cellular cyclic adenosine monophosphate and protein kinase activation. The relationship of this to the symptoms in our patient is unknown, but our case does indicate the need for caution in administering beta-blockers to patients with skeletal muscle disease.

We thank Professor M F Oliver for permission to report this case and for advice in the preparation of the manuscript.

- ¹ Robinson, B F, Side Effects of Drugs Annual, ed M N G Dukes, 3rd edn. Amsterdam, Excerpta Medica, 1979.

 Satya-Murti, S, Heiman, S, and Martinez, L B, New England Journal of
- Medicine, 1977, 297, 223.

 Blessing, W, and Walsh, J C, Lancet, 1977, 1, 73.
- ⁴ Barrett, A M, Recent Advances in Cardiology, ed J Hamer. Edinburgh, Churchill Livingstone, 1973.

(Accepted 24 September 1979)

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Effect of sustained-release lithium tablets on renal function

The ability of the kidney to concentrate urine may be impaired in patients treated with lithium; this impairment may persist after stopping the drug in some patients who have had long-term treatment.1 2 Disagreement exists as to the severity of the effects of lithium treatment. Donker et al3 and Hullin et al4 found less effect than in previous studies12; this may have been because they used smaller doses of lithium. Bucht et al² found greater impairment in patients whose plasma lithium concentrations were slightly above the recommended therapeutic range than in those whose plasma concentration was within it. This suggests that the therapeutic range of plasma concentrations must be narrow. We therefore hypothesised that it might make a considerable difference whether readily soluble lithium carbonate tablets or sustained-release tablets were prescribed: more stable plasma concentrations and less pronounced peaks might reduce the toxic effect. We have tested this hypothesis and describe our results.

Patients, methods, and results

We used 28 pairs of patients who were being treated long-term with lithium (median duration of treatment 63.5 months) and in whom plasma lithium concentrations had always been within the therapeutic range. The patients were paired for age, sex, and total intake of lithium. One patient in each pair had been treated with lithium carbonate tablets and the other with sustained-release tablets (Lithionit^R or Litarex^R). We measured the urine concentrations in each patient after 24 hours without drinking. The patients were given an intramuscular injection of antidiuretic hormone (vasopressin tannas 5 IE) at the beginning of the 24 hours, and during the test lithium treatment was suspended for 48 hours. The mean maximum urine concentration in patients taking sustained-release tablets was 846 mosm/kg; significantly higher (P < 0.03) than the 747 mosm/kg of the patients taking lithium carbonate tablets (table).

Comparison of mean maximum urine concentration after 24 hours without drinking in patients taking lithium carbonate tablets and patients taking sustainedrelease lithium tablets

	Sus	stained-release tablets (n = 28)	Lithium carbonate tablets (n = 28)
Mean age (years)		46.1	46.6
Mean total lithium intake (mols) Mean maximum urine concentration (mosmol/kg)	• •	64.3	64.7
	• •	846	747

Wilcoxon's matched pairs test; Z = 2.16; P < 0.03.

Comment

This comparison showed that during long-term treatment sustainedrelease lithium tablets produce less impairment of the ability of the kidney to concentrate urine than do lithium carbonate tablets. The sustained-release tablets used in this study are completely absorbed, and give more stable plasma concentrations and fewer concentration peaks than lithium carbonate tablets.5 We believe that this is why they produce less impairment of the ability of the kidney to concentrate urine.

We believe that lithium treatment is an irreplaceable prophylactic measure for patients with periodic affective disorders. The therapeutic range of plasma concentrations does, however, seem to be narrower than was previously thought, and therefore close attention should be paid to keeping the plasma concentration as low as is compatible with a prophylactic effect. We suggest that, when selecting the type of tablet, preference should be given to the sustained-release form.

- ¹ Bucht, G, and Wahlin, A, Lancet, 1978, 1, 778.
- Bucht, G, and Wahlin, A, Nordisk Psykiatrisk Tidsskrift, 1978, 32, 445.
 Donker, A J M, et al, Clinical Nephrology, in press.
 Hullin, R P, et al, British Medical Journal, 1979, 1, 1457.
- ⁵ Amdisen, A, in Lithium Research and Therapy, ed F N Johnson, p 197. London, Academic Press, 1975.

(Accepted 5 September 1979)

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WALLIN, MD, assistant professor C ALLING, MD, assistant professor

Vancouver style

All manuscripts submitted to the BMJ from now on should conform to the uniform requirements for manuscripts submitted to biomedical journals (known as the Vancouver style).

