

PUBLISHED BY
THE MEDICAL RESEARCH SOCIETY AND THE BIOCHEMICAL SOCIETY

© The Medical Research Society and the Biochemical Society 1981
ISSN 0143-5221

Printed in Great Britain by Spottiswoode Ballantyne Ltd.
Colchester and London

Tables should be in Arabic numerals, e.g. Fig. 3, and they should be numbered in order of appearance. In general, the same data should not be presented in both a Figure and a Table.

Figures, with captions attached, should be supplied as original drawings or matt photographs together with photocopies. All Figures should have their number and the authors' names written in pencil on the back; the top of the Figure should be indicated with a pencilled arrow. Acceptable symbols for experimental points are ●, ▲, ■, ○, △, □. The symbols × or + must be avoided. The same symbols must not be used for two curves where the points might be confused. For scatter diagrams, solid symbols are preferred. When a particular variable appears in more than one Figure, the same symbol should be used for it throughout, if possible.

Curves should not be drawn beyond the experimental points, nor should axes extend appreciably beyond the data. Only essential information that cannot readily be included in the legend should be written within the Figure.

Figures for half-tone reproduction should be submitted as glossy prints. They are particularly expensive to print and their use should be avoided as far as possible.

Tables should be typed separately from the text. They should have an underlined title followed by any legend.

Captions for the Figures, and titles and legends for the Tables, should make them **readily understandable** without reference to the text. Adequate statistical information, including that on regression lines, should be included in Figure captions where appropriate.

3.10. Footnotes

These should be avoided as far as possible but where they are used in Tables they should be identified by the symbols * † ‡ § || ¶, in that order.

3.11. Isotope measurements

The information given should include (a) conditions of radioactivity counting, e.g. infinitely thick, infinitely thin; (b) the nature of the phosphor used in liquid-scintillation counting; (c) details of corrections made to the observed count rate, e.g. for 'quenching' or 'cross-over'; (d) standard deviation of the results or a statement of the minimum total counts above background collected and the background value.

In general the specific radioactivity of the starting materials should be given, preferably in

terms of radioactivity per unit weight or, for stable isotopes, as atoms % excess.

Pending the general introduction of SI units radioactivity should continue to be expressed in terms of the curie (Ci) followed by the corresponding figure in terms of the becquerel (Bq: disintegrations/s), in parentheses, and suitably rounded.

3.12. Radionuclide applications in man

If new or modified radionuclide applications in man are described, an estimate of the maximal possible radiation dose to the body and critical organs should be given.

For the time being this can continue to be expressed in rems, but with the corresponding figure in sieverts (Sv) given in parentheses after it.

3.13. Methods

In describing certain techniques, namely centrifugation (when the conditions are critical), chromatography and electrophoresis, authors should follow the recommendations published by the Biochemical Society (currently, *Biochemical Journal* (1981) **193**, 1–21).

3.14. Nomenclature of disease

This should follow the *International Classification of Disease* (8th revision, World Health Organization, Geneva, 1969) as far as possible.

3.15. Powers in Tables and Figures

Care is needed where powers are used in Table headings and in Figures to avoid numbers with an inconvenient number of digits. For example: (i) an entry '2' under the heading $10^3 k$ means that the value of k is 0.002; an entry '2' under the heading $10^{-3} k$ means that the value of k is 2000. (ii) A concentration 0.00015 mol/l may be expressed as 0.15 under the heading 'concn. (mmol/l)' or as 150 under the heading 'concn. (μ mol/l)' or as 15 under the heading ' $10^5 \times$ concn. (mol/l)', but not as 15 under the heading 'concn. (mol/l $\times 10^{-5}$)'.

3.16. References

The numerical citation system is now used: references in the text are numbered consecutively in the order in which they are first mentioned, the numerals being given in brackets, e.g. [22]. References cited in Figure legends or Tables only should be numbered in a sequence determined by the position of the first mention in the text of the Figure or Table. References should be listed in

numerical order and the names of all authors of a paper should be given, with the full title of the paper and the source details in full including the first and last page numbers, e.g.

- [2] CLARK, T.J.H., FREEDMAN, S., CAMPBELL, E.J.M. & WINN, B.R. (1969) The ventilatory capacity of patients with chronic airways obstruction. *Clinical Science*, **36**, 307–316.

When the quotation is from a book, the following format should be used, giving the relevant page or chapter number:

- [20] MOLLISON, P.L. (1967) *Blood Transfusion in Clinical Medicine*, 4th edn, p. 50. Blackwell Scientific Publications, Oxford.
- [22] REID, L. (1968) In: *The Lung*, p. 87. Ed. Liebow, A.A. & Smith, D.E. Williams and Wilkins, Baltimore.

References to 'personal communications' and 'unpublished work' should appear in the text only and not in the list of references. The name and initials of the source of information should be given. When the reference is to material that has been accepted for publication but has not yet been published, this should be indicated in the list of references by 'In press' together with the name of the relevant journal and, if possible, the expected date of publication. If such a citation is of major relevance to the manuscript submitted for publication authors are advised that the editorial process might be expedited by the inclusion of a copy of such work. In the case of quotations from personal communications the authors should state in the covering letter that permission for quotation has been obtained.

3.17. Solutions

Concentration of solutions should be described where possible in molar terms (mol/l and subunits thereof), stating the molecular particle weight if necessary. Values should not be expressed in terms of normality or equivalents. Mass concentration should be expressed as g/l or subunits thereof, for example mg/l or µg/l. For solutions of salts, molar concentration is always preferred to avoid ambiguity as to whether anhydrous or hydrated compounds are used. Concentrations of aqueous solutions should be given as mol/l or mol/kg (g/l or g/kg if not expressed in molar terms) rather than % (w/v) or % (w/w). It should always be made clear whether concentrations of components in a reaction mixture are final concentrations or the concentrations in solutions added.

