this route is dependent on patient-nurse communication and nursing response, and this is mentioned in the discussion [1].

The aim in any pain study is to test the severity of pain and quality of pain relief experienced by the patient during the postoperative period. Two assessments of pain over 24 h may not be enough to give an adequate idea of the quality of pain. Baseline assessment at the time of arrival from theatre, before any analgesic injection is given, is essential. Pain relief scores at more frequent assessments should have been added (beside visual analogue (VAS) and verbal pain scores) to improve the sensitivity of these tests in detecting the amount of resulting pain relief.

From baseline assessments, the pain intensity difference (PID) and summed PID could have been calculated, both of which have been shown to be more sensitive [3] in revealing significant differences when VAS failed to do so.

Last, controlling another factor—the nature of the operation—might be prudent in any controlled pain study. The authors did not specify the type of operations, but classified them as only major and minor surgery according to specific criteria. These do not rule out the possibility of patients within the same category having a different quality of pain.

A. Al-HASANI
Leicester Royal Infirmary
Leicester


PATIENT-CONTROLLED ANALGESIA BY PROXY

Sir,—It is true that the use of a fixed i.m. dose of morphine is not the ideal method to study the morphine-sparing effects of a drug. Ketorolac has been shown to produce a morphine-sparing effect in other studies. The study in question was designed to see if there was any significant reduction in the use of morphine when this was classified as only major and minor surgery according to specific criteria. These do not rule out the possibility of patients within the same category having a different quality of pain.

S. AL-HASANI
Leicester Royal Infirmary
Leicester


VETERINARY USE OF “XYLOCAINE” SPRAY

Sir,—The Association of Veterinary Anaesthetists wishes to draw attention to a problem experienced in cats with the new formulation of the pump pack Xylocaine Spray (Astra Pharmaceuticals Ltd). An Astra Xylocaine spray has been used for many years to desensitize the larynx before tracheal intubation in the cat. The product has never carried an animal product licence, but has been used widely without apparent ill effect.

Several reports have been received in recent months describing adverse reactions to the new spray formulation. These include laryngeal oedema, upper respiratory tract obstruction and excessive airway secretion. This has culminated in a recommendation from Astra that the spray should not be used in cats [1]. The Association of Veterinary Anaesthetists has suggested several alternative techniques to facilitate feline tracheal intubation [2] and would welcome further ideas. We endorse the recommendation that the new pump pack should not be used in cats.

P. M. TAYLOR
Animal Health Trust
Newmarket

2. TayloR FM. Use of Xylocaine pump spray in cats. Veterinary Record 1992; 130: 583.