definite bearing on the usefulness of any column packing prepared. The performances of the seven supports mentioned previously were examined under the same operating conditions. The supports that can be used for lightly loaded packings are: glass beads, Gas Chrom-P, and Chromosorb W-HMDS. The other four supports cannot be used for lightly loaded column packing since their interaction with the antihistamines causes excessive peak tailing.

The hydrogen flame detector used in conjunction with the 0.010-in. stainless capillary column would not respond to compounds with boiling points above 330°. This limitation prevented evaluation of this column for the analysis of these antihistamines.

The 100-ft. 0.065-in. copper open tubular column was coated with XF-1150 and evaluated using the above group of antihistamines. The Sr^{90} ionization detector was used with a column flow of 36 ml./minute. The retention times obtained were comparable to the 6-ft.-XF-1150 packed column, but the peak base widths were considerably wider. Because of this increase in base width, the 0.065-in. column was less efficient than the 6-ft. packed column.

A 250-ft. 0.065-in. column wound on a $1^1/_4$-in. diameter mandrel has been reported to be more efficient than a packed column (15). There are two possible reasons why efficiency was less than previously reported: (*a*) the column was shorter (100 ft.), and (*b*) the winding configuration was markedly different. The column was wound on a $1^1/_4 \times {}^1/_4$-in. bar which resulted in a definite flattening of the tube around the edge of the bar.

CONCLUSIONS

The antihistamines investigated, except for meclizine, can be separated, identified, and concentration estimated using the Carbowax 20M, PDEAS, and XF-1150 columns described. The PDEAS column is the most efficient of the three for the analysis of antihistamines.

The usefulness of the 0.010-in. capillary and the 0.065-in. open tubular columns cannot be properly evaluated until the mentioned limitations are removed.

REFERENCES

(1) Brochmann-Hanssen, E., and Svendsen, A .B., THIS JOURNAL, 51, 318(1962).
(2) Cieplinski, E. W., *Anal. Chem.*, 35, 256(1963).
(3) Parker, K. D., and Kirk, P. L., *ibid.*, 33, 428(1963).
(4) *Ibid.*, 33, 1378(1961).
(5) Brochmann-Hanssen, E., and Svendsen, A. B., THIS JOURNAL, 51, 938(1962).
(6) Parker, K. D., Fontan, C. R., and Kirk, P. L., *Anal. Chem.*, 34, 1345(1962).
(7) Fales, H. M., and Pisano, J. J., *Anal. Biochem.*, 3, 337 (1962).
(8) Parker, K. D., Fontan, C. R., and Kirk, P. L., *Anal. Chem.*, 34, 757(1962).
(9) Anders, M. W., and Mannering, G. J., *J. Chromatog.*, 7, 258(1962).
(10) Parker, K. D., Fontan, C. R., and Kirk, P. L., *Anal. Chem.*, 35, 356(1963).
(11) Fontan, C. R., Smith, W. C., and Kirk, P. L., *ibid.*, 35, 591(1963).
(12) Zubyk, W. J., and Conner, A. Z., *ibid.*, 32, 912(1960).
(13) Averill, W., "Progress in Industrial Gas Chromatography," edited by Szymanski, H. A., Plenum Press, New York, N. Y., 1961, p. 225.
(14) MacDonald, A., Jr., and Pflaum, R. T., THIS JOURNAL, 52, 816(1963).
(15) Quiram, E. R., *Anal. Chem.*, 35, 593(1963).

Castor Oil as a Vehicle for Parenteral Administration of Steroid Hormones

By C. RIFFKIN, R. HUBER, and C. H. KEYSSER

Steroid hormones may be administered parenterally in high concentrations as oil solutions. In this form they exhibit a prolonged action and reduce the number of injections required. To accommodate the demand for increasingly greater concentrations of hormones in solution, castor oil in combination with other suitable oil-miscible solvents, has been found to fulfill a need. The development of several formulations together with the results of animal testing, as well as clinical trials in humans, attest to the acceptability of this oil for the purposes intended.