3.18. Spectrophotometric data

The term 'absorbance' [$\log(I_0/I)$] should be used rather than 'optical density' or 'extinction'. The

solvent, if other than water, should be specified. Symbols used are: A , absorbance; a , specific absorption coefficient ($\text{litre g}^{-1} \text{cm}^{-1}$) (alternatively use $A_{1\text{cm}}^{1\%}$); ϵ , molar absorption coefficient (the absorbance of a molar solution in a 1 cm light-path) ($\text{litre mol}^{-1} \text{cm}^{-1}$, not $\text{cm}^2 \text{mol}^{-1}$).

3.19. Spelling

Clinical Science uses as standards for spelling the *Concise* or *Shorter Oxford Dictionary of Current English* (Clarendon Press, Oxford) and *Butterworth's Medical Dictionary* (Butterworths, London).

3.20. Statistics

Papers are frequently returned for revision (and their publication consequently delayed) because the authors use inappropriate statistical methods. Two common errors are the use of means, standard deviations and standard errors in the description and interpretation of grossly non-normally distributed data and the application of *t*-tests for the significance of difference between means in similar circumstances, or when the variances of the two groups are non-homogeneous. In some circumstances it may be more appropriate to provide a 'scattergram' than a statistical summary.

A reference should be given for all methods used to assess the probability of a result being due to chance. The format for expressing mean values and standard deviations or standard errors of the mean is, for example: mean cardiac output 10.4 l/min ($\text{SD } 1.2$; $n = 11$). Degrees of freedom should be indicated where appropriate. Levels of significance are expressed in the form $P < 0.01$.

3.21. Trade names

The name and address of the supplier of special apparatus and of biochemicals should be given. In the case of drugs, approved names should always be given with trade names and manufacturers in parentheses.

4. UNITS: THE SI SYSTEM

The recommended Système International (SI) units [see *Quantities, Units and Symbols*, 2nd edn (1975) The Royal Society, London] are used by *Clinical Science*. All papers submitted should use these units except for blood pressure values, which should be expressed in mmHg, or gas tensions, where values at the author's discretion may be given as mmHg (with kPa in parentheses) or as kPa (with mmHg in parentheses) in the text and either as mmHg or as kPa in Figures, which (if practicable) should have scales in both units. Airways pressure should be expressed in kPa. Where molecular weight is known, the amount of a chemical or drug should be expressed in mol or in

an appropriate subunit, e.g. mmol. Energy should be expressed in joules (J).

The basic SI units and their symbols are as follows:

<i>Physical quantity</i>	<i>Name</i>	<i>Symbol</i>
length	metre	m
mass	kilogram	kg
time	second	s
electric current	ampere	A
thermodynamic temperature	kelvin	K
luminous intensity	candela	cd
amounts of substance	mole	mol

The following are examples of derived SI units:

<i>Physical quantity</i>	<i>Name</i>	<i>Symbol</i>	<i>Definition</i>
energy	joule	J	$\text{kg m}^2 \text{s}^{-2}$
force	newton	N	$\text{kg m s}^{-2} = \text{J m}^{-1}$
power	watt	W	$\text{kg m}^2 \text{s}^{-3} = \text{J s}^{-1}$
pressure	pascal	Pa	$\text{kg m}^{-1} \text{s}^{-2} = \text{N m}^{-2}$
electric charge	coulomb	C	A s
electric potential difference	volt	V	$\text{kg m}^2 \text{s}^{-2} \text{A}^{-1} = \text{J A}^{-1} \text{s}^{-1}$
electric resistance	ohm	Ω	$\text{kg m}^2 \text{s}^{-3} \text{A}^{-2} = \text{V A}^{-1}$
electric conductance	siemens	S	$\text{kg}^{-1} \text{m}^{-2} \text{s}^3 \text{A}^2 = \Omega^{-1}$
electric capacitance	farad	F	$\text{A}^2 \text{s}^3 \text{kg}^{-1} \text{m}^{-2} = \text{A s V}^{-1}$
frequency	hertz	Hz	s^{-1}
volume	litre	l	10^{-3} m^3

The word 'litre' has been accepted as a special name for cubic decimetre (1 litre = 1 dm³).

Both the basic and derived SI units, including the symbols of derived units that have special names, may be preceded by prefixes to indicate multiples and submultiples. The prefixes should be as follows:

<i>Prefix</i>	<i>Symbol</i>	<i>Multiple</i>	<i>Prefix</i>	<i>Symbol</i>
10 ⁶	mega	M	10 ⁻³	milli
10 ³	kilo	k	10 ⁻⁶	micro
10 ²	hecto	h*	10 ⁻⁹	nano
10	deka	da	10 ⁻¹²	pico
10 ⁻¹	deci	d*	10 ⁻¹⁵	femto
10 ⁻²	centi	c*		f

* To be avoided where possible (except for cm).

Compound prefixes should not be used, e.g. 10⁻⁹ m should be represented by 1 nm, not 1 mμm.

Notes:

(i) Full stops are not used after symbols.
 (ii) Minutes (min), hours (h), days and years will continue to be used in addition to the SI unit of time [the second (s)].

(iii) The solidus may be used in a unit as long as it does not have to be employed more than once,

e.g. mmol/l is acceptable, but ml/min/kg is not, and should be replaced by ml min⁻¹ kg⁻¹.

