mined. As the minimal rate to which the auricles could be brought with veratramine was less than the initial rate, the I₅₀ dose could assume two values depending upon whether the initial or minimal rate was used in calculating acceleration and its percentage inhibition. The terms "corrected" and "uncorrected" refer to the use of the minimal and initial rates respectively in the calculation. The I₅₀ dose against histamine was 0.33 µM/l. "uncorrected" or 1.23 µM/l. "corrected". Reiter(1) acclerated isolated guinea-pig auricles with a continuous infusion of adrenaline and obtained an Iso value of 0.04 μM/l. "uncorrected" or 0.15 μM/l. "corrected" (the latter value calculated by this author). Evidently, veratramine is approximately 18 times more potent as an anti-accelerator agent against adrenaline than against histamine.

Innes et al.⁽²⁾ have suggested that veratramine exerts two distinct effects, the one that of competitive antagonism towards the accelerator effect of sympathomimetic amines, the other being an independent less sensitive negative chronotropic action. This latter action probably accounts for its antagonism towards the cardio-accelerator effect of histamine.

The results indicate that the chronotropic effect of histamine is due to a direct effect on the sino-auricular node and is not due to catecholamines liberated by the histamine from a storage site in in the heart. Mannaioni⁽³⁾ has recently reached a similar conclusion from a study of the effect of histamine on auricles treated with reserpine and dichloroisoproterenol.

43a Activite Pharmacodynamique des Aspartates sur le Coeur Isole. M. Lamarche et M. Tapin (France).

Nous avons étudié l'activité pharmacodynamique sur le coeur isolé des aspartates de magnesium et de potassium (composés racemiques) ainsi que des mélanges des deux. Les coeurs utilisés, prélevés rapidement après saignée de cobayes adultes, etaient maintenus en survie selon la technique de Langendorf et perfusés avec le liquide de Chenoweth et Koelle oxygéné.

Dans ces conditions experimentales, l'addition à une concentration de l'ordre de 10 pour cent au liquide de perfusion d'un des espartates utilisés entraine une nette augmentation de l'amplitude de la contraction du coeur isolé (20–30 pour cent), sans que le rythme cardiaque ne presente de variation notable, sauf pour les concentrations élevées du sel de potassium. Cette action se maintient pendant la durée de la perfusion avec le

liquide contenant le produit, mais cesse aussitôt que celui-ci est remplacé par le liquide ordinaire, l'experience étant ainsi reproductible à volonté Enfin, il est à noter que cette action nette sur l'amplitude des contractions, sans modification du rythme ne s'accompagne d'aucune variation du débit du coeur isolé.

Nous avons ensuite recherché l'activité des aspartates sur le comportement du coeur lors d'une anoxie. Celle-ci était réalisée dans nos experiences par le remplacement de notre solution de perfusion oxygénée par une autre non aérée. Dans ces conditions, on observe une diminution progressive de l'amplitude des contractions, qui peut être reversible si l'experience n'est pas trop prolongée. Ces essais nous ont montré que la presence d'aspartate dans le liquide de perfusion retardait notablement l'apparition de ces manifestations d'anoxie cardiaque.

43b The Pharmacodynamic Activity of Aspartates on the Isolated Heart. M. Lamarche and M. Tapin (France).

The pharmacodynamic activity of magnesium and potassium aspartates (racemic compounds) as well as of a mixture of both was studied on the isolated heart. The hearts used were removed soon after adult guinea-pigs had been bled and were kept alive by the Langendorf technique and perfused with Chenoweth and Koelle's fluid which has been oxygenated.

Under these experimental conditions the addition of one of the aspartates added in a concentration of about 10 per cent to the perfusion liquid caused a definite increase in the amplitude of contraction of the isolated heart (20–30 per cent) without causing any marked variation in the cardiac rhythm; except with high concentrations of potassium. This effect continued during the time of perfusion with the fluid containing the substance but stopped as soon as it was replaced by ordinary fluid; the experiment could thus be repeated at will. Finally, it must be noted that this definite action on the amplitude of contractions, which did not affect the rhythm, was not accompanied by any variation in the output of the isolated heart.

Subsequently, the activity of aspartates on the behaviour of the heart during anoxia was studied by replacing an oxygenated perfusion fluid by another, non-aerated one. Under these conditions a progressive decrease of the amplitude of contraction was observed which was reversible if the experiment was not too prolonged. These trials have shown that the presence of aspartate in the perfusion fluid markedly delayed the appearance of anoxic cardiac manifestations.

44 The Relationship between Potassium and the Action of Digoxin in the Guinea Pig. G. A. Stewart (United Kingdom).

Slow intravenous infusion of non-toxic doses of

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