

seen in films. In 2 cases a second lumbar puncture within two days showed an increase of protein and fall in the number of cells. . . .

"A review of the circumstantial evidence pointed to a cold water filter as being a possible source of infection. This filter was a Berkefeld multiple candle type and was connected directly to the roof water tanks. The outflow water, assumed to be sterile, was used to rinse the lumbar puncture needles which were kept in formaldehyde vapor. . . . In view of these findings the use of the filter was promptly discontinued, after which no further cases of meningitis occurred. Thus, although circumstantial evidence strongly suggests the contaminated water as the source of infection, direct proof of this has not been obtained."

J. C. M. C.

CAMERON, W. M., AND KASANIN, J.: *A Pharmacologic and Clinical Re-valuation of Amphetamine (Benzedrine) Sulfate*. *New England J. Med.* **224**: 544-550 (Mar. 27) 1941.

"The molecular configuration of amphetamine (Benzedrine) places it in the group of phenyl amines, another member of which is ephedrine. None of the phenyl amines is truly sympathomimetic in their effects. Amphetamine is not sympathicotropic in its mode and locus of operation, and consequently should not be equated with epinephrine. Amphetamine is relatively feeble in potency in comparison with other aromatic amines, such as epinephrine, arterenol and tyramine. It is clearly established that increased length of the side chain and the absence of OH-groups are associated with increased toxicity. By these criteria amphetamine must be suspected of relatively high toxicity, which can be ruled out only by further pharmacologic experimentation. Because the toxicity of amphetamine has not been

sufficiently determined and its action is relatively feeble, it seems preferable to employ other amines for peripheral effects on the cardiovascular, gastro-intestinal and other systems.

"Clinically, amphetamine is valuable in certain diseases of the central nervous system, such as narcolepsy and postencephalitic parkinsonism, and in certain intoxications. The administration of the drug in neuroses, depressions and schizophrenia seems of doubtful value, and may occasionally be harmful. Favorable results reported in such heterogeneous states as orthostatic hypotension, chronic alcoholism, obesity, and schizophrenia do not speak for specificity of action, but indicate rather that other variables (present in every therapeutic situation) may have contributed to the ultimate improvement of the patients." 67 references.

J. C. M. C.

LIVINGSTONE, H.; HEIDRICK, F.; HOLLICKY, I., AND DACK, G. M.: *Cross-infections from Anesthetic Face Masks*. *Surgery* **9**: 433-435 (March) 1941.

"We wish to report the results of guinea pig inoculations of saline washings of anesthetic masks removed from patients having active pulmonary tuberculosis. Specimens were taken as follows: (A) After removal of the mask from the face; (B) after washing the mask with water, as is the custom in many institutions; (C) after washing the mask as in (B) and then immersing it for one hour in the following solution:

Formaldehyde (38 per cent solution)	210 cc.
Aqua	606 cc.
Alcohol 95 per cent q.s. ad	4,000 cc.

This solution was made by one of us (G. M. D.) after bacteriologic investigation to determine the lowest percentage of formalin necessary to destroy the tubercle bacilli in less than one hour. . . .

"In the 39 anesthetic face masks examined 13, or 33.3 per cent, contained