ANESTHESIOLOGY REFLECTIONS

The Infant Lungmotor

During and after World War I, Chicago's Life Saving Devices Company promoted its “Infant Lungmotor” for resuscitating young victims of drowning, smoke inhalation, and birth asphyxia. During such crises, an assistant would apply the device’s facemask to the apneic infant as the lead resuscitator would hand-pump air through two lengths of metal tubing connecting the distal end of the Lungmotor to the double-nippled mask. Air or oxygen volume delivered per “Lungmotor breath” could be reduced by inserting the attached piston-limiting pin into slots designated for “SMALL”- or “MEDIUM”-sized infants. By 1928, Yale physiologist Yandell Henderson would record in JAMA that these Lungmotors were “inevitably applied neither gently nor moderately.” (Copyright © the American Society of Anesthesiologists, Inc. This image appears in color in the Anesthesiology Reflections online collection available at www.anesthesiology.org.)

George S. Bause, M.D., M.P.H., Honorary Curator, ASA’s Wood Library-Museum of Anesthesiology, Park Ridge, Illinois, and Clinical Associate Professor, Case Western Reserve University, Cleveland, Ohio. UJYC@aol.com.