

# Acetazolamide in prevention of acute mountain sickness: a double-blind controlled cross-over study

M K GREENE, A M KERR, I B McINTOSH, R J PRESCOTT\*

24 amateur climbers (aged 17-50).

They climbed Kilimanjaro (5895 m) and Mt Kenya (5186 m) in 3 weeks with 5 rest days between ascents.

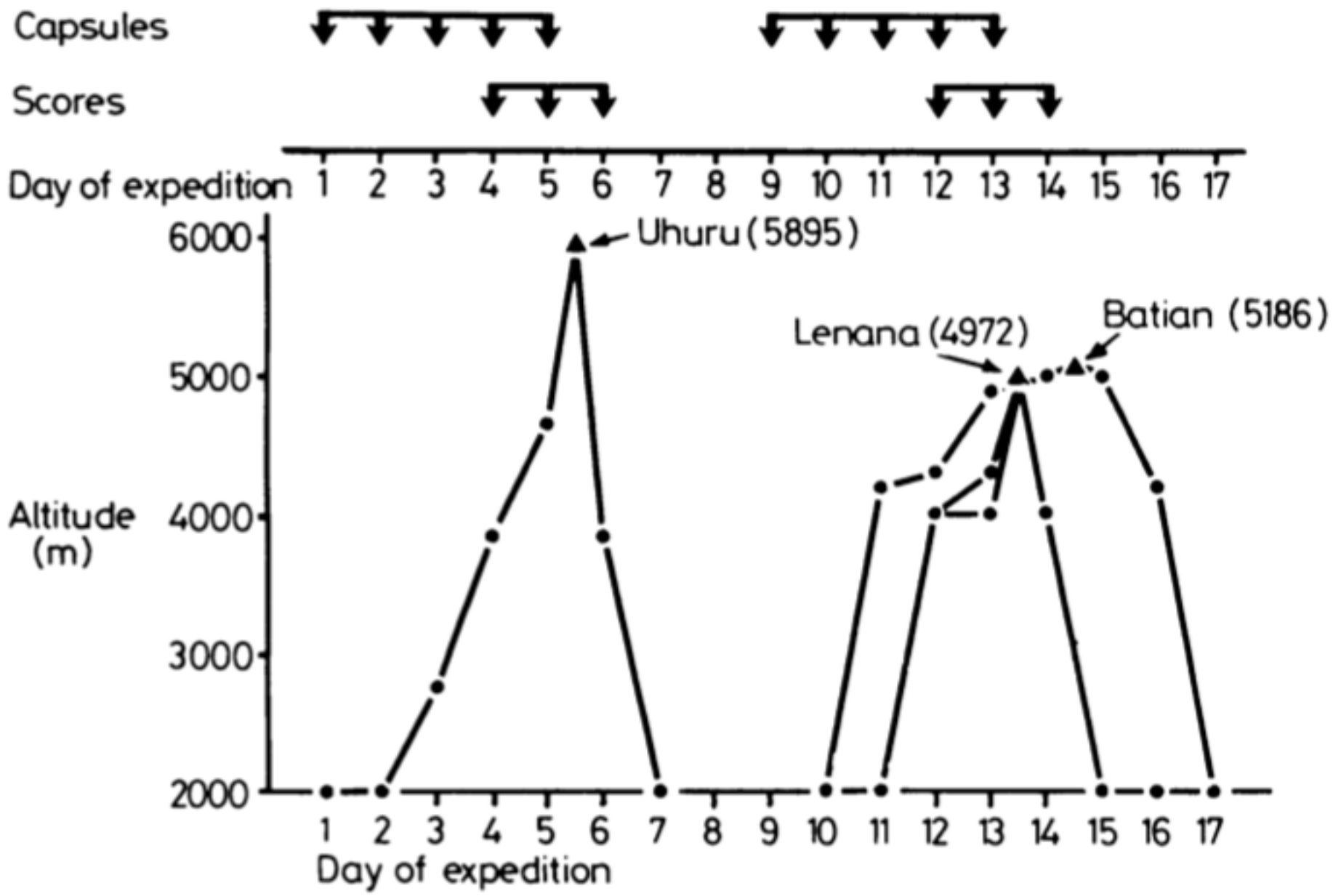
The severity of acute mountain sickness was gauged by a score derived from symptoms recorded daily by each subject.

