Depression...disturbed sleep...

Sinequan*
brand of doxepin

lifts depression...
promotes restful sleep

- SEDATIVE ANTIDEPRESSANT
- ONCE NIGHTLY DOSAGE

Indications: depression with or without anxiety. Contraindications: glaucoma, urinary retention, hypersensitivity to the drug. Side effects: dry mouth and drowsiness are most commonly reported. Precautions: Sinequan may potentiate other compounds - e.g. monoamine oxidase inhibitors; not recommended in pregnancy or children under 12 years of age. Dosage: range 30 mg to 300 mg daily in divided doses, up to 100 mg may be given as a single dose at night. Packs and Basic N.H.S. Cost: 10 mg capsules (PL 57/5032), pack of 100, £2.98; 25 mg capsules (PL 57/6033), pack of 100, £4.24; 50 mg capsules (PL 57/5034) pack of 100, £7.01; 75 mg capsules (PL 57/0133), pack of 60, £5.64.

Full information on request to the Company.
Epilim is a powerful anticonvulsant capable of providing control for the majority of adults with tonic-clonic seizures or other epilepsies, including those not well controlled on previous treatments. Because it controls without sedation, Epilim allows many patients to lead full, normal lives.

Hyperammonaemia without hepatic damage can occur in patients during treatment with valproic acid or sodium valproate. This may manifest clinically as vomiting, ataxia and increasing clouding of consciousness. Should these symptoms occur, Epilim should be discontinued.

Valproic acid inhibits second stage of platelet aggregation. Reversible prolongation of bleeding time and thrombocytopenia have been reported. Spontaneous bruising or bleeding is an indication for withdrawal of medication pending investigations. Patients receiving Epilim should be monitored for platelet function before major surgery. Red cell hypoplasia and leucopenia have been reported. The blood picture returned to normal when the drug was discontinued. Pancreatitis has occurred in patients receiving valproic acid or sodium valproate. Patients experiencing acute abdominal pain should have serum amylase estimated.

Minor gastric irritation and, less frequently, nausea may occur at the start of treatment, but these problems can usually be overcome by administering Epilim tablets or syrup with or after food, or by transferring the patient to the Epilim enteric-coated formulations. Transient hair loss has been noted in some patients. Regrowth normally begins within six months. Tremor has occasionally been observed at high dosage. Oedema has been reported. Increase in alertness, appetite and weight may occur. Combined medication: Epilim is generally well tolerated in combination with other anti-epileptic agents, however, as interaction occurs between these compounds, it may sometimes be necessary to reduce the dosage of other drugs when adding Epilim to existing anti-convulsant therapy. Epilim may also potentiate the effect of monoamine oxidase inhibitors and other anti-depressants, and dosage of such compounds should be reduced.

Diabetic patients: Epilim may give false positive urine testing for ketones. Care should be taken when treating diabetic patients with Epilim syrup which contains 3.6g sucrose per 5ml.

Women of childbearing age: Valproic acid or sodium valproate, like certain other anti-convulsants, have been shown to be teratogenic in animals. In women of childbearing age, the benefits of these compounds should be weighed against the possible hazard suggested by these findings.

Further Information
When plasma valproic acid is within the recommended range of 50-120mcg/ml (50-840mcg/ml) and serum albumin levels are normal, about 90% of the drug is bound to albumin. If the total plasma valproic acid rises above the upper range of normal, or if there is a reduction in plasma albumin, the percentage of free valproic acid may rise markedly in disproportion to any dosage increase and may be associated with a higher incidence of adverse effects.

Product Licence Numbers, Names and Addresses
Epilim 200 enteric-coated tablets 0623/0006
Epilim tablets 0623/0001
Epilim 500 enteric-coated tablets 0623/0005
Epilim syrup 0623/0004

NHS Code
Epilim 200 enteric-coated tablets: 100. E7.04
Epilim 500 enteric-coated tablets: 100. E7.60
Epilim syrup: 200ml: 6u.03
Epilim 200mg tablets: 100. E5.45

LABAZ: Sanofi UK Ltd.
Regent House, Heath Lane, Stockport SK4 1AG.
Chester Telephone: 061-480.8956/7/8

Additional Information is available from LABAZ: Sanofi U.K. Ltd., Regent House, Heath Lane, Stockport SK4 1AG.
For many grand mal patients

a full, normal life under the protection of

**Epilim**
sodium valproate

200 enteric-coated, 500 enteric-coated tablets; syrup.
Who puts the most advanced electrophysiology at your fingertips?

Worldwide, Medelec has become synonymous with modern electrophysiology and is first choice for routine clinical testing, teaching and research.

