who are acutely ill and toxic, thereby very likely lessening the number of convulsions during anesthesia. In the literature, the incidence of convulsions associated with spinal anesthesia is negligible compared to that with inhalation anesthetics. It is worth while to consider the use of spinal anesthesia in these toxic patients.

The authors recommend the prompt use of sodium pentothal as advocated by Lundy. Heretofore, the mortality in patients having convulsions during anesthesia was extremely high. With sodium pentothal at hand, this figure should be lower. There was only one death among the six patients herein presented and this was attributable, not to the convulsion but to hepatorenal failure on the fifth postoperative day.

M. F. P.


"As regards resuscitative drug therapy during general anesthesia, it has been pointed out that adrenalin and coramine have been greatly misused. Their efficacy in the unanesthetized subject is not contested, but in the anesthetized subject they may become detrimental. The cardiac conducting mechanism becomes sensitized during general anesthesia; and with certain agents, particularly chloroform and cyclopropane, this sensitization is so great that sub-therapeutic doses of adrenalin injected into the circulation may cause death following the production of ventricular fibrillation. Adrenalin injected into the heart during anesthesia in cases of cardiovascular collapse has proved to be fatal in every report encountered by the author.

"Adrenalin used locally in the operative field to aid hemostasis, because of its vasoconstrictor action, is another serious misuse of the drug during general anesthesia. . . .

"Coramine also shows varied effects depending upon whether it is used in the unanesthetized or anesthetized subject. In the subject anesthetized with a barbituric acid derivative, it has been shown experimentally that the administration of coramine will aggravate rather than diminish respiration and circulatory depression. The same untoward effect may occur clinically and was, in fact, observed during a study of clinical experiences with various analgetics.

". . . During general anesthesia, which entails some depression of the central nervous system, the intravenous injection of procaine is less apt to produce central nervous system stimulating effects. Its influence in reducing cardiac irritability can then be employed advantageously as has been demonstrated during certain intrathoracic procedures. . . .

". . . The intracardiac injection of adrenalin in a patient during general anesthesia should be avoided. Resuscitative measures are best confined to artificial respiration with oxygen through an endotracheal tube connected with carbon dioxide absorption. The resulting bellows action on the lungs by rhythmic, graded, manual pressure on the breathing bag is also beneficial as a form of cardiac massage. Manual cardiac massage is a definite worthwhile procedure to be used wherever applicable." 14 references.

E. L. S.


The purpose of this study was to determine the peripheral effect of digitalis. In the method used, the plasma