namely thrombosis and embolism, I wish to venture some new suggestions regarding treatment. . . . As soon as there is evidence of complete blocking of a major artery, the detrimental effects of heat upon bloodless tissues should be remembered. Surrounding the limb with ice is then a very beneficial measure, which can be carried out immediately, even at the patient’s home. Because the thrombus acts like a tourniquet, deep chilling is possible and pain and tissue devitalization can be checked. Not only is the contraction of blood vessels immaterial, but I also propose the earliest possible placing of a tourniquet well above the point of occlusion.” 30 references.

J. C. M. C.


The catheter holder was devised primarily for holding a Levine tube in place without adhesive tape.

“It is composed of a piece of elastic suspender for a head band with a buckle attached; a swivel, double adjustable unit through which the elastic is passed, and a piece of hollow metal tubing through which the nasal catheter is passed for satisfactory holding. The tubing may be adjusted in two planes to fit any patient.”

From the pictures of the catheter holder it appears to be too long for use of nasopharyngeal oxygen catheters although it might be modified.

M. L. B.


“[The author has] devised a drip-feed tube for the measured and controlled introduction of di-vinyl ether as an adjuvant anaesthetic agent into the circuit of a modern gas and oxygen machine. Using this tube very adequate and satisfactory supplementation of N₂O and O₂ anaesthesia can be achieved at extremely low cost. Di-vinyl ether is relatively an expensive drug, a factor that is further increased by the high degree of volatility and lack of keeping quality which it possesses. . . . One thousand consecutive administrations were carried out at a consumption of 1,485 cc. di-vinyl ether. With the ‘Tip-it-in’ technique, 1,000 cases would have required 1,000 ampoules, and although many of those cases might have required a 5 cc. ampoule, I consider that 3 cc. would have been used in the great majority. The consumption by this method, therefore, would have been 3,000 cc. A saving of approximately 50 per cent is thus obtained by the Ampoule Tube, and to this must be added the advantages of the drip-feed method in the matter of easily regulated fractional dosage.”

J. C. M. C.


This editorial is a good summary of the work of C. N. H. Long and his group. Most of his work was recorded in the Journal of Experimental Medicine, 1943 and 1944. In shock all the tissues and systems of the body suffer some oxygen lack, due to deficient blood flow. “The sensitivity of liver and kidney to anoxia accompanying hemorrhagic shock was tested by comparing the rate of respiration of slices of liver and kidney from normal rats and from rats in progressively severe states of shock.”

The result of this study showed that liver consumption of oxygen taken from shocked rats was greatly reduced. On the other hand, the kidney consumption of oxygen in normal and shocked rats was about the same. Thus it is suggested that many of the chemical changes in the blood which occur