Medelec systems meet the most demanding requirements in electrocardiography, physical medicine, rheumatology, rehabilitation, neurology, audiometry, otology, ophthalmology, kinesiology, psychology.

Medelec has a dedication to quality and a commitment to innovation to see you far into the future.

Try Medelec – for a better response.
HOW TO DO IT

Every doctor knows the sinking sensation induced by waiting one's turn for an examination viva and the social anxieties of changing jobs. The misery of first night nerves does not, however, disappear with time: each decade brings new challenges. On these occasions—chairing a committee, giving evidence in court, appearing on television—practical tips can be enormously helpful. The same is true of the many skills not taught in medical school—how to lecture, referee papers, edit, or use a library. All these and many more nuggets of down-to-earth advice have been collected from past issues of the BMJ to form a compendium for the novice—whatever his or her age or seniority.

Price: Inland £4.00;
Abroad US$10.00
(Concessionary price to BMA members: Inland £3.50;
Abroad US$8.75.
When ordering BMA members must quote their membership number or the full price will be applicable.)
Payment must be enclosed with order or a surcharge of 50p will be made for rendering invoices and statements.

Order your copy now
From: The Publisher
British Medical Journal
BMA House
Tavistock Square
London WC1H 9JR
or any leading bookseller
The combination of simple language and straightforward line drawings has made the

**ABC of OPHTHALMOLOGY**

one of the most popular series of articles in the Medical Practice section of the British Medical Journal.

All the common problems are covered - visual defects, squints, glaucoma and cataracts - together with detailed instruction on examination, diagnosis and management.

The articles have now been collected into book form - in exactly the same format as they appeared in the BMJ -

price: Inland £2.50; Overseas US$6.25 (Inland £2.00; Overseas US$5.00 for BMA members).

**Order your copy now**
From: The Publisher, British Medical Journal, BMA House, Tavistock Square, London WC1H 9JR or any leading bookseller
The Institute provides postgraduate training in the various departments of Neurology.

The Out-Patient Practice is open at 10.00 am at QUEEN SQUARE every day (except Saturday). A fee of £200 per month is charged for attending the Out-Patient Department only.

The In-Patient Practice at Queen Square is open at 10 a.m., and a limited number of clinical clerks are appointed. Fees: three months £1,500, six months, £3,000.

Whole-time courses of instruction are given during the Autumn, Winter and Spring terms. Besides these, teaching in the various neurological disciplines goes on throughout the year together with Clinical Demonstrations every Wednesday afternoon and Saturday morning as advertised in the Medical Journals.

Application should be made to the Dean at the Institute, Dr. P. C. GAUTIER-SMITH

ESsays in Neurochemistry and Neuropharmacology, Volume 5

Edited by M.B.H. Youdim, Technion—Israel Institute of Technology, School of Medicine, Haifa, Israel, W. Lovenberg, National Heart and Lung Institute, Bethesda, USA, D.F. Sharman, Agricultural Research Council, Institute of Animal Physiology, Babraham, Cambridge, and J.R. Lagnado, School of Medicine, University of Zambia

The essays have been written for postgraduate students and researchers who wish to familiarize themselves with current specific problems in neurochemistry and neuropharmacology. The level of presentation is such that the essays can be understood by advanced undergraduate students in biochemistry, physiology, and pharmacology. Each contribution is readable as an essay rather than as a review, and provides factual information to support or reject current theories. In summarizing, the authors state their own views on the trends for future research.

As with the previous publications in the series, Volume 5 represents a broad spectrum of subjects dealing with neurophysiological, neurochemical and behavioural pharmacology.

April 1981
170 pages
0471 27879 3
$45.40/£16.50

Monoamine oxidase inhibitors —
The State of the Art
Based on a Symposium of the 12th Congress of the Collegium Internationale Neuro-Psychopharmacologicum, Gothenburg, 22-28 June 1980

Edited by M.B.H. Youdim, Technion—Israel Institute of Technology, School of Medicine, Haifa, Israel, and E.S. Paykel, St. George's Hospital Medical School, London

The first part of the book deals with the biochemistry and pharmacology of MAO and its inhibitors. The emphasis is placed on how these compounds interact with MAO and inhibit the enzymes, resulting in the increase of amnergic neurotransmitter concentrations in the central nervous system. The second part contains chapters dealing with the clinical place of established MAO inhibitors, including efficacy, comparisons with tricyclic anti-depressants, the question of patient response, and combination with tricyclic antidepressants. A development with considerable promise is that of selective MAO inhibitors. Emerging clinical and pharmacological findings are also described.

February 1981
232 pages
0471 27880 7
$35.75/£13.00