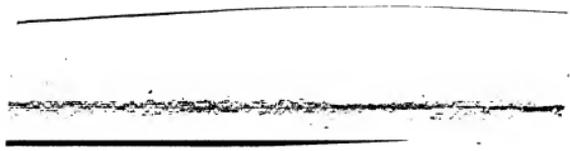


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Transmitted herewith are the clinical reports of tests conducted during July and August 1950. The outside temperature was very high with a constantly humid atmosphere. Tests were conducted in non-air conditioned buildings and estimated inside temperatures ranged from 90 to 100 degrees F.

Test #1

The drug used in this case was sodium amytal intravenously, 5% solution at the rate of 1 cc a minute. The stimulant employed was benzedrine intravenously at the rate of 1 cc a minute plus 10 mg given orally at the completion of the technique.

The intravenous injection was begun at 1332. At 1342, 9.4 cc had been administered. At 1345 the Subject was sound asleep. It was possible to arouse him but in order to obtain the exact state desired intravenous benzedrine, as a stimulant, was administered. At 1405, he was accessible, but his speech was quite thick. At that time 1 cc more of benzedrine was given intravenously following which he was in the proper state for the interrogation. The interrogation and other conversation was continued until 1440 when the Subject was told to go to sleep, which he did. At 1453, he was given 2 cc of the benzedrine solution, following which he became quite wide awake. At 1615, 1 benzedrine tablet was given to be taken orally, the dose being 10. mg.

The Subject had amnesia as to his conversations under the influence of the medication. This test was regarded as successful.

Test #2

The drug used in this case was sodium amytal intravenously, 5% solution given at the rate of 1 cc a minute. The total amount administered was 16 cc or 0.8 gm. The stimulant was benzedrine, 20 mg, 2-5 cc intravenously. A total of 9 cc was given or 36 mg. The injection was started at 1141. At 1152, after the administration of 11 cc of sodium amytal solution, the Subject said his head felt woozy. At 1155, he was nearly asleep but awakened with a start upon being aroused. From that time on, he was occasionally given 1 cc more of the solution in order to maintain the proper state for the technique. At 1230, he was again asleep but easily aroused and the same at 1245.

The desired effect of the medication was obtained. The Subject was interrogated under simulated enemy conditions and he was quite violent upon occasions during the interrogation as he was convinced that the interrogators were his enemies. At 1250, the stimulant was begun and although he gradually awakened, at 1250, after the administration of 7cc of benzedrine solution, he said that he still felt sleepy. He was given 2cc more at 1303. At 1353, he was awake. At 1404, he was sent to eat and then sleep. He said he still felt a little dizzy.

The Subject had amnesia as to his conversations under the influence of the medication. This test was regarded as successful.

#### Test #3

The medication administered was sodium amytal intravenously, 5% solution given at the rate of 1 cc a minute. The stimulants were benzedrine intravenously and picrotoxin intravenously.

The total amount of sodium amytal administered was 16 cc or 0.8 gm. The amount of the benzedrine solution totaled 5 cc or 20 mg was given and 1.5 cc of picrotoxin.

The medication was begun at 1048. At 1106, after 11 cc had been administered, the Subject complained of blurred vision. At 1112, following the administration of 12 cc (total), his eyes seemed heavy. At 1121, after the total administration of 16 cc, he was found to be yawning. At 1127, he was asleep but could be fairly easily aroused. At 1212, the desired effect of the medication was obtained and at 1215 successful interrogation was begun. At 1247, the stimulant was begun, that is, benzedrine intravenously. At 1252, a total of 5 cc had been administered and although the Subject could be aroused, he still seemed quite sleepy. At 1221, picrotoxin was given, a total of 1.5 cc. At 1226, the Subject was awake. However, in the afternoon after having had his lunch, he was visited in his room at 1445 and was found to be sleeping soundly.

The Subject had amnesia as to his conversations under the influence of the medication. This test was regarded as successful.

#### Test #4

The medication in this case was sodium amytal intravenously, 5% solution administered at the rate of 1 cc a minute. The total amount of sodium amytal was 15 cc or 0.75 gm.; The stimulants were picrotoxin intravenously, total 2 cc and benzedrine, 10 mg orally.

The intravenous sodium amytal was started at 1524 with 7 cc being given at the rate of 1 cc a minute and then a few minutes were allowed to elapse to observe the effect following which 2 more cc were given. A waiting period again followed with 3 more cc being given and then again a waiting period followed by 3 more cc and finally 3 cc at 1604. The intermittent nature was to keep the patient at the proper point for the interrogation. At 1610, the administration of 2.5 cc of picrotoxin had been completed. The Subject still slept following this by permission for 5 minutes. He was then awakened. At 1701, 1.5 cc of picrotoxin was administered and at 1705, 0.5 cc of picrotoxin. The Subject, at that time, was awake but said that he felt sleepy. At 1720, 10 mg of oral benzedrine was given.

The Subject had amnesia as to his conversations under the influence of the medication. This test was regarded as successful.

Test #5

The drug used in this case was sodium pentothal. A 2 1/2% solution was given intravenously. The first 10 cc was given at the rate of 2 cc a minute; beyond that, 1 cc a minute. The stimulant was benzedrine, 10 mg orally. The total amount of sodium pentothal was 19 cc of the solution which would represent not quite 0.5 gm. of the drug.

The intravenous sodium pentothal was started at 1109. At 1105, 10 cc had been administered. At 1107, the injection was again started and this continued at 1111, 4 more cc having been administered. At that time, the Subject dozed off but was easily aroused. At 1117, the injection was again started and this continued after the administration of 1 more cc. This procedure of giving 1 cc intermittently was repeated at 1122, 1125, 1130 and 1134.

The original plan was to give an intravenous stimulant but the needle had become clogged due to a blood clot therein and it was believed to be inadvisable to have to make another puncture, hence, the stimulant was given orally at 1222 (10 mg of benzedrine). At 1235, black coffee was administered. The Subject was then instructed to rest for a half of an hour and then eat his midday meal.

The medication was effective as to the desired results. It is believed that when this particular drug, sodium pentothal, is used, the method employed in this case is best, that is, after the initial stage of impaired consciousness be produced, it is advisable to give intermittently small amounts of the drug in order to maintain the desired state. When using sodium amytal, however, due to the more prolonged effect, it is not so necessary to inter-space minute doses in this way. The advantage of sodium pentothal is that it is much easier to have the man back in his normal state in a comparatively short time but it is not certain that the amnesia will be as definite as in the use of the longer acting drug. In this particular case, amnesia for the interrogation was produced. Also sodium pentothal is slightly more dangerous than sodium amytal in the more rapid production of respiratory failure.

The Subject had amnesia as to his conversations under the influence of the medication. This test was regarded as successful.

Test #6

Sodium pentothal, intravenously, was used in this case, 2 1/2% solution at the rate of 1 cc a minute. The total amount of sodium pentothal was 9.4 cc of the solution, representing approximately 0.24 gm of the drug. The stimulant was intravenous coramine.