



**LESS SHEEP  
MORE SLEEP**

# **DALMANE 15mg**

flurazepam

## **COUNT ON IT FIRST**

**Prescribing Information:** Indications Insomnia of all degrees. Sleep disturbances due to organic conditions, in conjunction with specific therapy. **Dosage** Adults: Mild insomnia 15mg. Moderate to severe insomnia 15 or 30mg. Severe insomnia 30mg. Elderly patients 15mg. **Precautions** As with other CNS drugs, patients should avoid alcohol while under treatment. Patients' reactions (driving ability, etc.) may be modified. Prescribe in early pregnancy only when absolutely indicated. The use of high doses of benzodiazepines, especially over prolonged periods, can sometimes lead to dependence particularly in patients with a history of alcoholism or drug abuse. Treatment in these cases should be withdrawn gradually. **Side-effects** Dalmane is well tolerated. However, morning drowsiness, dizziness and ataxia may occur. Occasionally patients may experience a bitter after-taste. **Basic NHS Cost** 1 x 15mg capsule 4.9p per night ex 500 pack. 1 x 30mg capsule 6.8p per night ex 500 pack. **Product Licence Numbers** 0031/0065 (capsules 15mg) 0031/0066 (capsules 30mg). **Presentations** Dalmane capsules 15mg and 30mg. Roche Products Limited, PO Box 8, Welwyn Garden City, Hertfordshire AL7 3AY. Dalmane is a trade mark.



J236319/783

New  
product  
for Angina



# Monit

Isosorbide mononitrate 20mg, Stuart

PREDICTABLE  
ANGINA PROPHYLAXIS



Usually 1b.d.



Effective.



For a wide range of patients.

#### Prescribing Information

**Presentation** 'Monit' tablets are white, round, scored tablets embossed 'Stuart 20'. Each tablet contains 20mg isosorbide mononitrate. **Uses** Prophylaxis of angina pectoris. **Mode of Action** Isosorbide mononitrate is an active metabolite of isosorbide dinitrate and from an oral dose exerts qualitatively similar effects. However, unlike the dinitrate which is subject to extensive 'first pass' hepatic metabolism, it has virtually complete systemic availability from an oral dose. Isosorbide mononitrate thus achieves predictable and sustained blood levels. Onset of pharmacological action occurs within 20 minutes of an oral dose and is maintained for more than 8 hours. **Dosage and Administration** Usually one tablet twice or three times daily. Patients already accustomed to prophylactic nitrate therapy (for example with isosorbide dinitrate) may normally be transferred directly to a therapeutic dose of 'Monit'. For patients not receiving prophylactic nitrate therapy, it is recommended that the initial dose should be half a tablet twice daily. Maintenance dose in individual patients will be between 20 and 120mg daily. The tablets should be swallowed whole with a little fluid. **Contra-indications, Warnings, etc.** *Contra-indications:* A known sensitivity to the drug or to isosorbide dinitrate. *Warnings:* The following adverse effects may be seen with nitrate therapy. 1. Cutaneous vasodilation, headache, dizziness and weakness may occur, and are usually controlled by lowering the dose. The incidence of these effects is highest at commencement of treatment and tends to decline with time. 2. Postural hypotension may occur, especially with high doses. 3. Nitrate preparations can act as physiological antagonists to noradrenaline, acetylcholine, histamine and other agents. 4. Dry rash and/or exfoliative dermatitis have been described rarely with isosorbide dinitrate and similar reactions might be expected occasionally. **Overdosage:** Overdosage should be treated symptomatically. The main symptom is likely to be hypotension and this may be treated by elevation of the legs to promote venous return. **Pharmaceutical Precautions** Store at room temperature, protected from moisture. **Legal Category** POM. **Package Quantities** 'Monit' tablets are supplied in bottles of 56 tablets. **Further Information** Isosorbide mononitrate is the British Approved Name for isosorbide-5-mononitrate. Beta-blocking drugs have a different pharmacological action in angina and may have a complementary effect when co-administered with 'Monit'. **Product Licence Number** 0029/0174. **Basic N.H.S. Cost** 56 tablets £4.78.



Further information is available on request to the company  
Stuart Pharmaceuticals Limited Carr House, Carrs Road, Cheadle, Cheshire SK8 2EG.

'Monit' is a trademark.

# There is no substitute for success



in urinary tract infections

## Septtrin b.d.

co-trimoxazole

### Prescribing Information

**Uses:** Sensitive bacterial infections of the lower respiratory, urinary and genital tracts, sinusitis, otitis media, skin infections, septicaemia, typhoid and paratyphoid fevers, and other infections caused by sensitive organisms.

