

Veterans Affairs Medical Center
MFRC, Room A1000
8701 West Watertown Plank Road
Milwaukee, Wisconsin 53226

* Estafanous FG: The choice of inotropes following cardiopulmonary bypass: *Con*: Amrinone is not a first-choice inotropic following cardiopulmonary bypass. *J Cardiothor Vasc Anesth* 5:184-186, 1991.

† Al-Wathiqui MH, Shimshak TM, Brooks HL, Preuss KC, Wynsen JC, Gross GJ, Warltier DC: Comparative effects of inotropic agents on coronary and systemic hemodynamics of conscious dogs: Actions of milrinone, dopamine, ouabain and MCI-154. *Pharmacology* 36:217-227, 1988.

REFERENCES

1. Rooney RT, Stowe DF, Marijic, Bosnjak, Kampine JP: Amrinone reverses cardiac depression and augments coronary vasodilation

with isoflurane in the isolated heart. *ANESTHESIOLOGY* 74:559-567, 1991

2. Benotti JR, Grossman W, Braunwald DH, Carabello BA: Effects of amrinone on myocardial energy metabolism and hemodynamics in patients with severe congestive heart failure due to coronary artery disease. *Circulation* 62:28-34, 1980
3. Wilmshurst PT, Thompson DS, Juul SM, Dittrich HC, Dawson JR, Walker JM, Jenkins BS, Coltart DJ, Webb-Peploe MM: Effects of intracoronary and intravenous amrinone infusion in patients with cardiac failure and patients with near normal cardiac function. *Br Heart J* 53:493-506, 1985
4. Hines R: The choice of inotropes following cardiopulmonary bypass: *Pro*: Amrinone is a first-choice inotrope following cardiopulmonary bypass. *J Cardiothor Vasc Anesth* 5:181-183, 1991

(Accepted for publication May 20, 1991.)

Anesthesiology
75:381, 1991

Peripheral Nerve Injury and Automatic Blood Pressure Measurement

To the Editor:—In a recent report¹ describing radial nerve injury in association with use of an automated blood pressure monitor, the authors stated that they were unaware of any publication reporting on radial nerve injury caused by a blood pressure cuff.

In 1982 we published a report² describing radial nerve injury due to automatic blood pressure measurement in a cachectic patient (50 kg and 172 cm) with very thin arms.

Our conclusion then was that in very light-weight patients, automatically cycled blood pressure monitors should be applied only when brief intervals between measurements is not demanded. Continuous noninvasive blood pressure measurement with a new operational concept using the unloaded artery principle of operation* has proved a useful monitor³ without detrimental effects to the finger, where the cuff for the measurement is applied.⁴

In addition, we would like to bring to your attention a case describing radial nerve palsy in a premature infant after long-term measurement of blood pressure.⁵

HEIDI M. SCHAEER, M.D.
Institute for Anesthesiology and Intensive Care
University Hospital
Inselspital
3010 Bern
Switzerland

* Penaz J: Photoelectric measurement of blood pressure, volume, and flow in the finger. Tenth International Conference on Medical and Biological Engineering, 1973, p 104.

REFERENCES

1. Bickler PE, Schapera A, Bainton CR: Acute radial nerve injury from use of an automatic blood pressure monitor. *ANESTHESIOLOGY* 73:186-188, 1990
2. Schaer HM, Tschirren B: Nervus radialis-Parese infolge automatischer Blutdruck-Messung. *Anaesthesist* 31:151-152, 1982
3. Friedman DB, Jensen FB, Matzen S, Secher NH: Noninvasive blood pressure monitoring during head-up tilt using the Penaz principle. *Acta Anaesthesiol Scand* 34:519-522, 1990
4. Smith NT, Wesseling KH, DeWit B: Evaluation of two prototype devices producing noninvasive, pulsatile, calibrated blood pressure measurement from a finger. *J Clin Monit* 1:17-29, 1985
5. Tollner U, Bechinger D, Pohlandt F: Radial nerve palsy in a premature infant following long-term measurement of blood pressure. *J Pediatr* 96:921-922, 1980

(Accepted for publication May 22, 1991.)

Anesthesiology
75:381-382, 1991

A Cause for Hemodynamic Instability during Hepatic Tumor Resection

To the Editor:—Elevated concentrations of circulating catecholamines have not previously been reported in association with primary hepatic tumors. We would like to report a 10-month-old baby girl with an intrahepatic tumor who developed severe hemodynamic instability during surgical resection. The highest preoperative blood pressure

was 120/80 mmHg, recorded while the patient was crying vigorously. Preoperatively, serum glutamic-oxaloacetic transaminase, serum glutamic-pyruvic transaminase, alkaline phosphatase, and lactate dehydrogenase concentrations were increased, and the α fetoprotein concentration was normal. Celiac and superior mesenteric arteriography