# KEEP ACID WHERE IT WORKS WHEREIT HURTS

Sadly, you're powerless over the scars which acid rain has left on the forests of Europe.

But if you know the true nature of the problem there's a lot you can do for the victims of acid reflux.

It's a little known fact that nearly 80% of reflux

patients don't suffer from excess acid, 1,2 they suffer from acid in the wrong place.

So doesn't it make sense to use a reflux treatment which keeps acid where it works and not where it hurts?

Gaviscon works by forming a soothing alginate barrie

Prescribing Information. Liquid Gaviscon. Active Ingredients: Sodium alginate BP 500 mg, sodium bicarbonate Ph.Fur. 267 mg and calcium carbonate Ph.Eur. 160 mg per 10 ml dose. Indications: Heartburn, including heartburn of pregnancy, dyspepsia associated with gastric reflux, hiatus hernia and reflux oesophagitis. Contra-Indications: None known. Dosage and Administration: Adults and children over 12: 10-20 ml liquid, after meals and at bedtime. Children 6-12: 5-10 ml liquid after meals and at bedtime. Note: 10 ml liquid contains 6-2 mnol sodium. Basic

NHS Cost: 500ml liquid £(2.70. PL: 44/0058 Liquid Gaviscon, 44/0140 Liquid Gavisco Peppermint Flavour, Legal Category: GSL. (PO). Gaviscon Tablets. Active Ingredients: Algir acid BP 500mg, sodium bicarbonate Ph.Eur. 170mg, dried aluminium hydroxide gel BP 100m magnesium trisilicate Ph.Eur. 25mg per tablet. In a sugar free flavoured base containing calciu carbonate (40mg) and saccharin. Indications: Heartburn, including heartburn of pregnane dyspepsia associated with gistric reflux, hiatus hernia and reflux ocsophagitis. Contra-Indication



Thich prevents acid from rising into the oesophagus, ringing rapid relief to 4 out of 5 reflux patients.<sup>3,4,5</sup>

So to keep acid in its natural environment, make Gaviscon your first choice in reflux.



liquid: sodium alginate BP, sodium bicarbonate Ph.Eur., calcium carbonate Ph.Eur. tablets: alginic acid BP, sodium bicarbonate Ph.Eur., aluminium hydroxide BP, magnesium trisilicate Ph. Eur.

## Keeps acid in its natural environment

one known. **Dosage and Administration:** Adults and children over 12: 1 or 2 tablets after meals at at bedtime. Children 6-12: 1 tablet after meals and at bedtime. **Note:** 1 tablet contains 2.1mmol dium. Tablets should be thoroughly chewed. **Basic NHS Cost:** 60 tablets £2.25. **PL:** 44/0021 aviscon Tablets. 44/0141 Gaviscon Tablets Lemon Flavour. **Legal Category:** GSL. (PO). **Holder F product licences:** Reckitt & Colman Products United. Dansom Lane, Hull, HUR 715S. aviscon and the sword and circle symbol are registered trademarks. **Date of preparation:** 20/9/94.

References 1. Ball C.S. et al. (1988) GUT, Vol. 29 (part 10) A 1449. 2. Cadiot G. et al. (1994) Gastroimest. Res. 22; 209–222. 3. Chevrel B. (1980) J. Int. Aled. Res. 8: 300. 4. Ward A.E. (1989) Br. J. Clin. Pract. 43 (2) Suppl. 66: 52. 5. Williams D.L. et al. (1979) J. Int. Med. Res. 7: 551.



### THE EXPANDING WORLD



# More Doctors are prescribing 'Zestril' for more patients than ever before

Consult data sheet before prescribing. 'ZESTRIL'

USE: All grades of essential hypertension and renovascular hypertension. Congestive heart failure (adjunctive therapy). PRESENTATION: Tablets containing 2.5mg, 5mg, 10mg or 20mg lisinopril ("Zestril"). DOSAGE AND ADMINISTRATION: Hypertension Adults

DOSAGE AND ADMINISTRATION: Hypertension Adults (including elderly): initially 2.5mg daily, a 2.5mg dose seldom achieves a therapeutic response; adjust dose according to response. Maintenance usually 10-20mg once daily. Maximum is 40mg daily. Diuretic-treated patients – if possible stop diuretic 2-3 days before starting 'Zestril'. Resume diuretic later if desired.

