BRITISH JOURNAL OF ANAESTHESIA

DIMINUTION DE LA PRESSION INTRA-CRANIENNE CHEZ DES CHIENS AYANT ETE TRAITES PAR DES SOLUTIONS DE MANNITOL ET DE FRUCTOSE ASSOCIE AU MANNITOL

SOMMAIRE

L'administration chez 6 chiens d'une solution de fructose associé à du mannitol (1,5 g/kg) a déterminé une chute de la pression crânienne suivie d'une élévation en rebond de cette dernière. À l'inverse, la même charge osmotique de mannitol a engendré une diminution plus prolongée de la pression, le niveau moyen de celle-ci étant demeuré bien au-dessous des chiffres témoins pendant les deux heures consécutives à la perfusion.

VERMINDERUNG DES INTRACRANIALEN DRUCKS BEI HUNDEN DURCH MANITOL UND FRUCTOSE-MANITOL-LÖSUNGEN

ZUSAMMENFASSUNG

Die Infusion einer Fructose-Manitol-Lösung (1,5 g/kg) verursachte bei sechs Hunden ein Sinken des intrakranielen Druckes, dem ein Rebound-Anstieg folgte. Im Gegensatz dazu sank der Druck bei Anwendung der gleichen osmotischen Mannitol-Lösung für längere Zeit, wobei die mittlere Druckhöhe zwei Stunden lang nach der Infusion beträchtlich unter dem Niveau der Kontrollwerte blieb.

REDUCCION DE LA PRESION INTRACRANEAL EN PERROS CON SOLUCIONES DE MANITOL Y FRUCTOSA-MANITOL

RESUMEN

Una infusion de solution fructosa-manitol (1,5 g/kg) en seis perros produjo un descenso de la presion intracranal seguido por una elevacion de rebote. Por otra parte, la misma carga osmótica de manitol produjo una reducción más prolongada de la presión, quedando el nivel medio muy por debajo de los valores de control durante dos horas después de la infusion.

CORRESPONDENCE

ANAESTHETIC PRACTICE AND PREGNANCY

Sir,—Many anaesthetists will be aware of the belief that women anaesthetists are abnormally prone to spontaneous abortion and perhaps to involuntary infertility. This belief has recently received further partial confirmation by the survey conducted by Askrog in Denmark among female nurse and physician anaesthetists and the wives of male anaesthetists. Askrog reported his findings at the recent European Congress of Anaesthesiology in Prague. He recorded a twofold increase in spontaneous abortion and perinatal deaths in women anaesthetists and the wives of male anaesthetists in the three-year period after starting the practice of anaesthesia as compared with the control period before entering the specialty of anaesthesia. There was an increase in the number of female infants born alive.

Although these figures appear striking, they must be viewed with some reservations. The reply rate to Askrog's survey was only 70 per cent and so no information was available concerning 30 per cent of the 800 nurse and physician anaesthetists in Denmark. The anaesthetists served as their own controls and it would be expected that the obstetric performance of any sizeable group of women would vary at each period of time. The effects of increasing age and different environment might be considerable.

The question of the possible harmful effects of anaesthetic practice upon pregnancy remains and Askrog's figures are so striking as to suggest strongly that a connection exists at least between abortion and exposure to anaesthetic agents. My colleagues Dr Alastair A. Spence and Dr Lucia V. Rodrigues and I intend to conduct a survey among women anaesthetists in the United Kingdom, and a control group of about 1,000 randomly selected women doctors. The selected women will each receive a questionnaire asking for details of their obstetric history. Replies will be treated in complete confidence. Unmarried women will be asked merely to return the questionnaire uncompleted. In this way, we hope to carry out a more extensive survey than was possible in Denmark and to have an acceptable control group. Questions will be directed towards establishing the possible effects of anaesthetic practice on the incidence of abortion, infertility, foetal abnormality and the sex of any children. We will have the co-operation of the Departments of Statistics and Medicine in Relation to Mathematics and Computing of the University of Glasgow in this survey. It is essential that we achieve a very high reply rate and I ask for the courtesy of your columns to ask those who will receive a questionnaire to reply, even if the questions are irrelevant. We are fully conscious of the personal nature of our enquiries and would not pursue the matter were we not convinced of its importance. The question of a harmful effect of anaesthetic practice upon child-bearing must be of some concern to every anaesthetist and is one which seems to demand a definite answer so that appropriate precautionary measures may be taken without further delay.

DONALD D. MOIR

Glasgow