It was of interest that there was relatively rapid equilibration of anti-pyrene between the circulations. There is no IN VIVO data on humans with which to compare. In the pregnant monkey (11) equilibration of 4 amino antipyrene IN VIVO is much more rapid than our results. The portion of the blood volume exposed to the placenta per minute in those experiments were very small, whereas in our IN VITRO perfusion, the entire blood volume was exposed to the placenta every two to four minutes. We should have expected much more rapid equilibration than the IN VIVO experiment.

We would hope, in the future, that when IN VITRO placental perfusion studies are reported, a more critical evaluation of the adequacy of the perfusion method will accompany the data since our results seriously question the physiological adequacy of this system.


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**In Vivo**

**Correspondence from Our Readers**

**Dear Ed:**

It is always a genuine pleasure and a challenge for me to assist in the establishment of a new dialysis program. The Olive View Medical Center is one of the most remarkable hospitals I've seen. It has a total bed capacity of 850 beds.

This facility will be a twenty bed unit ultimately and will be set up for two (possibly three) six-hour shifts daily. The patients will share machines and we will be utilizing the coil reuse technique.

I would at this point like to define minimum supervision. Mrs. Irene Maples, Head Nurse, will be in charge of training a few R.M.'s and many L.V.N.'s and aides to handle the nursing aspect of dialysis. I will be in charge of training technicians to handle the technical aspect of dialysis and for maintaining the overall quality control of the dialysis unit. The line between the nurse and technician will intersect at many points. This will consist of hooking-up patients, declotting patients, teaching cannula care and other areas formerly taboo in certain parts of the country to the technician.

Yours truly,
Leon C. Forbes
Chief Technician, D Dialysis Unit
Olive View Medical Center

**Dear Sir:**

We have read with interest your Winter Vol. III No. 1, particularly the article on page 18 concerning organs and tissues. While we are pleased that Pyrolite is becoming an accepted material in the area of the prosthetic heart valves, we consider the general statement made concerning the wear life premature. While we consider Pyrolite coatings have excellent wear characteristics, we consider the statement which implies a wear life of about 500 years may be misleading since it is taken out of context and needs additional qualification.

Yours sincerely,
Jack C. Bokros