

stops pain, controls and prevents the spread of infection in an extremity until the patient is properly prepared for surgery. . . . In trauma and embolism (arterial) the ice pack without tourniquet preserves the tissues of the extremity until collateral circulation develops which may make amputation unnecessary. . . . There is possible danger that cooling may lower the resistance of tissue so that infection occurs more frequently and spreads more rapidly when normal temperatures are restored. A number of uses for the procedure may be found such as the treatment of shock, burns of the extremities, insect and snake bites, and the preservation of skin grafts. . . . Anesthesia is minor in importance when compared to the value of careful and thorough preparation of the patient which the method affords." 16 references.

J. C. M. C.

ANSBRO, F. P.: *A Method of Continuous Brachial Plexus Block*. Am. J. Surg. 71: 716-722 (June) 1946.

"If a regional nerve block (brachial plexus block) could be certain to be effective and to last as long as the surgical procedure required, it would be desirable. For this reason, continuous block of the brachial plexus is employed. . . . By using a blunt needle . . . of the malleable type, and inserting it to the lateral side of the subclavian artery in contact with the upper surface of the first rib and observing it pulsating with the artery, one may be assured that he is in the proximity of the plexus. Paraesthesias in the form of shooting pains down the arm caused by the needle contacting the plexus are helpful and give further assurance of proximity, but they are not essential to success with this technic. If procain is injected at this location in sufficient quantity, a successful infiltration of the plexus will result. The needle is

blunted to prevent perforation of the artery while remaining in situ. By retaining the needle in this position, fractional injections of procain may be made through rubber tubing of convenient length attached to a syringe. The needle is retained in place by the use of a cork through which the needle is inserted before passing it through the skin in the supraclavicular area. . . . One per cent procain without adrenalin is used. . . . Infiltrating the skin area above the clavicle and acromion and circularly about the axilla along its thoracic surface may also be done to block the superficial branches of the cervical plexus. . . . Twenty-seven patients requiring operation of the shoulder, arm, wrist and hand had brachial plexus block by the continuous method. Anesthesia was successful in all cases and it was not necessary to supplement any with general anesthesia. The duration of operations extended from one and one-half hours to four hours twenty minutes. The possible utility of the method in peripheral vascular conditions of the upper extremity is suggested." 6 references.

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WILLIAM, P. H.: "*Trilene*" Auto Anesthesia in Dentistry. Brit. Dent. J. 80: 330-331 (May 17) 1946.

"An apparatus is so designed that the patient can administer to himself a mixture of air and 'Trilene' vapour. A rubber bulb, held and squeezed by the patient, propels air through a 'Trilene'-saturated wick fixed in a bottle. The resulting mixture is breathed by the patient by means of a special nasal inhaler. Delivery of the vapour depends entirely on the muscular action of the patient, and so overdosage is not possible. . . . Sense of hearing is not abolished, and so patient can be given instructions during the administration and is able to co-operate with the operator. . . .