FIXED OILS are included in the "United States Pharmacopeia XVI" as nonaqueous vehicles for injection and are characterized as being of vegetable origin, essentially odorless, and without suggestion of rancidity. They must also comply with certain measurable physical limits specified for the saponification, acid, and iodine values.

Received September 9, 1963, from the Pharmacology and Pharmaceutical Research & Development Sections, Squibb Institute for Medical Research, New Brunswick, N. J.
Accepted for publication November 19, 1963.
The authors are indebted to the Chemical Control Laboratories for their assistance with the assays; to Dr. N. Coy and H. Roberts of the Physical and Analytical Section, for their development of special assays; to G. Lockwood of the Pharmacology Section for the animal muscle irritation tests; and especially to Dr. E. C. Reifenstein, Jr., of the medical staff, for the information concerning the clinical trials.

After subcutaneous injection, Deanesly and Parkes (1) observed the persistence of olive oil and castor oil in animal tissue. Comparing other oils Brown, *et al.* (2), reported that sesame and corn oils were superior to cottonseed and peanut oils because they were less irritating, less antigenic, more quickly released from tissue, and possessed superior physical properties.

More recently the use of steroid hormone medication has expanded considerably. Due to limited water solubility, hormones have been administered as aqueous suspensions or solutions in oil. It has been claimed that the latter provided the slow release preferred in cyclical

TABLE I.—ANALYSIS OF COMMERCIAL OILS AND COMPARISON TO U.S.P. XVI SPECIFICATIONS

Oil	Lot No.	ml. 0.02 *N* NaOH Equiv. to Free Fatty Acid in 10-Gm. Sample	Sapon. Value	Iodine Value
Castor Oil	U.S.P. specs.	35.0[a]	179–185	83–88
	23946	14.0	183.3	84.8
	25589	4.6	179.8	87.0
	23463	7.9	182.7	84.5
	33742	9.2	180.4	84.2
Sesame Oil	U.S.P. specs.	3.0	188–195	103–116
	23549A	0.5	189.6	106.9
	26953	1.4	194.0	111.8
	33646	0.75	189.6	104.7
	29981	0.45	191.7	108.2
Cottonseed Oil	U.S.P. specs.	2.0	190–198	109–116
	49684	...	195.9	111.8
	44441	...	196.3	113.1
Corn Oil	U.S.P. specs.	2.0	187–193	102–128
	52148	1.0	194.5	119.1
	36716	1.2	191.4	124.4
	33436	1.2	189.3	125.0
	33715	1.0	189.3	123.0
Peanut Oil	U.S.P. specs.	2.0	185–195	84–100
	22160	1.2	192.0	94.4
	20993	1.4	191.7	93.2
	33622	0.8	193.1	87.8
	26147	1.2	190.4	93.9

[a] The U.S.P. specifies that the titration of free fatty acids in oral grade castor oil shall not exceed 7 ml. of 0.1 *N* NaOH which is equal to 35.0 ml. of 0.02 *N* NaOH.

TABLE II.—SOLUBILITY OF STEROIDS IN U.S.P. OILS AT 25°

Steroid	mg./ml. Castor Oil	mg./ml. Sesame Oil	mg./ml. Peanut Oil
17-Hydroxyprogesterone caproate	55.6	23.4	27.9
Testosterone	38.6	5.4	8.1
Estradiol valerate	60.6	16.1	18.8
Progesterone	52.0	22.9	23.5

therapy (3). Using withdrawal bleeding in human females as the criterion, Master, *et al.* (4), compared the duration of action of an aqueous suspension of progesterone with an oil solution, and confirmed the superiority of the latter. The prolongation of activity was generally related to storage in the fatty depots of the body (5).

