

tatic Human Lung, Amer. J. Med. 35: 31 (July) 1963.)

POSTOPERATIVE VENTILATION Regardless of how healthy the patient is or how competent his ventilatory apparatus may seem, the nature of the surgical procedure significantly influences the incidence of pulmonary complications. They are much higher following upper abdominal surgery than after lower abdominal surgery, while lower abdominal surgery has a higher complication rate than extremity surgery. The duration of the surgical procedure appears to be much more significant than the type or the route of the anesthetic agents. The early postoperative period presents a combination of increased demand for gas exchange associated with a decreased capacity for supply. (*Kinney, J. M.: Ventilatory Failure in the Postoperative Patient, Surg. Clin. N. Amer. 43: 619 (June) 1963.*)

PNEUMOTHORAX Ventilation, arterial blood gases, diffusing capacity of carbon monoxide (CO), and pulmonary blood flow and pressure were measured in conscious and pentobarbital-anesthetized dogs in which a pneumothorax of twice the functional residual capacity had been produced. Conscious dogs were able to adjust to the pneumothorax by maintaining arterial oxygen saturation at 95 per cent, whereas oxygen saturation was reduced to 87 per cent in those anesthetized. In the anesthetized series pulmonary artery pressure rose, CO diffusing capacity was reduced, peripheral vascular resistance increased, and cardiac output decreased even though alveolar ventilation increased. Pentobarbital anesthesia depressed ventilation and abolished compensatory reactions in proportion to the depth of anesthesia. (*Kilburn, K.: Cardio-respiratory Effects of Large Pneumothorax in Conscious and Anesthetized Dogs. J. Appl. Physiol. 18: 279 (Mar.) 1963.*)

EMPHYSEMA In 18 patients with pulmonary emphysema, cardiac output and pulmonary artery pressure were studied at rest and during isoproterenol infusion, and wedge pressure was determined in 16 subjects. Isoproterenol is capable of altering the pulmonary

vascular bed of resting and exercising emphysematous subjects in such a manner that increases in pulmonary blood flow are associated with a fall in pulmonary artery pressure and a marked decrease in calculated pulmonary vascular resistance. (*Williams, J. F., and others: Changes in Pulmonary Hemodynamics Produced by Isoproterenol Infusion in Emphysematous Patients, Circulation 28: 396 (Sept.) 1963.*)

ANALGESICS Analgesic effectiveness of a carisoprodol compound with codeine (Soma), was investigated in 215 postpartum patients using dextropropoxyphene hydrochloride (Darvon) and a placebo as controls. The double blind technique was utilized. The carisoprodol compound with codeine provided significantly greater relief of pain than did the dextropropoxyphene hydrochloride, and the latter was significantly more effective than the placebo. It is more logical and more effective to administer the medication when required rather than prophylactically. (*Benson, R. C.: Double Blind Evaluation of Analgesic Agents in the Postpartum Patient, Western J. Surg. 71: 167 (July-Aug.) 1963.*)

SUCCINYLMCHOLINE ANALYSIS Succinylcholine is hydrolyzed in the presence of alkali or the enzyme pseudocholinesterase in a stepwise fashion to yield succinylmonocholine, choline and succinic acid. Resolution of such a mixture has been accomplished by paper chromatography. Thirty solvents were screened; 10 separated all 4 compounds, while others achieved partial resolution. Kraut-Drägendorf and potassium iodoplatinate reagents were found to be useful to locate the compounds on the paper. (*Davies, R. O., and Kalow, W.: Chromatographic Separation of Succinylcholine and its Hydrolysis Products, Canad. J. Biochem. 41: 1991 (Sept.) 1963.*)

IMPURITY IN HALOTHANE A halogenated butene has been isolated from commercially available halothane (Fluothane). Its concentration increases under conditions in which halothane is used clinically. (*Cohen, E. N., and others: Science 141: 899 (Sept. 6) 1963.*)