5. ABBREVIATIONS, CONVENTIONS, DEFINITIONS, SYMBOLS AND SPECIAL COMMENTS

As well as standard symbols and abbreviations that have been accepted by international bodies, and which can be used without definition, this list shows selected abbreviations in the form of groups of capital letters (e.g. ALA, ECF, MCHC) which when used must be defined in the text as indicated on p. iv. The standard abbreviations for amino acids are only for use in Figures and Tables or for peptide sequences.

absorbance	<i>A</i>
acceleration due to gravity	<i>g</i>
adenosine 3':5'-cyclic monophosphate	cyclic AMP
adenosine 5'-phosphate	AMP
adenosine 5'-pyrophosphate	ADP
adenosine 5'-triphosphate	ATP
adenosine triphosphatase	ATPase
adrenocorticotrophic hormone	ACTH
adrenoceptor (see also blocking agents)	
alanine	Ala
alternating current	a.c.
alveolar minute ventilation	\dot{V}_A^A
alveolar to arterial oxygen tension difference	($P_{A,O_2} - P_{a,O_2}$)
ampere	A
aminolaevulinic acid	ALA
angiotensin	
Ångstrom (Å)	
antidiuretic hormone	ADH (when referring to the physiological secretion)
arginine	Arg
arteriovenous	a-v: permitted in Figures and Tables
asparagine	Asn
aspartic acid	Asp
atmosphere (unit of pressure)	not used; express in kPa (1 atmosphere = 101.325 kPa)
atomic weight	at. wt.
becquerel	Bq (1 d.p.s.)
blocking agents	e.g. β -adrenoceptor antagonists preferred
blood pressure	express in mmHg
blood urea nitrogen	not used; recalculate as urea, express in mmol/l
blood volume	BV
body temperature and pressure, saturated	BTPS

British Pharmacopoeia	write in full and give edition	electromotive force	e.m.f.
calculated 'Calorie' (= 1000 cal)	calc. (in Tables only) <i>not used</i> ; recalculate as kilojoules (1 'Calorie' = 4·184 kJ)	electron spin resonance	e.s.r.
carbon dioxide output (in respiratory physiology)	\dot{V}_{CO_2} ; express in ml STP/min	electronvolt	eV (for radiation energies)
cardiac frequency	f_c ; in beats/min	equation	eqn.
cardiac output	express in l/min	equivalents (amount of a chemical)	<i>not used</i> ; recalculate in molar terms
centimetre	cm	erythrocyte count	express as 10^{12} cells/l
clearance of x	C_x	erythrocyte sedimentation rate	ESR
coenzyme A and its acyl derivatives	CoA and acyl-CoA	ethanol, ethanolic	not ethyl alcohol or alcoholic
compare	cf.	ethylenediaminetetra-acetate	EDTA
complement fractions	C1–C9	exchangeable	Na_e , K_e etc., for total exchangeable sodium, potassium etc.
compliance (respiratory physiology)	C ; express in 1 kPa^{-1}	Experiment (with reference numeral)	Expt.; plural, Expts.
concentrated	conc.	expired minute ventilation	\dot{V}_E
concentration	concn.; may be denoted []; e.g. plasma $[\text{HCO}_3^-]$	extinction	use absorbance
conductance (respiratory physiology)	G ; express in $1 \text{ s}^{-1} \text{ kPa}^{-1}$	extracellular fluid	ECF
correlation coefficient	r : may be used without definition	extracellular fluid volume	ECFV
counts/min, counts/s	c.p.m., c.p.s.	extraction ratio of x (renal)	E_x
cubic centimetres	use ml	Figure (with reference numeral)	Fig.; plural, Figs.
curie	Ci ($1 \text{ Ci} = 3 \cdot 7 \times 10^{10}$ d.p.s.)	filtered load of x (renal)	F_x
cycle/s	Hz	follicle-stimulating hormone	FSH
cysteine	Cys	forced expiratory volume in 1·0 s	FEV _{1.0}
dates	e.g. 11 August 1970	fractional concentration in dry gas	F
dead-space minute ventilation	\dot{V}_D	fractional disappearance rate	k (as in $A = A_0 e^{-kt}$)
dead-space volume	\dot{V}_D	frequency of respiration	f_R ; in breaths/min
degrees, Celsius or centigrade	$^\circ\text{C}$	functional residual capacity	FRC
deoxy (prefix)	<i>not</i> deoxy	gas-liquid chromatography	g.l.c.
deoxycorticosterone	DOC	gas transfer factor	T ; in $\text{mmol min}^{-1} \text{ kPa}^{-1}$
deoxycorticosterone acetate	DOCA	glomerular filtration rate	GFR
deoxyribonucleic acid	DNA	glutamic acid	Glu
dialysate	diffusate preferred; 'dialysate' should be clearly defined	glutamine	Gln
diethylaminoethylcellulose	DEAE-cellulose	glutathione	GSH (reduced); GSSG (oxidized)
differential of x with respect to time	\dot{x} (= dx/dt)	glycine	Gly
1,25-dihydroxycholecalciferol	1,25-(OH) ₂ D ₃	gram(me)	g
dilute	dil.	gravitational field, unit of (9·81 m s ⁻²)	g
2,3-diphosphoglycerate	2,3-DPG	growth hormone	GH; if human, HGH
direct current	d.c.	guery	Gy (100 rads)
disintegrations/min	d.p.m.	haematocrit	not allowed; use packed cell volume (PCV)
disintegrations/s	d.p.s.	haemoglobin	Hb; express in g/dl
dissociation constant	K_a	half-life	$t_{\frac{1}{2}}$
acidic	K_b	hertz (s ⁻¹)	Hz
basic	e.g. K'_a	histidine	His
apparent	pK	hour	h
minus log of		human chorionic gonadotropin	HCG
doses	avoid Latin designations such as b.d. and t.i.d.	human placental lactogen	HPL
dyne	dyn; used for vascular resistance	hydrocortisone	use cortisol
elastance	E ; express in Pa m^{-3}	hydrogen ion activity minus log of	aH; express in nmol/l
electrocardiogram	ECG	25-hydroxycholecalciferol	pH
electroencephalogram	EEG	hydroxyproline	25-(OH)D ₃

