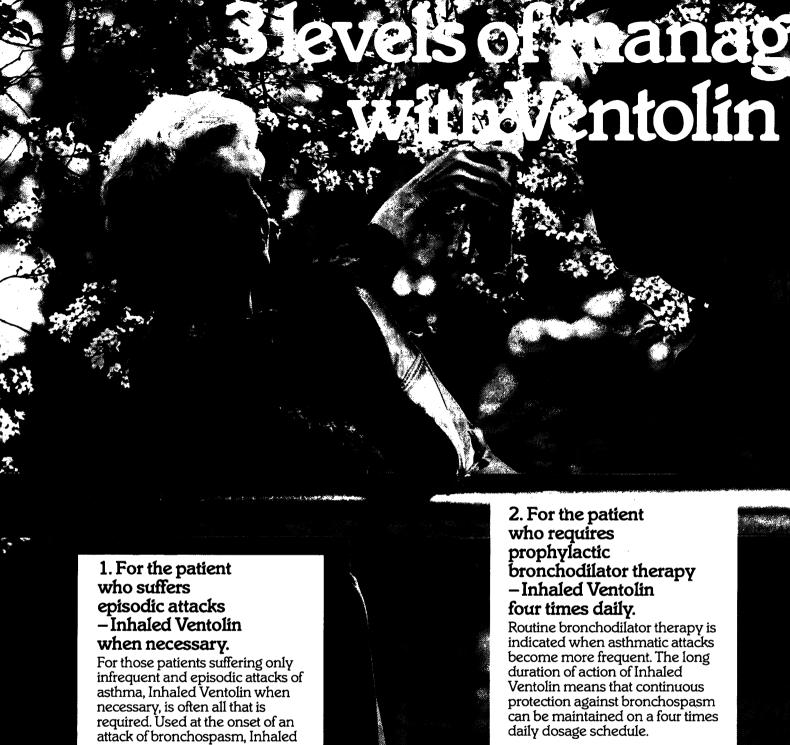
Prescribing Notes:

Full prescribing information is available on request to the compan









Ventolin provides rapid and sustained relief of symptoms. Patients waking with early morning breathlessness will also benefit from the rapid onset of

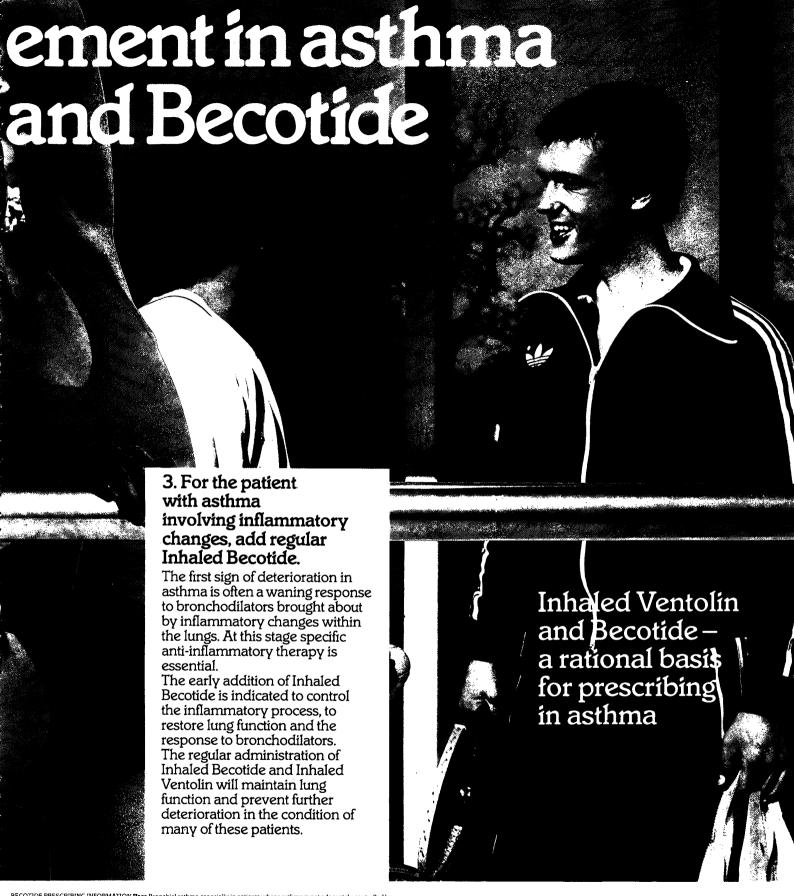
And taken before exertion, Ventolin provides protection against exercise-induced asthma.



Cross-section of bronchiole illustrating bronchospasm due to contraction of respiratory smooth muscle.

