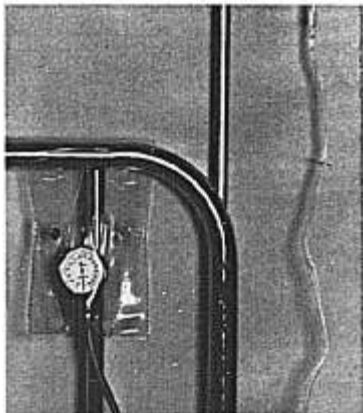


## GADGET

### Holder for Blood Pressure Manometer

Dr. E. W. Larking, Montreal, Canada, reports that an inexpensive plastic holder for the blood pressure gauge has been in use for several years at The Montreal General Hospital. Prior to the use of this holder, the gauges were either dropped or knocked on the floor as the patient moved in bed post-operatively. The clear plastic holder is 15 inches long, 5½ inches wide, with a 5-inch deep pocket for the blood pressure gauge.

The illustration shows the holder fastened to the head of the bed by two snap fasteners with the opening for the gauge on the inside. This prevents the gauge from popping out yet it is easily visible through the clear plastic envelope. Since this holder has been in use there has been no need to replace equipment damaged by accident.



The holder for blood pressure gauge fastened to head of patient's bed.

## CASE REPORTS

### Refsum's Disease

Drs. Mark B. Ravin and Herman Schwartz from the Anesthesiology Service, Presbyterian Hospital, New York, report the characteristics of an unusual syndrome, hereditary ataxia polyneuritisformis, and the anesthetic management of a patient with this disease for a bilateral levator palpebrae resection for ptosis of the eyelids.

**Refsum's Syndrome.** In 1946 Refsum described a rare clinical neuropathy occurring in five adult members of two unrelated Norwegian families.<sup>1</sup> The features of this syndrome consist of progressive nerve deafness, atypical retinitis pigmentosa, ichthyosis, visual field constriction and chronic polyneuritis. Other neurologic characteristics may include diminished or absent deep reflexes, ataxia and other cerebellar manifestations, urinary sphincter impairment, loss of position sense and sensory changes involving pain and temperature. Epiphyseal dysplasia in the elbow, shoulder knee joints and marked wasting of the extremities have been noted. The cerebrospinal fluid contains a high protein content,

over 200 mg. per cent, with a normal cell count. The electrocardiogram usually reveals a delayed ventricular conduction time. Myocarditis may be present.

The exact etiology of this syndrome is unknown. It appears to be a recessive hereditary characteristic since all parents or grandparents were born of consanguineous marriages.

Post mortem studies of patients with Refsum's syndrome disclosed pathologic changes resembling those of interstitial hypertrophic polyneuropathy with characteristic neural muscular atrophy, deposition of fat in affected peripheral nerves, retrograde atrophy of the ventral horns and secondary atrophy of the fasciculi gracili. In addition, a few cases demonstrated reactive changes in sympathetic ganglia, atrophy of the inferior olivary nucleus and degeneration of brain stem tracts with damage primarily to myelin. Only minor changes were noted in the extrinsic muscles of the eye and there was no clue to the etiology of the cardiac conduction defect.