**Dosage:** *Septtrin Forte Tablets:* over 12 years, one twice daily; *Septtrin Tablets/Septtrin Dispersible Tablets:* over 12 years, two twice daily; children 6 to 12 years, one twice daily; *Septtrin Suspension:* over 12 years, 10ml Adult twice daily; children 6 to 12 years, 10ml Paediatric twice daily; 6 months to 6 years, 5ml Paediatric twice daily; 6 weeks to 6 months, 2.5ml Paediatric twice daily.

**Contra-indications:** Septtrin is contra-indicated in patients with marked liver parenchymal damage, blood dyscrasias or severe renal insufficiency. Septtrin should not be given to patients hypersensitive to sulphonamides or co-trimoxazole; should not be given during pregnancy or to neonates.

**Precautions:** In cases of renal impairment a reduced dosage is indicated and an adequate urinary output should be maintained.

Trade Mark

Regular blood counts are necessary whenever long-term therapy is used. Caution is advised in patients with folate deficiency. Care should be taken when giving Septtrin to patients receiving oral anti-coagulants of the coumarin group, pyrimethamine, sulphonylureas, or phenytoin.

**Warnings and Adverse Effects:** Occasionally nausea, vomiting, diarrhoea, glossitis and skin rashes may occur with normal doses and, very rarely, haematological reactions.

Further information is available on request.

**Wellcome Medical Division**  
The Wellcome Foundation Ltd, Crewe, Cheshire.



1. Gower, P.E. and Tasker, P.R.W. (1976), *Brit. Med. J.*, 1, 684. Double-blind comparison of Septtrin with cephalixin in 93 women with acute UTI. After two weeks, 96% of Septtrin-treated patients were infection-free, compared with 68% of cephalixin-treated patients.

### Presentations:

	Product Licence	Formulation	Basic NHS Cost
Septtrin Forte Tablets	PL3/0121	160mg Trimethoprim BP 800mg Sulphamethoxazole BP	£1.90 for 10
Septtrin Tablets	PL3/0109	80mg TMP 400mg SMX	£2.27 for 20
Septtrin Dispersible Tablets	PL3/0099	80mg TMP 400mg SMX	£2.42 for 20
Septtrin Adult Suspension	PL3/5223	80mg TMP 400mg SMX in 5ml	£3.22 for 100ml
Septtrin Paediatric Suspension	PL3/5222	40mg TMP 200mg SMX in 5ml	£2.00 for 100ml
Septtrin Paediatric Tablets	PL3/0108	20mg TMP 100mg SMX	£0.69 for 20

# + Diuretic Beta Blockade


The combination of a beta-blocker with a diuretic is often effective in controlling hypertension when single-drug therapy has failed to produce an adequate response.

'**Inderex**' combines in a single capsule the world's most widely prescribed beta-blocker, 'Inderal' (in its long-acting formulation, 'Inderal' LA) with the equally well-proven diuretic, bendrofluazide.

Simple, once-daily dosage encourages compliance especially in asymptomatic patients.

**'Inderex'**: abridged prescribing information. **Presentation** Capsules, each containing 160 mg propranolol hydrochloride in long-acting formulation and 5 mg bendrofluazide. **Dosage** One capsule daily in hypertension. **Contraindication** Heart block. Bronchospasm. Anuria, renal failure or thiazide sensitivity. Prolonged fasting. Metabolic acidosis. Co-administration with verapamil. **Precautions** Untreated cardiac failure. Bradycardia. Diabetes. Hepatic cirrhosis with ascites. Discontinuation of clonidine. Anaesthesia. Pregnancy. **Adverse Reactions: Propranolol Hydrochloride** Cold extremities, nausea, insomnia, lassitude and diarrhoea 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. **Bendrofluazide** Hypokalaemia. Hyperuricaemia. Rare reports of rashes, necrotising vasculitis, acute pancreatitis, blood dyscrasias and aggravation of pre-existing myopia. **Overdosage** see data sheet **Basic NHS cost** 28 calendar pack £7.44. **PL No.** 0029/0157. 'Inderex' is a trademark for propranolol hydrochloride B.P. in a long-acting formulation, and bendrofluazide B.P.





# There is no substitute for experience

## Specify

# Diabinese<sup>\*</sup>

chlorpropamide

<sup>\*</sup>Trade Mark

## The original chlorpropamide

### Prescribing Information

**Indications:** maturity-onset, non-ketotic diabetes mellitus uncontrolled by diet alone. **Contra-indications:** pregnancy impairment of hepatic, renal or thyroid function; juvenile or growth-onset diabetes mellitus; severe, unstable 'brittle' diabetes; diabetes complicated by ketosis, acidosis, diabetic coma, major surgery, severe infection, severe trauma. **Precautions:** care should be taken to prevent hypoglycaemic reactions, particularly during the transition from insulin to the oral drug; also when other compounds are used concomitantly

with Diabinese. **Adverse reactions:** mostly dose related; they include anorexia, nausea, vomiting, epigastric discomfort. Certain idiosyncratic and hypersensitivity reactions have occurred, including jaundice and skin eruptions. **Dosage:** range 100 mg to 500 mg daily (See Data Sheet for full details of dosage). **Basic N.H.S. Cost:** 100 mg tablets (PL 57/5015), pack of 100, £3.04, 250 mg tablets (PL 57/5016), pack of 100, £6.68.