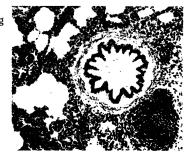
VENTOLIN PRESCRIBING INFORMATION Uses Routine control of bronchospasm in bronchial asthma, bronchitis and emphysema, or as required to relieve attacks of acute bronchospasm. Doses may also be taken before exertion to prevent exercise-induced asthma or before exposure to a known unavoidable challenge. Dosage 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 Inhalter – Adults: one or two inhalations. Children: one inhalation increasing to two inhalations one Ventolin Rotacap 200mcg for 400mcg. Children: one Ventolin Rotacap 200mcg for of women, and inhalation three or four times a day. Children: one Ventolin Rotacap 400mcg three or four times a day increasing to two inhalations if necessary. Using Ventolin Rotacap 400mcg three or four times a day children: one Ventolin Rotacap 400mcg three or four times a day. Children: one Ventolin Rotacap 400mcg three or four times a day children: one Ventolin Rotacap 400mcg three or four times a day. Children: one Ventolin Rotacap 400mcg three or four times a day increasing to two inhalations if necessary days feetive dose of inhalation three or four times a day. Children: one Ventolin Rotacap 400mcg three or four times a day. Children: one Ventolin Rotacap 400mcg three or four times a day. Children: one Ventolin Rotacap 400mcg three or four times a day. Children: one Ventolin Rotacap 400mcg ventolin shalation should not be used for the prevention of threatened abortion during the first or second trimester of pregnancy. Precartions is haladed Ventolin should be administered advice. Ventolin Should be administered advice. Ventolin Should be administered advice. Ventolin Rotacaps 400mcg three or four timester of pregnancy is undesirable. Side affects to the prevention of delivering 100mcg salotament with inhalated Ventolin. Presentation and Basic NRS cost Ventolin Rotacaps 200mcg and 400mcg each contain a mixture of the stated amount of mixturbus and S





BECOTIDE PRESCRIBING INFORMATION **Uses** 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 adrenocorticotrophic hormone (ACTH) or its synthetic equivalent. **Dosage 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 twelve to stateen inhalations per day and subsequently reduced when the patient begins to respond. Alternatively, the total daily dose may be administered as two divided doses. **Children**: one or two inhalations, two, three or four times a day according to the response. **Using Becotide Rotacap two**, three or four times adva according to the response. **Por optimum results inhaled Becotide should be administered regularly**. **Contart-indications**. **No** specific contrat-indications to inhaled Becotide are known but special care is necessary in patients with active or quiescent pulmonary tuberculosis. **Precentions** The maximum daily intake of Bectomethasone Dipropionate BP should not exceed Imp. 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 gad during the first trimester of pregnancy is undesirable. When transferring patients to Becotide from systemic steroid herapy 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 candidasis of the mouth and throat (thrush) occurs in some patients, particularly those with high blood levels of Gradida precipitins. Topical

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





References

1. Schersten Biet al. Clinical and biochemical effects of spironolacture administered once daily in primary hypertension. Hypertension 1980, 2(6), 672–9.

2. Hollander W. Hemodynamic and pathophysio-logical considerations in choosing antihyperiensive therapy Clin Therap 1979, 2(Suppl A), 11-23.

3. Sanguigni D. Benvenuti C. Comparison between spironolactorie and amiliorade associated with hydrochlorothiazade in the treatment of mild and moderate hypertension. Clin Therap 1978, 87–69,74.

Proscribing Information.

moderate hyperclasion. Clin Therap 1978, 87, 69, 74
Prescribing Information
Presentation
Addactide 50
Cream, scored tablets stamped "SEARLE 180" on one

side containing Spironolactone B P 50mg and Hydroflumethiazide B P 50mg Uses Essential hypertension Dosage and Administration Adults

Adults
Adults
Adults
Addactide 50 - one or two tablets with breakfast or
the first main meal of the day
Children
Daily dosage should provide 1.5 to 3mg of spironolactone per kilogram body weight-given in divided
doses

The Caring, Sparing Diuretic.

doses Contra-indications, Warnings, etc.

Anuria, acute renal insufficiency, rapidly progressing impairment of renal function, hyperkalaemia, patients

who are hypersensitive to either component, concurrent administration with other potassium conserving diuretics. Aidactide potentiales the effect of other anti-