Congestive beart failure Adults: initially 2.5mg daily under close medical supervision (hospital initiation for severe or unstable heart failure and other patients at higher risk), increasing to 5-20mg once daily according to response. Monitor blood pressure and renal function.

Monitor blood pressure and renal function.
Renal impairment – May require lower maintenance dosage.
Children – Not recommended.

CONTRAINDICATIONS: Pregnancy. Hypersensitivity to 'Zestril'. Patients with history of angioneurotic ocdema to previous ACE inhibitor therapy. Patients with aortic stenosis, cor pulmonale or outflow tract obstruction.

PRÉCAUTIONS: Assessment of renal function is recommended. Symptomatic hypotension may occur, particularly in volume depleted patients and congestive heart failure. Caution in patients with ischaemic heart or cerebrovascular disease; renal insufficiency; renovascular hypertension. Patients with a history of angioedema may be at increased risk of angioedema with an ACE inhibitor. Cough has been reported with ACE inhibitors. Renal impairment (usually reversible) may occur in some patients. Hypotension may occur during surgery or anaesthesia. Caution in nursing mothers. No paediatric experience. Afro-Caribbean patients may show reduced therapeutic response. Symptomatic hypotension can be minimised by discontinuing diuretic prior to "Zestril". Interaction with indomethacin and lithium. Potassium supplements, porassium-sparing diuretics and porassium-containing salt substitutes not recommended. Avoid concomitant use with high-flux dialysis membranes.

SIDE EFFECTS: Hypotension, dizziness, headache, diarrhoea, cough, nausea, farigue. Less frequently, rash, asthenia. Rarely, angioneuroric oedema and other hypersensitivity reactions, myocardial infarction or cerebrovascular accident possibly secondary to excessive hypotension in high risk patients, palpitation, tachycardia, abdominal pain, dry mouth, hepatitis, jaundice, mood alterations, mental confusion, urticaria, diaphoresis, uraemia, oliguria/anutria, renal dysfunction, acute renal failure, impotence, pancreatitis, haemolytic anaemia. A symptom complex which may include fever, vasculitis, myalgia, arthralgia/arthritis, positive ANA, elevated ESR, eosinophilia, leukocytosis; rash, photosensitivity or other

dermatological manifestations may occur. Increases (usually reversible) in blood urea, serum creatinine, liver enzymes and serum bilirubin. Decreases in haemoglobin and haematocrit have occurred. Hyperkalaemia and neutropenia.

LEGAL CATEGORY: POM.

PRODUCT LICENCE NUMBERS AND BASIC NHS COSTS: 'Zestril' 2.5mg (12619/0084) 7 tablets, £1.91; 28 tablets, £7.64; 5mg (12619/0085) 28 tablets, £9.58; 10mg (12619/0086) 28 tablets, £11.83; 20mg (12619/0087) 28 tablets, £13.38

'Zestril' is a trademark.

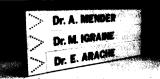
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### Department of Mental Health Sciences

### 2nd St. George's Conference on SUICIDE & THE MURDEROUS SELF

24 February 1995 £85.00

The conference will be psychotherapeutic in orientation and will consider effective psychotherapeutic interventions for working with suicidal clients, and families coming to terms with a suicide.

It will explore different aspects that may lead to suicide and suicidal behaviour from the psychotherapeutic point of view, including sexual abuse, gender identity, self harm.

The psychotherapeutic role of different groups that come into contact with suicidal clients and its aftermath, such as GPs, bereavement counsellors, psychiatrists, prison officers, the police and the Samaritans will be examined.

### The 3rd St. George's

### EATING DISORDERS CONFERENCE

Engaging the 'patient' 6-7 March 1995 £160.00

This 3rd St. George's Eating Disorders conference will build on the success of the last two.

We intend that it should address the practical issues involved in caring for the eating disordered person, be this obesity, anorexia nervosa, or bulimia nervosa. There will be input about the St. George's approach, about community programmes and about various counselling and therapeutic approaches that are available.