In 1952 Junkmann (6) determined that a testosterone ester dissolved in sesame oil prolonged the androgenic effects in castrated rats. Davis and Wied (7) demonstrated that prolonged activity was also obtained in humans when oil solutions of a progesterone derivative were injected. There was still a limiting factor, however, in that only a relatively small amount of hormone could be dissolved in the traditional oils. To increase the solvent power of the oil it was necessary to add compatible and nonirritating cosolvents. Such additions consisted of benzyl benzoate, benzyl alcohol, ethyl lactate, ethyl oleate, etc. The U.S.P. recognized the need for such "other vehicles," with the restrictions that they must be safe in the volume of injection administered, and that they should not interfere with the therapeutic efficacy of the preparation or its testing.

Demand for increased hormone concentrations per dose, furthered the search for an acceptable oil with greater solubilizing power *per se*. Boschann (8) in 1954, observed that 17-hydroxyprogesterone caproate in a castor oil–ethyl lactate vehicle was well tolerated. In addition, private communications from clinicians in West Germany[1] reported good tolerance to Proluton-Depot containing a castor oil–benzyl benzoate vehicle. Since then other hormones have been used as solutions in ricinoleic acid esters, as well as in castor oil (9–11). Accordingly, an investigation was undertaken into the suitability of castor oil as a vehicle for parenteral administration of steroid hormones.

METHODS AND RESULTS

Representative samples of U.S.P. oils obtained from commercial sources were tested in accordance with the official method for free fatty acid content, saponification, and iodine values. The results are listed in Table I along with the U.S.P. XVI specifications for these oils.

Solubility of selected steroids in various oils was determined in the following manner. An excess of steroid was stirred for 4 hours at room temperature (25°) in the test oil, after which the undissolved solids were removed by filtration, and the clear solution assayed for steroid content. Table II shows the results obtained.

An attempt was made to reduce the free fatty acids in castor oil by treatment with alumina and anhy-

[1] Dr. Napp, Universitats-Krankenhaus, Hamburg; Dr. Pots, Humboldt-Universitat-Charite Frauenklinik, Berlin; Dr. Prill, Universitats-Frauenklinik, Wurzburg; and Dr. Rauscher, Universitats-Frauenklinik, Vienna.

TABLE III.—ABSORPTION OF OIL FROM ANIMAL MUSCLE[a]

Days after Injection	Oil	ml. 0.02 N NaOH Equiv.	Residual Oil in Muscle (estd.)
1–3	Castor oil (aged)	50	1 day —50% 3 days—20%
1–3	Castor oil U.S.P.	13	1 day —30% 3 days—10%
1–3	Sesame oil U.S.P.	1.4	1 day —30% 3 days—30%
7–60	All oils	...	Declining 10 to 2%

[a] 1 ml. injected into back muscle of rabbit.

drous sodium sulfate. Three grams of dried, powdered, amorphous aluminum oxide (Merck No. 1097) and 6 Gm. of anhydrous sodium sulfate, reagent grade, were suspended in 120 ml. of oil and heated at 80° under a blanket of nitrogen for 1.5 hours. After allowing the oil to cool to room temperature, the solids were filtered off and the acids titrated in the usual manner. A significant reduction in free fatty acid was not obtained.

The absorption characteristics of oils with varying fatty acid content were examined and compared on a biological basis. Aged castor oil with a high free fatty acid content was compared to fresh U.S.P. castor oil with a low acid content and U.S.P. sesame oil by injecting 1 ml. of oil into the back muscles of rabbits, approximately 2 in. from the iliac crest. A rotational pattern of injection was used and the oil samples were stained to aid visibility in the tissues. The animals were sacrificed and the muscles excised and examined grossly. The results were averaged and appear in Table III.

The test disclosed that oil migrated or was carried to the fascia, and very small amounts remained for 60 days. Localized degeneration produced by the high acid value castor oil was essentially healed in 7 days, and the low acid value castor oil appeared to be no more irritating than sesame oil.[2]

In a specific test for irritation 0.25 ml. of the above oil samples were also injected into the *vastus lateralis* muscles of rabbits. After 2 days the animals were sacrificed and the injected muscles examined grossly for evidence of irritation. It was found that the castor oil containing a high level of free fatty acid produced a lesion size measuring approximately 121 mm.[2]. The lesion itself was characterized mainly by degeneration of local tissue without necrosis. Castor oil with low free fatty acid and sesame oil, on the other hand, produced no measurable lesion at the injection site.

