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TO: Faroukh Maneksha
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From: Max Fink

Subject: Follow-up on trimethaphan study

Now that the dose range of trimethaphan has been defined, we should use a similar design to study the relative efficacy [and safety] of a beta-blocker compared to trimethaphan.

Attached is the output of abstracts from a search of the *ECT Database* for the substances **labetalol**, **esmolol**, and **nitroglycerine**, post-1987. Would you review these and select one as a contrast for trimethaphan? Can you define a commonly used dose? Is there a design that you favor?