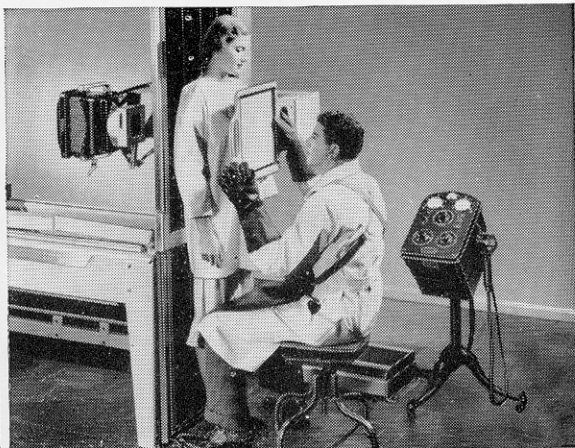


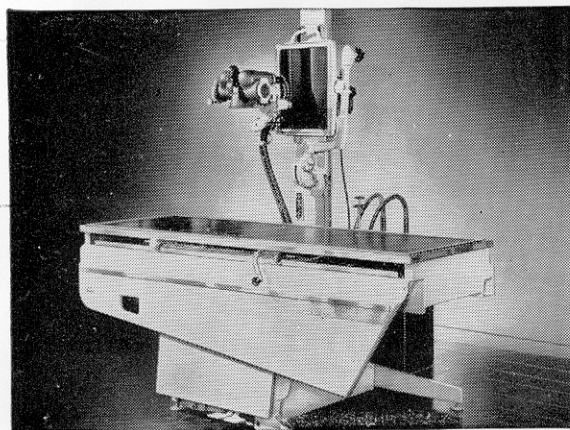
YOU WON'T OUTGROW THESE X-RAY UNITS!



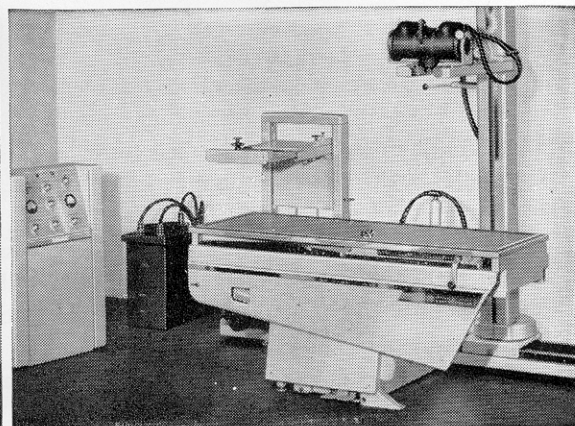
Horizontal Bucky Table — This is the simplest, the basic Maxicon unit. Practical for use in straight radiography, it can later be upgraded to provide one of many units to expand your facilities.



New Dual-Position Table — One of your many choices may be this unit for radiography and fluoroscopy with either a 25 or 100 ma generator. Its "tip-up" top permits vertical as well as horizontal patient positioning.



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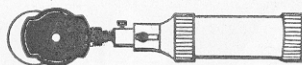
*Effective against many
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certain protozoal and large viral diseases.*

AUREOMYCIN

Hydrochloride Crystalline

Lederle

The Ophthalmologist now possesses in aureomycin a therapeutic agent effective against many infections of the eye, whether caused by bacteria or by large viruses. A half per cent solution is nonirritant to the conjunctiva, so that aureomycin may be given locally, systemically, or in both ways. It has been found of value in most types of conjunctivitis, as well as in dendritic keratitis and uveitis; and is of importance in the treatment of the acute stage of trachoma. Aureomycin is invaluable in both operative and nonoperative ophthalmology.



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Ophthalmic: Vials of 25 mg. with dropper; solution prepared by adding 5 cc. of distilled water.

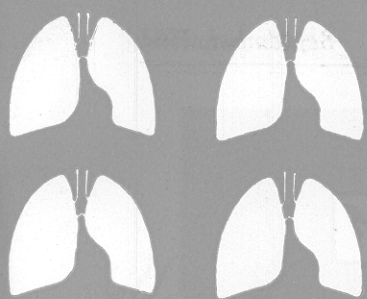
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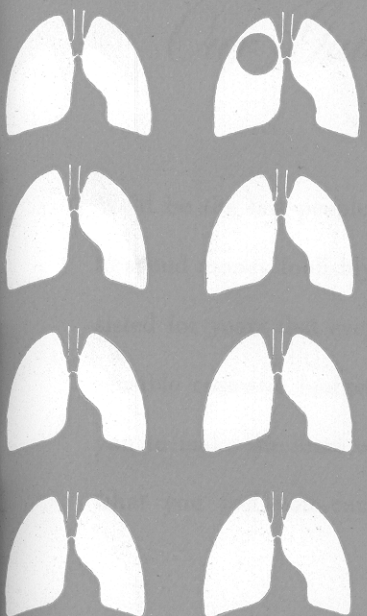
30 Rockefeller Plaza, New York 20, N. Y.

