IMPACT OF HALOTHANE-ANESTHESIA ON 103 IMPACT OF HALOTHANE-ANESTHESIA ON CEREBRAL CIRCULATION IN INFANCY. Jorch G, Reinhold P, Woyke H, Rabe H. Chil-drens hospital, University of Muenster, FRG. Loss of autoregulation of cerebral blood flow (CBF) under halothane-anesthesia has been shown in cats and monkeys. In human adults halo-thane enhances CBF. However, there are no data about the impact of halothane-anesthesia CBF in infancy. We measured changes of mean blood flow velocity of the right internal carotid artery (MBFV) by transfontanel-lar Doppler to estimate changes of CBF with induction 103

right internal carotid artery (MBFV) by transfontanel-lar Doppler to estimate changes of CBF with induction of anesthesia by halothane 1.5 %. TcpCO2 was kept constant. Mean arterial blood pressure (MABP) was measured oscillometrically. Our study collective con-sisted of 9 infants (age 15-80, body weight 2.0-5.6 kg) undergoing minor operations. Results (median, range). range): parameter tcpCO2 (mmHg) 5 min after 34 (26-41) 51 (33-71) 14 (8-33) before sign-test 34 (27-40) 63 (40-106) MABP (mmHg) MBFV (cm/s) n.s. n.s. 18 (16-40) p<0,05 Median decrease of MBFV was 30 % (0-70).

Conclusion: Narcotic doses of halo cerebral perfusion in young infants. of halothane may impair

104 NEUROPEPTIDE Y (NPY) AND CATECHOLAMINE (CA) RELEASE IN THE NEWBORN PIGLET - ENHANCED AFTER THEOPHYLLINE (T). M.Thoresen, I.Dahlin and H.Lagercrantz. Dept Neurophysiol., Karolinska Inst., Stockholm, Sweden. NPY is a co-transmitter of noradrenaline (NA) and

assumed to potentiate some of the cardiovascular effects of NA. Since NPY is assumed to occur only in the effects of NA. Since NPY is assumed to occur only in the sympathetic nerve terminals and not in the adrenal medulla it might be used as a selective marker of sympathetic nervous activity while the plasma CA also originate from the adrenal medulla and paraganglia. Nine anesthetized 2 w piglets were subjected to 6% CO<sub>2</sub>, 12% O<sub>2</sub> and 6% O<sub>2</sub> for 6 min respectively before and after T (20 mg/kg i.v.). Arferial NA, adrenaline (A) and NPY were measured before and during each gas challenge. CA levels were unaffected by CO<sub>2</sub> and 12% O<sub>2</sub> both before and after T. However, there was a moderate increase in A and NA during 6% O<sub>2</sub> which was greatly enhanced after T (bef. T; A, NN: 0.6-11, NA: 25-87, aft. T; A: 1.5-90, NA: 35-158). NPY levels were increased both during 12% and 6% O<sub>2</sub>, 36-84, 6% O<sub>2</sub>; 137-1687. We conclude that the sympathetic nervous system is substantially activated during hypoxia and theophylline treatment as indicated by the NPY levels, while the adrenal medulla only seem to be considerably activated during hypoxia after theophylline treatment.

hypoxia after theophylline treatment.

ACETAZOLAMIDE AND CEREBRAL VASODILATATION IN THE 105 HYPOTENSIVE NEWBORN PIGLET Andrew Whitelaw and Marianne Thoresen Neurophysiology Dept, Karolinska Institute, Stockholm

A selective cerebral vasodilator could be useful clinically in situations where low blood pressure might lead to cerebral ischaemia.

ischaemia. 8 newborn piglets were anaesthetised, ventilated, paralysed, arterial and venous catheters were inserted and a fontanelle made surgically. Cerebral blood velocity was measured from an intracranial vessel by a 5 MHz computerised Doppler (Vingmed SD 100) system held on the fontanelle. Hypotension was induced by arterial bleeding until mean arterial pressure had fallen by at least 30% or was below 45 mm Hg. Initially the nighter schwed a definite cerebral vasodilator.

Initially the piglets showed a definite cerebral vasodilator response to CO2 but this became minimal or absent when response to CO2 but this became minimal or absent when hypotension occured. The cerebral vasodilatation response to acetazolamide 50 mg/kg IV was also minimal or absent in the hypotensive state although the expected rise in arterial pCO2 and fall in end-tidal CO2 was found. Administration of 6%CO2 after the acetazolamide produced no further vasodilatation. Hypotension induces cerebral vasodilatation in an attempt to maintain cerebral blood flow and further dilatation cannot occur with hypercapnoea or acetazolamide.