CharingCrossHospital, London W6 8RF  
M K GREENE, medical student

Royal Hospital for Sick Children, Yorkhill, Glasgow G3 8SJ  
A M KERR, DCH, NIRCPC, registrar in paediatrics (present appt: senior registrar)

StirlingRoyalInfirmary, Stirling FK8 2AU  
I B McINTOSH, MB, CHB, clinical assistant in geriatrics and general practitioner

Edinburgh Medical School, Edinburgh  
R J PRESCOTT, MSc, PhD, senior lecturer in medical statistics



*Symptom scores for each subject on each mountain in order of ascent (after deduction for non-ascent days symptoms)*

Treatment group 1				Treatment group 2			
Subject No	Age	Acetazolamide Kilimanjaro	Placebo Mt Kenya	Subject No	Age	Placebo Kilimanjaro	Acetazolamide Mt Kenya
1	20	7	0	2	20	25	-1
3	20	13	7	4	21	19	5
5	49	3	3	6	43	17	9
7	36	4	missing	8	23	7	1
9	17	5	-1	10	18	9	3
11	45	6	-1	12	45	12	2
13	45	0	0	14	50	18	2
15	36	1	0	16	36	12	0
17	45	3	0	18	41	5	4
19	41	5	2	20	19	12	-1
21	27	9	9	22	19	18	-2
23	42 (F)	2	2	24	24 (F)	17	8
Total score		58	21			171	30
Mean		4.8	1.9			14.3	2.5

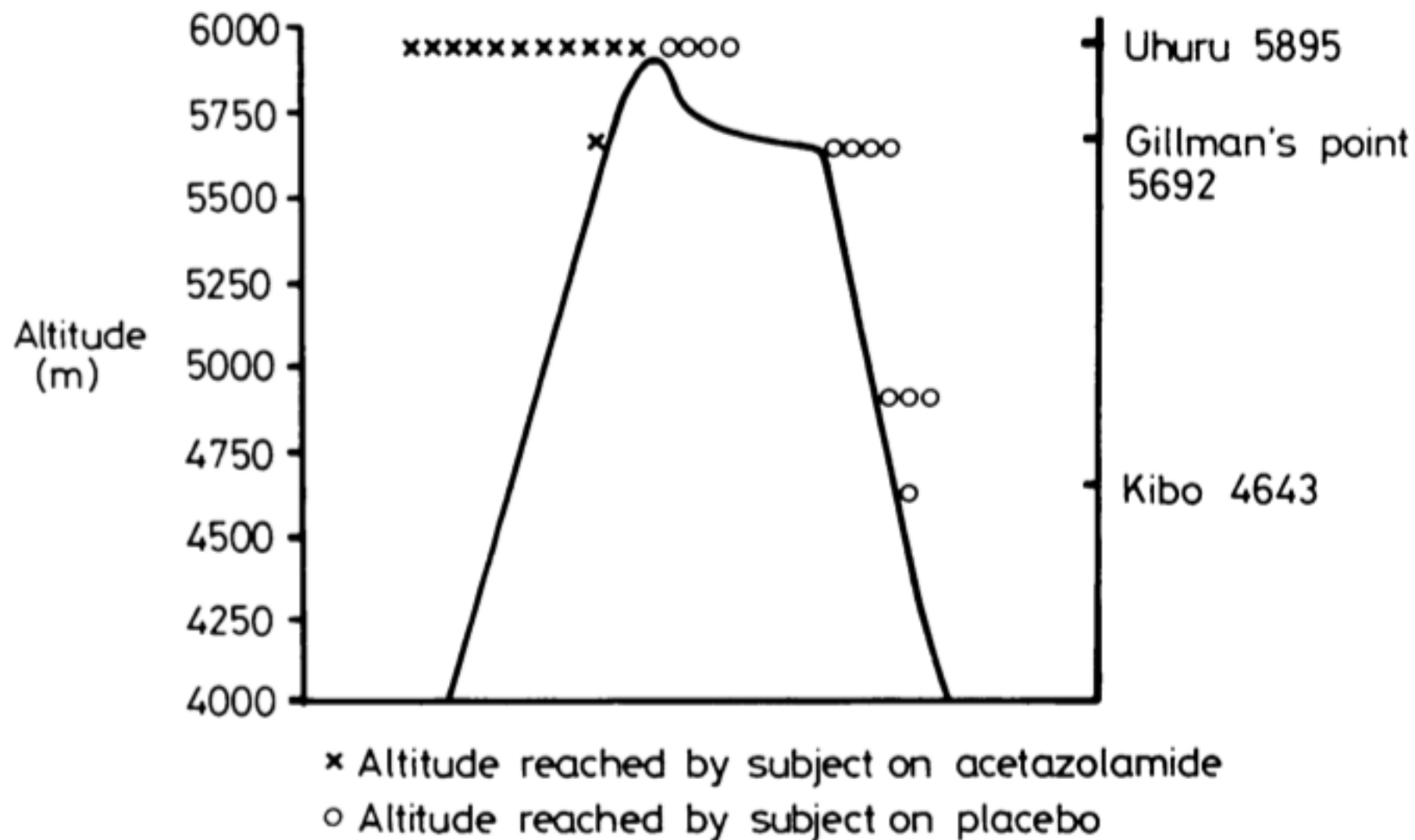


FIG 2—Altitudes reached on Kilimanjaro.