

**MORPHINE AND HEMODYNAMICS**

Seven subjects were given 60 mg. of morphine intravenously and the effect on cerebral blood flow and cerebral oxygen uptake was studied. The changes in cerebral blood flow were not significant, but the cerebral oxygen uptake was reduced in all. There was a reduction in arterial oxygen content and in extraction of oxygen from blood flowing through the brain. These effects were rapidly but not completely reversed by *N*-allylnormorphine. (Moyer, J. H., and others: *Effect of Morphine and N-Allylnormorphine on Cerebral Hemodynamics and Oxygen Metabolism, Circulation* 15: 379 (March) 1957.)

**TRANQUILIZER POISONING**

In 1955 The New York City Health Department reported 12 cases of poisoning associated with tranquilizing drugs as against 76 for the first 10½ months of 1956. In 1955 there were no fatalities associated with tranquilizing drugs—for the first 10½ months of 1956 there have been two. There were 16 attempts at suicide using these drugs for the first 10½ months of 1956. (Committee on Public Health: *Report on Tranquilizing Drugs, Bull. New York Acad. Med.* 33: 282 (April) 1957.)

**CHLORPROMAZINE AND SHOCK**

In the rat, chlorpromazine is an effective agent in reducing the shock produced by the Noble-Collip drum. This protective action is present in adrenalectomized animals. (Jones, C. J., and Ripstein, C. B.: *Effect of Chlorpromazine on Nonhemorrhagic Shock in the Rat, Surgery* 41: 589 (March) 1957.)

**ACTION OF BARBITURATES**

Changes in afferent conduction induced by low doses of barbiturates (pentobarbital and thiopental) are attributed to functional block of ascending reticular influences upon thalamic relay nuclei. In higher doses these barbiturates have an additional depressant action directly upon the thalamic relay. (King, E. E., Naquet, R., and Magoun, H. W.: *Alteration in Somatic Afferent Transmission Through the Thalamus by Cerebral Mechanisms and Barbiturates, J. Pharmacol. & Exper. Therap.* 119: 48 (Jan.) 1957.)

**THIOPENTAL IN BRAIN**

There is no demonstrable barrier in the dog to the passage of thiopental into the brain. Maximal concentration of thiopental appears in the brain almost instantly after intravenous injection. This explains the early respiratory depression or the cardiovascular depression in some patients after injection of thiopental. (Mark, L. C., and others: *Passage of Thiopental into Brain, J. Pharmacol. & Exper.* 119: 35 (Jan.) 1957.)

**MECHANICAL RESPIRATORS**

Plasma electrolyte studies were made in poliomyelitis patients with respiratory paralysis, some untreated and others maintained in mechanical respirators for protracted periods. Such treatment commonly induces chronic hyperventilation with respiratory alkalosis and, of particular interest, also hyponatremia unrelated to intake or excretion of sodium, but apparently owing to redistribution of sodium. Changes in plasma potassium, but not of sodium, could be correlated with pH and carbon dioxide tension. (Thomson, A. E.: *Electrolyte Studies in Respiratory Paralysis of Poliomyelitis, Am. J. Med.* 22: 549 (April) 1957.)

**PAIN**

For certain types of persistent pain, absolute alcohol sympathectomies are now utilized. Alcohol is injected, 0.5 cc. at a time, to a total of 2 cc. (Lundy, John S.: *Modern Technics for Relief of Pain, Journal Lancet* 77: 32 (Jan.) 1957.)

**VENTRICULAR FIBRILLATION**

Three types of electrocardiographic changes precede ventricular fibrillation in human beings (1) increased myocardial irritability in the form of ventricular extrasystoles and paroxysmal ventricular tachycardia; (2) increased myocardial depression in the form of bundle branch block and S-T depression and bradycardia, and (3) asystole. (Haeger, K. H., Johansson, B., and Sjostrom, B.: *Electrocardiographic Studies on Fibrillating and NonFibrillating Hypothermic Dogs With or Without Previous Treatment with Acetylcholine or Procaine Amide, Am. Heart J.* 53: 31 (Jan.) 1957.)

**LIVER DAMAGE** Administration of chlorpromazine to 50 subjects for an aver-