## BOTH $\alpha-$ AND $\beta-ADRENORECEPTOR$ (AR) MEDIATED INOTROPIC COMPONENTS (IC) OF NORADRENALINE (NA) ARE REVEALED 106BY REVERSING THE RESPONSE IN MYOCARDIUM BY ADRENER-GIC BLOCKERS (AB). Jan-Bjørn Osnes, Iwona G. Schiander & Tor Skomedal. University of Oslo, Department of Pharmacology, Blindern, Oslo, Norway. (Spon. by Asbjørn Langslet). The contribution of $\alpha$ -AR stimulation (S) to the total inotro-

pic effect (IE) of NA during full  $\beta\text{-}ARS$  has been questioned. The present study reveals a way of demonstrating an  $\alpha$ -AR effect in the presence of full  $\beta$ -ARS by studying the reversal responses to AB at supramaximal NA stimulation in rat papillary muscles. The response was rapidly reversed ( $t_{50} = 2.8 \pm 0.2$  min) by simultaneous addition of the  $\beta$ -blocker timolol and the  $\alpha$ -blocker prazosin. When AB were added sequentially (5-10 minutes apart), two IC in the inotropic response to NA could be demonstrated; new IC which was sensitive to timolol (73.3  $\pm$  6.9 % of total response) and was taken as  $\beta$ -AR mediated and one IC which was sensitive to and was taken as  $\beta$ -Ak mediated and one 10 which was sensitive to prazosin (26.7 ± 5.7 % of total response) and was taken as  $\alpha$ -AR mediated. Thus, there is a significant contribution also from an  $\alpha$ -AR effect. There is a mutual inhibition of one component upon the other as the expression of both  $\alpha$ -AR and  $\beta$ -AR effects was less during combined AR stimulation than when the receptor populations were stimulated separately.

DETERMINATION OF SURFACTANT APOPROTEIN AND PHOSPHO-107LIPIDS IN AMNIOTIC FLUID FOR ESTIMATING FETAL LUNG MATURITY.

H.Nakamura, T.Motoike, K.Sano, M.Matsuo, and T.MATSUO Dep. of Pediatrics, Kobe University, Kobe, Japan.

Padilla Carmencita Dep. of Pediatrics, UP-PCH Medical Center, Philippines Padilla Carmencita Dep. of Pediatrics, UP-PGH Medical Center, Philippines Measurement of disaturated phosphatidylcholine(DSPC) or phospha-tidylglycerol(PG) have been proved to be useful in complicated mothers for evaluating the fetal lung maturity. But the procedure is complicated and takes long time. Kuroki et al.(Ped Res 19: 1017,1935) described a simple immunoassay of the surfactant apo-protein having Wo f 36 KDa and came up with an immunoassay kit incooperated with TEIJIN inst. With this kit,determination can be done within 1 h. We conducted this study to assess the clinical usefulness of this immunoassay kit (kindly provided from TEIJIN inst.) in the evaluation of fetal lung maturity. Twenty-six amniotic fluid samples were examined for levels of surfactant apoprotein, as well as DSPC, and PG. Results were as follows; Cestational Age (weeks) Number Apoprotein Conc.(ug/m1) <30-35 weeks 13 0.412 + 0.08 30-35 weeks 4 0.66 # 2.69 35-41 weeks 9 9.48 # 3.25 The amount of apoprotein was in a statistically significant correlation with gestational age as well as DSPC and PG. This assay kit will provide rapid and accurate information about fetal lung maturity in the clinical field.

100	SURFACTANT IN PREMATURE SURFACTANT DEFICIENT
	RABBITS.
	S Bambang Oetomo*,C Schoots**,B Lachmann***, A Okken*.Depts. of Pediatrics, Div. of Neo-
	A Okken*.Depts. of Pediatrics, Div. of Neo-
	natology*, Pathology**, University of
	Groningen, and Dept. of Anaesthesiology***,
Erasmus University, Rotterdam, The Netherlands.	
To determine the clearance of endotracheally	
instilled artificial porcine derived surfactant (APS)	
from the	lung, premature surfactant deficient rabbits
were sac	rificed at 30, 60, and 120 min. following
surfacta	nt instillation. APS was determined in lung
tissue specimens using a monoclonal antibody against	
APS apoprotein a peroxidase staining technique and a	
counting	grid. In 18 rabbits APS was instilled endo-
tracheally, 6 did not receive surfactant (controls).	
Results:	The number of surfactant positive points in
alveoli	was 38.2±20.0, 13.8±12.0 and 3.3±4.4 at 30, 60,
and 120	min. after instillation resp. (p<0.05). In the
perivasc	ular spaces we found 0, $4.0\pm0.1$ and $14.5\pm7.3$
resp. (p	<0.05). No surfactant positive points were
found in	controls. We conclude that endotracheally
instille	d APS is cleared from the lungs of surfactant
deficien	t premature rabbits within 2 hours. Presumably
via the	lymphatic ducts in the pariyangular sugar
via che	lymphatic ducts in the perivascular spaces.

CLEARANCE OF ENDOTRACHEALLY INSTILLED

100