Full information on request to the Company.

 **PFIZER LIMITED**  
SANDWICH, KENT

20750



# Cuts fat in half.

St. Ivel Gold contains only half the fat of butter, margarine or even polyunsaturated margarine. Most authorities agree that reducing total dietary fat is an important measure in reducing the risks of obesity<sup>1</sup> and heart disease.<sup>2,3</sup>

Changing to polyunsaturated margarine does not decrease the calorie or fat intake. Moving to St. Ivel Gold does.

Average content per 100g of product	Butter	Polyunsaturated Margarine	St. Ivel Gold
Total fat g	80	80	39
Saturated fat g	47	14	11
Calories Kcal	740	740	390

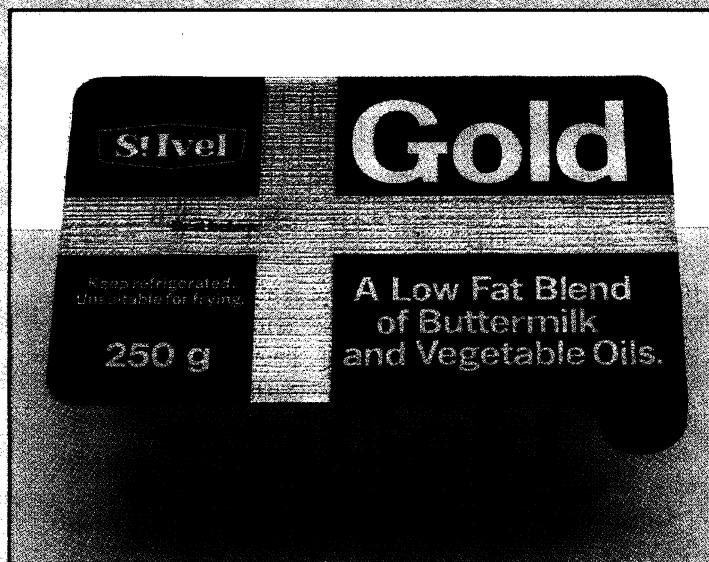
But this is only half the story.

St. Ivel Gold is a unique low fat blend of buttermilk and vegetable oil with a satisfying buttery taste.

So when you are recommending a weight reducing or lower fat diet, St. Ivel Gold can make a healthy contribution that patients enjoy.

#### References

1. Obesity. A report of the Royal College of Physicians, 1983 17; 1.
2. Beating Heart Disease. Health Education Council, 1982.
3. Prevention of Coronary Heart Disease, W.H.O. 1982, Technical Report Series, 678.



## A buttery taste with half the fat of any margarine.

#### Send off for information package.

If you would like to receive further information on the St. Ivel Gold Low Fat Programme, including educational consumer literature, please return this coupon by FREEPOST to St. Ivel Limited, Hesketh House, Portman Square, London W1H 9FG.

Name \_\_\_\_\_

Address \_\_\_\_\_





Anxiety is a perfectly normal response to stress but there are times when it gets out of hand and becomes mentally and physically disabling.

Then, a short course of drug treatment is required to help the patient to cope. New LEXOTAN is a good choice for the short-term treatment of anxiety states. It is a highly effective anxiolytic and patient tolerance is excellent!

*1. Wien.klin.Wschr., 1979, 91, 240*

## WHEN ANXIETY GETS OUT OF PROPORTION

# **NEW** LEXOTAN

bromazepam

## CUTS IT DOWN TO SIZE

### Prescribing Information

**Indications** Short-term treatment of anxiety and associated symptoms such as tension and agitation.

**Dosage** Dosage should be determined on an individual basis. Some patients may respond to doses as low as 1.5mg three times daily.

