

DEPARTMENT OF HEALTH,
P.O. BOX 5013,
WELLINGTON.

18 December 1974.

CLINICAL SERVICES LETTER NO. 146
TO MEDICAL PRACTITIONERS AND DENTISTS
(Copy to Proprietors of Retail Pharmacies)

Dear Sir/Madam,

**LIST OF RECOGNISED SPECIALISTS FOR PURPOSES OF PART II,
SOCIAL SECURITY ACT 1974**

The list which follows is a second amendment (Clinical Services Letter No. 136 being the first) to the list of recognised specialists whose names appear in Clinical Services Letter No. 128. All names given below have been registered by the Medical Council of New Zealand.

Several wrongly printed entries in Clinical Services Letter No. 136 are corrected, and these are listed as an addendum.

Yours faithfully,



(A. W. S. Thompson)
Director,



(A. H. Paul)
Deputy Director,

Division of Clinical Services.

Anandoraja, Sirasambu, P.
Bethune, Henry Charles, PSYC.
Briant, Robin Helen, P.
Clark, Matthew Stephen Shearburn,
P.
Crichton, Brian John, AN.
Curtis, Gale Mervyn, S/OR.
Elliott, Ian Desmond, OPH.
Fung, David, P.
Grant, Alastair William, S/OR.
Greig, Murray Hickson, S/OTO.
Harper, Guy David James, RAD.D.
Harry, John Michael, O/G.
Hatfield, Anthea Helen, AN.
Heng, Madalene Choon Ying, DER.
Henley, Wilton Ernest, P.
Hewland, Helen Robyn, PSYC.
Hogg, Arthur Welton, P.
Jamison, David Laurence, PAED.

Jackson, Robin Valentine, S/OR.
Jones, Donald John, S/OR.
Karalliedde, Lakshman Delgoda,
AN.
Kyd, Graham Francis, RAD.D.
McIlroy, Russell Frederick, S.
Mandeno, John Woodward, S.
Matthews, John Richard Delahunt,
P.
Moodie, James Frederick, P.
Paterson, Donald Edward, RAD.D
Richards, Edward Glyndwr, AN.
Samarasinghe, Heratmudiyanselage
H.R., P.
Schwarz, Kurt, M.AD.
Stewart, Richard John, S.
Thomson, James Doig, O/G.
Wallis, William Eduardo, P.
Wishart, John Martin, DER.

ADDENDUM

Corrected Entries to Clinical Services Letter No. 136

Barnes, Graeme Laurence, PAED.
Bhattacharyya, Ratnakar, S.
Hindle, Roger Clifford, PAED.

Senanayake, Senanayake Mudi-
yanselage Sirisena, S/OTO.

PARACETAMOL POISONING

Use of paracetamol has increased since phenacetin became a prescription poison. The toxicity of paracetamol is not sufficiently appreciated, but as little as 7 g in one dose has caused poisoning. Fulminating hepatic necrosis may occur and some cases have surprisingly few symptoms.

If poisoning with paracetamol is suspected its severity should not be assessed on the clinical condition or the history of the number of tablets taken. Urgent admission to hospital for estimation of plasma levels of the drug is necessary. An antidote, cysteamine, is now available at public hospitals, but early treatment is essential.

PRACTOLOL

Adverse reactions associated with practolol have already been brought to the attention of practitioners by the manufacturers. Reactions have mainly involved the skin and cornea, but also the pericardium and peritoneum. Not all lesions are reversible.

Until further knowledge is obtained it may be prudent not to commence new patients on practolol therapy and to consider alternative therapy for those already treated with the drug. It is anticipated that from 1 April 1975 availability under the Drug Tariff will be restricted.

BY AUTHORITY:

A. R. SHEARER, GOVERNMENT PRINTER, WELLINGTON, NEW ZEALAND—1974

55028D—74G