

The two patients with portacaval anastomosis had greatly increased serum half times ( $P < 0.001$ ) associated with low plasma clearance rates and high distribution volumes. Two patients with chronic liver disease who were not receiving drugs and one who was receiving antituberculous chemotherapy had normal values for  $T_{\frac{1}{2}}$ ,  $C_a$  and  $V_{dss}$ . Two patients receiving long term drug therapy had plasma amylobarbitone clearance values at the upper limit of the normal range. One of these had a significantly shortened half-time ( $P < 0.05$ ).

There was a strong and significant negative correlation ( $r = -0.93$ ,  $P < 0.01$ ) between the plasma amylobarbitone clearance rate  $C_a$  and the bromsulphalein retention at 45 min. This is consistent with the suggestion that both measurements are directly related to the functional capacity of the liver.

There was a weak and insignificant positive correlation ( $r = 0.52$ ,  $P > 0.20$ ) between the serum concentration half-time  $T_{\frac{1}{2}}$  and the bromsulphalein retention; the half-time is dependent not only on the plasma clearance rate but also on the distribution volume, and this is not directly related to liver function.

$$T_{\frac{1}{2}} = \log_e 2 \cdot \frac{V_{dss}}{C_a}$$

#### **Increased half-life of antipyrine in women taking oral contraceptives (T)**

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#### **The absorption and elimination of cloxacillin in patients on chronic intermittent haemodialysis (T)**

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#### **The effects of steroid and of immunosuppressive drug therapy on lymphocyte stimulation by *Candida* antigens (T)**

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