Usual dose for mild to moderate anxiety is 3mg to 6mg three times daily. Elderly patients are more sensitive to the actions of Lexotan. The safety of Lexotan for use in the elderly has not been established and therefore its use should be avoided. **Contra-indications** Patients with known sensitivity to benzodiazepines; acute pulmonary insufficiency; respiratory depression. **Precautions** Use during pregnancy and lactation should be avoided. Patients should be

advised to avoid alcohol whilst under treatment with Lexotan. Patients' reactions, e.g. driving ability, may be modified. Sedative effects of other centrally-acting drugs may be intensified. The use of high doses of benzodiazepines, especially over prolonged periods, can sometimes lead to dependence, particularly in patients with a history of alcoholism or drug abuse. Treatment in these cases should be withdrawn gradually. **Side-effects** Drowsiness, sedation, unsteadiness and ataxia may occur. They usually disappear after the first few days of treatment or with reduction of dosage. **Presentation** Pink, hexagonal tablets containing 3mg of bromazepam in blister packings of 100. **Basic NHS Cost** Lexotan 3mg tablets in packings of 100 £6.25 **Product licence number** 0031/0128

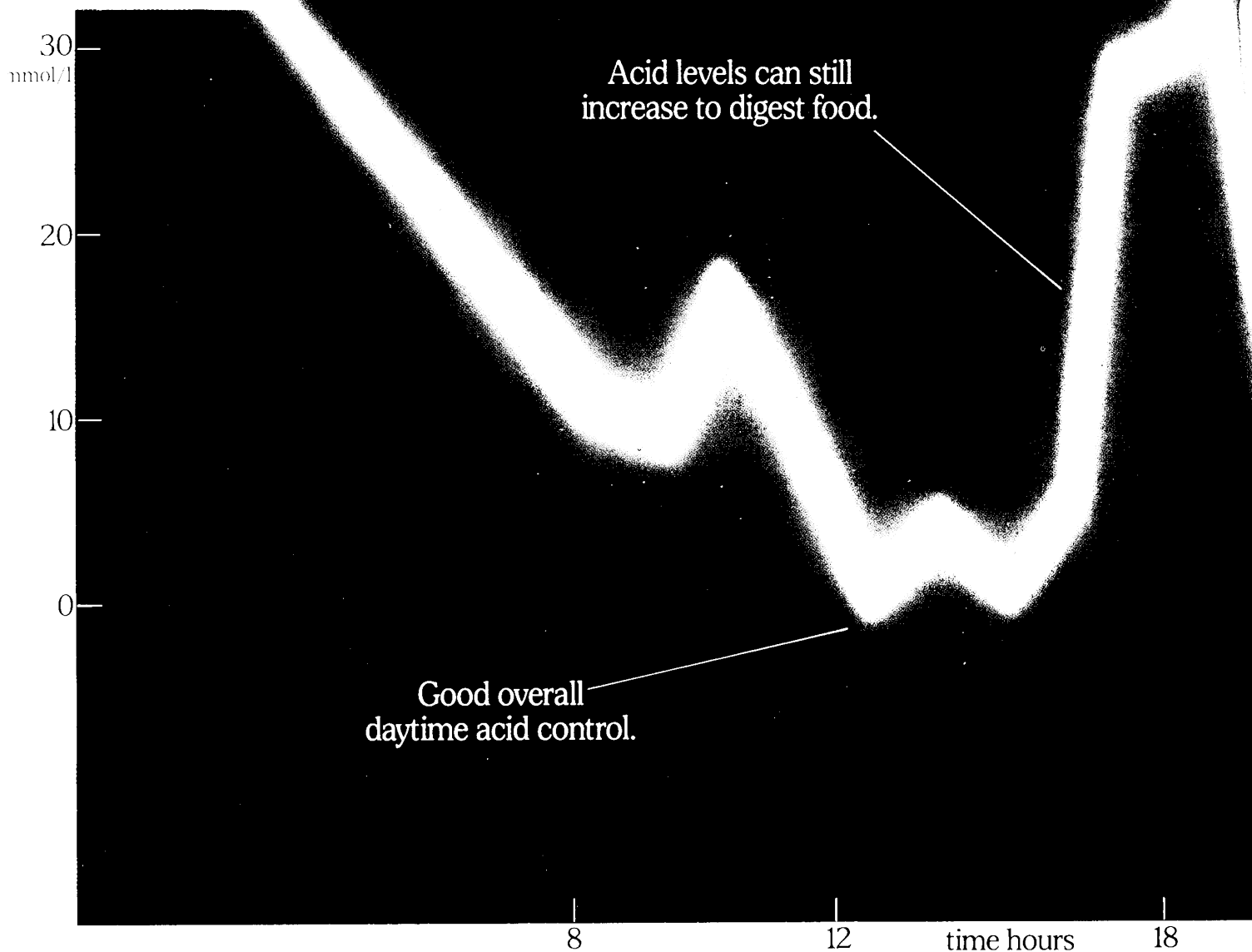


Lexotan is a trade mark

Roche Products Limited, PO Box 8, Welwyn Garden City, Hertfordshire AL7 3AY.

# The acid test

Control when it's needed.<sup>1</sup>



Selective  
effective  
H<sub>2</sub> blockade

RANITIDINE





In maintenance, acid levels  
are essentially normal by day;  
one tablet at night protects mucosa  
in the absence of food.

