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H. SIDNEY NEWCOMER, M. D.

June 25, 1945

Harold R. Griffith, M. D.
Medical Superintendent
The Homoeopathic Hospital of Montreal
2100 Marlowe Avenue
Montreal, Canada

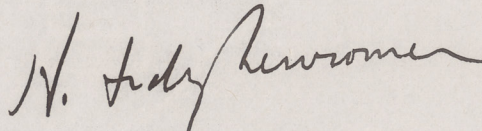
My dear Doctor Griffith:

I thank you very much for forwarding the letter from Professor Macintosh, which I have taken care of as per the enclosed copy.

On the same day that your letter arrived, Dr. Rake had his letter from Professor Macintosh and called me about the matter.

Very truly yours,

E. R. SQUIBB & SONS



H. Sidney Newcomer, M. D.

HSN:dl
Enc.

cc. Dr. Harold R. Griffith ✓

June 22, 1945

June 22, 1945

Professor R. R. Macintosh
Nuffield Department of Anesthetics
University of Oxford
The Radcliffe Infirmary
Oxford, England

My dear Professor Macintosh:

I have just received from Dr. Griffith a copy of your letter to him and have also had a telephone call from Dr. Rake concerning your desire to have some Intocostrin from us, Intocostrin being our standardized physiologically assayed preparation of curare.

I am happy to send you with our compliments, under separate cover, 25 x 10 cc. vials of Intocostrin. This should be sufficient for about fifty patients. We are not able to export freely to England, it being necessary to have an import license which must, I believe, be obtained for each shipment where the shipment is on a commercial basis. Savory and Moore, Pharmacists of London, have had some of our Intocostrin and may still have some. If you would contact them, they will inform you of the steps necessary in order that an import license be applied for permitting them to import for you.

I am very much interested in what you say about Burroughs Wellcome having supplied you with some curare and that the strength of their material is greater than ours. The strength of our material, or, that is, the most suitable dilution, was arrived at empirically and chosen so that accurate dosage can readily be effected for small individuals.

When you state in your letter to Dr. Griffith that you are combining the drug with ether about 5%, do you mean that you are giving the ether intravenously along with the curare?

A number of papers are about to appear in this country relating to the use of Intocostrin with intravenous barbiturate anesthesia. This, to my mind, offers a very promising field for the drug because the Intocostrin permits substantial decrease in dosage of the barbiturate, the relaxation being wholly obtained with the curare. You will be interested to learn that the use of Intocostrin in anesthesia is mounting rapidly and that we believe that it is well over 10,000 doses a month by now.

Although you have undoubtedly seen the papers, I am taking the liberty of sending you under separate cover, for your convenience, copies of such reprints on the use of the drug in anesthesia as I have. We are now preparing a book in which we shall give excerpts from all of the recent articles on curare. There are over one hundred of them. Since, perhaps, you do not

cc. Dr. Harold R. Griffith ✓

Professor R. R. Macintosh

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June 22, 1945

so readily see them, I am sending you also several reprints on the use of the drug in shock therapy in mental disease.

When conditions permit, we hope that Intocostrin will find wide acceptance in England. Presently, we will have available a variant of the product in which the pure d-Tubocurarine crystals are used in making the solution rather than a purified curare extract.

Very truly yours,

E. R. SQUIBB & SONS

H. Sidney Newcomer, M. D.

HSN:d1

I have just received from Dr. Griffith a copy of your letter to Mr. ... and also had a telephone call from Dr. ... concerning your desire to ... Intocostrin from us, Intocostrin being our standardized purified ... preparation of curare.

We are glad you will use our curare, and we are glad to export it to England, it being necessary to have an import license which must, I believe, be obtained for each shipment where the shipment is on a commercial basis. Savory and Moore, Pharmacists of London, have had some of our Intocostrin and say it is very good. If you would contact them, they will inform you of the steps necessary in order that an import license be applied for permitting them to import for you.

I am very much interested in what you say about Intocostrin having supplied you with some curare and that the strength of their material is greater than ours. The strength of our material, or, that is, the most reliable strength, was arrived at empirically and chosen so that someone might be readily affected for small individuals.

As you state in your letter to Dr. Griffith that you are comparing the drug with other about 1/2, do you mean that you are giving the other intravenously along with the curare?

A number of papers are about to appear in this country relating to the use of Intocostrin with intravenous barbiturate anesthesia. This, in my mind, offers a very promising field for the drug because the Intocostrin permits substantial decrease in dosage of the barbiturate, the relaxation being wholly obtained with the curare. You will be interested to learn that the use of Intocostrin in anesthesia is mounting rapidly and that we believe that it is well over 10,000 doses a month by now.

Although you have undoubtedly seen the papers, I am taking the liberty of sending you under separate cover, for your convenience, copies of some reprints on the use of the drug in anesthesia as I have. We are now preparing a book in which we shall give excerpts from all of the recent articles on curare. There are over one hundred of these. Since, perhaps, you do not