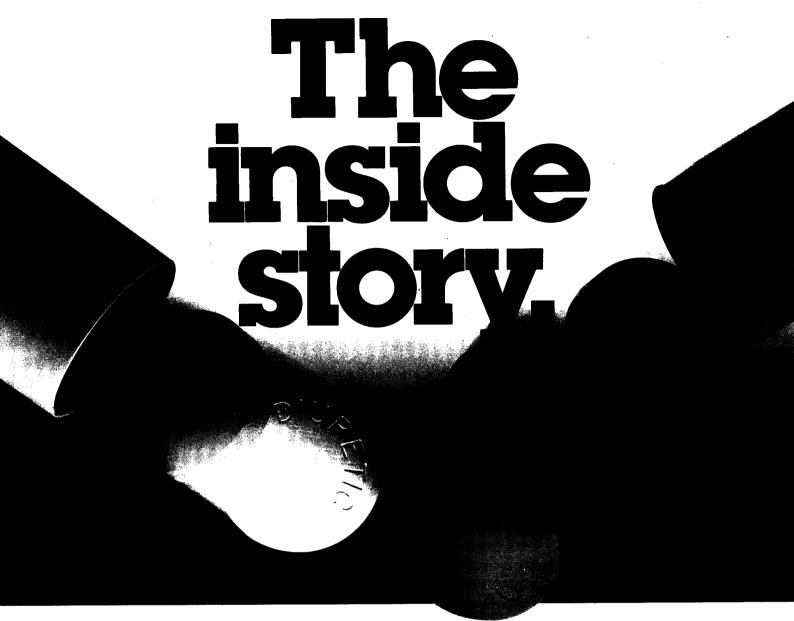
hypertensive drugs and their dosage should be reduced when Aldactide is added to the treatment

rations should be carefully evaluated for possible disturbances of fluid and electrolyte balance. Thisardes may induce hyperuncaemia and decrease glucose tolerance. Spironolactone or its metabolites may, and hydroflumetimazide does, cross the placental barrier. Use of Aldactide in pregnant women requires the anticipated benefit be weighed against the possible. 28 tablets £5.60 Full prescribing information is available on request Aldactide and Searle are registered trade marks

hazards to the feetus. Adverse effects reported in association with spironofactone include gynaecomastia gastro intestinal intolerance skin rashes, menstrual irregularities, impotence mild androgenic effects etc. Adverse effects reported in association with thiazides include gastrointestinal symptoms, skin rashes.

blood dyscrasias, muscle cramps etc Product Licence Holder and Number

Searle Pharmaceuticals. Division of G.D. Searle & Co. Ltd., PO. Box 53, Lane End Road, High Wycombe, Bucks. HP12 4HL Telephone. High Wycombe 21124 *SEARLE* 



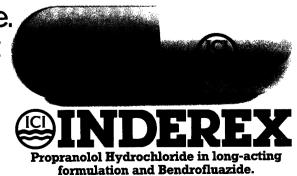
# ICI announce 'Inderex'.

'Inderex' is designed to give full 24-hour control of blood pressure from a single daily dose.

'Inderex' combines the world's most widely prescribed beta-blocker, 'Inderal'-in the form of 'Inderal' LA, with one of the world's most widely used

diuretics, bendrofluazide.
'Inderex', the next logical step in the treat-

ment of hypertension.



The next logical step

Inderex: abridged prescribing information. Dosage One capsule daily in hypertension. Contraindications Heart block. Bronchospasm. Anuria, renal failure or thiszide sensitivity. Prolonged fasting, death-colic acidosis. Co-administration with verspanul. Precautions Untreated cardiac failure. Bradycardia: Diabetes. Repaid cirrhosis with ascrites. Discontinuance of clonidine. Anaesthesia. Pregnancy. Adverse Reactions. Proprantol Bydrochloride: cold extremities, nauses, insomnia, lassified and time are usually transient. Isolated cases of paraesthesia of the hands. Rashes and dry eyes have been reported with beta-blockers—consider discontinuance if they occur. Cessation of beta-blocker therapy should be gradual. Bendrofinaride: Hypokalaemia. Hyperuricaemia. Rare reports of rashes, necrotising vasculitis, acute pancreatitis, blood dyscrasias and aggravation of pre-extising myopia. Overdosage see data sheet. Basic NEE cost 28 day calender pack 63, 12, FLN occur. Alderley Park, Macclesfield, Cheshire SK10 4TF. for prograndol hydrochloride in a long-acting formulation, and bendrofination. And prescribing information is available from Imperial Chemical Industries PLC, Pharmaceuticals Division, Alderley House, Alderley Park, Macclesfield, Cheshire SK10 4TF.



