

recovery of contractile force would be viewed as activating both peripheral and cardiac receptors, while methoxyflurane apparently excites cardiac receptors only.

### References

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### Obstetrics and Pediatrics

**FETAL SCALP pH AND APGAR SCORES** Samples of scalp blood were obtained from 355 fetuses and the acid-base components analyzed. There was good correlation between the pH of fetal capillary blood and the clinical state of the infant at birth, as judged by the one-minute Apgar score. In general, when the pH was 7.20 or less, neonatal depression was found. However, in 18 per cent of the fetuses fetal acid-base states were not useful in predicting clinical condition at birth; 7.6 per cent of the fetuses had significant acidosis and yet were vigorous at birth, while 10.4 per cent were only mildly acidotic but nevertheless were depressed. A variety of factors may have accounted for this lack of correlation. The most notable were maternal acidosis and the analgesic or anesthetic agents administered during labor. These factors must be carefully evaluated in assessing the significance of fetal acidosis. (Bowe, E. T., and others: *Reliability of Fetal Blood Sampling*, *Amer. J. Obstet. Gynec.* 107: 279 (May) 1970.)

**COMPLICATIONS OF FETAL SCALP BLOOD SAMPLING** Since 1965, 1,200 samples of fetal scalp blood have been obtained from 670 infants. Six neonatal complications occurred. Scalp abscesses developed in three infants, and three sustained substantial hemorrhages from scalp incisions. Certain factors, such as vacuum extractions, sampling in breech presentations, neonatal coagulation defects, and maternal infection, may increase the incidence of complications. Strict aseptic technique in the sampling procedure is essential. The obstetrician is cautioned about the potential hazard of making multiple incisions and is urged to watch for scalp hemorrhage or vaginal bleeding following incisions. The pediatrician is advised to perform coagulation studies of infants who hemorrhage significantly from scalp incisions. (Balfour, H. H., Jr., and others: *Complications of Fetal Blood Sampling*, *Amer. J. Obstet. Gynec.* 107: 288 (May) 1970.)