injection routes:	use abbreviations only in Figures	millimetre of mercury	mmHg; for blood pressure and, at authors' discretion, for gas tensions: see p. vi (1 mmHg = 0.133 kPa)
intra-arterial	i.a.	millimolar (concentration)	mmol/l; <i>not</i> mM
intramuscular	i.m.	millimole	mmol
intraperitoneal	i.p.	minimum	min.
intravenous	i.v.	minute (60 s)	min
subcutaneous	s.c.	molal	mol/l; <i>not</i> M
international unit	i.u. (definition and reference should be given for uncommon or ambiguous applications, e.g. enzymes)	molar (concentration)	ϵ (the absorbance of a molar solution in a 1 cm light-path)
ICF	ICF	molar absorption coefficient	mol
ICFV	I	nicotinamide-adenine dinucleotide	mol. wt.
I	Ile	nicotinamide-adenine dinucleotide phosphate	NAD if oxidation state not indicated
isoleucine	<i>not used</i> ; specify composition of fluid, e.g. NaCl, 150 mmol/l	normal	NAD ⁺ if oxidized
isotonic	e.g. [¹⁴ C]glucose, [¹⁻¹⁴ C]glucose, sodium [¹⁻¹⁴ C]-acetate; <i>use</i> [¹³¹ I]-labelled albumin, <i>not</i> [¹³¹ I]albumin	normal	NADH if reduced
isotopically labelled compounds	for simple molecules: ¹⁴ CO ₂ , ³ H ₂ O	normal	NADP if oxidation state not indicated
J	J	normal temperature and pressure	NADP ⁺ if oxidized
kilogram(me)	kg	nuclear magnetic resonance number (in enumerations)	NADPH if reduced
kilopond	<i>not used</i> ; 1 kilopond = 9.8067 N	observed	should not be used to denote the concentration or osmolarity of a solution
lactate dehydrogenase	LDH	ohm	use standard temperature and pressure (STP)
leucine	Leu	ornithine	n.m.r.
leucocyte count	express as 10 ⁹ cells/l	ortho-	no. (in Tables only)
lipoproteins (serum)	HDL	orthophosphate (inorganic)	obs. (in Tables only)
high density	LDL	osmolality	Ω
low density	VLDL	oxygen uptake per minute (in respiratory physiology)	Orn
very low density	1 (write in full if confusion with the numeral 1 is possible)	packed cell volume	σ^-
litre	MCH; express in pg	page, pages	P _i
logarithm (base 10)	MCHC; express in g/dl	para-	express in mol (or mmol)/kg
logarithm (base e)	MCV; express in fl (1 μm^3 = 1 fl)	para-aminohippurate	\dot{V}_{O_2} ; express in ml STP/min
luteinizing hormone	LD ₅₀	partial pressure	PCV
lysine	m-	e.g. alveolar, of O ₂	p., pp.
maximum	m.p.	arterial, of CO ₂	p-
mean corpuscular haemoglobin	<i>not</i> methyl alcohol	capillary, of O ₂	PAH
mean corpuscular haemoglobin concentration	Met	mixed venous, of CO ₂	P; express in either kPa or mmHg (see p. vi)
mean corpuscular volume	m	pascal	P _{A,O₂}
median lethal dose	K _m	per	P _{A,CO₂}
meta-	μmol	per cent	P _{C,O₂}
melting point	μm ; <i>not</i> μ	petroleum ether	P _{V,CO₂}
methanol, methanolic	<i>not used</i> ; give amount in mmol	phenylalanine	Pa
methionine	ml	plasma renin activity	/
metre		plasma volume	%
Michaelis constant		poise	<i>not used</i> ; use light petroleum and give boiling range
micromole			Phe
micron (10 ⁻⁶ m)			express as pmol of angiotensin I h ⁻¹ ml ⁻¹
milliequivalent			PV
millilitre			1 poise = 10 ⁻¹ N s m ⁻²