The image features a dense, repeating pattern of white lung silhouettes against a solid black background. The lungs are arranged in a grid-like fashion, with each silhouette facing forward. The word "reducing" is printed in a white, serif font, positioned in the upper right quadrant of the image, partially overlapping the lung pattern.

reducing



pulmonary embolism



"No case of post-operative death from pulmonary embolism" occurred in a study of heparinization¹ during a 9-year period in a hospital with 30,650 admissions. With early diagnosis, early ambulation and heparin treatment of thrombo-embolism, mortality was reduced from 18 per cent in a control series to 0.4 per cent.¹ Such advances in the control of thrombo-embolic phenomena have been made possible by the pioneering efforts of investigators in many centers of medical research.

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R_x Depo-Heparin

Each cc. contains: Heparin Sodium 20,000 U.S.P. units
(Approximately 200 mg.)
Gelatin 180 mg.
Dextrose, Anhydrous 80 mg.
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Preserved with sodium ethyl mercuri thiosalicylate 1:10,000
Supplied with sterile disposable 1 cc. cartridge syringe.

1. Bauer, Gunnar: Nine Years' Experience with Heparin in Acute Venous Thrombosis. *Angiology*, Vol. 1, No. 2, (Apr.) 1950.

2. Smiles, William J.: Long-Acting Heparin Preparation: A Useful Adjunct in Anticoagulant Therapy. *U. S. Armed Forces Med. J.*, Vol. II, No. 1 (Jan.) 1951.

Upjohn

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S-M-A, diluted and ready to feed, provides in each quart the following proportions of the minimum daily requirements for infants.

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VITAMIN C 50 mg.	500%
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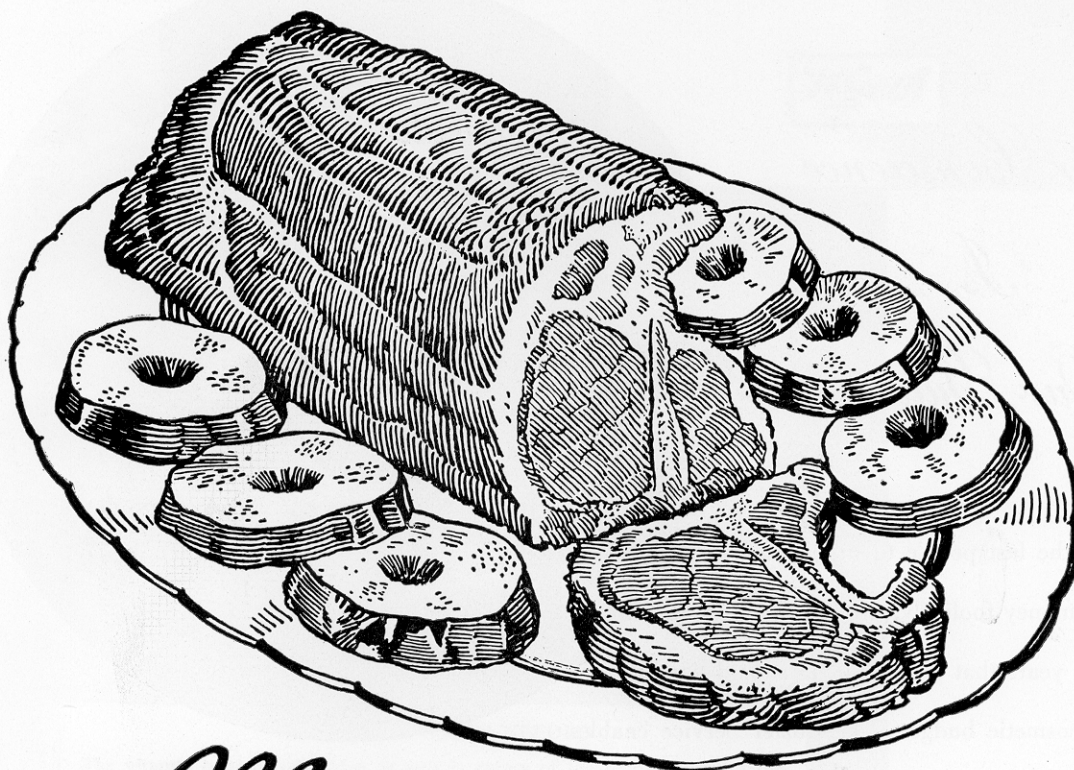
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1. Biologically complete protein... the kind which satisfies the requirements for growth and which is needed daily for tissue maintenance, antibody formation, hemoglobin synthesis, and good physical condition.
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The instinctive choice of meat as man's favorite protein food has behind it sound nutritional justification.*



The Seal of Acceptance denotes that the nutritional statements made in this advertisement are acceptable to the Council on Foods and Nutrition of the American Medical Association.

