

the esters are safe to use? Wingard¹⁰ indicates that MH is a human stress syndrome. Kehlet¹¹ notes that spinal and epidural anesthesia eliminated or markedly reduced the indicators of stress (catecholamine release, etc.) only when they blocked both the somatic and autonomic nervous system to the area operated (namely, the lower trunk of the body and the lower extremities). Interestingly, these are the areas in which spinal and epidural blocks, regardless of the local anesthetic, did not cause MH or, if it did, it was not fatal (tables 1 and 2). Perhaps the blocking of the stress response, not the local anesthetic, is the important factor in avoiding MH.

At present, it cannot be concluded that an ester or an amide local anesthetic will not trigger MH, or that a regional block protects against it regardless of the area of the operation. One method to further resolve this question would be to use regional anesthesia and the esters as well as the amides in the MHSP for procedures where all afferent impulses are not blocked (*e.g.*, epidural anesthesia for upper intraabdominal surgery).

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Leaves and Needles

To the Editor:—Apropos of the story on the priming of Danish decks with blood and cocaine to put the Nazis' dogs off the scent of escapee stowaways,¹ I have since learned* that the well-known anesthesiologist, Dr. Trier Mörch, was the inventor of the stratagem. Anyone acquainted with Trier knows that this is entirely typical of his resourcefulness and delightfully sly wit.

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* Chicago Tribune, August 2, 1985, Section 5, p 2