

Cardioprotection

Amiloride
Hydrochlorothiazide
Potassium Protection

atenolol 50mg,
amiloride 2.5mg,
hydrochlorothiazide 25mg

New combines low strength
'Tenormin' with low dose amiloride/
hydrochlorothiazide.

- ① One capsule daily Ⓛ Low dose
♥ Cardioprotection Ⓚ Potassium protection

New is the modern combination
for patients uncontrolled on a diuretic alone.

Prescribing Notes for 'Kalten', 'Tenormin' and 'Tenormin' LS

DOSAGE

Hypertension 'Kalten' - 50 mg atenolol + 25 mg hydrochlorothiazide + 2.5 mg amiloride hydrochloride (as amiloride hydrochloride BP 2.84 mg) orally one capsule daily; recommended where monotherapy with beta-blocker or diuretic proves inadequate.

'Tenormin' - 100 mg atenolol, orally once a day.

'Tenormin' LS - 50 mg atenolol orally once a day; some patients may respond adequately to 'Tenormin' low strength (LS).

Children - 'Kalten', 'Tenormin' and 'Tenormin' LS are not recommended for use in children.

Elderly patients - Dosage requirements for 'Tenormin' and 'Tenormin' LS may be lower, especially in patients with renal impairment.

'Kalten' may be suitable for older patients.

CONTRA-INDICATIONS

'Kalten': Heart block, hyperkalaemia, anuria, acute renal failure, severe progressive renal disease, diabetic nephropathy; blood urea over 10 mmol/l or serum creatinine over 130 micromol/l if not possible to monitor carefully and frequently. In renal impairment additional potassium conserving agents may cause hyperkalaemia. Sensitivity to hydrochlorothiazide or amiloride hydrochloride.

'Tenormin': Heart block.

PRECAUTIONS

Untreated cardiac failure, bradycardia, renal failure, anaesthesia, pregnancy. Disturbed fluid or electrolyte balance. Caution in patients with chronic obstructive airways disease or asthma. Atenolol modifies the tachycardia of hypoglycaemia. Co-administration with verapamil or Class I antidysrhythmic agents.

Withdrawal of clonidine.

Withdrawal of beta-blocking drugs should be gradual in patients with ischaemic heart disease.

Additional precautions for 'Kalten'

Co-administration with lithium.

Metabolic effects: Measurement of potassium levels is appropriate especially in the older patient, those receiving digitalis preparations for cardiac failure, taking adnormal (low in potassium) diet or suffering from gastrointestinal complaints.

Caution in metabolic or respiratory acidosis.

Diabetes: 'Kalten' may lower glucose tolerance.

Discontinue before glucose tolerance testing.

Hyponatraemia and hypochloreaemia may occur.

Hepatic or renal impairment: Caution in patients

where fluid and electrolyte balance is critical.

Hyperkalaemia and hypokalaemia may occur. Discontinue treatment if increasing azotaemia and oliguria occur.

Amiloride may precipitate hepatic encephalopathy. Jaundice may occur in cirrhotic patients.

Breast-feeding: Discontinue if 'Kalten' deemed essential.

SIDE EFFECTS

Coldness of extremities, bradycardia and muscular fatigue may occur. Sleep disturbance rarely seen. Rashes and dry eyes have been reported with beta-blockers - consider discontinuance if they occur.

With amiloride hydrochloride and hydrochlorothiazide gastrointestinal disturbances may occur. Side-effects commonly associated with diuresis, dizziness and headache, may occur.

Skin rashes and blood dyscrasias have been reported.

PRODUCT LICENCE NUMBERS AND BASIC NHS COST

'Kalten' Capsules (29/186) in calendar packs of 28, £6.70.

'Tenormin' Tablets (29/122) in calendar packs of 28, £6.98.

'Tenormin' LS Tablets (29/86) in calendar packs of 28, £4.88.

'Kalten', 'Tenormin' and 'Tenormin' LS are trade marks.

Further information is available on request from the Company.



Stuart Pharmaceuticals Limited
Stuart House, 50 Alderley Road, Wilmslow,
Cheshire SK9 1RE.

These are changing times in the pharmaceutical industry. Generic prescribing is gradually winning new converts.

