rat experiments (Xu *et al*, 2000). The absence of similar findings in mouse experiments does not imply that ibogaine is safe in humans. Reports of eight deaths after ibogaine use between 1990 and 2006 have been compiled (http://myeboga.com/fatalities.html). This source notes that more deaths might have occurred but might have not been reported owing to the 'underground nature of ibogaine treatment'. One death occurred at a dose of 4.5 mg/kg orally, a much lower dose than used in the rat experiments. Health problems associated with substance misuse or potentiation of ibogaine toxicity when used with heroin have been implicated. Alper *et al* (1999) when referring to one of the fatalities quoted Vocci, the Director of the Medication Development Division, National Institute on Drug Abuse (MDD–NIDA), that 'this incident was a significant factor in the decision not to pursue a clinical trial of ibogaine following the NIDA review meeting held in March of 1995'.

The antagonism at the $\alpha_3\beta_4$ nicotinic receptor should have been highlighted as a therapeutic target for the modulation of drug seeking but this would not have changed our conclusions since we have not doubted the potential efficacy of ibogaine. However, we maintain that ibogaine and *iboga* extracts may not be safe and thus should not be recommended. Ibogaine derivatives with an improved therapeutic index may prove clinically useful in the future. These are likely to be synthetic, thereby leaving the realm of complementary medicine.

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One hundred years ago

The Medico-Psychological Association of Great Britain and Ireland

THE quarterly general meeting of the Association was held on Thursday, May 31st, at the Medical Society's Rooms, Chandos Street, London, W., under the presidency of Dr. OUTTERSON WOOD.

Epilepsy and changes in the blood and nervous system

Dr. JOHN TURNER read a paper entitled The Relation of Epilepsy to Changes in the Blood and Central Nervous System. He stated that epilepsy was the result of a double cause or tendency, the one an inherently-defective nervous system from a hereditarily-vicious organization, and the other some morbid condition of the blood whereby it shows a special tendency to intravascular clotting, and that the immediate cause of the fits is sudden stasis of the blood stream, resulting from the blocking of cerebral vessels by these intravascular clots. The fits he regarded as only a symptom of the general epileptic condition. Further investigations were related as to the coagulability of the blood in epileptics, which was shown to increase at the times of *petit mal*, *grand mal*, and stasis. Forms of changes in the nerve cells were shown, resembling those described as *réaction à distance*, and persistence of large numbers of subcortical nerve cells was shown. The author also referred to experimental work by ligature of the cerebral arteries in the dog, with acute forms of cell changes. The blood was shown to have a large number of blood plates, and specimens were shown of different forms of intravascular clotting, probably in a large measure derived from amalgamation of the blood plates. Small cortical haemorrhages were also described and shown on the screen, which could be traced to rupture of a vessel blocked up by the clots of coagulated blood referred to.

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