Combinations of benzyl alcohol and benzyl benzoate with both castor oil and sesame oil were also injected into the *vastus lateralis* muscles of rabbits and Table IV lists the lesion sizes produced.

Solutions which were formulated for clinical trials in humans were prepared by dissolving the steroid hormones in appropriate vehicles at 60° under nitrogen. The solutions were then filtered through a coarse sintered-glass filter with the aid of nitrogen pressure, filled into vials, and sterilized by autoclaving for 2 hours at 121° (15 lb. steam pressure). The products were then submitted for assay, safety, and animal muscle irritation testing prior to release for clinical investigation.

[2] Due to the apparent increase in free fatty acids with aging, subsequent work utilized fresh oils which required for neutralization less than 3 ml. of 0.1 N NaOH (15 ml. of 0.2 N NaOH) per 10 Gm. of sample.

DISCUSSION

Throughout the investigation it was desirable to have a reference oil to serve as a basis for comparison. Since sesame oil is universally accepted as a parenteral oil vehicle, it was chosen as the "standard" vegetable oil to be compared to castor oil, with and without other cosolvents. The physical, chemical, and biological properties of sesame oil are well documented and require no comments here.

Chemically, castor oil consists of the triglycerides of ricinoleic acid, together with small quantities of glycerides of other acids. The quantitative composition is given by Eckey (12) as follows: ricinoleic acid 87%, oleic acid 7.4%, linoleic acid 3.1%, dihydroxyricinoleic acid 0.6%, and miscellaneous acids 2.4%. Two grades are commonly recognized in this country—U.S. No. 1 which is cold pressed oil, and U.S. No. 3 which is oil extracted from the pressed cake. Only the former is used for medicinal purposes.

The high viscosity of castor oil compared to other vegetable oils is undoubtedly related to hydrogen bonding and it is probably the hydroxy groups which contribute to the greater polarity and superior solvent power of the oil. As indicated in Table I, the saponification and iodine values of commercial castor oil appear to be slightly lower than the U.S.P. XVI limits for oils used for injection. On the other hand, the content of free fatty acids even in fresh oil, varies considerably and exceeds the traditional limits for injectable oils. The significance of this is somewhat obscure, although "Remington's Practice of Pharmacy, 12th edition," page 387, states "a low free fatty acid content is essential since it indicates a fresh and pure product and not one that is likely to have become old and heavily contaminated with bacterial products."

Despite better solubility of steroids in castor oil, other cosolvents were necessary to dissolve the

TABLE IV.—LOCAL IRRITATION PRODUCED IN RABBIT MUSCLE BY INJECTION OF VARIOUS OIL VEHICLES[a]

Identification	Composition	Lesion size, mm.[2]
SHY-47-2	Sesame oil 98% Benzyl alcohol 2%	61
SHY-47-4	Castor oil 98% Benzyl alcohol 2%	Too small to measure
SHY-47-3	Sesame oil 95% Benzyl alcohol 5%	506
SHY-47-5	Castor oil 95% Benzyl alcohol 5%	106
SHY-14-2	Sesame oil 65% Benzyl benzoate 35%	291
SHY-14-5	Castor oil 65% Benzyl benzoate 35%	184
SHY-47-6	Sesame oil 63% Benzyl benzoate 35% Benzyl alcohol 2%	207
SHY-47-7	Castor oil 63% Benzyl benzoate 35% Benzyl alcohol 2%	262
SHY-14-3	Sesame oil 50% Benzyl benzoate 50%	291
SHY-14-6	Castor oil 50% Benzyl benzoate 50%	158

[a] A 0.25-ml. quantity of the oil vehicle was injected into the *vastus lateralis* muscle of the rabbit. Two days later the muscle was excised and the lesion size measured in mm.[2].

increasingly higher concentrations required by therapeutic regimens. Often these materials contributed additional advantages. For example, the addition of benzyl alcohol or benzyl benzoate to castor oil resulted in a lower and more favorable viscosity, making it easier to inject. Also, benzyl alcohol was an effective preservative and local anesthetic.

