

Because the tube room is closed from midnight to 8 A.M., a pharmacy messenger will be stationed in the department to pick up and deliver orders during this time.

#### SHORTAGE OF SERUM ALBUMIN CONTINUES

It is still difficult to purchase 25% Normal Serum Albumin (Human) Salt Poor. A limited supply of 20 ml. vials has been obtained by the pharmacy. These will be issued in place of the 50 ml. vials until further notice.

#### PHARMACY COMMITTEE NOTES

1. Furosemide (Lasix) tablets 40 mg. and Ethacrynic Acid (Edecrin) tablet 25 mg., 50 mg. and 50 mg. vials for I.V. use only have been added to the formulary.

These diuretics have shown to provide good results. However, they are potent diuretics and are likely to result in potassium depletion. The following brief summaries of these preparations are therefore provided:

##### *Furosemide (Lasix)*

Site of action: Mainly on distal tubules; inhibits Na and water reabsorption in both the loop and the ascending limb of the loop of Henle and possibly in the proximal tubule.

Onset and duration of action: Within one hour. Peak effect in 1-2 hours. Duration of 6-8 hours.

Dosage: Usual initial dose is 40 to 80 mg. for adults given in a single dose. If diuresis is inadequate, a 2nd dose is given 6-8 hours later; maintenance dose is then given once or twice a day.

##### *Ethacrynic acid (Edecrin)*

On the ascending limb of the loop of Henle and on the proximal and distal portions of the tubule.

Within 30 minutes after oral dose, 15 minutes after I.V. injection. Peak effect in 2 hours. Duration 6-8 hours.

*Oral:* The smallest effective dose should be utilized, usually 50 mg.-100 mg. for adults given after meal. To determine smallest effective dose:

1st day: 50 mg., p.c.

2nd day: Depending on response increase to 50 mg. twice daily p.c.

3rd day: 100 mg. in the morning and 50 mg. to 100 mg. the following afternoon or evening meal, depending on response to the morning dose.

*Maintenance dose:* 50-200 mg./day continuously or intermittently—alternate days or more prolonged rest periods.

*I.V.* 50 mg. for the average adult.

Both of these drugs are powerful diuretic agents, having a rapid onset of action. If not properly used they can lead to excessive diuresis with water and electrolyte depletion.

Careful medical supervision is required of the patient. The physician should be aware of the dosage requirements, precautions, warnings and contraindications so as to prescribe these drugs effectively and safely. Such additional information is available in our pharmacy.

2. Fibrinolysin and desoxyribonuclease combined (Bovine) Elase was approved for the formulary. This preparation will replace Varidase Jelly which was deleted.

In a recent review of proteolytic enzymes by "The Medical Letter," they concluded that "the clinical value of systemic proteolytic enzymes has not been established. Despite the absence of definite evidence, it is possible that topical application of a preparation such as Elase may be useful in the treatment of some wounds."

The committee pointed out that such preparations do not replace good nursing care and that enzyme preparations can cause irritation of the skin.

#### ADVERSE DRUG REACTION COMMITTEE NOTES

1. Reports indicate that 5% of the total population show some sensitivity to Tetracycline and 10% to Penicillin.

2. Reaction reviewed concerning Novocaine indicated that when given intravenously it should not be administered faster than 1 mg./Kg./min. and should generally be given in isotonic sodium chloride injection or 5% dextrose injection.