The BMJ, together with many other international biomedical journals, has agreed to accept articles prepared in accordance with the Vancouver style and will be introducing the system from January 1980. The style (described in full in BMJ, 24 February, p 532) is intended to standardise requirements for authors and covers text format, presentation of methods and results, use of SI units, and the form of tables and illustrations. All the participating journals have also agreed to introduce a standard form of

In future references to papers submitted to the BM7 should include: the names of all authors if there are fewer than seven or, if there are more, the first three followed by et al; the title of journal articles or book chapters; the titles of journals abbreviated according to the style of Index Medicus; and the first and final page numbers of the article or chapter.

Examples of common forms of references are:

- ¹ International Steering Committee of Medical Editors. Uniform requirements for manuscripts submitted to biomedical journals. Br Med J 1979;1:532-5.
- Soter NA, Wasserman SI, Austen KF. Cold urticaria: release into the circulation of histamine and eosinophil chemotactic factor of anaphylaxis during cold challenge. N Engl J Med 1976;294:687-90.
- Weinstein L, Swartz MN. Pathogenic properties of invading microorganisms. In: Sodeman WA Jr, Sodeman WA, eds. Pathologic physiology: mechanisms of disease. Philadelphia: W B Saunders, 1974:457-72.

Up to the beginning of October some 100 journals had agreed to accept articles in the Vancouver style, and a full list will be printed early in 1980.

COMING EVENTS

Royal College of Physicians of London—Teach-in "Viral diseases of the nervous system," 4 December, "Viral diseases of the nervous system," 4 Dece London. For details see classified advertisements.

Royal Society of Health—Conference "Exotic infectious diseases," 7 December, London. Details from the society, 13 Grosvenor Place, London SW1X 7EN. (Tel 01-235 9961.)

Royal College of Surgeons of England—Annual meeting of fellows and members, symposium "Who does what in children's surgery," and Bradshawe lecture "Urinary diversion" by Mr H Hanley, open to any interested practitioner, 12 December, London. Details from the assistant secretary of the college, 35-43 Lincoln's Inn Fields, London WC2A 3PN.

Society for Drug Research—Symposium "Synthetic developments in the prostanoid field," 18 December, London. Details from the society secretariat, c/o Institute of Biology, 41 Queen's Gate, London SW7 5HU. (Tel 01-589 9076.)

Course on counselling before and after bereav ment—Ten seminar and discussion groups organised by Cruse, 10 January-13 March, London. Details from Dr Dora Black, Cruse House, 126 Sheen Road, Richmond, Surrey. (Tel 01-940 4818/9047.)

"Developments in packaging for medical and hospital supplies"—Seminar organised by Pira, 15 January 1980, Leatherhead. Details from the booking officer of the information and training division, Pira, Randalls Road, Leatherhead, Surrey KT22 7RU. (Tel Leatherhead 76161.)

Boerhaave Committee for Postgraduate Medical Education—Course on bone scintigraphy, 24-25 January 1980, Leiden. Details from the committee, Academisch Ziekenhuis, Rijnsburgerweg 10, 2333 AA Leiden, Netherlands.

Association for Clinical Research in the Pharma Association for Clinical Research in the Pharma-ceutical Industry—Second spring symposium, 19-21 March 1980, Stratford-upon-Avon. Details from Mrs C A Ayrton, Smith Klein and French, Mundells, Welwyn Garden City, Herts. (Closing date for residential attendance 7 December.)

Biological Engineering Society 20th anniversary—International conference "Recent advances in biomedical engineering," 23-28 March 1980, London Details from Bio Eng 80 Secretariat, Royal College of Surgeons of England, 35/43 Lincoln's Inn Fields, London WC2A 3PN. (Tel 01-242 7750.) Closing date for submission of abstracts 1 December 1979.

18th Congress of the International Society of Hematology and 16th Congress of the International Society of Blood Transfusion—16-22 August 1980, Montreal, Details from ISH/ISBT Congress Montreal, 772 Sherbrooke Street West, Montreal, Quebec, Canada H3A 1G1. (Tel (514) 392-6744.)

South Essex Postgraduate Medical Centre—Details and copies of the January-March 1980 programme are now available from the centre, Basildon Hospital, Nether Mayne, Basildon, Essex SS16 5NL. (Tel 0268 3911 ext 3360.)