The nature of the irritative response depended on the particular hormone, its concentration in the formulations, and/or the composition of the vehicle. Although rabbit muscles are more sensitive than human muscles, they were selected primarily because local changes in the muscle were observed easily. It was not always possible, however, to correlate muscle irritation in animals to that of humans.

A numerical assignment to lesion size was used solely as a convenience for grading response. The numbers alone do not adequately describe the nature of the response, however. More completely it is characterized by the amount of hemorrhage and edema and the incidence, degree, and extent of local degeneration produced by the injection. A slight, reversible irritative response may cover a large area and a severe irreversible one may be comparatively small. A decrease in the size of the degenerated area indicates a reversible condition. The presence of necrosis, which is the most damaging situation, means that the cellular structure was destroyed and repair must take place. The debris must be removed and the original cellular mass in the area replaced with fibrous connective tissue. The extent of this fibrosis or formation of scar tissue gives an index of the amount of irreversible damage. Fortunately necrosis was not encountered, indicating the lack of permanent muscle damage. Since these changes take time, final assessment of the effects of an injection in the muscle frequently required observation for 7 days or longer.

It is unfortunate that pain cannot be measured by any known method of animal testing. The animal usually does not respond unless the painful stimulus is marked. Furthermore, the pain caused by injection into human muscle is not usually proportionate to the irritation produced either in animal muscle or in human muscle. Realizing that these limitations are inherent in animal test methods, it remained for final acceptability to be determined in man.

When it was discovered that 17-hydroxyprogesterone caproate possessed high progestational activity, potencies of the order of 65 mg./ml. were used. By increasing the dose, additional prolongation of action was obtained, and eventually concentrations of the order of 250 mg./ml. were required. Such a solution in sesame oil produced acceptable animal muscle tolerance, but the pain and local reaction in humans was so great as to prohibit the adoption of the formulation as a commercial product (see Table V, Lot Pr. 142-53/15-10).[3] Solutions were also prepared using castor oil as the vehicle, and Table V lists the formulations tested and the results obtained. Information obtained from the clinical trials (14–21) attested to the acceptability and safety of the adopted formulations.

Inherent in the development of an acceptable formulation of 17-hydroxyprogesterone caproate was the required development of a suitable assay method. This was accomplished by Roberts and Florey (13) using paper-strip chromatography.

Since estrogens are more potent than progestogens and require less per dose, an acceptable formulation of estradiol valerate was easier to prepare. Besides use in estrogen therapy, estradiol valerate has found utility in the treatment of carcinoma, and for that purpose high dosages were required. Concentrations were increased from 10 to 40 mg./ml. and

[3] Reactions in excess of 5–6% were considered unacceptable.

TABLE V.—EVALUATION OF 250 MG./ML. 17-HYDROXYPROGESTERONE CAPROATE SOLUTIONS IN VARIOUS OIL VEHICLES

Vehicle Composition	Animal Muscle Lesion Size, mm.[a]	Lot Number and Remarks on Clinical Testing
Sesame oil 50% Benzyl benzoate 50%	1049	Pr.142-53/15-7—238 injections, 20.6% reactions, rejected
Castor oil 58% Benzyl benzoate 40% Benzyl alcohol 2%	691	Pr.142-53/15-8—270 injections, 23.2% reactions, rejected
Sesame oil 60% Benzyl benzoate 35% Benzyl alcohol 5%	697	Pr.142-53/15-10—189 injections, 10.7% reactions, rejected
Castor oil 54% Benzyl benzoate 46%	258	Pr.142-53/15-11—503 injections, 4.2% reactions, accepted
Castor oil 52% Benzyl benzoate 46% Benzyl alcohol 2%	633	Pr.142-53/15-13—924 injections, 1.3% reactions, accepted

[a] Injection of 0.25 ml. into *vastus lateralis* muscle of rabbits and lesion size determined 2 days after injection.

