

ciated with seizure activity. Instead, agents that are not associated with seizures are selected. Benzodiazepines are acceptable premedicants; phenobarbital is thought to be the premedicant of choice.<sup>4</sup> If general anesthesia is indicated, halothane, isoflurane, or narcotic/relaxant techniques are used.

Strict attention to radiologic and anesthetic techniques may reduce the likelihood of metrizamide-induced seizures. As new contrast media are developed for neuroradiology, the anesthesiologist should become acquainted with their side effects and possible drug interactions.

STEPHEN T. PYLES, M.D.  
*Resident in Anesthesiology*

ANNETTE G. PASHAYAN, M.D.  
*Assistant Professor in Anesthesiology and Neurosurgery*  
*Department of Anesthesiology*  
*University of Florida*  
*College of Medicine*  
*Gainesville, Florida 32610*

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## Neutralizing Capacity of Particulate Antacids

*To the Editor:*—We read with interest the clinical report, "Effectiveness of Sodium Citrate as an Antacid," by Gibbs *et al.*<sup>1</sup> who demonstrated that 0.3 M sodium citrate is an effective pre-induction antacid in pregnant women. They also reported that 0.3 M sodium citrate has a higher acid-neutralizing capacity *in vitro* than does Mylanta®. However, their data (in Table 2) show a neutralizing capacity for Mylanta less than that previously published.<sup>2</sup>

To reproduce Dr. Gibbs' experiment, we added HCl of pH 1.5 in 100-ml increments to 30 ml of Mylanta (pH 8.0) stirring for 5 min after each addition. Immediately following the third and subsequent increments (to a total of 1,000 ml HCl), pH fell to the 2.2-2.6 range but rose steadily to 4.0 or above during the next five minutes. In a separate experiment we added 10 ml Mylanta to 330 ml HCl (pH 1.5). With continuous stirring the pH rose steadily reaching 2.5 at 4 min 40 s, and 4.0 at 20 min. Thus, one volume of Mylanta can neutralize (to pH 2.5) over 33 volumes of pH 1.5 HCl, as opposed to 10 volumes in Dr. Gibbs' report.

These data indicate that Mylanta has a greater neutralizing capacity than shown in Dr. Gibbs' report for 0.3 M sodium citrate, provided that adequate time and

mixing are allowed. This error does not detract from the significance of their data concerning sodium citrate. The lesser requirement for mixing and quicker onset of action of sodium citrate compared to Mylanta would, in fact, be advantageous in the antepartum setting.

STEVEN W. EYLER, M.D.  
*Assistant Professor*  
*Director, Pain Clinic*

JUNE ZACCARI, B.S.  
*Research Associate*

*Department of Anesthesiology*  
*University of California, Irvine*  
*Medical Center*  
*Orange, California 92668*

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