

with minimal need for labetalol but it results in a longer recovery from anaesthesia.

M. Maroof MD
R.M. Khan MD
T.H. Bhatti FFARCS
King Fahad National Guard Hospital
Riyadh Saudi Arabia

REFERENCES

- 1 Woodcock TE, Millard RK, Dixon J, Prys-Roberts C. Clonidine premedication for isoflurane induced hypotension, sympathoadrenal responses and a computer controlled assessment of the vapour requirement. *Br J Anaesth* 1988; 60: 388-94.
- 2 Toivonen J, Kaukinen S. Clonidine premedication: a useful adjunct in producing deliberate hypotension. *Acta Anaesthesiol Scand* 1990; 34: 653-7.

Succinylcholine warning

To the Editor:

In October, Burroughs-Wellcome issued a letter to all anaesthetists in Canada advising them against the routine use of succinylcholine in children and adolescents. This letter was based on a few cases presented by Drs. H. Rosenberg and G. Gronert to the FDA, USA. The advisory that succinylcholine, a muscle relaxant that has been in use in paediatric anaesthesia for more than 40 years, should not be used in children and adolescents is reprehensible. At The Hospital for Sick Children, we have established neuromuscular blockade with succinylcholine in hundreds of thousands of infants, children and adolescents without a single death attributable to succinylcholine. Furthermore, the hyperkalaemic response reported is treatable with *iv* calcium provided the diagnosis is considered. It is inappropriate for the pharmaceutical industry to bypass the extensive experience of Canadian clinicians, the Canadian Anaesthetists' Society and the CNS division of the Bureau of Human Prescription Drugs, Canada and issue such a letter!

It is the opinion of the undersigned that succinylcholine will continue to play an essential role in the airway management of infants, children and adolescents under our care.

Jerrold Lerman MD FRCPC
S.E. Berdock MD FRCPC
B. Bissonnette MD FRCPC
B.M. Braude MB BCh FRCPC
P. Cox MB BCh FRCPC
M.W. Crawford MD FRCPC

R.E. Creighton MD FRCPC
B.G. Dodgson MD FRCPC
D.W. Fear MD FRCPC
L.R. Gerus MD FRCPC
E.J. Hartley MD FRCPC
H.M. Holtby MD FRCPC
A.E. Johnston MD FRCPC
S.M. Kemp MD FRCPC
M. Levine MB BCh FRCPC
B.A. Macpherson MD FRCPC
B.G. McIntyre MD FRCPC
M.E. McLeod MD FRCPC
J.E.S. Relton MB FRCPC
G. Robison MD FRCPC
W.L. Roy MD FRCPC
I.A. Sloan MD FRCPC

Department of Anaesthesia
The Hospital for Sick Children
555 University Avenue
Toronto, Ontario M5G 1X8

Erratum

Hudson RJ, Friesen RM. Health care "reform" and the costs of anaesthesia/La réforme des soins de santé et les coûts de l'anesthésie. *Can J Anaesth* 1993; 40: 1120-5.

Please note that in the following reference on p. 1125:

- 2 Morley-Forster P, Newton PT, Cook M-J. Ketorolac and indomethacin are equally efficacious for the relief of minor postoperative pain. *Can J Anaesth* 1994; 41: 1126-30.

the last line should read:

Can J Anaesth 1993; 40: 1126-30.