SOCIETIES AND LECTURES

For attending lectures marked * a fee is charged or a ticket is required. Applications should be made first to the institutions concerned.

Monday, 26 November

CIBA FOUNDATION—At Royal Institute of British Architects, 5 pm, 31st annual Ciba Foundation lecture by Dr Spyros Doxiadis (Greece): The right to be different.

INSTITUTE OF OBSTETRICS AND GYNAECOLOGY—12.30 pm. Professor R Beard: The current status of intrapartum monitoring.

Tuesday, 27 November

Institute of Neurology—5.30 pm, Dr T W Picton (Ottawa): The neurophysiology of human cognition. UNIVERSITY COLLEGE LONDON—1.20 pm, Dr D Wilkie: Mitochondria and oncogenesis.

WORTHING POSTGRADUATE MEDICAL CENTRE—1 pm, fourth Leonard Simpson lecture by Professor H Keen: Diabetes and vascular disease—pathogenesis and therapy.

and therapy.

Wednesday, 28 November

Institute of Neurology—Sandoz Foundation advanced lectures, 6 pm, Professor J C Sloper: The muscle cell: current trends in research. 7 pm, Professor R H T Edwards: Muscle performance and fatigue.

Institute of Psychiatry—5.30 pm, Dr I F Brockington: A Tower of Babel—comments on the classification of

the psychoses.

OVAL FREE HOSPITAL SCHOOL OF MEDICINE—5 pm,

Professor C G Clark: Peptic ulcer—cimetidine or

Thursday, 29 November

EDINBURGH ROYAL INFIRMARY—5 pm, Honyman Gillespie lecture by Dr K Little: Why make them wait at the roadside?

St Mary's Hospital Medical School—5.15 pm, Aleck Bourne lecture by Dr A Clare: Psychosocial aspects of premenstrual tension.

Friday, 30 November

UNIVERSITY OF LIVERPOOL—At Royal Liverpool Hospital, 5 pm, Dr G Meachim: The clinical pathology of orthopaedic implants.

BMA NOTICES

Central Meetings

NOVEMBER

Scottish Committee for Hospital Medical Services (7 Drumsheugh Gardens, Edinburgh EH3 7QP), 2.30 pm. Forensic Medicine Subcommittee (Private Practice Committee), 2.15 pm. BMA Council, 10 am. 26 Mon 27 Tues 28 Wed 29 Thurs

and 30 Fri

Training course for newly appointed honorary secretaries.

DECEMBER

Scottish General Medical Services Committee (7 Drumsheugh Gardens, Edinburgh EH3 7QP), 10.30 am. Journal Committee, 3.30 pm. Armed Forces Committee, 10.30 am. Central Committee for Hospital Medical Services 10 am. 4 Tues 4 Tues 5 Wed 6 Thurs

Services, 10 am.
General Purposes Subcommittee (GMSC), 6 Thurs 10.30 am. BMA Council Executive Committee, 10 am. General Purposes Subcommittee (CCHMS), 12 Wed 13 Thurs

19 Wed Negotiating Subcommittee (CCHMS), 10

am. General Medical Services Committee, 10 am. 20 Thurs

Division Meetings

Members proposing to attend meetings marked * are asked to notify in advance the honorary secretary concerned.

Bradford and Airedale—At Bradford Royal Infirmary, Wednesday, 28 November, 7.30 pm, Dr K M Lumb: "Shanghaied—a glimpse of China."

Bromley—At Farnborough Hospital, Wednesday, 28 November, 8.15 pm, Dr David Paul and Professor J Cameron: "Forensic follies."* (Followed by free buffet, guests are invited.)

Darlington—At the George, Piercebridge, Friday, 30 November, 7.30 pm, annual dinner dance.* (Guests are welcome.)

Eastbourne—At Lambe Inn. Tuesdav. 27

Eastbourneare welcome.)

Eastbourne—At Lambe Inn, Tuesday, 27

November, 7·30 pm, dinner/lecture, Dr R Alderslade:
"The changing scene in community medicine."*

East Yorkshire—At Willerby Manor Hotel, Friday,
30 November, 8 for 8.30 pm, joint annual dinner dance
with Hull Medical Society.*

Greenwich and Review—At Churchill Theatre.

Hastings—At High Beech Hotel, Friday, 30 November, 7.15 for 8 pm, annual dinner and dance.* (Guests are invited.)

