

June 1, 1970

Dr. Henry Adams
University of Georgia
Athens, Georgia

Dear Dr. Adams,

My associates and I have read your recent report, "Electroconvulsive Shock, Brain Acetylcholinesterase Activity and Memory" with considerable interest. We would like to become acquainted with any subsequent studies from your laboratory.

As you are aware, Ulett and his co-workers were unable to replicate their findings, even with higher dosages of atropine (cf. Johnson et al., Arch gen Psychiat., 2:324-336, 1960). In reviewing their experiences, and our own with various anticholinergic drugs, we became concerned that studies (particularly in man) that depended on the anticholinergic effects in the central nervous system were often unsuccessful because the peripheral effects of atropine exceed the central effects, especially at low dosages. While the same is less true for scopolamine, this compound also has extensive peripheral effects. We tested a variety of active anticholinergic drugs and reported that benactyzine, Ditran and diethazine seemed to elicit a higher degree of central activity in proportion to their peripheral effects. (cf. EEG clin. Neurophysiol., 12:359-369, 1960).

Some time ago, I reviewed the available data on central anticholinergic and cholinergic activity and the convulsive therapy process, and I am taking the liberty of enclosing a reprint that may be of interest.

Again, our congratulations on a nice piece of work.

Sincerely yours,

Max Fink, M.D.
Professor of Psychiatry

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