

Despite all this, it was not until August 1996 that **Alcon** approached the FDA about withdrawal of its approval of various drugs, including related. N61 FR40649 covers drug products no longer marketed but leaves them open for future use, as there was no question as to Pantopaque's safety.

In 1996 Lidov et al. ([\[1\]](#)) wrote about a patient with Pantopaque in the basal cisterns, mimicking thrombosed intracranial aneurysm.

Tabor and Batzdorf (Los Angeles) in the journal Neurosurgery described a case of a thoracic Pantopaque cyst and associated syrinx resulting in progressive spastic paraparesis. ([\[2\]](#))

In the same year, Laitt, Jackson and Isherwood from Manchester Royal Infirmary, UK, described patterns of chronic adhesive arachnoiditis following Myodil myelography. ([\[3\]](#))

This followed a previous paper by Hughes and Isherwood in 1992 ([\[4\]](#)), which suggested,

"it is rare for Myodil to produce symptomatic arachnoiditis."

In the 1996 paper, the authors concluded,

"chronic adhesive arachnoiditis is significantly related to previous Myodil myelography in the presence of spinal stenosis or previous surgery but that Myodil alone rarely produces these changes."

Of course, this brings to mind Glaxo's argument that by definition, people needing a myelogram already have a spinal condition, which must therefore make it more likely rather than less that they will suffer the consequences of dye plus mechanical abnormality, and of course, if the myelogram is positive the surgery is rather more likely than not and thus again the risks are compounded (they cannot have it both ways!)

[1] [Lidov MW, Silvers AR, Mosesson RE, Stollman AL, Som PM.](#) *J Comput Assist Tomogr.* 1996 Mar-Apr; 20(2): 225-7. Pantopaque simulating thrombosed intracranial aneurysms on MRI.

[2] [Tabor EN, Batzdorf U.](#) *Neurosurgery.* 1996 Nov; 39(5): 1040-2. Thoracic spinal Pantopaque cyst and associated syrinx resulting in progressive spastic paraparesis: case report.

[3] [Laitt R, Jackson A, Isherwood I.](#) *Br J Radiol.* 1996 Aug; 69(824): 693-8. Patterns of chronic adhesive arachnoiditis following Myodil myelography: the significance of spinal canal stenosis and previous surgery.

[4] Hughes DG, Isherwood I. *Br J Radiol.* 1992 Sep; 65(777): 758-60. How frequent is chronic lumbar arachnoiditis following intrathecal Myodil?