

deeper while the bath remains at 65° F. As the temperature is increased, the respiratory movements tend to become more quiet and much shallower. At 80° F the movements are practically normal as to rate but are very shallow. The shallow characteristic begins to disappear at 110° F. When 115° F is reached, the respiratory movements again become deep and irregular, assuming a form somewhat similar to those recorded in the cold bath.

In most cases, very little discomfort was experienced in the cold bath. However, when the temperature reached 105° F, the subjects perspired profusely. As the temperature was increased still more, symptoms such as nausea, dizziness and extreme irritability were observed.

The outstanding feature of the experiment is that the respiration rate is changed but little, compensation being accomplished by a change of depth.

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A Study of the Metabolism of Reticulocytes.

A. P. BARER, R. J. NEEDLES AND C. W. BALDRIDGE.

(Introduced by Fred M. Smith.)

From the Department of Internal Medicine, State University of Iowa.

The metabolism of blood cells can be estimated from their glycolytic activity *in vitro*. This rate of glycolysis has been studied in the blood of patients with pernicious anemia during a remission induced by liver extract. In all of 5 cases the amount of sugar glycolyzed increased abruptly at the beginning of the remission. In 2 of the 5 cases the increased glycolysis during the reticulocyte crisis could be explained by an increase in erythrocytes and leucocytes. In the other 3 cases some of the increased glycolysis seemed to be attributable to the increase in the reticulocytes *per se*. This might indicate that young blood cells have a more active metabolism than adult cells.