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### Drugs

**HEPTAMINOL** Heptaminol is a straight-chain amine that has a positive inotropic action of long duration, similar to digitalis. The drug reduces the pressure in the right heart and has a favorable effect on cor pulmonale. Heptaminol was studied in six healthy persons and in six hypertensive patients, two of whom were in congestive heart failure. In the normotensive group, the intravenous injection of 2 to 9 mg/kg (average 6 mg/kg) increased cardiac output approximately 10 per cent. This resulted primarily from increases in stroke volume with minimal changes in heart rate and peripheral resistance. Mean arterial blood pressure increased ten per cent. In the six hypertensive patients, the findings were similar. Mean arterial blood pressure increased 16 per cent. In the patients in congestive heart failure, cardiac output increased by 24 per cent without changes in heart rate. Clinical trial of therapy with heptaminol in five other patients with chronic cor pulmonale resulted in significant improvements in objective and subjective findings. This was ascribed to the positive inotropic action of the drug, as well as to improvements in the hemodynamics of the pulmonary circulation, increased coronary perfusion, and diuresis. No toxic side-effects were noted. (*Juchems, R., and Poustchi, C.: Central Hemodynamic Effects of Heptaminol in Man, Klin. Wschr.* 47: 423 (April) 1969.)

**HYPERTHYROIDISM** Clinical and metabolic effects of propranolol (4.6 to 10.3 mg/kg/day) and phenoxybenzamine hydrochloride (0.44 to 0.82 mg/kg/day) administered for an average of 71 days were studied in eight hyperthyroid patients. Common thyroid-function tests, including protein-bound iodine and <sup>131</sup>I scan of the thyroid gland, were made before and after treatment. Thyrotoxic items were changed towards normal: mean oxygen consumption decreased 12 per cent; Achilles reflex times increased; weight increased by a mean of 9 pounds, or 7 per cent; most of the common signs and symptoms of thyrotoxicosis were eliminated or attenuated. No effects on serum lipids or thyroid-function test results were observed. Alpha- and beta-adrenergic receptor blocking agents apparently mitigated the weight loss and increased oxygen consumption, reflex changes, and other signs and symptoms of thyrotoxicosis. Since these abnormalities of hyperthyroidism are mediated in part via the sympathetic nervous system, it seems that this therapy is an effective adjunct in the interim management of thyrotoxicosis. (*Stout, B. D., Wiener, L., and Cox, J. W.: Combined Alpha and Beta Sympathetic Blockade in Hyperthyroidism: Clinical and Metabolic Effects, Ann. Intern. Med.* 70: 963 (May) 1969.)