'INDERAL' LA ABRIDGED PRESCRIBING INFORMATION. DOSAGE: 12 CAPSULES ONCE DAILY IN HYPERTENSION. CONTRAINDICATIONS: HEARTBLOCK. BRONCHOSPASM. PROLONGED FASTING. METABOLIC ACIDOSIS. CO-ADMINISTRATION WITH VERAPAMIL PRECAUTIONS: UNTREATED CARDIAC FAILURE. BRADYCARDIA. DISCONTINUANCE OF CLONIDINE. ANAESTHESIA. PREGNANCY. ADVERSE REACTIONS: COLD EXTREMITIES, NAUSEA, INSOMNIA, LASSITUDE AND DIARRHOEA ARE USUALLY TRANSIENT. ISOLATED CASES OF PARAESTHESIA OF THE HANDS. RASHES AND DRY EYES HAVE BEREPORTED WITH BETTA BLOCKERS. CONSIDER DISCONTINUANCE IF THEY OCCUR. BETTA BLOCKERS SHOULD BE WITHORAWIN GRADUALLY. OVERDOSAGE: SEE DATA SHEET. PACK SIZE AND BASIC NHS COST: £6.66 PER 28 CAPSULES. PL. NO. 0029/0128 'INDERAL' LA IS A TRADE MARK FOR PROPRANOLOL HYDROCHLORIDE IN LONGACTING FORMULATION. FULL PRESCRIBING INFORMATION IS AVAILABLE FROM: IMPERIAL CHEMICAL INDUSTRIES PLC, PHARMACEUTICALS DIVISION, ALDERLEY HOUSE, ALDERLEY PARK, MACCLESFIELD, CHESHIRE.

clavulanate-potentiated amoxycillin

# Confidence inspired by outstanding results

Over 6,000 patients treated in clinical trials Over 100 published papers

its launch, Augmentin has been d as offering enormous new otential in the treatment of bacterial infections.

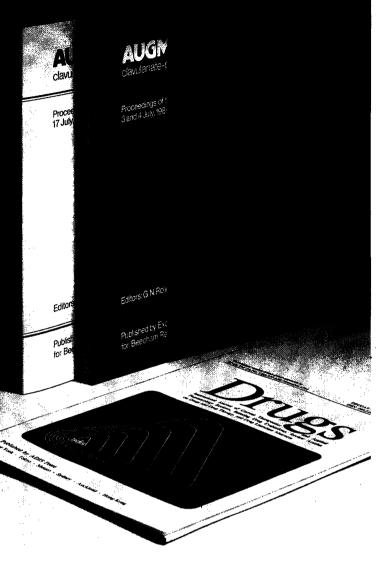
A recent BMI leader entitled 'Twent's one years of beating beta-lactamases' referred to Augmentin's unique mode of action and to its clinical effectiveness:

"In the compound recently marketed under the name Augmentin, clavulanic acid is partnered by amoxycillin and the pair evidently correspond well in their pharmacokinetic behaviour, they appear to be well tolerated at the recommended dosage, and have been successfully used to treat infections due to both sensitive and beta-lactamase-producing organisms affecting the respiratory and urinary tracts and the soft tissues." 1

In practice, this means that you can rely on Augmentin when faced by patients with bacterial infections. 2,3

Augmentin has already been the subject of two International Symposia and a Drugs review Focus on Augmentin which attest both to its antibacterial activity and to its clinical efficacy. A boxed set of the proceedings of these symposia and/or Focus on Augmentin can be obtained on request to the Company.

3. Watson, A. and Mahendra, M., Ibid., pp 187-202.



Prescribing Information

Uses: Respiratory tract, genito-urinary tract, skin and soft tissue infections. Dosage: Adults and children over 12 years of age: One Augmentin or Augmentin Dispersible Tablet (375 mg) three times a day. infections. Dosage: Adults and children over 12 years of age: One Augmentin or Augmentin Dispersible Tablet (375 mg) three times a day. In severe infections dosage may be doubled. Treatment with Augmentin should not be extended beyond 14 days without review. At present there is insufficient clinical evidence to permit a firm dosage recommendation to be made for younger children. Contra-indication: Penicillin hypersensitivity. Precautions: Safety in human pregnancy is yet to be established, although high dose animal studies show no teratogenicity. Dosage need not be reduced in patients with renal impairment, unless the condition is severe enough to require dialysis. Side-Effects: As with other penicillins, these are uncommon and mainly a mild and transitory nature, and include diarrhoea, indigestion, nausea, vomiting and candidiasis. If gastro-intestinal side-effects occur they may be reduced by taking Augmentin at the start of meals. Erythematous and urticarial rashes sometimes occur but their incidence has been particularly low in clinical trials. Treatment should be discontinued if either type of rash appears. Availability and Basic NHS Prices:(Prices correct at time of printing). Augmentin Tablets and Augmentin Dispersible Tablets, each containing potassium clavulanate (equivalent to 250 mg amoxycillin). Augmentin Tablets (bottles of 30,100). Cost per tablet - 25p PL 0038/0270. Augmentin Dispersible Tablets (foil wrapped 30,90). Cost per tablet - 28p. PL 0038/0272.

Further information is available on request from the Company.



## **Beecham Research Laboratories**

Brentford, England.

<sup>1.</sup> Leading article Brit. Med. J., 1982, **284**, 369. 2. Further analysis of the data presented in summary form in: A multicentre antibiotic sensitivity survey. Proceedings of the First Augmentin Symposium. Rolinson, G.N. and Watson, A (eds), Excerpta Medica, 1980, pp 173-183. Full data available on

# The fast, simple at oromote period

# crific way to



80% ulcers healed in one month!

