ABSTRACTS

Editorial Comment: Material for this section is not abstracted in a uniform style. Many employ direct quotations only. Others are written in the more conventional form. At times there may be included a few opinions, personal to the abstractor, which, where they appear, will be bracketed or labeled "Comment." The Editorial Office continues in its desire to receive correspondence from readers relative to the management of this section.


"Demerol has three actions in the human body, namely, analgesia, a spasmolytic action on smooth muscle, and a slight sedative effect. It can be administered orally, intramuscularly, subcutaneously, or intravenously. . . . Demerol, when used in obstetrics, does not endanger the life of the mother. It is easy to administer and no serious risks are associated with its use. Demerol is not the ideal obstetric analgesic as far as the effect on the child is concerned. The effect of demerol on the length of labor is as yet undetermined. Demerol does not increase the incidence of forceps delivery and post-partum hemorrhage is probably not increased by its use." 30 references.

J. C. M. C.


"The cases described were all encountered at a prisoner of war hospital established at River Valley Road, Singapore, from April 12 till August 20, 1945. . . . Conditions were primitive in the extreme. . . . When the first surgical patient—a man suffering from perforated peptic ulcer—was admitted, the hospital possessed no instruments and no anaesthetics of any kind. However, after some six hours' delay the Japanese produced a reasonable set of instruments, and these, with odd pieces of linen to serve as drapes, we were able to sterilize in a native boiler over an open fire. About four ounces of chloroform were also provided for this first case, and thereafter we received a few ounces from time to time; by exercising considerable care we even managed to build up a small stock, but at no time did this exceed one pound. We were also given a little 'Novocain,' a few ampoules of spinal anaesthetic agent and one tube of ethyl chloride; but as during our first week we had four major and a number of minor operations, including dental extractions, and as further it appeared probable that we might have to cope at any moment with a considerable number of casualties, occasioned either by air raids or by the tunneling work on which the working parties were employed, the anaesthetic situation caused us grave anxiety. It was on this account that it was decided to attempt to use hypnosis, instead of the more usual forms of anaesthesia, in selected cases. . . . The patients . . . were for the most part suffering from comparatively minor ailments. . . . Hypnosis was induced with the patient lying supine on a table. The method employed was that of convergence fatigue, the patient being instructed to