

tory is truly fact and how much legend which human nature is reluctant to let go.

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Acknowledgment

To the Editor:—Upon re-reading the article "The Anesthetists in Thomas Eakins' 'Clinics'," which appeared in the September–October 1965 issue of ANESTHESIOLOGY, page 663, I am distressed to find I failed to include the permissions to reproduce "The Gross Clinic"

and "The Agnew Clinic." Permission to use "The Gross Clinic" was granted by courtesy of the Jefferson Medical College of Philadelphia (photographed by the Philadelphia Museum of Art), and to use "The Agnew Clinic" by the University of Pennsylvania.

I would appreciate your publically acknowledging this omission.

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INTRAVENOUS LIDOCAINE Intravenous injection of lidocaine was done in 100 cases. Ages of subjects ranged from 10 to 75 years. Thoracic surgery was done in 30 per cent of this series. Intravenous injection of lidocaine under nitrous oxide anesthesia significantly stabilized the anesthesia. Injection at a rate of 400 to 500 mg./hour did not cause either adverse effects on circulation or intoxication, whether given intermittently or by the drip method. Its combined use with succinylcholine materially diminished the dose of succinylcholine with good maintenance of muscular relaxation. The postoperative analgesic effects were difficult to maintain, but the waking was quick without untoward complications. (Nishimura, N., and Setoya, K.: *Intravenous Injection of Xylocaine (Japanese)*, Tokyo Surg. Ther. 10: 485, 1964.)

PROLONGED LOCAL ANESTHESIA ON 12 healthy volunteers a new local anesthetic, LAC-43, was tested in a double blind study using bilateral ulnar nerve blocks. The chemical structure of the compound is closely related to mepivacaine. An 0.25 per cent solution of the local anesthetic was compared to 1 per cent mepivacaine and 0.25 per cent tetracaine. All solutions contained epinephrine 1 to 200,000. Blocks with LAC-43 with epinephrine lasted for eight hours, two to three times longer than blocks with one per cent mepivacaine with epinephrine. The duration of the blocks was increased if an 0.5 per cent solution or larger amounts were used. Under these circumstances ulnar nerve blocks lasting lasting 20 hours (10 ml. of an 0.5 per cent solution) and intercostal nerve blocks up to 15 hours duration (4 ml. of an 0.5 solution) could be produced. In mice LAC-43 is about four times as toxic as mepivacaine; compared to tetracaine the toxicity is about the same. The new local anesthetic is stable and can be autoclaved. Maximal recommended doses are: 20 ml. of an 0.5 per cent solution, and 40 ml. of an 0.25 per cent solution. (Albert, J., and Löfström, B.: *Bilateral Ulnar Nerve Blocks for the Evaluation of Local Anesthetic Agents*, Acta Anaesth. Scand. 9: 1, 1965.)