However at the June 1985 LMC Conference a motion stated "...but anxieties such as standards, formulations and bio-availability were obstacles to the large-scale introduction of generic prescribing"¹

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Hypertension



Adalat Retard

Maintains efficacy
with advancing patient age

Prescribing Information.

Presentation: Pink-grey coated tablets each containing 20mg

nifedipine. **Indications:** For the treatment of hypertension. **Dosage and Administration:**

The recommended dose for Adalat Retard is one

20mg tablet twice daily and if necessary a further tablet

may be taken according to the patient's response. Treatment

may be continued indefinitely. **Contra-indications:** Must not be

given to women capable of child bearing. **Warnings and Precautions:**

Adalat Retard is not a beta-blocker and therefore gives no protection

against the dangers of abrupt beta-blocker withdrawal, any such

withdrawal should be by gradual reduction of the dose of beta-blocker,

preferably over 8-10 days. Adalat Retard may be used in combination with

beta-blocking drugs and other anti-hypertensive agents, but the possibility of

an additive effect resulting in postural hypotension should be borne in mind. Adalat

Retard will not prevent possible rebound effects after cessation of anti-hypertensive

therapy. Adalat Retard should be used with caution in patients whose cardiac reserve is

poor. Ischaemic pain has been reported in some patients, commonly within 30 minutes of

the introduction of nifedipine therapy. Patients experiencing this effect should discontinue

nifedipine. The use of nifedipine in diabetic patients may require adjustment of their control.

The antihypertensive effect of nifedipine can be potentiated by simultaneous administration with

cimetidine. There are no other known drug incompatibilities. Gravitational oedema associated with

increased capillary permeability has been reported. **Side Effects:** Adalat Retard is well tolerated. Minor

side-effects, usually associated with vasodilatation are mainly headache, flushing and lethargy. These are

transient and invariably disappear with continued treatment. **Overdosage**—standard measures such as

atropine and noradrenaline may be used for resultant bradycardia and hypotension. Intravenous calcium

gluconate may be of benefit. **Pack Quantities:** Adalat Retard tablets are available in foil strips of 10 in packs

of 100. **Daily Treatment Cost:** 39p. **Product Licence Number:** Adalat Retard UK: PL0010/0078.

CLASSIFIED ADVERTISEMENTS AND NOTICES

Classified Advertisements are welcomed and should be sent to: *The Journal of the Royal College of General Practitioners*, 8 Queen Street, Edinburgh EH2 1JE. 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 £6.35 per single column centimetre, plus 30p if a box number is required, plus VAT at 15%. Fellows, Members and Associates of the Royal College of General Practitioners may claim a 10% reduction. Replies to box numbers should be sent to the above address, 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.

PARTNER WANTED

Additional full-time partner wanted at St John's House Surgery, Worcester starting April 1986 with senior partner reducing commitments. Parity at two years with purchase of share then. Intra-partum obstetric skills essential as practice delivers 50% of all births in general practitioner maternity unit. The partnership consists of six doctors practising from a converted Queen Anne house in cathedral city.

We are looking for someone with more than 'just vocational training' and especially someone interested in training. Female and male, single and married applicants will be equally considered. Send typed CV with handwritten covering letter to: Dr Geoffrey Holehouse, St John's House Surgery, 28 Bromyard Road, Worcester WR2 5BU.

We will send you a description of the practice and details of interview procedure. Closing date for applications is 3 November 1985.

REFRESHER COURSE

A refresher course for general practitioners, 'Advances and trends in obstetrics and gynaecology' will be held in Bristol from Monday 4 to Friday 8 November 1985.

Further details and programme from Mrs Potter, University Department of Obstetrics and Gynaecology, Bristol Maternity Hospital, Southwell Street, Bristol BS2 8EG.

GENERAL PRACTITIONER TRAINERS' COURSE

The North Western Faculties of the Irish College of General Practitioners are holding a National Trainers' Course on 18, 19 and 20 October, 1985, in Bundoran, Co. Donegal.

There are a limited number of places still available, which will be allocated on a 'first come' basis.

For application form and further details please apply to: Dr Paul Money, General Practice Training Unit, 3rd Floor, Sligo General Hospital, Sligo.



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