Acid control  
right through until  
breakfast time.

Night time acid is reduced,  
protecting gastric mucosa when there is  
no 'buffering' effect of food.



## The result

24

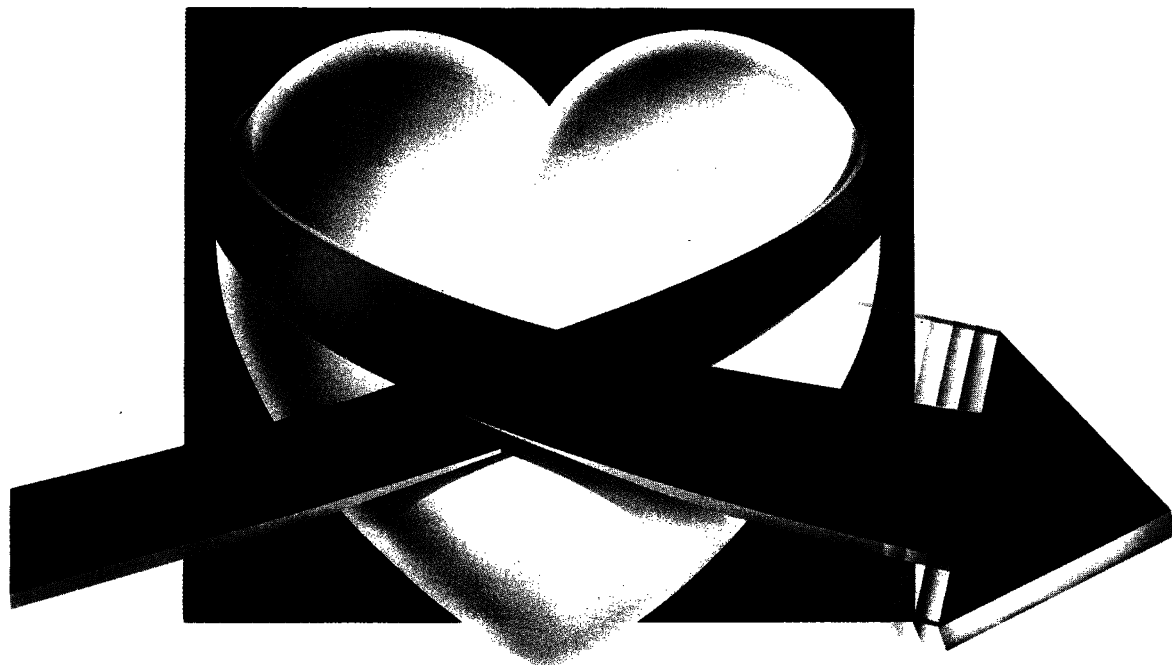
### Rapid, effective ulcer healing.

Zantac provides four-week peptic ulcer healing on just one 150mg tablet twice-daily, together with a maintenance regime to keep patients both symptom-free and ulcer-free on one tablet at night.

Reference: 1. Derived from Walt, R. P. *et al.* Gut 1981; 22: 49-54

For offer of further evidence about Zantac's effect on 24-hour acid activity, please see over page. Full prescribing information overleaf.

# An important additional benefit for Hypovase\*



## ...restoring the plasma lipid ratio.

Hypovase, the booster anti-hypertensive to first line therapy has now been shown to have an additional beneficial property... the restoration of the plasma lipid ratio<sup>1</sup>

This is important because the use of first line anti-hypertensives such as  $\beta$ -blockers and diuretics has not reduced the incidence of ischaemic heart disease (IHD)<sup>2-5</sup>

One possible reason is that their beneficial effects on blood pressure, one risk factor for IHD, have been

offset by their effect on another major risk factor – the plasma lipid ratio (HDL: LDL+VLDL)<sup>6-9</sup>

Hypovase when added to these first line anti-hypertensives restores the plasma lipid ratio, providing yet another good reason for adding Hypovase to your first line therapy.

## Hypovase\*

prazosin HCl

**boosts anti-hypertensive action,  
restores the plasma lipid ratio.**

### Prescribing information:

**Indications:** hypertension of varied aetiology and all grades of severity.

**Contra-indications:** sensitivity to Hypovase.

**Precautions:** A small percentage of patients may react more rapidly and to a greater extent than the majority. In some cases this had led to sudden loss of consciousness generally lasting a few minutes. Subsequent treatment may be satisfactory. Hypovase is not recommended in pregnancy, during lactation, or in children under 12 years of age.

**Side-effects:** dizziness, drowsiness, and lack of energy are the most common.

**Dosage:** starting dose 0.5mg two to three hours before

retiring; thereafter, up to 20mg/day in divided doses.

