

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

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National Institute of Mental Health Addiction Research Center U.S. Public Health Service Hospital Lexington, Kentucky

called me on this date concerning diphosphopyridine nucleotide and alcohol. I promised him I would write him concerning the information I have on this.

I have the "Information for Clinical Investigators" prepared by Abbott Laboratoriés. The material is undated and consists of an introductory section which attempts to build up a theoretical background for the use of DPN. The second section is on the chemistry of the material; section 3 on the pharmacology, is blank; section 4 on clinical studies, deals with hangover in nonalcoholic subjects. The studies were done on only 2 men, and apparently there were no measurements on blood alcohol or blood acetaldehyde levels. Section 4B deals with treatment of alcohol withdrawal syndrome, and section 5 with dosage recommendations, after which references, precautions, and contraindications table, and suggested forms are given.

I also have a paper, "Pyridine nucleotides in the prevention, diagnosis and treatment of problem drinkers" by Paul O'Hollaren, West. J. Surg., 69: (2) 101-104, 1961.

The material in both of these reports is unconvincing, but possibly some little work might be indicated. Since the theoretical background is hypothesized, more rapid removal of acetaldehyde, determinations of blood alcohol, and blood acetaldehyde levels should be done if behavioral changes indicate any gross effects on either drunkenness or hangover.

As I also told Dr. Treichler, I am embarking on a study of cross tolerance between scopolamine and JB-318 and ISD. We are just beginning the first phase, which will involve determination of proper dose range for scopolamine and JB-318 intramuscularly. Following this, comparative potency evaluations will be made, after which the chronic tolerance phase would be undertaken.

Sincerely,

Harris Isbell, M.D.

Director

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