

## SUMMARY

1. Creatine excretion was determined in a group of 74 European diabetics (50 females and 24 males) and 50 control cases.
2. Thirty-nine diabetics (29 females and 10 males) had Dupuytren's contracture.
3. Creatinuria was greater in the diabetic group.
4. There was no significant difference between the creatinuria in the female total diabetic group and in those with diabetes plus Dupuytren's contracture, but

there was a marked difference between the males of the two groups.

5. The significance of the results is discussed.

We wish to thank Mr. V. J. Noble for his technical assistance.

## REFERENCES

1. Schneider, T. (1953): *S. Afr. Med. J.*, **27**, 466.
2. Steinberg, C. Le R. (1946): *Med. Clin. N. Amer.*, **30**, 221.
3. Peters, P. and Van Slyke, D. (1932): *Quantitative Clinical Chemistry*, vol. 2, p. 602. London: Baillière, Tindall and Cox.
4. Wright, S. (1952): *Applied Physiology*, p. 894. London: Oxford University Press.

## ASSOCIATION NEWS: VERENIGINGNUUS

## MEDIËSE BESKERMING

Op die jongste vergadering van die Federale Raad is dit ooreengekom dat die Mediese Vereniging van Suid-Afrika 'n ooreenkoms met die Medical Protection Society van Londen sou sluit, waardeur die Genootskap 'n Suid-Afrikaanse Tak in oorleg met die Vereniging sou stig.

Vir baie jare is beskerming aan ons lede verskaf volgens 'n ooreenkoms met die Atlas Assuransie Maatskappy, wat waardevolle diens aan die mediese professie in ons land gelewer het deur die dekking wat hulle voorsien. Hegte vriendskapsbande het bestaan, en bestaan nog tussen die maatskappy en die Vereniging, en die ooreenkoms wat nou met die Medical Protection Society aangegaan is, verskaf 'n alternatiewe diens aan lede maar vervang nie die diens wat die Atlas Maatskappy gedurende al hierdie jare voorsien het nie.

'n Memorandum wat die dienste van die Medical Protection Society duidelik maak, is vir oorweging aan al die lede van die Vereniging gegee, en dit word aan die lid oorgelaat om te besluit

watter vorm van beskerming hy verkies. Een ding staan egter vas, naamlik dat elke dokter op een of ander wyse beskerm moet wees. Versuim om hierdie voorsiening te tref, asook nalatigheid om toe te sien dat die beskerming, met betrekking tot die bedrag van indenniteit, doeltreffend is, is dwaasheid.

Dit is gevind dat die vorige laer perk van £1,000 nie meer redelike en genoegsame beskerming bied nie, en dit is nou tot £2,000 verhoog. Sommige soorte van praktyke het beskerming teen baie groter eise nodig.

Die vorms wat gesirkuleer is, sluit 'n aansoekvorm in, en die aanvangsdatum vir dekking deur die Medical Protection Society dateer van die datum waarop die voltooide vorm by die kantoor van die Sekretaris van die Mediese Vereniging van Suid-Afrika, Posbus 643, Kaapstad, ontvang word. Lede wat miskien besluit om die beskerming wat hulle by een of ander maatskappy of genootskap het, te verander, moet aandui wanneer die volgende hernuwingspremie normaalweg betaalbaar is.

## NEW PREPARATIONS AND APPLIANCES : NUWE PREPARATE EN TOESTELLE

*Ef-Cortelan Nasal Spray.* This product is an isotonic aqueous solution containing: Hydrocortisone (alcohol) 0.02%, naphazoline nitrate 0.025%.

Hydrocortisone has been shown to be effective for the relief of inflammatory conditions of the nasal passages when applied to the mucous membranes of the nose in very dilute solutions. Local application avoids the possibility of systemic effects and the low concentration is unlikely to cause irritation. The presence of naphazoline, a decongestant vasoconstrictor, assists the hydrocortisone to exert a maximum effect.

Ef-Cortelan Nasal Spray is recommended for the commonly occurring inflammatory allergic conditions of the nose, such as hay-fever and vasomotor rhinitis. It is also effective in reducing the inflammation in sinusitis and helps to prevent the recurrence of nasal polypi.

The length of treatment varies with the condition and the response obtained, but unnecessarily prolonged treatment should be discouraged. Where acute infection is present this may require appropriate treatment concurrently.

Manufactured by Glaxo Laboratories (S.A.) (Pty.) Ltd., P.O. Box 21, Wadeville, Transvaal. Packed in 15 c.c. plastic squeeze-bottles.

\* \* \*

*Neobacrin Ointment.* This product contains 5 mg. of neomycin sulphate and 500 units of zinc bacitracin per gram, in a bland paraffin base. Both these antibiotics are bactericidal. They are non-irritant and have an extremely low sensitizing potential. No systemic effects from Neobacrin have been observed, even when applied to large body-surfaces for prolonged periods.

Neobacrin is recommended for the treatment of pyogenic skin conditions such as impetigo, sycosis barbae, furunculosis, and secondarily infected wounds and burns. Superficial infections of the eye such as blepharitis, conjunctivitis and styes also respond well to Neobacrin.

Manufactured by Glaxo Laboratories (S.A.) (Pty.) Ltd., P.O. Box Wadeville, Transvaal. Packed in 3.5 gram long-nozzle tubes.

## REVIEWS OF BOOKS : BOEKRESENSIES

## AIDS TO DISPENSING

*Aids to Dispensing.* Fifth Edition. Revised by G. M. Watson, B.Pharm., F.P.S. Pp. vii + 167, with 7 Illustrations. 7s. 6d. net. London: Baillière, Tindall and Cox Ltd. 1956.

*Contents:* Preface. I. Introduction. II. Powders. III. Cachets and Capsules. IV. Percentage Solutions. V. Mixtures. VI. Emulsions. VII. Incompatibles. VIII. Pills. IX. Pill Coating. X. Tablets. XI. Pastilles and Lozenges. XII. Effervescent Granules. XIII. Lotions. XIV. Other External Applications. XV. Pre-

parations for use in the Eyes. XVI. Ointments. XVII. Suppositories. XVIII. Preparation of Isotonic Solutions. XIX. Preparation of Sterile Products. XXI. Antibiotics. Index.

The 'Aids' series has always been popular with students and 'Aids to Dispensing' has now reached its 5th edition, having first appeared in 1928. Pharmaceutical practice, like all forms of practice, has changed considerably since those days and in his revision the author has sought to bring the book completely up to date in regard to both knowledge and methods. Certain