Rapid relief of pain, rapid healing of the ulcer.

No dosage simpler in peptic ulcer treatment

Specifically developed as b.d. treatment

The panetits of highly specifie Halblockade

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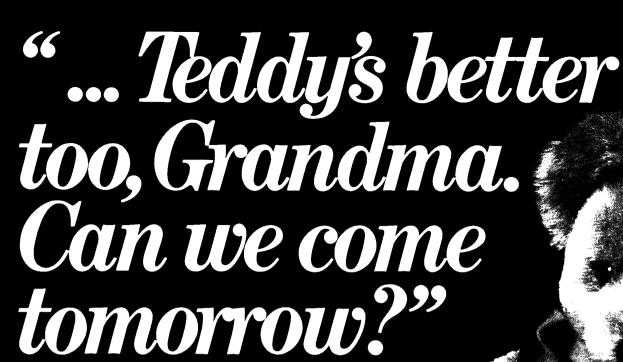


A British advance from Glaxo

# theophylline Unicontin™ tablets

British Expertise in Theophylline Therapy

Uses: Treatment and prophylaxis of bronchospasm associated with asthma, emphysema and chronic bronchitis; also cardiac asthma and left ventricular or congestive cardiac failure. Dosage and administration: 3 or 4 tablets taken as a single daily dose, following an initial week of therapy on 2 tablets daily. Tablets should be swallowed whole or halved and not chewed. Each tablet contains 200 mg, theophylline BP. Contra-indications: None. Side-Effects: The risk of side-effects usually associated with theophylline and xanthine derivatives such as nausea, gastric irritation, headache and CNS stimulation are absent or much diminished. Basic NHS cost: 24p per day (ex. 100 pack, 4 o.d.). PL 0337/0057. Napp Laboratories Limited Watford WD2 7RA Member of Napp Pharmaceutical Group W Uniphyllin and Unicontin are Trade Marks Napp Laboratories Limited 1982.



its outstanding safety profile. It is available in three different oral presentations which offer acceptable and convenient therapy for younger patients.

Amoxil – the leading antibiotic prescription for children in Britain.

Rapidly resolves young patients' infections.

### Prescribing Information

Commonly occurring bacterial infections of the upper and lower respiratory tract, urinary tract, skin and soft tissue. Presentations:

Amoxil syrup: 125mg and syrup forte 250mg per 5ml PL0038/0108/9 Amoxil paediatric suspension: 125mg per 1.25ml PL0038/0107 Amoxil capsules: 250mg and 500mg PL0038/0103/5

- ▼Amoxil dispersible tablets: 500mg PL0038/0277
- Morail 3g sachet: PL0038/0238

  ▼Amoxil vials for injection: 250mg,
  500mg and 1g PL0038/0221/2/5
  The amoxycillin content per dose unit is present as the trihydrate in Amoxil oral preparations and as the sodium salt in Amoxil injections.

salt in Amoxil injections. Average treatment cost: children 28p/day (125mg syrup t.d.s.) adults 49p/day (250mg capsules t.d.s.). Dispersible tablet: 35p per tablet (30 pack), 3g Sachet £1.98 per sachet.

Dosage Children's Dosage (up to 10 years) Oral: 125mg three times a day. In severe infections doses should

Injectable: 50-100mg/kg bodyweight per day in divided doses.

Adult Dosage

Oral: 250mg three times a day.

In severe infections doses should be

Injectable: 500mg IM 8 hourly (or more frequently if necessary) in moderate infections. 1g IV 6 hourly in severe

infections. Contra-Indications

Amoxil is a penicillin and should not be given to penicillin hypersensitive patients. Side-effects, as with other penicillins, are usually of a mild and transitory nature: they may include diarrhoea or indigestion. Occasionally a rash may occur in which case treatment should be discontinued. Since Amoxil is a penicillin, problems of overdosage are unlikely to be encountered.

Further information on Amoxil (amoxycillin) is available f



Bencard, Great West Road, Brentford. Telephone: 01-560 5151 Amoxil and the Bencard logo are trademarks.



# "Tricyclics are extremely dangerous drugs when taken in overdose" Hollister, L. E., (1981), Drugs, 22, 129-152.

PRESCRIBING INFORMATION

Indications Endogenous depression, reactive depression and anxiety, agitation and insomnia where associated with depressive illness.

depressive illness.