TABLE VI.—EVALUATION OF ESTRADIOL VALERATE IN VARIOUS OIL VEHICLES

Composition	Animal Muscle Lesion Size, mm.[a]	Lot Number and Remarks
20 mg./ml. in Castor oil 78%, Benzyl benzoate 20%, Benzyl alcohol 2%	197	Es.31-53/15-B—Commercially available
30 mg./ml. in Sesame oil 60%, Benzyl benzoate 40%	306	DEK-98-2—Not tested clinically; dosage increased to 40 mg./ml.
30 mg./ml. in Castor oil 80%, Benzyl benzoate 20%	194	Es.31-53-V—Not tested clinically; dosage increased to 40 mg./ml.
40 mg./ml. in Sesame oil 65%, Benzyl benzoate 30%, Benzyl alcohol 5%	803	SHX-94-4—Too irritating; not tested clinically
40 mg./ml. in Sesame oil 58%, Benzyl benzoate 40%, Benzyl alcohol 2%	496	Es.31-53-8—201 injections, 23.2% reactions, rejected
40 mg./ml. in Castor oil 58%, Benzyl benzoate 40%, Benzyl alcohol 2%	250	Es.31-53-A—826 injections, 2.67% reactions (all mild), accepted

[a] Injection of 0.25 ml. into *vastus lateralis* muscle of rabbits and lesion size determined 2 days after injection.

again formulations containing castor oil in the vehicle proved to be less irritating than similar preparations containing sesame oil. Physically and chemically both oil solutions were stable. Based on acceptable preliminary data, formulations such as those listed in Table VI were prepared and tested. Acceptability in humans was confirmed by clinicians and described in the literature (22, 23) and in case reports.[4]

SUMMARY

1. The development and testing of parenteral steroid hormone formulations has been described, using castor oil as a vehicle.

2. After ascertaining stability and animal muscle irritation, selected formulations were evaluated in humans. They exhibited a prolonged action, were effective and well tolerated.

3. Examples of commercially available products are the estrogen, estradiol valerate[5] at 20 mg./ml. and 40 mg./ml., and the progestogen, 17-hydroxyprogesterone caproate[6] at 250 mg./ml.

[4] Case reports: estradiol valerate, 20 mg./ml., in castor oil 78%, benzyl benzoate 20%, benzyl alcohol 2%—90 injections in 46 patients. Two mild local reactions. Estradiol valerate 40 mg./ml. in castor oil 58%, benzyl benzoate 40%, benzyl alcohol 2%—51 patients. Number of injections not completely tabulated. One report is in press.

[5] Marketed as Delestrogen by E. R. Squibb & Sons, New York, N. Y.

[6] Marketed as Delalutin by E. R. Squibb & Sons, New York, N. Y.