Some of the conference will be given over to teaching workshops to show how to use these therapeutic approaches effectively in your work.

### 2nd St. George's Conference on BEREAVEMENT & COUNSELLING Linking Theory and Practice 30th March 1995 £85.00

The conference will look hard at linking the theory and the practice of bereavement care and counselling - from helping to prepare the dying patient for death, through to counselling family and friends after the death of a loved one.

We will examine how to work with different client groups, look at who may be asked to provide bereavement counselling and the contexts in which it which it may occur.

The conference forms part of the St. George's Death and Dying Course - in which we will be covering these issues in greater depth. An optional second day well be held on 31st March 1995, and will cost an additional £65.00.

For further details or to obtain programmes for any of the above conferences, please contact: Philippa Weitz, The Conference Unit, Dept. of Mental Health Sciences, St. George's Hospital Medical School, Cranmer Terrace, London SW17 ORE. Tel.: 081-725 5534 Fax: 081-725 3390

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#### **DEVELOPING YOUR TEAM**

Course Tutor: Hilary Haman

25/26 January 1995

This two day course, open to general practitioners and practice and health centre managers, will enable participants to understood how teams are developed, what their purpose is and how they can be sustained, as well as giving some practical experience of team building and team play. It is highly participative with a great deal of small group work so that participants can share with each other problems relating to operating within teams, as well as gaining experience of leadership and small group skills.

PGEA is being sought. The fee (inclusive of VAT) is £325.00 including lunch, refreshments and dinner on the first evening.

#### PERFORMANCE APPRAISAL

Course Tutor: Hilary Haman 16/17 February & 23/24 May 1995

A two day course open to general practitioners and practice and health centre managers. It aims to provide an appreciation of performance appraisal, the opportunity to practise interviewing skills, including role play and the use of video, and to develop a plan to allow participants to introduce a staff appraisal scheme into their practice. This course is aimed at both newcomers to appraisal and those who have experience of appraisal but wish to revisit the subject. It is a highly intensive course and therefore limited to twelve participants only.

Two days PGEA under Service Management. The fee (inclusive of VAT) is £325.00 including lunch, refreshments and dinner on the first evening.

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Course Tutor: Hilary Haman

3/4 May 1995

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### PRESENTATION & MEDIA SKILLS COURSE FOR WOMEN GP's 24 January 1995

will be given to Faculty Women's Representatives and Leaders of Women's Groups.

The RCGP Women's Task Force presents a course on self presentation and communication skills, commissioned by Voiceworks. Areas covered will include visual and auditory skills, creating confidence and tactics. Workshop sessions will focus on putting these techniques to use in media presentations interviews and chairing meetings. Please apply as soon as possible as course numbers are limited. Priority

The course is heavily subsided and accordingly, a fee of £20 (including VAT) will be charged. Some funding is also available towards childcare costs.

For further details please contact RCGP Courses and Conferences Unit on: 071-823-9703.

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# FITNESS FOR WORK CONFERENCE & LAUNCH OF THE 2ND EDITION THURSDAY 9 FEBRUARY 1995

The launch of the second edition of this invaluable reference book, which has been completely re-written, will take place at an all day conference on the subject at the Royal College of Physicians, Regents Park, London NW1 on Thursday 9 February 1995.

The conference will be opened by Sir Bob Reid, Chairman of British Rail and London Electricity and addressed by some of the contributors and other distinguished medical specialists on topics concerned with the relationship between work and health.

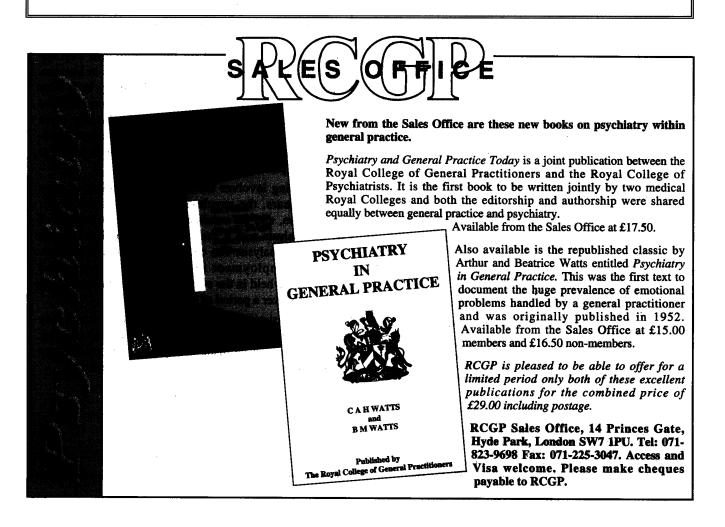
The conference will cover minimally invasive surgery, drug abuse in the workplace, women at work, legal issues concerning fitness for work, heart disease and driving, working on dialysis, new concepts in repair of the CNS and a medical view from the cockpit by a doctor who combines two professions, flying and medicine.