potential difference power output	p.d. W (1 W = 0.1635 kpm/min)	specific conductance of airways	sGaw; express in $s^{-1} kPa^{-1}$
precipitate pressure	ppt. <i>P</i> ; express in kPa (except for blood pressures and gas tensions: see p. 6); 1 kPa = 7.5 mm Hg	standard deviation standard error of the mean	SD } may be used SEM }
probability of an event being due to chance alone	<i>P</i>	standard temperature and pressure steroid nomenclature	STP
proline	Pro	sulphydryl	see <i>Biochemical Journal</i> (1969) 113, 5-28; (1972) 127, 613-617
protein-bound iodine (plasma)	PBI	sum	use thiol or SH
pulmonary capillary blood flow	\dot{Q}_c	Svedberg unit	Σ
pyrophosphate (inorganic)	PPi	temperature (absolute) (empirical)	S
rad (radiation dose; 10^{-5} J absorbed/g of material)	not abbreviated (100 rads = 1 Gy)	temperature, thermodynamic	T
red blood cell	<i>use erythrocyte;</i> express counts as 10^{12} cells/l	thin-layer chromatography	t
red cell mass	RCM	threonine	$^{\circ}\text{K}$
relative band speed (partition chromatography)	R_F	thyrotrophic hormone	t.l.c.
rem	100 ergs/g \times quality factor	thyrotrophin-releasing hormone	Thr
renin	<i>see plasma renin activity</i>	tidal volume	TSH
residual volume	RV	time (symbol)	TRH
resistance (rheological)	<i>R</i> ; express in kPa l ⁻¹ s	time of day	
respiratory exchange ratio (pulmonary)	<i>R</i>	torr	e.g. 18.15 hours
respiratory quotient (metabolic)	RQ	total lung capacity	not used; <i>use kPa</i> (1 torr = 0.133 kPa)
revolutions	rev.	tryptophan	TLC
rev./min	<i>not r.p.m.; use g if possible (see p. viii)</i>	tubular maximal reabsorptive capacity for x	Trp
ribonucleic acid	RNA	tyrosine	$T_{m,x}$
röntgen	R	ultraviolet	
saline	define at first mention [e.g. NaCl solution (154 mmol/l)]	urinary concentration of x	U _x
saturation	<i>S</i> , e.g. $S_a\text{O}_2$ for arterial oxygen saturation (see partial pressure for other analogous abbreviations)	valency	e.g. Fe ²⁺ , <i>not</i> Fe ⁺⁺
second (time)	s	valine	Val
serine	Ser	variance ratio	F
sievert	Sv (1 J/kg \times quality factor)	vascular resistance	express in kPa l ⁻¹ s (with value in dyn s cm ⁻⁵ in parentheses); primary values of differential vascular pressure (mmHg) and flow (l/min) should always also be given in Tables or text as appropriate
solvent systems	e.g. butanol/acetic acid/water (4:1:1, by vol.), butanol/acetic acid (4:1, v/v)	velocity	v; express as m s ⁻¹
species	sp., plural spp.	venous admixture	\dot{Q}_{va}
specific activity	sp. act. Confusion must be avoided between e.g. specific radioactivity and the specific activity of an enzyme	veronal	used only for buffer mixtures; otherwise use 5,5'-diethylbarbituric acid
		viscosity, dynamic	η
		viscosity, kinematic	ν
		vital capacity	VC
		volt	V
		volume of blood (in cardio-respiratory physiology)	Q ; use \dot{Q} for blood flow rate
		watt	W
		wavelength	λ
		weight	wt.
		white blood cell	<i>use leucocyte; express counts as 10^9 cells/l</i>

Volume 60

AUTHOR INDEX

- ALBERTI, K.G.M.M. 579–585
AMANN, F.W. 483–489, 571–577
AMERY, A. 377–385
AMTORP, O. 157–164
AXON, A.T.R. 115–118
AYNSLEY-GREEN, A. 349–353

BALASUBRAMANIAM, S. 435–439
BALDWIN, C.J. 579–585
BARON, P.G. 537–542, 543–548
BARRAND, M.A. 519–525, 527–535
BAUMINGER, S. 405–410
BEELEY, J.A. 179–184
BELFIELD, P.W. 139–143
BELL, M. 303–310
BEREZNOWSKI, Z. 565–569
BERGLUND, G. 229–232
BERNHHEIM, J. 405–410
BISDEE, A. 17–23
BLOOM, S.R. 349–353
BOBIK, A. 217–219
BONJOUR, J.-P. 101–107, 171–177
BOOMSMA, F. 491–498
BRAGANZA, J.M. 303–310
BREWER, D.B. 693–702
BUCKMAN, M. 17–23
BÜHLER, F.R. 483–489, 571–577
BULLEN, A.W. 109–113
BULLOCK, S. 419–426
BUNCH, C. 191–198
BURGESS, E.M. 499–506
BURKINSHAW, L. 457–461
BUTLER, J. 1–4

CALLINGHAM, B.A. 519–525, 527–535
CAMERON, I.R. 441–449
CAMERON, J.S. 81–86
CAMPBELL, D. 355–361
CAMPBELL, E.J.M. 463–466, 513–518
CANGIANO, J.L. 479–482

CARNEY, S.L. 549–554
CASTLEDEN, C.M. 587–589
CHAN, T.K. 681–688
CHAN, V. 681–688
CHETTLE, D.R. 457–461
CHOU, H.J. 633–637
CHOW, F.P.R. 327–329
CLAGUE, M.B. 233–235
CLARK, T.J.H. 11–15
CLOIX, J.F. 339–341
COBDEN, I. 115–118
COFFMAN, J.D. 5–9
COHEN, R.A. 5–9
COHEN, R.D. 245–246, 537–542, 543–548
COMPSTON, J.E. 241–243
CORAZZA, G.R. 109–113
CRAVEN, A.H. 261–265
CRAWFORD, G.A. 73–80
CREMER, J.E. 87–93
CUMBERBATCH, M. 555–564
CUMMING, G. 17–23
CUMMINS, P. 33–40, 251–259
CUNNINGHAM, V.J. 87–93

DAMKJAER NIELSEN, M. 591–593
DANDONA, P. 327–329
DAVIES, I.B. 399–404
DAVIES, T.J. 595–597
DE BRUYN, J.H.B. 491–498
DERKX, F.H.M. 491–498
DICKINSON, C.J. 471–477
DIRKS, J.H. 549–554
DOBBS, R.J. 659–666
DORMANDY, T.L. 295–301
DUNCAN, G. 145–155
DÜSING, R. 467–469

ECKERSALL, P.D. 179–184
EDMONDS, C.J. 311–318
EDSTRÖM, S. 319–326
EISER, N.M. 363–370
EKMAN, L. 319–326
ERIKSSON, S. 95–100
ESLER, M. 217–219
EVEMY, K.L. 33–40

FAGARD, R. 377–385
FARRINGTON, K. 55–63

FINCH, A.M. 411–418
FITCH, W. 355–361
FLAHERTY, D.K. 225–228
FLECKNELL, P.A. 335–338
FLEISCH, H. 101–107, 171–177
FLEMSTRÖM, G. 427–433
FOG-MØLLER, F. 157–164
FRANCIS, M.J.O. 617–623
FRANKEL, H.L. 399–404
FUNCK-BRENTANO, J.L. 339–341
FYHRQUIST, F. 267–272

