2. Barbiturates may be used prophylactically but offer only a small degree of protection against a lethal dose.

Side effects and their treatment:

1. Syncope—Stop injection, recumbent position with legs raised, oxygen, aromatic spirits of ammonia, cold compresses.

2. Hypotension—Stop injection, recumbent position with legs raised, assure adequate ventilation with oxygen. Support circulation with vasopressor if necessary.

3. Apnea—Stop injection, recumbent position, maintain patent airway, artificial respiration with oxygen.

4. Headache and/or backache—Bed rest, analgesic agents as needed. It should be remembered that these side effects most often accompany spinal anesthesia and Citanest (prilocaine) is not recommended for spinal use at this time.

5. Nausea and vomiting—Stop injection, maintain patent airway, prevent

aspiration, anti-emetics as needed.

Methemoglobinemia: At a dose of 600 mg of Citanest (prilocaine), which is the maximum recommended dose for any anesthetic procedure, methemoglobin formation did occur but was less than 15% of total hemoglobin in all patients studied.

With respect to the clinical symptoms associated with methemoglobinemia, the following statement has been made in textbooks: In general, levels of less than 20 per cent methemoglobin are usually not associated with symptoms. At levels of 20 to 50 per cent fatigue, weakness, dyspnea, tachycardia, headaches, and dizziness may occur. In studies conducted to date no patient in whom the maximum recommended dose of 600 mg of Citanest (prilocaine) was used demonstrated a methemoglobin value in excess of 15% and no clinical symptoms have been observed. Moreover, in clinical studies involving approximately 9000 cases in which Citanest (prilocaine) has been used, only one patient who received a single injection of 900 mg has been reported to have exhibited clinical symptoms of lightheadedness and dizziness may have been related to methemoglobin value in excess of 20%.

Administration and Dosage: With the exception of therapeutic nerve blocks, 20-30 ml of Citanest (prilocaine) hydrochloride 1% or 2% and 15-20 ml of Citanest (prilocaine) hydrochloride 3% will usually produce adequate opera-

tive anesthesia.

The onset of anesthesia, the duration of anesthesia and the degree of muscular relaxation are proportional to the volume and concentration of local anesthetic used. Thus, an increase in volume and concentration of Citanest (prilocaine) will decrease the onset of anesthesia, prolong the duration of anesthesia, provide a greater degree of muscular relaxation and increase the segmental spread of anesthesia. It should be remembered, however, that increasing the volume and concentration of Citanest (prilocaine) may result in a more profound fall in blood pressure when used in peridural anesthesia. Although the incidence of side effects in clinical trials was quite low, caution should be exercised particularly when employing large volumes and concentrations of Citanest (prilocaine) since the incidence of side effects is directly proportional to the total dose of local anesthetic agent injected.

Maximum recommended dosage: Normal Healthy Adults: No more than 600 mg of Citanest (prilocaine) hydrochloride should ever be administerd as a single injection, i.e., no more than 8 mg/kg or 4 mg/lb should be given as a single injection. The maximum total dose which may be administered over a period of several hours (e.g., for continuous peridural anesthesia) without side effects is not known as yet. Doses in excess of 2000 mg have been administered over a five-hour period with no toxic symptoms. However, until further data is available we would recommend that doses in excess of 600 mg not be administered at intervals of less than two hours so that one should not exceed a total dose of

1200 mg in a four-hour period.

Children: Experience in children under the age of ten (10) is limited. It is extremely difficult to recommend a maximum dose of any drug for children since this varies as a function of age and weight. With respect to Citanest (prilocaine) hydrochloride, 400 mg have been used without toxic effects in children of 10–15 years. However, for children of less than 10 years who have a normal lean body mass and normal body development, we recommend the use of one of the standard pediatric drug formulas (e.g., Clark's rule or Young's rule) to determine the maximum dose. For example, in a child of five years weighing 50 lbs., the dose of Citanest (prilocaine) hydrochloride should not exceed 150–200 mg