

"LECITHIN" AS AN AFTER-TREATMENT IN ANÆSTHESIA.

To the Editor of "THE INDIAN MEDICAL GAZETTE."

SIR,—The after-treatment of anæsthesia is a subject of no little importance, as the after-effects are at times grave and intractable, though no doubt at present many of them have been prevented and overcome owing to the recent great improvements in the methods of administering anæsthesia, for we all know that the liability to, and the severity of, post-anæsthetic complications are proportionate to a large extent to the method and length of the administration.

We know the old maxim "Prevention is better than cure," and this applies more aptly here than elsewhere. It is always safe and better to anticipate complications and take measures to prevent their occurrence rather than treating them after they are well established. Our aim and object must be to plan out more of preventive measures than of curative ones and so in this brief article I do not mean to tabulate the several complications following anæsthesia and their respective treatment.

My only object is to bring before the notice of my fellow brethren how far "Lecithin" can prevent post-anæsthetic complications and how, when and why, it ought to be used.

We know that few subjects in medicine have caused more discussion among Physiologists than the theories of the cause of anæsthesia. The most widely accepted theory is that of Mayor and Overton, and it runs thus, that the anæsthesia is brought on by the action of the anæsthetic upon the Lipoid of the brain cells, forming a sort of chemical combination with it and thus destroying temporarily the functioning power of the cell, and in the process of combination, as Reicher believes, the *Lecithin* from the brain is dissolved out and enters into the blood stream which when tested is generally found rich in both (Lecithin and Lipoid). Neiking of Dusseldorf has reported, in the *Munchener Medizinische Wochenschrift* for July 20th 1907, the result of his recent investigations about the effect of the administrations of *Lecithin*, on the actions of various local and general anæsthetics which are used in the present day.

He states that when Lecithin is administered either before or with the anæsthetic, much larger doses are required to produce narcosis than when given otherwise, and if the administration follows anæsthesia, the subject recovers from the effect sooner and the after symptoms are less severe and more transient.

If Mayor and Overton's theory of anæsthesia is correct, it is believed that the injected Lecithin decomposes the product of chemical combination and attracts the anæsthetics, thus setting free the brain Lecithin and removing the poison from the brain; or if Reicher's theory is the true one, it must be by supplying new Lecithin in the place of that which has been dissolved out by the anæsthesia. Whatever it be, one thing we know for certain and that is this, that Lecithin is a harmless substance and though our present knowledge about Lecithin and anæsthesia is only a little and insufficient and more or less confined to within the limits of the Laboratory, yet, I hope and fully believe that my other medical brethren will lose no opportunity and time in experimenting the effect of the same on human beings; so that the occasional unformidable complications that ensue from anæsthesia that create terror and anxiety in the minds of those who undergo operations under chloroform and the several other anæsthetics, may be prevented and removed, and thus bring the death ratio under anæsthesia to zero.

Yours, etc.,

K. P. K. RAMAN NAIR.

TRICHINOPOLY.

THERAPEUTIC NOTICES, &c.

MESSRS. MARTIN and Harris of Calcutta, Bombay and Madras, are agents for the well-known chemical products and drugs of E. Merck of Darmstadt.

The importance of getting drugs only from a reliable and well reputed wholesale firm is shown by the following facts. A sample of *Paraffin liquid* was required for medical purposes; on examination the analyst said it was only fit for machinery. In another case loz. of *santonin* was examined, purchased from a local wholesale house, and it was found to contain not a trace of santonin.

Santonin is an expensive drug and its price must be paid; cheap so-called santonin is useless, and is often nothing more than coloured boric powder or such like. No wonder such, "santonin" often fails in cases of sprue, etc.

Our attention has been called to a paper on *Deut. Med. Wochens.* No. 38, 1912, by Prof. Meyer, in which he advocated the use of *DIURETIN* in case of bronchial asthma as well as in the cardiac variety.

THE attention of our readers is directed to Messrs. Parke Davis & Co.'s useful pamphlet on Bacterin.

