

ratus which for infant use we regulate at 5 inches of suction. A drop leaf is provided at one end of the cabinet and will lock in position as it is brought to the horizontal. We prefer this arrangement for working on an infant during tracheal intubation since working with the child in a bassinot often is difficult.

The suction machine was taken from the delivery room, and the only parts that had to be purchased were the mask-Leigh valve-hag assembly and the mercury gauge (total

outlay \$40.10). The remainder of the apparatus was constructed from discarded anaesthesia equipment which probably is available in every hospital.

The most important considerations about this apparatus are the ease with which it is used and its ability to supply an adequate amount of oxygen for the infant's needs.

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To the Editor:

The paper by Bergner *et al.*, "Severe Neurological Complications Following Spinal Anesthesia: Report of Six Cases," in the November 1951 issue of *Anesthesiology* stimulates me to report on the technique of sterilization of equipment and drugs for spinal anaesthesia used by our group.

The time honoured custom of soaking the necessary ampoules in coloured solutions of various antiseptics has been entirely superseded at this hospital. All the drugs used: pontocaine 1 per cent, procaine 2 per cent, dextrose 10 per cent, ephedrine, methedrine (desoxyephedrine) and vasoxyl, are now autoclaved in the spinal set (at 240 F., 17 pounds pressure for twenty minutes) and checked with "diack" or "sterilex" controls. Many of the drugs, especially the vasoconstrictors, are repeatedly sterilized before eventually being used. This procedure has been followed for two and a half years except for dextrose solu-

tion which was soaked, until two months ago, because of the illusion that autoclaving would carmelize it.

We administer approximately 125 spinal anaesthetics each month and have had no reason to believe that any of the drugs are affected in any way. It might be added that nupercaine, procaine crystals, doxamine, proctocaine, and absolute alcohol may also be autoclaved.

The above technique simplifies the procedure of spinal anaesthesia, reduces the danger of bacterial contamination, and eliminates the decided danger of the antiseptic-soaking solution entering a cracked ampoule.

If a neurologic complication does occur at least one possible cause is automatically eliminated.

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AMERICAN SOCIETY OF ANESTHESIOLOGISTS, INC. NOTICE OF ANNUAL MEETING

The Annual Meeting of the American Society of Anesthesiologists, Inc., will be held at The Bellevue-Stratford, Philadelphia, Pennsylvania, November 11-14, 1952.