Dosage Treatment should
be initiated at 30mg, a day as
a single bedtime dose or in
divided doses. Dosage may
be increased after the first
week. The usual effective week. The usual effective daily dosage lies in the range of 30-60mg, although divided daily dosages up to 200mg, have been well

Contra-Indications,

Warnings, Etc. Norval is not yet recommended for use in recommended for use in children or pregnancy. When treating patients with epilepsy, diabetes, hepatic or renal insufficiency, normal precautions should be exercised and the dosages of all medication kept under review. Care should be taken in patients with cardiac nditions, but cardiotoxic effects have not been seen at therapeutic dosage even in patients with pre-existing cardiac disease. Drowsiness may occur during the first few days of treatment and patients should be warned to avoid alcohol and activities that demand constant alertness. Norval may interact with clonidine, but does not interact with bethanidine, guanethidine, propranolol, or coumarin type anticoagulants; nevertheless usual monitoring procedures should be followed.
Concurrent use of Norval with MAOI's or barbiturates is not yet recommended.

Side-Effects Serious sideeffects are uncommon. A small number of cases of reversible on cessation of treatment, have been reported; white blood cell counts are advisable in patients with persistent signs of infection. Jaundice, usually mild, hypomania and convulsions have also been reported. Additional adverse disorders include breast disorders (gynaecomastia, nipple tenderness and nonuerperal lactation), puerperal lactation dizziness, postural hypotension and skin rash. Drowsiness may occur initially but no drug related anticholinergic effects have been observed.

Overdosage There is no specific antidote to Norval. Treatment is by gastric lavage with appropriate supportive therapy. Symptoms of overdosage are normally confined to prolonged

sedation.

Availability and NHS
price 10mg. 20mg. and
30mg. mianserin hydrochloride tablets. Basic NHS cost per day (30mg. dosage) is 21p. (Price correct at time of

- printing.)
  References
  1. Crome, P. and Newman,
  B., (1979), Postgrad.
  med. J., 55, 528-532.
  2. O.P.C.S., (1979), London.
  3. Chand, S., Crome, P. and
  Dawling, S., (1981),
  Pharmakopsych., 14,
  15.17



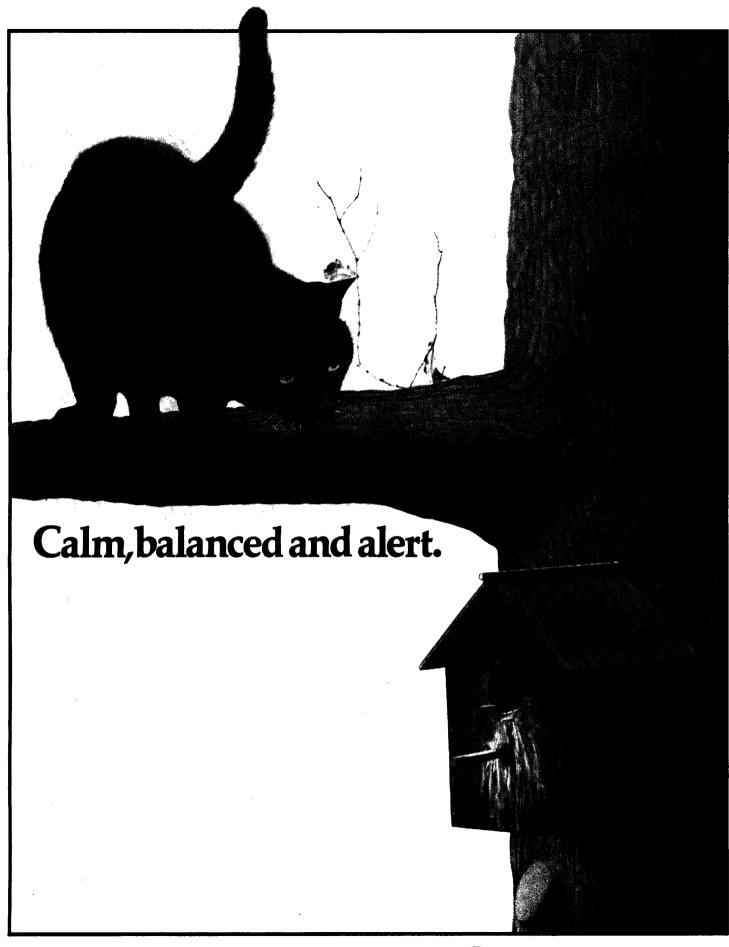
Self-poisoning with amitriptyline, and other tricyclic antidepressants is now implicated in some 10,000 hospital admissions and 400 deaths per annum-a tragic waste of human life on a scale equivalent to one death every day.

Norval is an effective antidepressant which, in contrast to the tricyclics, has a high safety margin in overdose.3 In the treatment of depressed patients, where the possibility of deliberate or accidental self-poisoning cannot easily be ruled out, the difference between Norval and the tricyclics can be life-saving.



Effective in depression without tricyclic overdose risks.