GANDEVIA, S.C. 463–466, 513–518
GARDNER, M.L.G. 707–710
GARNER, A. 427–433
GEJYO, F. 331–334
GEORGE, C.F. 247–250
GIESE, J. 591–593
GILMORE, I.T. 65–72
GOLDSTRAW, P.W. 139–143
GRAHAME-SMITH, D.G. 191–198
GREENING, A.P. 507–512
GREGERMAN, R.I. 633–637
GUZ, A. 363–370

HAGENFELDT, L. 95–100
HALL, R. 109–113
HALL, R.J.C. 441–449
HAMILTON, G. 327–329
HAMMETT, F.G. 241–243
HANSON, P.G. 225–228
HARRIS, A.L. 191–198
HARTLING, O.J. 675–679
HARVEY, J.E. 579–585
HEATH, J.R. 667–674
HENDERSON, R.M. 543–548
HENQUET, J.W. 25–31
HENRIKSEN, O. 157–164
HERLITZ, H. 229–232
HERVEY, G.R. 457–461
HEYS, A.D. 295–301
HIGENBOTTAM, T. 11–15
HILL, G. 451–456
HILTON, P.J. 237–239
HOBBS, K.E.F. 327–329
HUGHES, J.M.B. 507–512

- HUGHES, R.L. 355-361
 HUGI, K. 101-107
 HUTTON, R. 327-329
- ILES, R.A. 245-246, 537-542, 543-548
 ISAACSON, L.C. 283-293
 ITO, G. 331-334
- JACKMAN, G. 217-219
 JAMES, V.H.T. 399-404
 JAMES, W.P.T. 519-525, 527-535
 JARRETT, R.J. 81-86
 JENKINS, W. 207-212
 JEWKES, R. 17-23
 JOHN, M. 335-338
 JOHNSON, R.H. 145-155
 JONES, P.R.M. 457-461
 JONES, R.B. 237-239
 JONES, S.M. 703-706
 JUNG, R.T. 519-525, 527-535
- KARLBERG, B.E. 229-232
 KARLBERG, I. 319-326
 KASIDAS, G.P. 411-418
 KEELING, P.W.N. 237-239
 KEIR, M.J. 233-235
 KELLY, D. 221-224
 KELSEY, C.R. 659-666
 KHO, T. 25-31
 KILLIAN, K.J. 463-466, 513-518
 KING, R.F.G.J. 451-456
 KING, R.V. 499-506
 KINOSHITA, Y. 331-334
 KIOWSKI, W. 483-489, 571-577
 KLASS, H.J. 303-310
 KLINGMÜLLER, D. 467-469
 KNIBBS, A.V. 457-461
 KÖRBER, A. 467-469
 KORNER, P. 217-219
 KRAFT, C.A. 587-589
 KRAMER, H.J. 467-469
 KROOS, M.J. 185-190
- LAI, C.L. 681-688
 LAM, H. 157-164
 LAMBIE, D.G. 145-155
 LANGLEY, F. 17-23
 LAWRENCE, G.M. 693-702
 LECKIE, B.J. 119-130
 LEONARD, P. 217-219
 LEVISON, J.A. 653-658
 LIJNEN, P. 377-385
- LITTLER, W.A. 33-40, 251-259
 LOCKHART, A. 371-375, 599-605
 LOSOWSKY, M.S. 109-113
 LUCAS, A. 349-353
 LUNDHOLM, K. 319-326
 LUNDIN, S. 229-232
 LUSH, D.J. 393-398
 LYSBO SVENSEN, T. 675-679
- MACFIE, J. 451-456
 MAGILL, P. 241-243
 MAHONY, J.F. 73-80
 MAKAREWICZ, W. 565-569
 MANCINI, M. 435-439
 MARTÍNEZ-MALDONADO, M. 479-482
 MARTINEZ, P. 387-392
 MATHIAS, C.J. 165-170, 399-404
 MATHIE, R.T. 355-361
 MATSEN III, F.A. 499-506
 MATTOCK, M. 81-86
 MCCORMICK, J. 625-631
 McGURK, B. 251-259
 MEILTON, V. 81-86
 MERRETT, A.L. 241-243
 MIETTINEN, A. 267-272
 MILLS, J. 363-370
 MITROPOULOS, K.A. 435-439
 MOHAMMED, M.N. 55-63
 MONET, J.D. 339-341
 MOORHEAD, J.F. 55-63
 MORGAN, D.B. 457-461, 555-564
 MÜHLBAUER, R.C. 171-177
 MUNDAY, K.A. 393-398
 MYANT, N.B. 435-439
- NAIK, R.B. 165-170
 NAISH, P. 47-53
 NASCIMENTO, L. 479-482
 NEWMAN, S.P. 55-63
 NIELSEN, A.H. 41-46
 NOBLE, A.R. 393-398
 NOBLE, M.I.M. 17-23
- OGG, C.S. 81-86
 O'MALLEY, B.P. 595-597
- PEARSON, S.B. 667-674
 PEART, W.S. 399-404, 639-651
 PETERS, T.J. 207-212, 435-439
 PLUMB, J.A. 707-710
- PODJARNY, E. 405-410
 POSTIGLIONE, A. 435-439
 POTTER, C.G. 191-198
 POULSEN, K. 41-46
 POURMOTABBED, G. 633-637
- QAZZAZ, S. 47-53
 QUERIDO, D. 283-293
- RAFFESTIN, B. 371-375
 RAHN, K.H. 25-31
 RASMUSSEN, S. 591-593
 RATHAUS, M. 405-410
 RAVID, M. 405-410
 REED, B. 221-224
 REES, J. 689-692
 REID, J.L. 165-170
 RICHARDS, H.K. 393-398
 RIGDEN, B.G. 261-265
 RIZZOLI, R. 101-107
 ROBINSON, B.F. 659-666
 ROBINSON, P.J. 109-113
 RODRIGUEZ-SARGENT, C. 479-482
 ROSE, G.A. 411-418
 ROSENTHAL, F.D. 595-597
 ROSS, B. 419-426
 ROSZA, I. 327-329
 ROTHWELL, J. 115-118
- SAFAR, M.E. 653-658
 SAGNELLA, G.A. 639-651
 SAIAG, B. 599-605
 SANCHEZ-IBARROLA, A. 47-53
 SARNA, G.S. 87-93
 SAVERYMUTTU, S. 659-666
 SCHALEKAMP, M.A.D.H. 491-498
- SCHERSTÉN, T. 319-326
 SCHOLS, M. 25-31
 SCOTT, J. 207-212
 SCOTT, J.M. 221-224
 SEED, A. 17-23
 SHETTY, P.S. 519-525, 527-535
 SHUSTER, S. 689-692
 SIGSTRÖM, L. 229-232
 SILK, D.B.A. 607-615
 SILVA, P. 419-426
 SIMON, A.CH. 653-658
 SIMMONS, C.W. 499-506
 SKAGEN, K. 157-164, 213-216
 SKEWS, H. 217-219
 SMITH, G.P. 207-212

