Investigación Clínica
Apartado Postal N° 1151 — Maracaibo - Venezuela

Summaries

Investigación Clínica. N° 28. 1968.

MOLINA, R. A.; MARTINEZ, J. T.; SOLARTE, C.; FERNANDEZ, G. E. **"Norgestrel-Ethynilestradiol in the therapy of abnormal uterine bleeding".** Invest. Clín. Nº 28: 9-21. 1968.

Low dosage of Norgestrel and Ethynilestradiol was used in combination in order to arrest bleeding in 80 patients; including cases of dysfunctional uterine bleeding, and bleeding associated with chronic endometritis, fibroids, intrauterine contraceptive devices and ovarian tumors. Bleeding was stopped within the first 24 hours in 18 cases (22.5 %). The results of withdrawal bleeding are discussed. The endometrial morphology before and after therapy is presented. It is concluded that the Norgestrel - Ethynilestradiol combination is useful and might have an indication in the above mentioned conditions.

LUZARDO-BAPTISTA, M. J.; GARCIA-TAMAYO, J. **"Ultrastructure of the basal lamina and basal cells of the epithelium of the normal human oral mucosa".** Invest. Clín. Nº 28: 23-40. 1968.

Electron microscopic findings in 10 normal gums, at the level of the basal lamina are reported, after fixation with glutaraldehyde and osmium tetraoxide. Embedding in Araldita or Epon-Araldita, and stained with uranyl acetate solution and lead citrate. The basal lamina is a band of 600 A thick, separated from the cell membrane by a light zone. Fine filaments join the basal lamina to the cell membrane at the level of the half-desmosome. The basal cells present half-desmosomes and desmosomes, mitochondrias, granular reticulum, Golgi complex, melanin, glycogen and filaments. The probable chemical nature of the basal and lucid lamina is discussed in relation with the existing knowledge in other epithelial tissues.

The possibility that the oxidative metabolism be more active in the basal cells, than at other levels of this epithelium is considered. We reported that the cellular space of the desmosolateral dense lines in the interme are continous with the outermost leaflet of the cell membrane.

CASTEJON, O. J. **"Ultrastructure of the molecular layer of the human cerebellar cortex".** Invest. Clín. Nº 28: 41-66. 1968.

Four surgical biopsy specimens of the cerebellar cortex obtained from four patients with intracranial tumors were studied. The tissue was primarily fixed with glutaraldehyde, post-fixed with osmium tetraoxide and embedded in Epon. Purkinje cell dendrites show dendritic canaliculi, endoplasmic sacs and numerous mitochondria. Parallel fibers establish Gray's type I synaptic contacts with the expanded ends of Purkinje dendritic spines by means of "boutons de passage". These boutons contain numerous agranular synaptic vesicles ranging from 290 to 470 A in diameter, a smaller proportion of 660 to 930 A agranular vesicles and ocassionally in a few parallel fibers one or two dense-cored vesicles, about 660 to 930 A in diameter. The Purkinje cell dendrites, the parallel fiber bundles and the axo-spinodendritic synapses show a glial envelope, astrocytic in nature, presumably Bergmann fibers or Fañanas glia. The stellate neurons contain scarce rough endoplasmic reticulum canaliculi and numerous free ribosomes. The cell organelles, such as mitochondria and Golgi complex, exhibit a swollen appearance presumably reflecting perifocal edema or poor fixation. The nucleus contains a well developed nucleolus. Axo-somatic synapses were observed. The findings are discussed in relation with the existing knowledge in several vertebrates.

PICADO S., F. **"Contribution to the study of neurocysticercosis in Venezuela".** Invest. Clín. Nº 28: 67-125. 1968

Studies were made of twenty eight cases of neurocysticercosis which entered the Neurology Department and other Sections of the University Hospital, Caracas, during the period May 1957 to March 1968. Seventy five percent of the patients were of the male sex, and the greater incidence ocurred between the third and fifth decades of life. Fifty seven percent of the patients originated from the Federal Dis-

trict and Central States (Miranda, Carabobo and Aragua) and fourteen percent from the Andes States: Trujillo, Mérida and Táchira. Twenty cases were classified as an intracranial clinical form and their predominant symtoms were endocranial hypertension (100%), epileptic manifestations and focal signs. The results of the examination of the spinal fluid showed a pleocytosis consisting mainly of lymphocytes in seventy four percent of the cases. Chlorides and glucose were normal. Fifty two percent of the cases had high protein values in the spinal fluid. The importance of certains guiding details of the diagnosis stood out, above all, in cysticercosis of the posterior fossa, when ventriculography was practiced. From this study, it can be concluded that EEG indicates abnormality but not localization. The only effective treatment is surgery. Anatomopathologically, all the cases with neurological symptomatology, had an intraventricular and/or meningeal localization. The supratentorial parenchymal localizations did not present neurological pictures, and when they did, it was due to the fact that they coexisted with intraventricular cysticerci. The importance of neurocysticercosis as a sanitary problem is made evident and the preventive measures which are necessary for the control of this parasitosis are mentioned.