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SCIENTIFIC PUBLICATIONS OF THE GOVERNMENT¹

PUBLICATIONS OF THE U.S. PUBLIC HEALTH SERVICE

By Dr. ATHERTON SEIDELL

U. S. PUBLIC HEALTH SERVICE

A GREAT majority of the members of the Washington Academy and its affiliated societies are engaged in research in governmental laboratories. They are the authors of the papers in which by far the larger part of governmental research is described. Although the preparation of these papers is in itself a certain satisfaction, since they are the evidence of worthwhile accomplishments, the real purpose of their publication is to aid others engaged in the advancement of science. This, however, is possible only if the papers find their way to persons engaged in research of a similar kind. This link in the chain of scientific progress is usually given very little attention. Most of us consider that our duty is done when our papers are accepted for

¹ Papers presented at the January 21, 1943, meeting of the Washington Academy of Sciences.

publication. We assume that it is the concern of others to obtain them and not ours to render this task less difficult.

The channels through which papers describing additions to scientific knowledge are most widely distributed are the well-known, regularly appearing, and internationally circulating journals, especially those devoted to specific fields of research. In general, our governmental publications meet these specifications to an exceedingly limited degree. They are usually published irregularly, are of a heterogeneous character, and but a very small proportion of any of them ever get beyond the borders of our country. Descriptions of experimental investigations published in them can thus rarely reach workers in other countries who would be able to use them to advantage. solution is a measure of the sulfonamide content of the fluid.

The time for a single determination is exceptionally long, and the color which is formed is stable for no longer than one hour, so that it is impossible to run a large number of samples simultaneously. The nitrogen bubbles which form after the addition of the sulfamate often lead to false readings. The recovery of sulfathiazole from blood is low, and is only about 80 to 85 per cent. when the blood is precipitated in trichloracetic acid in a volume ration of 1:20.

Changes in the procedure have removed all the causes for these objections. In the micro method, the blood is precipitated with trichloracetic acid containing a small amount of sulfuric acid. Then sodium nitrite in excess is added to the filtrate, and ethyl alcohol added to the solution of the diazonium salt. The coupling with N-l naphthyl ethylene diamine is carried out in this solution. It was found unnecessary to add the ammonium sulfamate, the color being more stable in its absence.

It was shown that the blood need not be laked prior to precipitation of the protein in order to obtain complete recovery of the sulfonamides. This is pointed out in Table I, together with comparative results obtained by the Bratton and Marshall procedure.

TABLE I FREE SULFATHIAZOLE LEVELS-(MG PER CENT.)

Subject and dose	E .	Micro method				
	Regular Bratton and Marshall method	Blood pptd. directly	Blood laked before pptn.			
Rabbit— ¹ / ₂ g of STA orally. Blood taken after one hour.	3.0 (trip.)	3.5 (trip.)	••			
Man— 2 g of STA taken orally. Blood taken after two hours.	2.9 (dupl.)	3.6 (dupl.)				
Man— 1 g of STA taken orally. Blood taken after two hours.	2.8	3.3 (dupl.)	3.3 (dupl.)			
Rabbit— ½ g of STA taken orally. Sample after one hour.	3.5 (quad.)	4.0 (dupl.)	4.0 (dupl.)			
Man— 2 g of STA orally. Sam- ple after one hour.	2.3 (quad.)	2.6 (trip.)	2.6 (quad.)			
Man— 2 g STA orally. Sample after 4 hours.	2.7 (trip.)	3.1 (quad.)	3.1 (quad.)			

No interference from bubbles was noticed, because the sulfamate-nitrous acid reaction was eliminated. The time for a single analysis is reduced to about eight minutes. This is to be compared with about forty minutes for the Bratton and Marshall procedure, and about twelve minutes for the Werner procedure.² Recovery of sulfathiazole added to whole blood was 95 to 100 per cent., at a dilution of 1:20, and results on blood of patients who have received the drug were about 15 per cent. higher by the micro method than by the Bratton and Marshall method. This was taken to indicate almost complete recovery of the drug. The color which was formed was stable enough to permit accurate analysis for twenty-four hours.

Substantiating experiments and a discussion of the results will be published elsewhere as soon as the method has been tested under clinical conditions.

The experimental procedure is briefly as follows: Whole blood (0.30 ml) is added dropwise with vigorous shaking to 5.70 ml of "acid mixture" which is prepared by adding 56 ml of 4 N sulfuric acid to one liter of 3.33 per cent. trichloracetic acid. The protein is allowed to coagulate and is filtered through Whatman number 1 or 42 paper. Sodium nitrite solution (0.10 per cent., 0.10 ml) is added to a 2.00 ml aliquot of the filtrate, and three minutes is allowed for diazotization. Ethyl alcohol (1.00 ml) is added, the tube swirled, and 0.10 ml of N-l naphthyl ethylene diamine (0.10 per cent.) added. The color forms to its maximum intensity in fifteen seconds.

The determinations were carried out in flat-bottomed 10 ml vials, and the color intensities measured in micro cuvettes, using a Coleman Universal spectrophotometer. It was also noted that the values could be found with fair accuracy by visually comparing the developed colors with color standards made from a mixture of fuchsin and methyl violet.

S. W. LEE

N. B. HANNAY W. C. HAND

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² M. C. Andrews and A. F. Strauss, Jour. of Lab. and Clinical Medicine, 26: 888, 1941.

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