Since the majority of the AABB centers have identical blood freezing and processing systems, rare types of frozen blood can be shipped in dry ice from one center to another and be processed only if actually needed.

During the 12 years that the Reference Laboratories Program of the American Association of Blood Banks has been in operation, many hundreds of units of rare types of blood have been shipped to blood banks throughout the United States and also as far away as Australia and New Zealand. The goal of the program is to make certain that all blood banks and transfusion services can receive the necessary help to solve their problems with blood group antibody identification, and to secure adequate supplies of compatible blood for patients in need of transfusions.

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Drugs

PENTAZOCINE VS. MORPHINE The d- and l-isomers of pentazocine were compared with morphine for analgesia and other effects in two randomized, double-blind assays involving 889 treatments of 478 patients. Most of the analgesics were given for postoperative pain. Responses to 60 mg/d-pentazocine were less than that to 5 mg morphine. Relative potency of l-pentazocine, based on measurement of effects for as long as 255 minutes, was found to be 0.55 to 0.40 (25 to 29 mg approximately equal to 10 mg morphine). Sedation and sweating were common with the l— isomer. It appears that analgesia resides principally in the l— isomer. (*Forrest, W. H., and others: Analgesia and Other Effects of the d— and l— Isomers of Pentazocine, Clin. Pharmacol. Ther. 10: 468 (July) 1969.*)

ANALGESICS AND MAO INHIBITORS The monoamine oxidase inhibitors, iproniazid and tranylcypromine, potentiated the acute toxicity of meperidine, morphine, pentazocine and phenazocine in mice. The increased toxicity of meperidine previously has been related to the inhibition of a hepatic microsomal MAO enzyme system, a system not important in the detoxification of the other analgesia studied. There was no correlation between changes in brain and hepatic MAO activity and the increased meperidine toxicity. The acute toxicity of pentazocine was enhanced in spite of normal blood pentazocine levels. On the other hand, the increased toxicity of all the analgesics studied correlated well with increased brain levels of 5-hydroxytryptamine but not with the other monoamines, norepinephrine and dopamine. (*Rogers, K. J., and Thornton, J. A.: The Interaction between Monoamine Oxidase Inhibitors and Narcotic Analgesics in Mice, Brit. J. Pharmacol. 36: 470 (July) 1969.*)

ANTIPYRETIC–ANALGESIC DRUGS The antipyretic effect of aspirin and related drugs on the temperature-regulating region of the hypothalamus is a central one. The analgesic action is predominantly peripheral, probably occurring at receptors in nerve terminals. The anti-inflammatory effect is also peripheral, but may be mediated by axon reflex inhibition. (*Keele, C. A.: Sites and Modes of Action of Antipyretic–analgesic Drugs, Proc. Roy. Soc. Med. 62: 535 (June) 1969.*)