**Basic NHS Cost:** b.d. Starter Pack containing 8 x 0.5mg Hypovase tablets and 32 x 1mg Hypovase tablets, £2.70; 0.5mg tablet.

(PL57/0149), pack of 100, £4.08; 1mg tablet (PL57/0106), pack of 100, £5.25; 2mg tablet (PL57/0107), pack of 100, £6.98; 5mg tablet (PL57/0108), pack of 100, £15.58.

**REFERENCES:** 1. Leren, P, Eide, I., Foss, O. P, Helgeland, A., Hjermann, I., Holme, I., Kjeldsen, S. E., The Oslo Study, *Lancet*, July 5th, 1980; 2: 4-6. 2. Medical Research Council Working Party, *Lancet* 1981, II, 539-543.

3. Veterans Administration Co-operative Study Group, *JAMA*, 1970; 213: 1143-1152. 4. Hypertension

Detection and Follow-up programme Co-operative group, *JAMA*, 1979; 242: 2560-2577. 5. Australian National Blood Pressure Study Management Committee, *Lancet*, 1980, I, 1261-1267. 6. Johnson, B. F., *Journal of Cardiovascular Pharmacology*, 1982, 4, Suppl. 2: S213-221. 7. Kaplan, N. M., *Journal of Cardiovascular Pharmacology*, 1982, 4, Suppl. 2: S187-189. 8. Oliver, M. F., *New England Journal of Medicine* 1982; 306, No. 5: 297-298. 9. Lowenstein, J., Neusy, A. J., *Journal of Cardiovascular Pharmacology*, 1982; 4, Suppl. 2: S262-264.

Full information on request.

Pfizer Ltd., Sandwich, Kent.

\*Trade Mark 20496



# Working night and day

The pain of arthritis can in many ways be worse at night, causing insomnia. Feldene has been shown to give a better improvement in sleep quality than in daytime.

In a double-blind, placebo-controlled study.

In a study of 24 patients with rheumatoid arthritis.

In a study of 24 patients with osteoarthritis.

In a study of 24 patients with ankylosing spondylitis.

**Feldene**<sup>\*</sup>  
piroxicam <sup>\*</sup>Trade Mark

**24 hour relief from  
a single daily dose**

**Prescribing Information Indications:** rheumatoid arthritis, osteoarthritis, ankylosing spondylitis, acute gout, acute musculoskeletal disorders. **Contraindications:** patients with active peptic ulceration or a history of recurrent ulceration. Hypersensitivity to the drug or in patients in whom aspirin or other non-steroidal anti-inflammatory drugs induce symptoms of asthma, rhinitis or urticaria. **Warnings:** the safety of Feldene used during pregnancy and lactation has not yet been established. Dosage recommendations and indications for use in children have also not yet been established. **Side Effects:** Feldene is generally well tolerated. Gastro-intestinal symptoms are the most common; if peptic ulceration or gastro-intestinal bleeding occurs Feldene should be withdrawn. As with other non-steroidal anti-inflammatory agents, oedema, mainly ankle oedema, has been reported in a small percentage of patients; the possibility of precipitation of congestive cardiac failure in elderly patients or those with compromised cardiac function should therefore be borne in mind; various skin rashes have been reported. **Dosage:** in rheumatoid arthritis, osteoarthritis, ankylosing spondylitis - starting dose of 20mg as single daily dose; the majority of patients will be maintained on 20mg daily. In acute gout, start with a single dose of 40mg followed on the next 4-6 days with 40mg daily in single or divided doses; Feldene is not indicated for long term management of gout. In acute musculoskeletal disorders, start with a loading dose of 40mg daily in single or divided doses for the first 2 days. For the remainder of the 7 to 14 days treatment period the dose should be reduced to 20mg daily. **Basic N.H.S. Cost:** capsules 10mg coded FEL10, pack of 60 £9.00 (P.L. 0057/0145). Full information on request. **References:** 1. Romberg, O. The American Journal of Medicine Feb., 16, 1982, 58.

# Day and night

Twenty-four hour relief with Feldene means just that. Continuous day and night relief from the pain, inflammation and stiffness of rheumatoid and osteoarthritis. Because of the unique pharmacokinetics of Feldene, all this is achieved with a single daily dose.

