Abstracts

both in obstetrics and in the performance of caudal puncture, but holds much hazard for the novice in either. In states of acute thyroid activity and established thyroid crisis the use of a spinal anesthetic, by paralyzing the adrenal gland improves the patient’s chances. Care and common sense exercised when administering a spinal anesthetic should minimize the risk of infection with subsequent headache and more serious sequelae. Procaine administered intravenously is said to relieve many forms of pain in an effective, safe, and prolonged manner. Vascular spasm is said to be relieved by intravenous injection of this drug.

22 references.

F. A. M.


Of 208 consecutive deliveries 169 patients required repair immediately following delivery. Of these, 116 were under local infiltration anesthesia and 53 under inhalation anesthesia. The results of seven repairs were unsatisfactory; three complete disruptions, one fistulous tract, and three partial disruptions. Twenty others were “disturbing” in that redness and edema developed within twenty-four to forty-eight hours, followed by separation of the skin edges, sloughing and sluggish healing. To eliminate the factor of infection the use of penicillin was considered. For 81 consecutive repairs a local infiltration was made of 1 per cent procaine hydrochloride in normal saline to which 250 units of freshly made penicillin sodium were added to each cubic centimeter of the solution. This solution was made fresh at the time of each delivery and an average of 45 cc. was injected into the vulvo-vaginal tissues. Two pudendal nerve blocks were also done. In 77 patients the repairs were considered excellent. In three the results were excellent except for one centimeter shallow separations of the skin at the distal angle. No redness, edema or slough occurred and all three were healed by the fourteenth day. In one patient a large submucosal hematoma required evacuation. Subsequent healing was satisfactory with no sign of infection. Following the use of one brand of penicillin seven patients developed


Several attempts have been made to explain the parasympathetic phenomena associated with general anesthesia through an action cholinesterase. Since there is no agreement in the evidence from different laboratories it was decided to carry out a number of experiments in an attempt to clarify the problem. As a result of these experiments it was concluded that “(1) Ether and chloroform in concentration corresponding to those attained during deep general anesthesia do not inhibit the activity of cat serum cholinesterase in vitro. (2) In cats the cholinesterase activity of the serum during deep anesthesia was not depressed. (3) Ether and chloroform in concentrations higher than occur in blood during deep anesthesia inhibit cholinesterase in vitro. (4) The action of ether in the high concentration used is partially reversible. (5) These observations, while not conclusive, support the hypothesis that the parasympathetic effects observed during general anesthesia from ether and chloroform are not due to the inhibition of cholinesterase.” 4 references.

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