Leicestershire and Rutland—At the Grand Hotel, Saturday, 1 December, 7.30 for 8 pm, Leicester medical ball.*

medical ball.*

Lothian—At BMA Scottish House, Friday, 30

November, 12 noon, wine and cheese lunch in aid of the

Royal Medical Benevolent Fund.*

Mid-Northumberland—At Ashington General

Hospital, Wednesday, 28 November, 7.30 pm, extraordinary divisional meeting on "The viability of the

Mid-Northumberland division of the British Medical

Association." Association

North and South Camden—At BMA House, Wednesday, 28 November, 7.30 for 8 pm, business

Wednesday, 28 November, 7.30 for 8 pm, business meeting.

Redbridge and Stratford—At Ilford Postgraduate Centre, Tuesday, 27 November, 7.30 pm, Dr Fay Hutchinson: "Psychosexual counselling."*

Salop—At Royal Shrewsbury Hospital, Wednesday, 28 November, 7.15 for 7.30 pm, agm.* (Followed by buffet supper.)

South-east Essex—At Garon's No 1 Banqueting Suite, Southend on Sea, Friday, 30 November, 7.30 for 8 pm, annual dinner dance.* (Guests are invited.)

West Sussex—At Royal Norfolk Hotel, Bognor Regis, Thursday, 29 November, 7.30 pm, dinner/lecture, speaker Dr Dimond: "Smoking and chest disease."*

Regional Meetings

Regional Council—At Pinderfields ital, Wakefield, Sunday, 25 November, General Hospital, 2.30 pm.

UNIVERSITIES AND COLLEGES

GLASGOW

MD-D G Gilmour, O Ogunbode, F B Proudfoot, K MacD Taylor.

LONDON

MD-R E Cowan, T M Cox, M F D'Souza, Patricia M Sonksen.

MS-D J Farrar, J D Stamatakis.

Instructions to authors

The following are the minimum requirements for manuscripts submitted for publication.

A stamped addressed envelope or an international reply coupon must accompany the manuscript if acknowledgment of its receipt is desired.

- (1) Typing should be on one side of the paper, with double or triple spacing between the lines and 5-cm margins at the top and left-hand side of the sheet.
- (2) Two copies (or preferably three) should be submitted.
- (3) Spelling should conform to that of Chambers Twentieth Century Dictionary.
- (4) References must be in the Vancouver style (BMJ, 24 February, p 532) and their accuracy checked before submission.
- (5) SI units are used for scientific measurements. In the text they should be followed by traditional units in parentheses. In tables and illustrations values are given only in SI units, but a conversion factor must be supplied. For general guidance on the International System of Units, and some useful conversion factors, see The SI for the Health Professions (WHO, 1977).
- (6) Authors should give their names and initials, their current appointments, and not more than two degrees or diplomas. Each author must sign the covering letter as evidence of consent to publication.
- (7) Letters to the Editor submitted for publication must be signed personally by all the authors.
- (8) Acknowledgments will not be sent unless a stamped addressed envelope or an international reply coupon is enclosed.
- (9) Detailed instructions are given in the BMJ dated 6 January 1979 (p 6).

ROYAL COLLEGE OF SURGEONS OF ENGLAND

At an ordinary meeting of the council held on 8 November with the president, Sir Reginald Murley, in the chair, the re-election of Lord Brock as chairman and Sir Hedley Arkins as vice-president of the Board of Trustees of the Hunterian Collection and the election of Lord Smith of Marlow to the board were noted.

Professor David Johnston was elected to the fellowship ad eundem, and a diploma of fellowship was granted to MH Al-Alawi.

CONSULTANT APPOINTMENTS

BIRMINGHAM AHA(T)-Mr I Donaldson (ENT

surgeon).

East Anglian RHA—Dr W R Guirguis, Dr J E Olive, Dr G U Mehta, Dr V Bapuji Rao (mental illness); Dr S J Harris, Dr Elizabeth A Welsh (anaesthetics); Mr H G Sturzaker, Mr J F Colin (general surgery); Dr J B Latham (radiology); Dr R T Rees (dental surgery); Dr Hilary M Scott (paediatrics); Dr Gillian R Milner (blood transfusion); Dr M W Fowles (forensic psychiatry); Dr R H Greenwood (general medicine); Mr G Thomas, Mr S G Crocker (obstetrics and gynaecology); Mr L J Deliss (traumatic and orthopaedic surgery); Dr Ann M G Gath (child and adolescent psychiatry). psychiatry).

Wessex RHA-Dr M Lesna (histopathology).

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