**Feldene**<sup>\*</sup>  
piroxicam <sup>\*</sup>Trade Mark

**24 hour relief from  
a single daily dose**

**Prescribing Information Indications:** rheumatoid arthritis, osteoarthritis, ankylosing spondylitis, acute gout, acute musculoskeletal disorders. **Contraindications:** patients with active peptic ulceration or a history of recurrent ulceration. Hypersensitivity to the drug or in patients in whom aspirin or other non-steroidal anti-inflammatory drugs induce symptoms of asthma, rhinitis or urticaria. **Warnings:** the safety of Feldene used during pregnancy and lactation has not yet been established. Dosage recommendations and indications for use in children have also not yet been established. **Side Effects:** Feldene is generally well tolerated. Gastro-intestinal symptoms are the most common, if peptic ulceration or gastro-intestinal bleeding occurs Feldene should be withdrawn. As with other non-steroidal anti-inflammatory agents, oedema, mainly ankle oedema, has been reported in a small percentage of patients; the possibility of precipitation of congestive cardiac failure in elderly patients or those with compromised cardiac function should therefore be borne in mind; various skin rashes have been reported. **Dosage:** in rheumatoid arthritis, osteoarthritis, ankylosing spondylitis - starting dose of 20mg as single daily dose; the majority of patients will be maintained on 20mg daily. In acute gout, start with a single dose of 40mg followed on the next 4-6 days with 40mg daily in single or divided doses; Feldene is not indicated for long term management of gout. In acute musculoskeletal disorders, start with a loading dose of 40mg daily in single or divided doses for the first 2 days. For the remainder of the 7 to 14 days treatment period the dose should be reduced to 20mg daily. **Basic N.H.S. Cost:** capsules 10mg coded FEL10, pack of 60 £9.00 (PL. 0057/0145). Full information on request.

ANXON

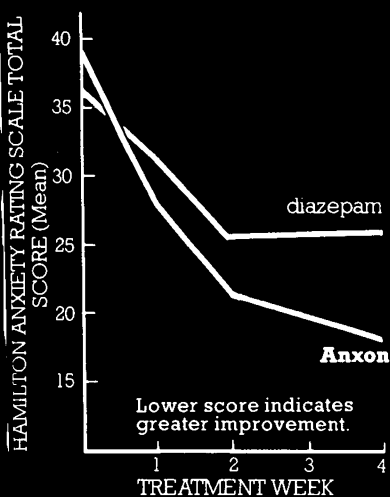
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# IN ANXIETY ANXON

ketazolam

## CLINICALLY SUPERIOR

## SIGNIFICANTLY MORE EFFECTIVE THAN DIAZEPAM!



Curr. Ther. Res. (1980), 28, 3, 425

A recent double-blind study<sup>1</sup> demonstrated that Anxon was more effective than diazepam in the treatment of anxiety. Another study showed "...on the Hamilton Anxiety Rating Scale in direct comparison with diazepam, ketazolam [Anxon] was significantly superior in anxiolytic effect."<sup>3</sup>

### Anxon vs. clorazepate and lorazepam.

Further double-blind studies have compared Anxon both with clorazepate and with lorazepam. In comparison with clorazepate, although the authors commented that, on the overall patients' global impression, the differences between the two drugs did not reach statistical significance, "Nevertheless at the end of the study, over 70% more patients reported feeling *very much better* on ketazolam [Anxon] than on clorazepate (33 versus 19, respectively)."<sup>5</sup>

In comparison with lorazepam: "Therapeutic effects, although similar for both drugs, showed a slight superiority in favour of ketazolam [Anxon]. Also ketazolam [Anxon] was better tolerated in that patients in that group reported fewer side effects than those in the lorazepam group."<sup>6</sup>

### REFERENCES

1. Br. J. Clin. Pract. (1983), In Press
2. Br. J. Clin. Pract. (1980), 34, 4, 107
3. Curr. Ther. Res. (1980), 28, 3, 425
4. J. Int. Med. Res. (1980), 8, 6, 439
5. Curr. Ther. Res. (1982), 31, 5, 679
6. Curr. Ther. Res. (1981), 29, 6, 936

### ▽ PRESCRIBING INFORMATION

#### Indications

Anxiety, tension, irritability and similar stress-related symptoms.

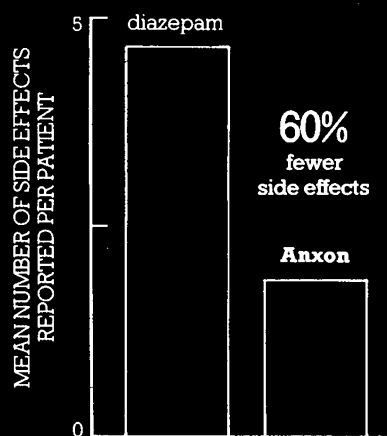
**Dosage and Administration** For many adult patients a dosage of 30mg nocte is appropriate. This dosage may be adjusted to suit the needs of each individual patient within the range of 15-60mg per day.

Children: Not recommended. Elderly: Reduced dosage initially until tolerance and efficacy have been assessed. Patients undergoing therapy with Anxon should be periodically reviewed.

