keep a kit available. You'll find primary syphilis when and where you least expect.

"Hooks and Barbs"

Immediately before use, draw intravenous and intramuscular needles across sterile cotton. Minute hooks and barbs, which cause pain to the patient, will catch cotton fibres. Try another needle if the one you test catches fibres. Technical excellence keeps patients under treatment longer.

"Find V.D. Contacts — Report V.D. Cases"

Clinical and Laboratory Notes

RESOLUTIONS CONCERNING ANTI-RETICULAR CYTOTOXIC SERUM ADOPTED AT THE UFA CONFERENCE IN JULY, 1942, AFTER THE PRESEN-TATION OF 40 REPORTS ON 2,500 CLINICAL CASES

(In Abstract)

1. Anti-reticular cytotoxic serum is recommended for all diseases in which there is weakening or inhibition of the physiological system of the connective tissue.

2. The following tests are recommended to determine the activity of the physiologic system of the connective tissue: (a) trypanblue dermal test; (b) morphology of blood; (c) sedimentation rate; (d) titre of complement and opsonic index and phagocytic activity of leucocytes; (e) dermal test with anti-reticular cytotoxic serum.

3. The therapeutic value of the serum has been clearly established in the following conditions: (a) Frost bites and wounds, including fractures, burns and eye wounds. (b) Infectious diseases such as typhus, puerperal sepsis, rheumatism, pneumonia, lung abscess, tonsillitis. (c) Nervous system diseases such as neuritis, meningo-encephalitis, disseminated sclerosis and schizophrenia.

4. It is essential to use anti-reticular cytotoxic serum in all military and civilian hospitals for the above conditions.

5. The serum to be prepared in the Moscow and Ufa departments of the Mechnikov Institute and in the Bashkirian Medical and Bacteriological Institute.

This abstract has been prepared by Captain Paul S. Rutherford, R.C.A.M.C., and is taken from the American Review of Soviet Medicine, 1: 101, 1943.

THE EFFECT OF TEMPERATURE ON THE WAUGH AND RUDDICK TEST FOR INCREASED COAGULABILITY OF BLOOD*

By Lieut. J. Whittaker, R.C.A.M.C.

A new test by means of which it is possible to demonstrate and measure an increase in the coagulability of blood has been described recently by Waugh and Ruddick.¹ This test consists of recording the coagulation time of the blood in a series of tubes to which increasing amounts of heparin have been added. While these authors appreciated the importance of changes in temperature on the velocity of the coagulation process, the work was carried out during the winter months when the temperature of the wards and laboratory of the hospital



*From the Departments of Pathology of the Royal Victoria Hospital and of McGill University.

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was relatively constant at 22.5° C. Under these circumstances tests were conducted satisfactorily at room temperature. With the advent of summer however, it became necessary to study the effect of temperature on the results obtained when this test is used.

Method

Twenty-four male patients were selected. These individuals were all under observation for mental disorders, and were considered to be in good physical health. They gave no history of syphilis and were not confined to bed. Coagulation curves using the method described by Waugh and Ruddick were carried out on each patient at controlled temperatures of 20° C., 25° C., 30° C. and 35° C. Any diurnal variation that might occur was avoided by examining the patient at the same time of day. A constant temperature bath was brought to the desired temperature, and the tubes containing the prescribed amounts of heparin were placed in the bath for thirty minutes prior to the test. One cubic centimetre of patient's blood was then added to each tube, and the test was carried out in the usual manner except that the tubes remained in the constant temperature bath throughout the test period.

Results

It was found that the coagulation curve was significantly changed by variations in temperature, and that between 20° C. and 35° C. increase in temperature caused a decrease in clotting time. It was also seen that the effect of temperature on the clotting time increased steadily from tube one to tube seven.

Fig. 1 shows the mean curves for twenty-four patients at each temperature, and Figs. 2 and 3 show typical recordings for individual patients.

SUMMARY

A series of curves are presented showing the effect of temperature on the results obtained with the Waugh and Ruddick test for coagulability of the blood in normal individuals.

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