M&B May&Baker

Prescribing information: Dosage: Minor mental and emotional disturbances and vertigo. Adults: 1 x 5 mg tablet TD.S. increasing if necessary to a maximum of 6x 5 mg tablets per day. Contra-indications: No absolute contra-indications. Precautions: Usual precautions during pregnancy and lactation. Patients should not drive contra-indications precautions: Usual precautions during pregnancy and lactation. Patients should not drive slight transient drowsiness may occur in some patients during the early stages of treatment. Rare reports of mild skin reactions and dry mouth. Presentation/cost 5 mg tablet (PL0012/5263) £0.53 x 25 (April '82). Further information available on request. May & Baker Ltd., Dagenham, Essex RM10 7XS.

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# Practical diagnosis means effective management for atopic patients.

You often see atopic patients whose conditions are difficult to manage. Their range of symptoms may be confusing. In-vivo tests can be time consuming and impractical. Symptomatic treatment can seem the only option. Now, the hospital laboratory can confirm atopy and reliably identify important allergens. A single blood sample plus a full allergic history can cost effectively provide you with accurate information.

# Phadebas IgE PRIST and RAST®

Please send me full details on Phadebas IgE PRIST and RAST
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Speciality
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# THE MSD FOUNDATION

# **Audiovisual Programmes for General Practitioner Training**

# **Programmes for 1982**

Our 1982 catalogue contains details of videocassette and tape/slide programmes for use with small groups in general practitioner training. They include:

### Immunization in Childhood

- 1. Toby's mother, a page editor for a national newspaper, is dubious about his receiving pertussis vaccine because of his eczema, a family history of atopy and the effect of correspondence with the Association of Parents of Vaccine Damaged Children.
- 2. Robin is nearly three and has severe asthma, but is currently well on alternate day prednisolone. He is about to start at playgroup and his parents are worried about contact with measles. They have heard that the vaccine can cause fits and this worries them.
- 3. Sophie is awating an appointment at a child development clinic because you believe there is moderate motor delay and her mother is suspicious she might be deaf. You see her at six months for her first triple.
- 4. Samantha, aged three and a half, has a soil-contaminated laceration of her right knee. Her notes have been mislaid and her mother, who has seven children, cannot remember whether she was immunized as a baby. Consider also what your practice would be if she had received a full course in infancy.

These are four of the 13 'short cases' presented for group discussion in a tape/slide programme designed to help general practitioners understand the use and efficacy of the standard vaccines used in childhood. The sound track lasts 15 minutes and is combined with 60 slides to provide material for an hour and a half 'teaching session on the topic.

Videocassettes are available for sale on U-matic, VHS, Philips 1500 or Betamax formats, and the average cost is about £20-£25. Tape/slide programmes cost about £30 per session.

Further information, and catalogue, can be obtained by writing to:

The MSD Foundation
Tavistock House
Tavistock Square
London WC1
Tel: 01-387 6881

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Classified advertisements are welcomed and should be sent to: 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 six weeks before the 1st of 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.

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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.

### **MRCGP CANDIDATES**

New practice exams now available. Two MCQ papers (120 questions) covering the new subject areas as required by the Royal College. (This includes social and legal aspects, epidemiology, statistics and practice organization.) Answers and detailed teaching explanations provided together with computer sheets and free marking service. MEQ and TEQ papers have sample answers, explanations, marking schedules references and practical examination advice. Also hints on log diary, oral and reading suggestions. Send cheque now for £15 plus 60p p & p.



Dept. GP PasTest Service, PO Box 81, Hemel Hempstead, Herts HP1 1AA Tel. Hemel Hempstead (0442) 52113

### WELLINGTON CLINICAL SCHOOL OF MEDICINE

Faculty of Medicine University of Otago

# SENIOR LECTURER IN GENERAL PRACTICE (Half-time)

Applications are invited from suitably qualified medical practitioners for this half-time post within the Wellington Clinical School of Medicine.

The appointee, who will be a member of the staff of the Department of Medicine, will be responsible for the development and co-ordination of educational and training programmes relating to general practice for medical students at the Wellington Clinical School.

It is anticipated that the appointee will work in association with the staff of various clinical departments already established. He or she will be expected to establish and maintian close professional relations with practitioners in the region, and will be encouraged to participate in research particularly related to general practice. It is expected that the balance of the appointee's time will be devoted to active general practice.

Salary: Senior Lecturer, pro rata—NZ\$35,121-\$45,213 per annum.

Further particulars are available from The Association of Commonwealth Universities (Appts), 36 Gordon Square, London WC1H 0PF; from The Dean, Wellington Clinical School of Medicine, Wellington Hospital, Wellington 2, New Zealand; or from The Registrar of the University, P.O. Box 56, Dunedin, New Zealand.

Applications to be returned as soon as possible.