THE attention of microscopists may be directed to the new pamphlet of E. LEITZ (18, Bloomsbury Sq., London, W. C.), in which is described a new binocular microscope, for which many advantages are claimed, including that of less fatigue to the eyes.

MESSRS. W. B. SANDERS Co. are bringing out a new work by Prof. Crile and Dr. Lower on Anoci-Association:—

The authors first discuss shock—its kinetic theory, its histological and clinical pathology, and its treatment. Then follow chapters on the principles of Anoci-association, the technique of its application in the administration of the anæsthetic, in abdominal operations, in gynecological operation, in genito-urinary work, in operations for cancer, for exophthalmic goitre, on the brain, and on the extremities.

THE Welcome Historical Medical Museum is now a permanent institution at 54A, Wigmore street, Cavendish Sq., W., London. It is well worth a visit.

MESSRS BUTTERWORTH & Co. (Hastings street, Calcutta), are bringing out the 4th Ed. of Dr. E. M. Foote's *MINOR SURGERY* (Price Rs. 15-12); a complete and up to date and concise work on minor surgery, dressing, bandaging, etc. It has no less than 433 illustrations, and 830 pages.

CORRIGENDA.

IN Major F. P. Connor's letter on Iodine in Plague in our May No., the dose mentioned in para. 2 should be "8 minims to one drachm," not as given; *injection* is wrongly printed for "infection."

PUNJAB NOTES.

THE annual Indian Medical Service dinner was to be held at the United Service Club at Simla on July 24th, 1914.

AFTER two postponements, the first meeting of the Simla Improvement Committee was held on June 4th under the presidency of the Hon'ble Mr. L. Porter, I.C.S. It is understood that one of the first questions to be taken up was that of the improvement of the Simla water-supply.

THE subject of pure water supplies is apparently much to the fore at the present time, for the Hon'ble Major Robertson, C.I.E., Sanitary Commissioner with the Government of India left Simla in June for Aden, to advise in regard to measures to extend and improve the water-supply of that station. On the completion of this duty Major Robertson proceeded to England on two months' privilege leave. During his absence the duties of Sanitary Commissioner with the Government of India are being performed by the Director-General of the Indian Medical Service, in addition to his own duties.

IT is understood that Lieutenant-Colonel E. Wilkinson, F.R.C.S., I.M.S., Sanitary Commissioner, Punjab, has accepted an appointment under the Local Government Board in England, and that he proposes to retire from the service on the expiry of his leave in February next.

LIEUTENANT-COLONEL A. COLEMAN, I.M.S., Civil Surgeon, Rawal Pindi, has been granted four months' furlough from June 24th. He will be relieved by Major J. G. G. Swan, I.M.S., when that officer is set free from his appointment as Civil Surgeon, Lahore, by the return from privilege leave on or about July 6th, 1914, of the permanent incumbent, Lieutenant-Colonel D. Davidson, I.M.S.

LIEUTENANT-COLONEL D. LANE, I.M.S., Civil Surgeon, Ambala, was granted 42 days' privilege leave from 5th June 1914, and Captain H. Mills, I.M.S., Plague Medical Officer, Ambala, was appointed to officiate for him.

ON transfer to the Punjab, Major J. Woods, I.M.S., was posted as Plague Medical Officer, Gujranwalla.

CAPTAIN H. G. Stiles WEBB, I.M.S., Deputy Sanitary Commissioner, North-West Frontier Province, has proceeded home on three months' privilege leave.

WE regret to record the death of Lieutenant J. E. Scudamore, I.M.S., Specialist in Electrical Science, Meerut, under peculiarly sad circumstances. It appears that Lieutenant Scudamore undertook a walking tour from (Chakrata to Simla, without any companion or servants. It is believed he passed through certain malarious valleys, and that he contracted a severe chill and fever as the immediate result of being exposed to a heavy downpour of rain. When news of his condition was received in Simla, he was brought