- SMITH, J.A. 543-548
SMITH, R. 617-623
SMITH, T. 311-318
SNASHALL, P.D. 363-370
STANKIEWICZ, A. 565-569
START, M.K. 81-86
STEWART, J.H. 73-80
STOLL, R.W. 273-282
STURNIOLI, G. 303-310
SUMI, H. 199-205
SYKES, B.C. 617-623
- TAKASUGI, S. 199-205
TATTERSFIELD, A.E. 579-585
TAYLOR, S.H. 139-143
TEMMAR, M.M. 653-658
THIJSSEN, H. 25-31
THOM, A. 625-631
THOMAS, R.D. 139-143
THOMPSON, R.P.H. 65-72,
 237-239
TIKKANEN, I. 267-272
TOKI, N. 199-205
TOMKINS, A. 131-137
- TOPPING, R.M. 261-265
TÖRNROTH, T. 267-272
TORRETTI, J. 703-706
TOTOMOUKOOU, J.M. 653-
 658
TRAP-JENSEN, J. 675-679
TUCKER, S. 87-93
TUNNEY, A. 387-392
TURNER-WARWICK, M. 261-
 265
TURTON, C.W.G. 261-265
- ULMANN, A. 339-341
UNGAR, A. 625-631
 ·
VALETTE, H. 371-375
VAN BRUMMELEN, P. 483-
 489, 571-577
VAN DER HEUL, C. 185-190
VANDONGEN, R. 387-392
VAN EIK, H.G. 185-190
VAN NOORT, W.L. 185-190
VARGHESE, Z. 55-63
VARTSKY, D. 457-461
- VENKATESAN, S. 435-439
VERNON, P. 17-23
- WAHREN, J. 95-100
WALKER, P. 319-326
WARREN, D.J. 165-170
WASS, V.J. 81-86
WATSON, M.L. 625-631
WATT, S.J. 139-143
WEIR, D. 221-224
WEISS, E. 405-410
WEN, S.-F. 273-282
- WHELPDALE, P. 625-631
WHITING, S. 261-265
WILKE, R. 467-469
WILLIAMS, K.J. 617-623
WILSON, C.A. 165-170
WONG, N.L.M. 549-554
WOOD, P.J. 579-585
WOOTTON, R. 335-338
WORKMAN, R.J. 633-637
WRIGHT, P.D. 233-235
WYSS, C.R. 499-506
- ZIMMERMAN, B.G. 343-348

Volume 60

SUBJECT INDEX

First and last page numbers of papers to which entries refer are given.
Page numbers marked with an asterisk refer to Editorial Reviews.

- Absorption, intestinal
 calcium 101–107
 competition 221–225
 diarrhoeal disease 131–137* dipeptides 221–225
 fluid and electrolytes 131–137* mucosal damage 115–118
 oxalate 411–418
 phosphate 55–63
 vitamin D₃ 241–243
- Absorption, renal
 calcium 101–107
 phosphate 171–177
- Acidosis
 ischaemia 537–542
 metabolic 355–361
- Acid protease 41–46
- Acyl-CoA:cholesterol *O*-acyltransferase, liver
 submicrosomal distribution 435–439
- Adenosine ammoniagenesis in parotid gland
 565–569
- Adenosine 3':5'-cyclic monophosphate, intra-venous salbutamol 579–585
- Adenosine 5'-phosphate, ammoniagenesis in parotid gland 565–569
- Adenosine phosphate deaminase 565–569
- Adenosine triphosphatase (Na⁺,K⁺-activated), erythrocyte 229–232
- Adrenaline, hepatic lactate and glucose 543–548
- Adrenergic facilitation, angiotensin 343–348*
- Adrenergic resistance 579–585
- α-Adrenoceptor, noradrenaline and vasoconstriction 483–489
- β-Adrenoceptor
 blockade 675–679
 blockade and growth 33–40
 lymphocyte cyclic AMP 587–589
 renal 571–577
- Adrenocorticotropic hormone, spironolactone 227–233
- β-Adrenoceptor *see* β-Adrenoceptor
- Affinity chromatography, renin 633–637
- Age
 isoprenaline responses 571–577
 lymphocyte cyclic AMP 587–589
 noradrenaline kinetics 217–219
- Airways
 chronic disease 17–23
- Airways—*continued*
 obstruction 11–15
 resistance 249–253, 579–585
- Albuminuria 693–702
- Alcohol, folate catabolism 221–224
- Aldosterone
 regulation 227–233
 renal hypertension 625–631
 saralasin 377–385
 sympathetic stimulation 399–404
 urinary excretion 229–232
- Alkalosis, metabolic 355–361
- Altitude, pulmonary circulation 599–605*
- Alveolar volume, intrapulmonary haemorrhage 507–512
- Amino acids, blood
 aromatic 95–100
 branched-chain 95–100
- Ammonia, parotid gland production 565–569
- Androgens, sweat gland activity 689–692
- Angiotensin I
 captopril 591–593
 converting enzyme 387–392, 491–498
- Angiotensin II
 adrenergic facilitation 343–348* antagonism 377–385
 captopril 591–593
 sodium 377–385
 spironolactone 227–233
- Antiserum, human saliva 179–184
- Antithrombin III, metabolism in liver disease 681–688
- Apolipoproteins, plasma 73–80
- Arteries, haemodynamics and responses to drugs 659–666
- Arteriovenous pressure difference, skin 499–506
- Asthma
 histamine receptors 363–370
 intravenous salbutamol 579–585
- Athletic training, methandienone 457–461
- Atrial pacing, chronic bronchitis 371–375
- Autonomic nervous system
 borderline hypertension 25–31
 haemodialysis hypotension 165–170
 noradrenaline 217–219, 483–489
 sympatholytic drugs 139–143
 tetraplegia 399–404

