

says there have been three. As Mark Twain remarked about reports of his own death, they are "considerably exaggerated."

9. In this paragraph Dr. Sussman is quibbling about semantics. We used the term "laminectomy" because it is commonly used, although we are well aware that often "laminotomy" might be more accurate.

Chemoneurolysis gives good results in a satisfactorily high percentage of cases. It is unquestionably safer than laminectomy when used with established precautions and, if it fails to relieve the patient's pain, does not prejudice the results of open surgery later.

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Nutmeg Mydriasis

To the Editor.—It has been suggested that when nutmeg is ingested in quantities sufficient to have a systemic effect, the pupils will dilate.^{1,2} There are many cases of nutmeg poisoning in humans in the literature,

but we were able to find only seven cases in which the condition of the pupils was mentioned.²⁻⁷ This in itself may be of some importance. These seven cases are summarized in the Table.

In three patients, the pupils were described as normal. In two patients the pupils were dilated; patient 6 was described as "agitated and apprehensive" during the examination, and patient 1 was described as "weak." In two, the pupils were constricted. In one case, the patient was semistuporous during the examination; in the other, the observation was made by one of us, who also took nutmeg. He apparently looked in the mirror and noted that even though he had a dry mouth and tachycardia, his pupils were "constricted." All of these examples of pupillary "abnormalities" seen in nutmeg poisoning in humans can be accounted for by physiologic processes: dilation with excitement and apprehension, and miosis in stupor and coma, and, perhaps, with accommodation.

We tried to produce a nutmeg

mydriasis in cats, using an oil of nutmeg preparation that was fatal when given 10 ml/kg intraperitoneally. The oil of nutmeg, when dropped on a cat's cornea or injected subconjunctivally (1 ml), did not change the size or reactivity of the pupil. This suggests either that it has no local pharmacologic action, or that it is not getting into the eye. So, nutmeg oil, 0.1 ml, was injected into the vitreous cavity of one eye of a third cat. Within ten minutes, the pupil on the injected side constricted until it was 3 to 4 mm smaller than the control pupil. The pupil was reactive to light, and no afferent defect was noted. The pupil remained constricted, and on the third day a severe uveitis was seen. This miosis may have been due to the local irritant effect which is common to most volatile oils, but in any case it demonstrates that nutmeg oil has no local mydriatic action in cats.

If anything can be concluded from these observations, it might be that nutmeg does not have an obvious effect on the pupils and that pupillary signs should not be depended on in the diagnosis of nutmeg poisoning in humans.

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Cases of Nutmeg Poisoning in Humans, With Pupillary Findings

Case	Source	Age (yr)/ Sex	Amount Ingested, gm	Vomited	Clinical Findings
1	Hinman ² (1901)	36/F	About 30.0	No	Six hours after ingestion: extremely weak; pulse rate, 150 beats per minute; respirations, 23/min; mouth, dry; pupils, 3/4 dilated, unresponsive to light or accommodation. Recovered next day.
2	Hamond ³ (1906)	34/F	7.0	Yes	Six hours after ingestion: shock-like condition but conscious, restless, and apprehensive; pupils, normal. Recovered next day.
3	Green ⁴ (1959)	28/F	18.3	Yes	Thirteen hours after ingestion: semistuporous; blood pressure, 100/50 mm Hg; pulse rate, 180 beats per minute; respirations, 24/min; pupils, small, no light reaction visible; semistuporous for 12 hours. Restless next day; well by fourth day.
4	Truitt et al ⁵ (1961)	Adult	18.0	No	Eight hours after ingestion: pupils, constricted, sometimes euphoric, sometimes anxious, with dry mouth and tachycardia.
5	Payne ⁶ (1963)	19/M	14.0	No	Five hours after ingestion: agitated and apprehensive; skin, flushed; tachycardia, 148 beats per minute; blood pressure, 152/84 mm Hg; mouth, dry; pupils, normal. Drowsy for 24 hours; fully recovered by 48 hours.
6	Payne ⁶ (1963)	20/M	14.0	No	Five hours after ingestion: agitated, apprehensive, and flushed; tachycardia, 130 beats per minute; blood pressure, 170/90 mm Hg; pupils, dilated but reactive. Drowsy for 24 hours; recovered by 48 hours.
7	Painter et al ⁷ (1971)	21/M	75.0	Yes	Twelve hours after ingestion: semicomatose. Drowsy and restless throughout first day with normal pupils. Recovered next day.

- Walsh FB, Hoyt WF: *Clinical Neuroophthalmology*, ed 3. Baltimore, Williams & Wilkins Co, 1969, vol 1, p 448.
- Hinman EE: A case of nutmeg poisoning. *Albany Med Ann* 22:669, 1901.
- Hamond PW: Nutmeg poisoning. *Br Med J* 2:778, 1906.
- Green RC Jr: Nutmeg poisoning. *JAMA* 171:1342-1344, 1959.
- Truitt EB, Callaway E, Braude MC, et al: The pharmacology of myristicin: A contribution to the psychopharmacology of nutmeg. *J Neuropsychiatr* 2:205, 1961.
- Payne RB: Nutmeg intoxication. *N Engl J Med* 269:36-38, 1963.
- Painter JC, Shanor SP, Winek CL: Nutmeg poisoning—A case report. *Clin Toxicol* 4:1, 1971.

A Supravital Cytochemical Stain For Urinary Sediments

To the Editor.—Time magazine's report (April 28, 1975, p 78) of my paper (231:826, 1975) contained inaccuracies that confused those reading both publications. Three points must be made to set the record straight: (1) The stain was devised as an overall stain for urinary sediments. (2) Our experience with malignant neoplasia was incidental and so far has been limited to 12 cases. (3) The results of such diagnosis of cancer, by evaluating nuclear abnormalities, need verification on a large scale.

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