

88 patients with angina pectoris cardiac pain disappeared, while in 3 it diminished, and only in one did it persist. Subjective improvement after the first block took place in 122 patients. The systolic arterial pressure dropped, on average, by 32 mm./Hg and the diastolic pressure by 14.5 mm./Hg; the pulse pressure fell by 5 mm. The blood cholesterol level fell on the average by 30 mg./100 ml. in cases of considerable hypercholesterolaemia, and became normal in cases with only a slight excess of blood cholesterol. The treatment can be conducted on an outpatient basis. No side-effects were noticed. (Davydov, N. M.: *Experiment in Treatment of Patients with Hypertensive Disease by Means of Paravertebral Novocaine Block*, *Ter. Arkh.* 28: 60, 1956.)

SPECIAL CARE UNIT Faced with complaints from non-acute patients concerning the noise and depressing nature of having acutely ill patients next to them in their wards, from nurses regarding difficulties in providing good care for acute patients scattered between non-acute patients and from doctors desiring more exacting care of critical patients, the Mary Hitchcock Memorial Hospital has organized a special care unit. This consists of one open mixed six bed ward for unconscious and neurosurgical patients, one male and one female four-bed unit, and four single rooms for either sex who require this privacy because of their peculiar problems or because isolation technique is required. This plan has conserved manpower, gives invaluable training for student nurses, and has provided better care for both acute and non-acute cases than previously was possible. (Mosenthal, W. T., and Boyd, D. D.: *Special Unit Saves Lives, Nurses, and Money*, *Mod. Hosp.* 89: 83 (Dec.) 1957.)

ANESTHESIA COSTS Analysis of the cost of anesthetic agents shows that a continuous spinal or extradural anesthetic,

with oxygen administration, may be conducted at an average cost per hour of \$0.85, while the drug cost for balanced general anesthesia averages \$4.22 per hour. (Hingson, R. A., Ress, E. F., and Costley, E. C.: *Current Analysis of Cost of Anesthetic Agents*, *West. J. Surg.* 65: 375 (Nov.-Dec.) 1957.)

RUDOLPH MATAS On September 23, 1957, there passed away in New Orleans the oldest, though not the senior, Honorary Fellow of the Royal College of Surgeons of England. Rudolph Matas had survived his ninety-seventh birthday, having been born September 1, 1860, the son of an ophthalmologist near New Orleans. His career in medicine was brilliant from the start, and in 1894, at age 34, he was appointed professor of surgery at the University of Tulane. The name of Matas will always be associated with operative technique in the surgery of aneurysm but he made many pioneer contributions to surgery apart from those dealing with the vascular system: these comprised local, regional and spinal anesthesia; the intravenous use of saline and other sera for shock and hemorrhage (1885-91); gastro-duodenal suction for intestinal obstruction, peritonitis and paralytic ileus, and many other methods of therapy for diverse conditions. To some the name of Matas is only legendary, but for others the memory remains of the short, sturdy figure, the white moustache and "goatee" beard, the quick movements and Latin restlessness, his encouragement to the young, and always his own intense humility. He was fortunate in living to see the seed which he planted in the eighties of last century flower and produce today's brilliant surgery of the cardiovascular system. "The sword which he forged and wielded so long is safe in the hands of those who succeed him in the surgical pilgrimage." (*Editorial: In Memoriam: Rudolph Matas*, *Ann. Roy. Coll. Surgeons England* 21: 334 (Nov.) 1957.)