

disturbance during anaesthesia with trichlorethylene. This anaesthetic produces rapid and shallow breathing which is very readily reversible. We have therefore investigated the effects of trichlorethylene on the vagal afferent systems, and have compared them with those of other anaesthetics which do not usually cause conspicuous respiratory changes. . . .

"The effect of anaesthetics on the pulmonary afferent nerve endings has been investigated by recording action potentials in vagal single fibre preparations. All volatile anaesthetics tested caused an increase in the sensitivity of stretch receptors. This occurred in spinal cats ventilated artificially with constant volumes of air, and also in decerebrate cats breathing spontaneously. Cyclopropane and nitrous oxide caused hyperexcitability of stretch endings throughout exposure. Ethyl chloride, chloroform, divinyl-ether, ethyl ether and trichlorethylene caused stimulation followed by paralysis. Chloralose and nembital caused no stimulation but showed some depression in large doses. The activity of deflation endings was studied in rabbits by selective blocking of the vagal fibres and recording from a diaphragm slip preparation. Those deflation endings which produce acceleration of respiration in the rabbit were first stimulated and then paralyzed by ether, whereas trichlorethylene caused prolonged stimulation." 23 references.

J. C. M. C.

THEIS, F. V., AND RUSHER, M. W.: *The Pilonidal Sinus: Sacrococcygeal Cyst Teratoma*. Surg., Gynec. & Obst. 79: 482-489 (Nov.) 1944.

"The pilonidal sinus is an important and serious problem in the armed forces because of its frequent occurrence, the prolonged period of hospitalization sometimes following surgical procedures, and the number of recurrences with or without surgical treatment. Naval morbidity statistics reveal that nearly as many sick days are recorded for this disease as for appendicitis. . . . Spinal anesthesia with 100 milligrams of procaine is used routinely with satisfactory results. Local anesthesia is contraindicated when closure is contemplated because of the danger of spreading infection." 26 references.

J. C. M. C.

EVERETT, G. M., AND RICHARDS, R. K.: *Comparative Anticonvulsive Action of 3,5,5-trimethyloxazolidine-2,4-dione (Tridione), Dilantin and Phenobarbital*. J. Pharmacol. & Exper. Therap. 81: 402-407 (Aug.) 1944.

"We have investigated N-methylated 5-alkyl and 5,5-dialkyloxazolidine-2,4-diones synthesized by Dr. M. A. Spielman. . . . In this series the hypnotic action is greatly reduced when the alkyl radicals are small, and a definite analgesic effect becomes apparent. The present report concerns the marked anticonvulsive properties of 3,5,5-trimethyloxazolidine-2,4-dione (Tridione) which was also found to be the most potent analgesic in this group of compounds. . . . Comparative experiments with phenobarbital and dilantin revealed that tridione is more comparable to phenobarbital in its action but produces less depression in effective doses." 14 references.

J. C. M. C.