Contributors will include Mr James Wellwood, Dr Neil Davies, Dr David Cowan, Professor Nicola Cherry, Mrs Gillian Howard, Dr Michael Petch, Dr Derek Manning, Dr Gerald Smith, Dr Lalia Kapadia, Dr Tim Carter, Dr Peter Baxter, Mr Trevor Lawson, Dr Charles Veys and Professor Malcolm Harrington.

The price of £85.00 includes attendance at the conference, lunch, coffee, tea and a complimentary copy of the Second Edition of Fitness for Work (normal retail price of £27.50). PGEA approved.

As demand for places is expected to be heavy and numbers will be limited, you are advised to reserve your place early. Details can be obtained from the Faculty of Occupational Medicine at 6 St Andrews Place, Regents Park, London NW1. Tel: 071 487 3414. Fax: 071 935 2259.

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Previous courses have all received PGEA approval. Courses are held at Southampton General Hospital.

Please apply for further details from: Mrs Angela Jackson, Department of Rheumatology, General Hospital, Southampton SO9 4XY Tel: 01703 796711



### MRCGP EXAMINATION – 1995

The dates and venues of the next two examinations for Membership are as follows:

Mav/July 1995

Written papers:

Wednesday 3 May 1995 at centres in London, Manchester, Glasgow, Edinburgh, Newcastle, Cardiff, Belfast, Liverpool, Ricon, Birmingham, Bristol, Sennelager and Rivadh.

Oral Examinations: In Edinburgh from Monday 19 to Wednesday 21 June and in London from Thursday 22 June to Saturday'1 July Inclusive.

The closing date for the receipt of applications is

Friday 24 February 1995.

October/December 1995

Written papers:

Tuesday 24 October 1995 at those centres listed

above.

Oral Examinations: In Edinburgh on Monday 4 and Tuesday 5 December and in London from Wednesday 6 to Monday 11 December inclusive.

The closing date for the receipt of applications is

Friday 1 September 1995.

MRCGP is an additional registrable qualification and provides evidence of competence in child health surveillance for accreditation.

For further information and an application form please write to the Examination Department, Royal College of General Practitioners, 15 february 1997,

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#### RECRUITMENT



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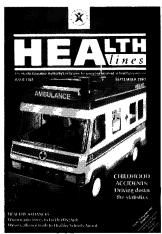
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24/25 March 1995

VENUE: Homerton College, Cambridge

A European Conference on Reaccreditation and Recertification is being organised in Cambridge, UK from 24-25 March 1995 by the European Academy of Teachers in General Practice (EURACT) with the assistance of the International Committee of the RCGP and the East Anglian Faculty of the RCGP.

This subject is becoming extremely important in all countries. The conference will provide a forum for consideration of the Academic and Educational issues involved in recertification and reaccreditation. The programme will be in the format of keynote speeches and interactive workshops. Delegates fees (inclusive of VAT) £105.00 for EURACT Members or £120.00 for non-EURACT Members. PGEA applied for.