**Contra-indications, Warnings etc.** Precautions: Anxon may potentiate other centrally acting drugs. Patients should be warned to exercise care when

# TO DIAZEPAM. (Refs 1-4)

## FEWER SIDE EFFECTS THAN DIAZEPAM, CLORAZEPATE AND LORAZEPAM.<sup>2,4,5,6</sup>



J. Int. Med. Res. (1980), 8, 6, 439.

### 60% fewer than diazepam

"Side effects were markedly less frequent and less severe in patients treated with ketazolam [Anxon] than in those treated with diazepam."<sup>4</sup>

### 28% fewer than clorazepate

"...ketazolam [Anxon] produced side effects in fewer patients, the overall incidence of side effects was less and the severity of the side effects tended to be milder than with clorazepate."<sup>5</sup>

### 14% fewer than lorazepam

"Ketazolam [Anxon] patients reported a total of 124 side effects [30 patients], while the lorazepam patients reported 135 side effects [28 patients]" - 14% fewer side effects on Anxon.<sup>6</sup>

iving or operating heavy machinery. sage cannot be recommended during pregnancy, labour or lactation. Side effects: Anxon is well tolerated. In clinical trials, the overall incidence of side effects was no greater than observed with placebo. Daytime drowsiness has been reported. Overdosage: Symptomatic treatment only is

required. Gastric lavage may be useful if performed soon after ingestion.

#### Presentations and Basic NHS Prices

Anxon capsules 15mg: 10p each. Anxon capsules 30mg: 16p each. Prices correct at February 1983. Further information is available on request to the Company.



**Beecham Research Laboratories**  
Brentford, Middx. TW8 9BD



Anxon and the BRL logo are trademarks.

BRL 8016 R

PL0038/0252 0253



# CLASSIFIED ADVERTISEMENTS AND NOTICES

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.

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 10 per cent reduction. Replies to box numbers should be sent to the Production Department, Update Publications Ltd., with the box number on the envelope.

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.

## RELOCATION IN IRISH REPUBLIC REQUIRED

Male general practitioner (15 years experience) with MRCP and DCH and Irish family seeks relocation in Ireland in 1984. Partnership or single-handed. Capital available. S. Dublin, Wicklow, Wexford, Waterford or Cork preferred.

Reply to: **Box No. 32, JRCGP, The Update Group Ltd, 33/34 Alfred Place, London WC1E 7DP.**

## PARTNER REQUIRED

*Birmingham North-East* part- or full-time Partner required for estate practice with full ancillary staff, well equipped surgery including computer and open access to hospital departments. GP Maternity Unit. Special interest in obstetrics and paediatrics an advantage. Excellent housing, schools and amenities.

Reply to: **Box No. 31, JRCGP, The Update Group, 33/34 Alfred Place, London WC1E 7DP.**

## SYMPOSIUM '83

The South London Faculty of the College of General Practitioners invites you to:

Symposium '83,  
Hyde Park Hotel, Knightsbridge,  
London SW1  
10-11 November

The aim is to identify the major influences affecting the development of general practice in the next 20 years and to consider their implications for today's decisions. The challenge is to adapt.

An ambitious exhibition incorporating the theme of the Symposium will run concurrently.

To apply for booking form and full programme, please write to: **Mrs A. Bridgeman, 21 Swaffield Road, London SW18.**

## THE ROYAL COLLEGE OF GENERAL PRACTITIONERS WEST OF SCOTLAND FACULTY

(in collaboration with the West of Scotland  
Committee for Postgraduate Medical Education)

## PREPARATION COURSE FOR THE MRCP EXAMINATION

Friday 3 to Sunday 5 February 1984  
Normandy Hotel, Renfrew

The above course is intended for general practitioners who plan to take the Membership Examination of the Royal College of General Practitioners. The number of participants is limited and early application is advised. Preference will be given to applicants who have *not* had the opportunity to attend trainee half-day release sessions dealing with preparation for the MRCP examination. The course is residential and has been approved under Section 63.

Further details may be obtained from:  
**The Dean of Postgraduate Medical Education  
The University of Glasgow  
Glasgow, G12 8QQ  
Telephone: 041-339 8855 Ext. 7275.**

## 2nd INTERNATIONAL COURSE OF RENAL TRANSPLANTATION

The 2nd International Course of Renal Transplantation will be held in Barcelona, Spain at the Palacio de Congresos on 12-15 December 1983, directed by Drs Jose M. Gil-Vernet, Antonio Caralps and J. Vives.

The course will address the most significant medical, surgical and immunological aspects of renal transplantation. The course will offer scientific lectures, practical courses in immunology and actual surgical operations broadcasted in colour TV.

Details from: **The Secretary, F. Oppenheimer, Unidad de Trasplante Renal, Hospital Clinico, Casanova 143, Barcelona-36, Spain.**

## WOMAN'S CHOICE ON ABORTION

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### Occasional Paper 23

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