REFERENCES

(1) Deanesly, R., and Parkes, A. S., *J. Physiol.*, **78**, 155 (1933).
(2) Brown, W. E., Wilder, V. M., Schwartz, P., *J. Lab. Clin. Med.*, **29**, 259(1944).
(3) "Hormone Therapy in Practice," 2nd ed., Schering, A. G., Erich Blaschker, Berlin, 1954, p. 109.
(4) Master, W. H., Grody, M. H., and Magallon, D. T., *J. Clin. Endocrinol.*, **12**, 1445(1952).
(5) "Modern Trends in Endocrinology," H. Gardiner-Hill, ed., P. B. Hoeber, 1958, p. 233.
(6) Junkmann, K., *Arch. Exptl. Pathol. Pharmakol.*, **215**, 85(1952).
(7) Davis, M. E., and Wied, G. L., *J. Clin. Endocrinol. Metab.*, **15**, 923(1955).
(8) Boschann, H. W., *Arst. Wochenschr.*, **9** (25) 591 (1954).
(9) Richter, U. S. pat. 2,822,316.
(10) Brit. pat. 817,241.
(11) Ercoli, A., U. S. pat. 2,983,649.
(12) Eckey, E. W., "Vegetable Fats and Oils," A.C.S. Monograph, Reinhold Publising Co., New York, N. Y., Series No. 123, pp. 587–597.
(13) Roberts, H. R., and Florey, K., THIS JOURNAL **51**, 794 (1962).
(14) Short, C. L., *Am. Practitioner Dig. Treatment*, **11**, 149(1960).
(15) Greenblatt, R. B., and Dutta, S. N., *Ariz. Med.*, **18** (4), 107(1961).
(16) Kelley R. M., and Baker, W. H., *New Engl. J. Med.*, **264**, 216(1961,).
(17) Kennedy, B. J., *J. Am. Med. Assoc.*, **184**, 758(1963).
(18) Danforth, D. N., and Buckingham, J. C., *Postgrad. Med.*, **32**, 345(Oct. 1962).
(19) Kistner, R. W., *Clin. Obstet. Gynecol.*, **5**, 1166(1962).
(20) Siegel, I., *Obstet. Gynecol.*, **21**, 666(1963).
(21) Pellegrino, L., *Current Therap. Res.*, **4**, 301(1962).
(22) MacDonald, I., and Yettra, M., *Med. Clin. N. Am.*, **43**, 971(1959).
(23) Eichner, E., Brown, M., and Sable, M., *J. Intern. Coll. Surgeons*, **32**, 394(1959).

Isolation of Marrubiin, a Sterol, and a Sesquiterpene from *Marrubium vulgare*

By HAROLD J. NICHOLAS*

A simple column chromatographic method for isolating the bicyclic diterpene marrubiin from acetone and ethanol extracts of *Marrubium vulgare* L. is described. An unsaturated sterol of the stigmastanol series, present in esterified form, and a sesquiterpene ($C_{15}H_{22}O_2$) have been isolated from the extracts.

IN PREPARATION for radioactive tracer work on the biosynthesis of marrubiin it was necessary to examine extracts of the plant for associated terpenoid substances. A convenient column chromatographic method was therefore devised for separating relatively pure marrubiin from crude acetone extracts. Two new terpenoid substances were detected in the extracts.

EXPERIMENTAL

Materials and Methods.—Ground *M. vulgare* L. was obtained from the Wunderlich-Diez Corp., Hasbrouck Heights, N. J.[1] This material was exhaustively extracted with hot acetone or hot ethanol. Either solution on removal of solvent by distillation (the last stages *in vacuo*) yielded black, viscous material which was used for further examination. Melting points were determined on a Fisher-Johns melting point apparatus. Optical rotations (in $CHCl_3$) and C—H analyses were determined by Drs. G. Weiler and F. B. Strauss, Microanalytical Laboratory, Oxford, England. An infrared spectrum of the unidentified diterpene was determined on a Perkin-Elmer spectrophotometer by the KBr disk method.[2] An infrared spectrum of the sterol was determined in chloroform solution in a 0.1-mm. sealed cell, compensated with $CHCl_3$, on a Beckman IR-4 recording infrared spectrophotometer,[3] and by the KBr disk method. The

Received August 15, 1963, from the Department of Obstetrics and Gynecology, University of Kansas Medical Center, Kansas City.
Accepted for publication November 6, 1963.
This investigation was supported by a grant from the National Institutes of Health, U. S. Public Health Service, Bethesda, Md.
The author is indebted to Fuad Jarjoura and Sharon Moriarity for their technical assistance.

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[1] This firm has given assurance that the material investigated was *M. vulgare* or white horehound, not *Ballota hirsuta* (black horehound).

[2] We are indebted to the Department of Pathology, University of Kansas, for this determination.

[3] Determined by Sadtler Research Laboratories, Philadelphia, Pa.