regarding the administration of anti-emetic drugs of the phenothiazine group and a diagnostic test employing intravenous benzotropine would spare the patient and his relatives from acute anxiety.

Stewart Lamont

Leeds

Reference


The Foetal and Maternal Pharmacology of Some of the Drugs Used for the Relief of Pain in Labour

Sir,—I was interested to read in the article by R. A. P. Burt (Birt. J. Anaesth., 43, 824, Sept. 1971) that diamorphine “has less effect on the cardiovascular system (MacDonald, 1967)” than morphine. I would like to point out that the study referred to by Dr Burt was not a controlled trial. Indeed all the patients in that study received diamorphine alone, not morphine.

More recently a double-blind trial comparing diamorphine, morphine, methadone and pentazocine in patients with suspected acute myocardial infarction has been published (Scott and Orr, 1969). These authors found no significant difference between diamorphine and morphine, apart from the well-known fact that the action of diamorphine occurs earlier than that of morphine. As many people feel that diamorphine ought not to be used in medical practice it is regrettable that an unsubstantiated statement alleging the superiority of diamorphine over morphine should appear in your columns.

Robert G. Twycross

London

Reference


Sir,—Thank you for allowing me the opportunity of replying to the letter from Dr Twycross. My paper, and the reference to the work by MacDonald et al. (1967), discussed the cardiovascular effects of diamorphine. To describe the work by MacDonald and his colleagues as “uncontrolled” is inaccurate because the authors took half a page to detail the manner in which they controlled the circumstances of their study. However, Dr Twycross appears to believe that the word “controlled” is synonymous with “comparative” and he dismissed the study because no comparator drug was included. This suggests that he also ignores the other studies with morphine (Thomas et al., 1965) pethidine (Rees et al., 1967) and pentazocine (Scott and Adgey, 1971; Jewitt, Maurer and Hubner, 1970), although all the assessments involved similar sensitive and accurate objective measurements. The various authors themselves have felt that the findings from the studies are valid and they have drawn comparisons from the data obtained.

While the double-blind method is essential in all investigations involving subjective assessment or the measurement of subjective phenomena, it is only one of the many factors that need to be considered in a clinical investigation, and it cannot by itself “control” the study. The article by Cromie (1963) emphasizes the relevance and importance of the double-blind technique, as well as the applications and limitations, of the double-blind technique. The comment that the findings by MacDonald et al. are “unsubstantiated” is also incorrect, as the authors defined the limits of accuracy of their measurements. Even if Dr Twycross was, in fact, asking for corroboration of these findings, he will find this in this journal (Loan et al., 1969) and this from a double-blind comparative study at that. Finally, I wonder whether the last comment by Dr Twycross that “many people feel that diamorphine ought not to be used in medical practice” is based on the findings of a double-blind comparative study, as I notice he offers no substantiation or corroboration for his statement.

R. A. P. Burt

Surbiton-upon-Thames

Reference


ADRENALINE INFILTRATION DURING HALOTHANE ANAESTHESIA

Sir,—In the correspondence section of the February 1972 number of the British Journal of Anaesthesia (p. 234), Dr John G. Brock-Utne comes to the conclusion that the infiltration of a small dose of adrenaline during halothane anaesthesia carries little risk. Though this may be true, Dr Brock-Utne’s experiments are by no means conclusive as no electrocardiographic tracings were recorded. Several authors point out that all kinds of arrhythmias can occur that cannot be detected by pulse and auscultation alone but need electrocardiographic monitoring and recording to be discovered.

A. F. Weihburg

Apeldoorn, Holland

Reference

