

properties of cyclopropyl vinyl ether (cyprethylene ether). . . . Continuing our studies of similar ethers as anesthetic agents, our attention was directed to an isomer of cyprethylene ether, namely, isopropenyl vinyl ether. . . . Propethylene ether involves no great difficulties in its synthesis and has physical properties admirably suited for a volatile anesthetic. It is a volatile, colorless liquid with a characteristic ethereal odor; the boiling point is 55° C. and the specific gravity 0.786 at 20° C. . . . Isopropenyl vinyl ether (propethylene ether) . . . is a volatile liquid exhibiting anesthetic properties when administered by inhalation to various species of animals. Propethylene ether exhibits an anesthetic potency which approximates chloroform and an anesthetic index more than twice that of ethyl ether. In the monkey, propethylene ether produces no functional liver damage as shown by the bromsulfalein test. In [our] . . . experiments in the rat, dog and monkey anesthetics propethylene ether produced no significant histopathological changes in certain viscera. The monkey's heart showed no significant electrocardiographic changes under anesthesia with propethylene ether. The anesthetic concentration in the blood under surgical anesthesia is approximately one-fifth that of ethyl ether. The blood pressure of the dog is lowered by anesthetic concentrations of propethylene ether. The explosive range of concentrations of propethylene ether and ethyl ether with air appears to be about the same. This first approximation of the pharmacology of propethylene ether, in our opinion, warrants its careful and judicious trial in man by skilled anesthetists." 6 references.

J. C. M. C.

HERBERT, W. E.: *Acrylic Resin Restorations and Ether Anaesthesia*. Brit. Dent. J. 75: 259 (Nov. 19) 1943.

"It has been suggested that acrylic resin restorations in the mouth are likely to be damaged if the patient subsequently has ether administered as anaesthetic. In order to test the truth of these statements two highly polished acrylic resin teeth were exposed to ether and trilene vapour during the course of several anaesthetics, covering in all a period of three hours, at Guy's U. S. A. Hospital, Seal, Kent, by Mr. A. Shein. This was done in circumstances in which the teeth received the full concentration of ether and trilene vapour. In neither case was the polish in any way impaired nor the material softened."

J. C. M. C.

MOREY, G. W.: *Bloodless Tonsillectomy under Local Anaesthesia*. Lancet 2: 794-796 (Dec. 25) 1943.

"Since my postgraduate days in Vienna I have performed more than 2300 tonsillectomies under local anaesthesia, and, with my present technique, claim that 90 per cent of the operations are completely bloodless, while in the remaining 10 per cent there is rarely more than eggcupful of blood lost. The essential principle of this operation is the injection of a very large quantity of 'Novutox'. . . . First, the anaesthetic properties are so great that the patient experiences no pain at all; secondly, it acts as a perfect haemostatic; and thirdly, by its quantity alone, it forces the tonsil from its bed, forming an intervening layer of oedematous tissue."

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GRIFFITH, H. R.: *The Use of Curare in Anaesthesia and for Other Clinical Purposes*. Canad. M. A. J. 50: 144-147 (Feb.) 1944.

"The so-called 'true curare substance' was separated from various