

28 March 1967

**CLINICAL SERVICES LETTER NO. 69**  
**TO MEDICAL PRACTITIONERS**

Dear Doctor,

**NOT ONE OF YOUR PATIENTS?**

Overleaf we print a photograph of the drugs found in the home of an elderly patient after his death.

For one patient: 26 containers, 1,751 unused tablets or capsules. Total cost, about £13. Some patients prefer hoarding drugs to taking them.

In another case, a doctor was called to see a new arrival in his district, a man of over 80. He found him in possession of the following:

260 Choledyl tablets; 180 Dilosyn tablets; 210 Tricloryl tablets; 200 Melleril tablets; 60 Digitalis tablets; 18 Eromycin capsules; 150 Lasix tablets.

This man may not have been a hoarder. But were such quantities necessary—or wise?

Safety, as well as cost, suggests that before prescribing for a chronically ill patient, a doctor should check that previous supplies have been used. Many of these patients are seen at frequent intervals. It is not necessary to order everything in three-month lots. A three months' supply is only economical if it is used.

**WHAT ABOUT THIS?**

Cost to public funds last year:

Erythromycin preparations, £700,000 (approx.)

Librium and Valium (chlordiazepoxide and diazepam), £1,000,000 (approx.)

Erythromycin is three times as costly as a comparable dose of phenoxymethylpenicillin. (Penicillin V.)

Librium and Valium are from 10 to 40 times as costly as comparable doses of phenobarbitone or amylobarbitone.

How would you rate them therapeutically?

**OXYTETRACYCLINE TABLETS 250 mg**

One brand of these tablets has now become available at a greatly reduced price. Payment by the Department will therefore be based on this price from 1 April 1967.

If these tablets are ordered by generic name, a substantial part charge to the patient will be avoided.

Yours faithfully,

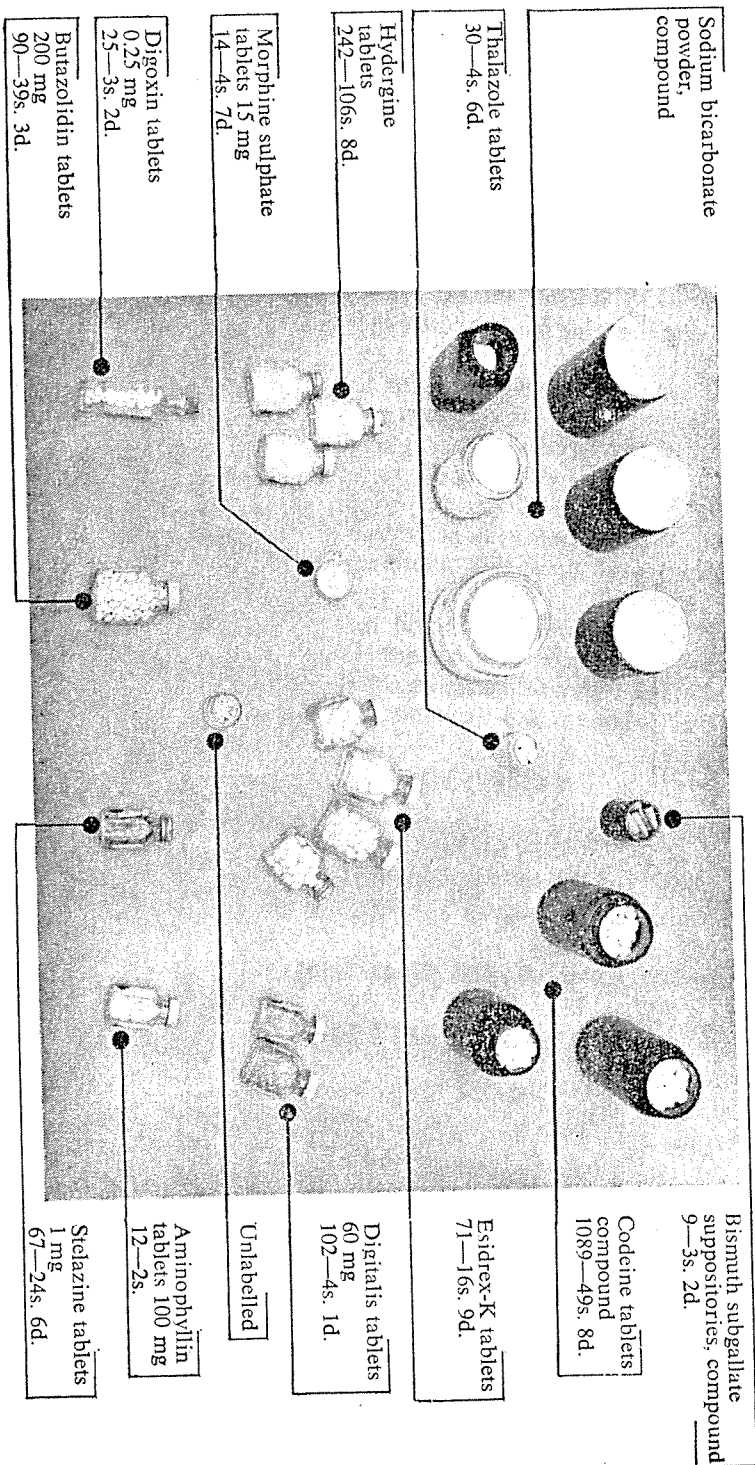
*A. W. S. Thompson*

(A. W. S. THOMPSON)  
Director,

*T. L. Hayes*

(T. L. HAYES)  
Assistant Director,

Division of Clinical Services.



The costs shown are total costs to public funds.  
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