*McLester, J. S.: Protein Comes Into Its Own, J.A.M.A. 139:897 (Apr. 2,) 1949

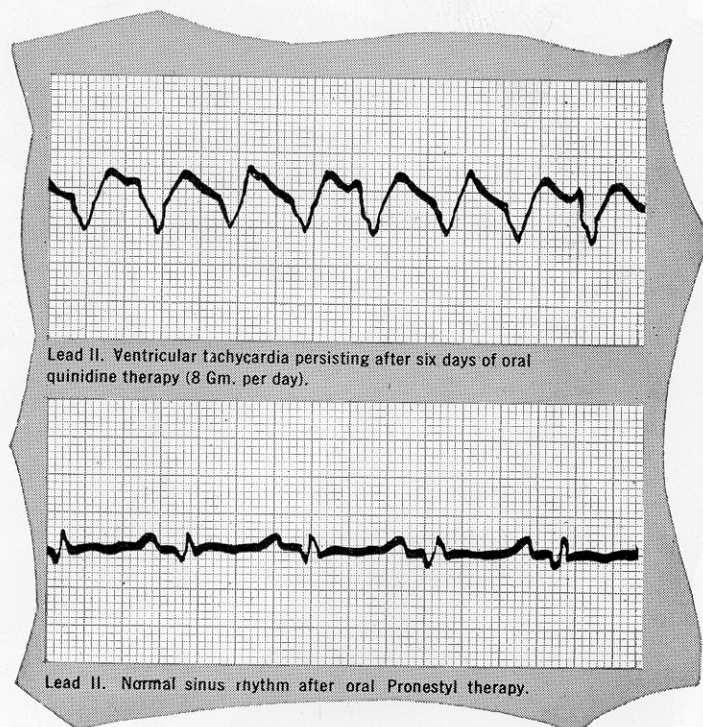
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Main Office, Chicago...Members Throughout the United States

a **new** drug . . .

for the treatment of ventricular arrhythmias

PRONESTYL *Hydrochloride*

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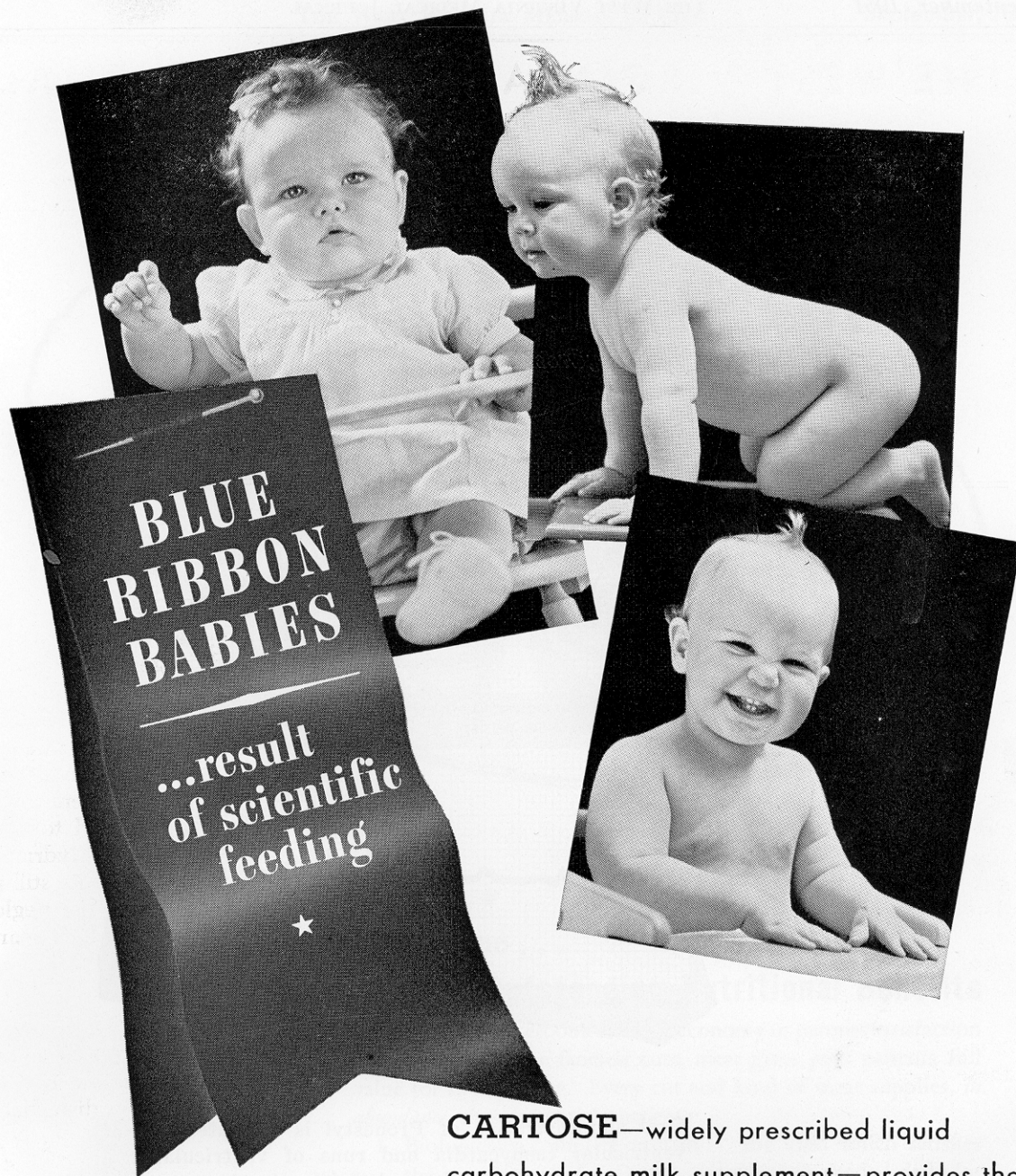