For further details please contact RCGP Courses and Conferences on 071-823-9703 or Fax: 071 225 3047

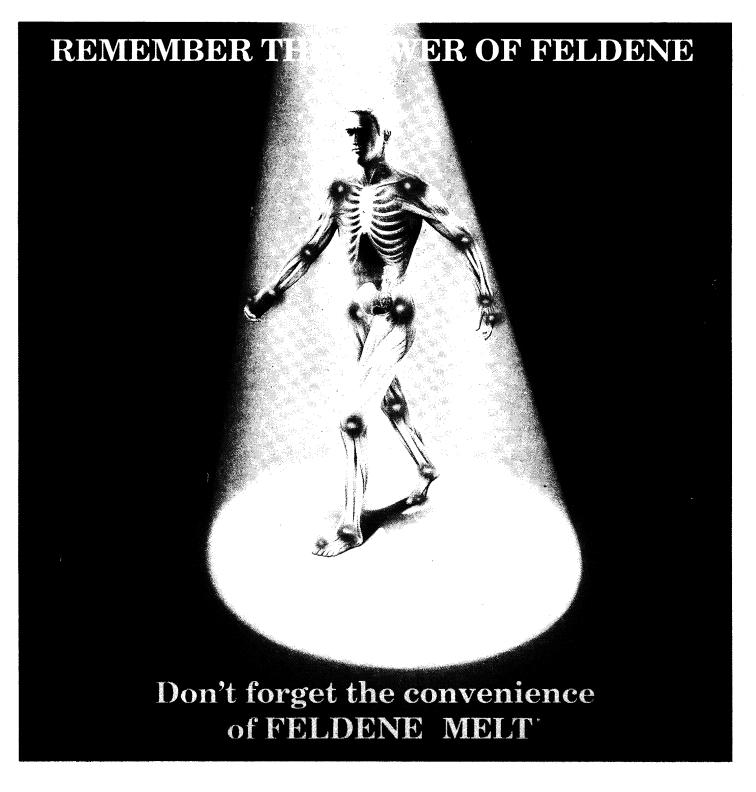
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# National Spring Meeting 28-30 April 1995

Hosts - North West England Faculty



For further details contact: Halina Dawson, Faculty Manager and Conference Organiser, RCGP - NW England Faculty, Wigan and Leigh Medical Institute, 162 Wigan Lane, Wigan WN1 2LA Tel: 0942 826400 Fax: 0942 826249



# Feldene Mati

### MELTS IN THE MOUTH FOR POWER IN THE JOINTS

PRESCRIBING INFORMATION FOR FELDENE MELT\* (PIROXICAM): UK. Indications: Adults: Rheumatoid arthritis, osteoarthritis, ankylosing spondylitis, acute gout and acute musculoskeletal disorders. Elderly: As with other NSAIDs, elderly patients should be closely supervised. Children: FELDENE MELT is not recommended in children. For treatment of juvenile chronic arthritis (Still's disease) please see oral data sheet. Dosage: Rheumatoid arthritis, osteoarthritis and ankylosing spondylitis - normal starting and maintenance dosage 20mg once daily. Long-term use of 30mg daily or more carries an increased risk of gastro-intestinal side-effects. Acute gout - 40mg daily in single or divided doses for up to 7 days. Acute musculoskeletal disorders - 40mg daily, in single or divided doses, for the first 2 days. 20mg daily for the remainder of the 7 to 14 days' treatment. Contra-indications: Active peptic ulceration or history of recurrent ulceration. Hypersensitivity to FELDENE, aspirin or other NSAIDs. Warnings: Pregnancy, lactation.

Precautions: Significant renal, hepatic or cardiac insufficiency. Patients with phenylketonuriaeach FELDENE MELT tablet contains 0.14mg phenylalanine. Drug Interactions: Monitor
patients on concurrent anticoagulants, lithium or diuretic therapy. Concurrent use of aspirin or
other NSAIDs is not advised. Side-Effects: Gastro-intestinal symptoms; if peptic ulceration or
gastro-intestinal bleeding occurs withdraw FELDENE. Oedema, mainly ankle. Skin rashes. CNS
effects, including headaches and dizziness. Rare cases of renal and hepatic abnormalities have been
reported. Haematological reactions including thrombocytopenia and anaemia and hypersensitivity
reactions such as bronchospasm and anaphylaxis have been reported.

reactions such as bronchospasm and anaphylaxis have been reported very rarely. Legal Category: POM. Package Quantities and Basic NHS Cost: FELDENE MELT tablets 20mg, pack of 28, £9.83 (PL 0057/0352). Further information on request. Pfizer Limited, Sandwich, Kent.