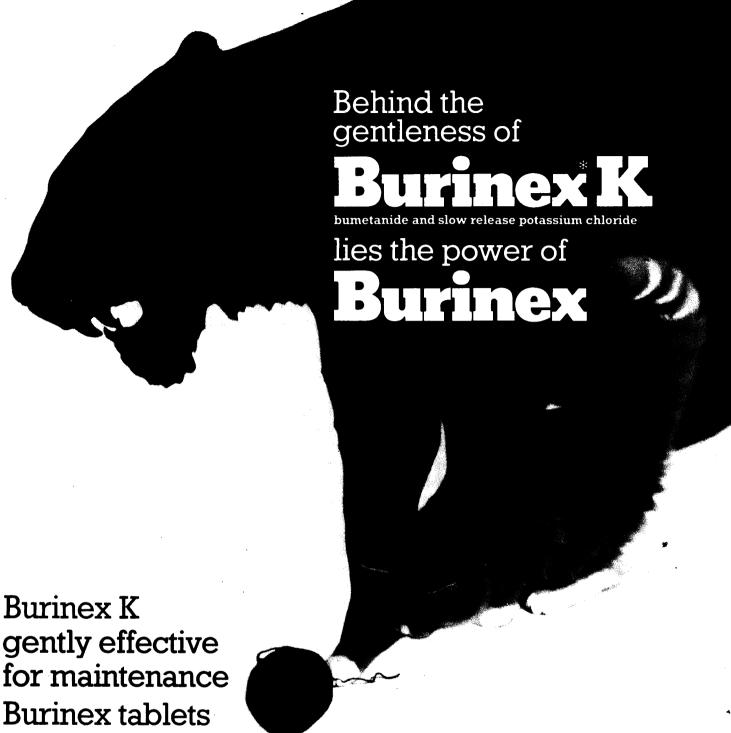
### **PARTNERSHIP REQUIRED**

Indian graduate, 35, married. Experience in the UK: psychiatry, casualty, orthopaedics. Then joined reputable VT scheme: medicine, obs/gynae, paediatrics. Finishing general practice 31 Jan 1983. FP/IUCD and Obs list. Curriculum vitae and references available. Tel: 0632-621083 or 658121.

# COMPUTERS AND THE GENERAL PRACTITIONER

This new book published by Pergamon Press for the Royal College of General Practitioners follows from a Study Day organized by the College in 1981. The chapters are written by a number of doctors with personal experience of computing in general practice as well as experts on the subject. The topics include a general review, examples of the experience of some early pioneers, the problem of security, education, audit and ECG analysis, and perceptive reviews on the challenge and opportunities for further development.

Computers and the General Practitioner is available now from the Publication Sales Department, Royal College of General Practitioners, 14 Princes Gate, Hyde Park, London SW7 1PU, price £10.00 plus 50p postage. Payment should be made with order.



combine strength with gentleness for more refractory oedema
Burinex injection fast powerful action for emergencies

Formulations Burinex Injection: 0.5 mg/ml in 2 ml, 4 ml and 10 ml ampoules. Burinex Tablets: 1 mg and 5 mg. Burinex K: 0.5 mg burnetanide, 7.7 mmol slow release potassium chloride. Indications Acute pulmonary oedema and oedema of cardiac, renal or hepatic origins. Dosages Burinex Injection: Initially 1-2 mg i.v., if necessary repeated at 20 minute intervals to achieve desired response. Where appropriate higher doses may be given by infusion over 30-60 minutes. Burinex Tablets: Most patients require 1 mg Burinex daily as morning or evening dose. In refractory cases dosage can be increased to achieve the desired response. For high dose treatment 5 mg Burinex should be given initially and increased by 5 mg steps at 12-24 hour intervals until desired response is achieved. Burinex K: Most patients require 2 tablets Burinex K daily. Contra-indications, Precautions and Side Effects Contra-indicated in hepatic coma, severe electrolyte depletion and severe progressive renal failure. Hypokalaemia and circulatory collapse may follow inappropriately excessive diuresis. Concurrent digitalis therapy in association with electrolyte disturbances may lead to digitalis toxicity. Concurrent antihypertensive or antidiabetic therapy may require adjustment. Caution should be exercised in the first trimester of pregnancy. Burinex K is contra-indicated in combination with potassium sparing agents. Burinex K should be stopped immediately if signs or symptoms of bowel ulceration appear. Side effects such as skin rashes, muscular cramps, rises in serum uric acid and thrombocytopenia may rarely occur. Product Licence Numbers: Burinex Injection: 0043/0060 Burinex Tablets: 0043/0021, 0043/0043 Burinex K: 0043/0027B Basic N.H.S. Prices Burinex Injection: 0.5 mg/ml – 5 x 4 ml £3.34 Burinex Tablets: 1 mg – 100 tabs £4.74 Burinex K: 100 tabs £3.24



\*Burinex is a trade mark