Mechanism of the Action of Narcotics. (*Protoplasma, vol. xviii, p.* 321, 1933.) *Süllmann, H.*

Emulsions of olive oil in water containing soap or gelatine are rendered unstable by the addition of narcotics, which accelerate phase inversion by barium chloride. Urea and sugar have the reverse effect. The action of narcotics results from its disturbing effect on the emulsifier. Narcotic effects are discussed in relation to the physico-chemical condition of living cells. B. C. A. (Chem. Abstr.).

Further Contributions to Methods of Barbital Research. (*Proc. Soc. Exp. Biol. Med., vol. xxxi, pp.* 373, 375, 376, 451, 1933–34.) *Koppanyi, T., et alia.*

In severe experimental nephrosis, the dog and the rabbit reacted to barbiturates like totally nephrectomized animals, they remained anæsthetized until death, barbital was retained in the blood, and very little was excreted in the urine. In milder nephrosis, recovery from the sleep produced by barbiturates was retarded. In the dog, dehydration did not prolong barbital narcosis, nor did the saline diuresis by the method of Gower and Van de Erve hasten recovery. The intravenous injection of ·5–1% solutions of ammonium chloride did not shorten the period of depression; it did increase the rate of excretion of barbital in the urine.
C. V. Bailey (Chem. Abstr.).

The Elimination of Barbituric Acid Derivatives in the Urine, with Special Reference to Sodium Amytal and Pentobarbital Sodium. (*Journ. Pharmacol., vol. xlix, p.* 393, 1933.) *Shoule, H. A., Keltch, A. K., Kempf, G. F., and Swanson, E. E.*

Sodium amytal and pentobarbital sodium are excreted in the urine of men and dogs in traces only, while barbital and phenobarbital are excreted as such. The two drugs first mentioned are probably rapidly and completely destroyed in the body.
T. H. Rider (Chem. Abstr.).

A Case of Poisoning with a Derivative of Barbituric Acid (*Can. Med. Assoc. Journ., vol. xxx, p.* 65, 1934.) *Orford, T. J.*

A patient who had swallowed 18 gr. of dial passed into a state of coma in 1½ hours and showed all the signs of barbiturate poisoning; respirations were about 6–8 per minute. Coramine, 3 c.c., was given intramuscularly about 2½ hours after the tablets were swallowed, and a cold bath was given. Respirations and pulse improved at once; the patient was kept awake for 4 hours and was then allowed to sleep 14. Another 3 c.c. of coramine was given, and the patient made a complete recovery. G. H. W. Lucas (Chem. Abstr.).

Acute Somnifen Poisoning. (*Arch. ex. Path. Pharm., vol. clxxiv, p.* 111, 1933.) *Glatzel, H., and Schmitt, F.*

The symptoms resemble those of barbituric acid poisoning, with motor excitation ascribed to the allyl and amine groups. Coramine was successfully used therapeutically. Based on their barbituric acid contents, somnifen seems to be less toxic than barbital. H. Eagle (Chem. Abstr.).

Physiological Observations during Intravenous Sodium Amytal Medications. (*Amer. Journ. Psychiat., vol. xiii, p.* 1206, *May*, 1934.) *Lorenz, W. F., Reese, H. H., and Washburne, A. C.*

Observations on 350 patients permit certain deductions. Sodium amytal, properly prepared and administered, produced no alarming physiological effects. The functional group necessitated a larger dosage than the organic group. Because of the greater blood-pressure instability among involutional cases, greater caution and supervision must be observed in them. M. Hamblin Smith.