

in nearly every instance examined the peculiar Sacchus-butyric type of bacterial decomposition here found is dependent upon *B. welchii* (*B. aerogenes capsulatus*). Evidence is furthermore brought forward to show that this organism is a prominent and perhaps specific factor in some cases of advanced "primary" anemia. The overgrowth of the gas-bacillus is associated with a partial disappearance of *B. coli*. During convalescence the gas-bacillus recedes numerically and *B. coli* resumes a dominant position.

39 (131). "**Absorption of typhoid bacilli from the peritoneal cavity**": **B. H. BUXTON** and **J. C. TORREY**.

Shortly after injection of typhoid bacilli into the peritoneal cavity of a rabbit the organs in most experiments are found to be invaded by the bacilli, more particularly the liver and spleen, in which there may be enormous numbers. By means of injection of lamp black, the peritoneal path for this rapid rush to the organ is shown to be by way of the anterior mediastinal lymphatic trunks. Even in five minutes after injection the trunks and the anterior mediastinal lymph node are markedly blackened.

On plating out the lymph nodes after injection of typhoid bacilli, they are often found to contain many millions of bacilli, and, as a general rule, if there are many bacilli in the lymph nodes there are also many in the organs.

40 (132). "**The dicrotic elevation at different points of the arterial tree**": **PERCY M. DAWSON**. (Presented by **J. R. MURLIN**.)

In a number of dogs the form of the pulse-wave was studied by means of the Hürthle manometer. The arteries upon which the observations were made were the following—aorta, brachiocephalic, innominate, carotids, thyroids, vertebrales, internal mammaries, axillaries, brachials, left subclavian, celiac axis, superior mesenteric, left renal, inferior mesenteric, left iliac, deep femoral, femoral, saphenous and peripheral end of the carotid, *i. e.*, a side branch of the circle of Willis. The exact values of the apex and base of the pressure triangles were determined from readings of the systolic and diastolic pressures obtained by means of a valved manometer.

A careful study and comparison of the results has led to the following conclusions.