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Compatible with all milk formulas • Instantly soluble
No gumming • No nipple clogging • No caking

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Pure Crystalline Vitamin D₂ in Propylene Glycol • Diffuses perfectly
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No.9

ACTH AND CORTISONE THERAPY OF OCULAR CONDITIONS*

By CHARLES M. POLAN, M. D.,
Huntington, W. Va.

The epochal work of Hench and his co-workers in the use of ACTH and cortisone in the treatment of inflammatory joint diseases that was first reported about two years ago has led to a very rapidly developing and widespread use of these agents in the treatment of many diseases, including inflammatory eye diseases. In the past year an ever increasing number of reports on the use of ACTH and cortisone in treating all varieties of ocular lesions has been appearing.¹ The March 1951 issue of the Archives of Ophthalmology was devoted entirely to the use of these drugs.²

ACTH (adrenocorticotrophic hormone) is a substance extracted from hog and beef pituitary glands. It is produced by Armor and Company and has not been produced synthetically. Cortisone acetate is a steroid compound that has been produced by synthesis and is marketed by Merck and Company under the trade name of Cortone.^R

Both of these substances, when administered to individuals, give a beneficial response by inhibiting reaction in mesenchymal structures. Cellular exudation of polymorphonuclear neutrophils, round cells and eosinophiles is reduced. There is a reduction of capillary permeability to proteins in areas of inflammation. Production of fibrotic reaction in the course of healing is reduced.

The exact mechanisms by which ACTH and

cortisone produce their effects in the body are not known but it is apparent that they do not act directly against the injurious agent, be it bacterial, allergenic, or whatnot; but the beneficial response is obtained by altering or blocking tissue response to those injurious substances. Therefore, in treating ocular lesions in general one should use every therapeutic agent in his armamentarium that he is accustomed to using in treating inflammatory lesions. Mydriatics, antibiotics and chemotherapeutic agents still retain their usefulness and one should not neglect nor abstain from using them. A diligent search for foci of infection must still be made and any found should be eradicated.

ACTH and cortisone when used systemically can have serious deleterious side-effects and these should be kept in mind and watched for constantly. Water retention due to disturbance of the electrolyte balance probably is the most important thing to be watched for. Hypertension may be produced. Latent diabetes may show up during therapy. The insulin requirements of diabetics is greatly increased and these patients must be watched carefully. Acneform and pustular lesions may appear. A condition resembling Cushing's syndrome with the appearance of a round face, increased body hair and pigmented striae may result. Heart failure may be precipitated by overexertion.

It does not appear necessary to resort to elaborate precautions to prevent these complications. Careful watching of a few simple tests is all that is necessary to prevent trouble. The fasting blood sugar level should be checked for all patients before starting systemic treatment. Daily afternoon urinary sugar determinations should be made for a few days. Daily

*Presented before the West Virginia Academy of Ophthalmology and Otolaryngology, at White Sulphur Springs, April 28, 1951.