- Baroreflexes, blood volume 193–200
 Bethanidine, blood pressure and heart rate 139–143
 Bicarbonate, gastric secretion 427–433
 Bile acids, hepatic extraction 65–72
 Bladder, urinary, sympathetic stimulation 399–404
 Blood flow
 borderline and essential hypertension 653–658
 subcutaneous regulation 157–164, 213–216
 transcutaneous oxygen tension 499–506
 Blood platelets, ^{111}In -labelled 243–248
 Blood pressure
 isometric exercise 139–143, 145–155
 noradrenaline 483–489
 saralasin 377–385
 sympatholytic drugs 139–143
 Blood vessels
 arterial occlusion 659–666
 diseases 499–506
 neurogenic vasoconstriction 483–489
 portacaval anastomosis 87–93
 portal blood flow 355–361
 pulmonary artery wedge pressure 371–375
 resistance 5–9
 skin 157–164, 213–216, 499–506
 Blood volume, cardiovascular responses 193–200
 Body composition, methandienone 457–461
 Bone
 hydrochlorothiazide 101–107
 marrow cells 185–190, 191–198
 resorption 201–210
 Bone marrow cells
 leukaemia 191–198
 transferrin 185–190
 Bradykinin 387–392
 Breast cancer 201–210
 Breath holding
 effort sense 463–466
 expiratory flow measurements 11–15
 Breathing pattern
 airway resistance 249–253
 sustained lung inflation 667–674
 Bronchitis, cardiac function 371–375
 Bronchomotor tone 249–253
 Caffeine, catecholamines and metabolism 527–535
 Calcium
 gastric secretion 427–433
 plasma, hydrochlorothiazide 101–107
 tubular absorption 101–107
 Calciuria, hydrochlorothiazide 101–107
 Captopril
 angiotensins 591–593
 angiotensin I-converting enzyme 491–498
 Captopril—continued
 experimental hypertension 387–392
 renin 491–498, 591–593
 Carbon dioxide ($^{14}\text{CO}_2$), ^{14}C -labelled substrates 233–235
 Carbon monoxide diffusing capacity, intra-pulmonary haemorrhage 507–512
 Carcinoma, liver, antithrombin III metabolism 681–688
 Cardiac muscle, *see* Muscle, heart
 Cardiac output, chronic bronchitis 371–375
 Catecholamines
 borderline hypertension 25–31
 caffeine 527–535
 haemodialysis hypertension 165–170
 isoprenaline 571–577
 metabolism 183–191*
 subcutaneous blood flow 157–164
 Cholecystokinin, first meals 349–353*
 Cholesterol, lipoprotein, home haemodialysis 81–86
 Cholesterol, liver microsomal fractions 435–439
 Cholesterol 7 α -mono-oxygenase, liver sub-microsomes 435–439
 Cholic acid, hepatic extraction 65–72
 Chylomicrons, plasma vitamin D 241–243
 Cirrhosis
 antithrombin III metabolism 681–688
 primary biliary 207–212
 Clonidine, blood pressure and heart rate 139–143
 Coeliac disease, splenic function 109–113
 Collagen chains, skin 617–623
 Converting-enzyme inhibition 377–385, 387–392
 Copper, liver 207–212
 Corticosterone, spironolactone 227–233
 Cortisol, spironolactone 227–233
 Creatine kinase, primary hypothyroidism 595–597
 Crystalluria, oxalate-rich foods 411–418
 Cyclic AMP *see* Adenosine 3':5'-cyclic monophosphate
 Cytosine arabinoside resistance 191–198
 Dead-space measurement 17–23
 Deconvolution analysis 55–63
 Deoxycorticosterone acetate, salt-retention escape 467–469
 Diabetes mellitus, blood volume 193–200
 Dialysis, renal hypertension 625–631
 Diet
 fat-modified 81–86
 obesity 519–525
 oxalate-rich foods 411–418
 Digoxin, erythrocyte sodium transport 555–564

- 1,25-Dihydroxyvitamin D₃ 101–107
 Disaccharides, intestinal absorption 115–118
 Doping, sports 457–461
 Drug resistance 191–198
 Dyspnoea, respiratory muscle fatigue 463–466
- Effort sense, maintained inspiration 463–466
 Electrolytes, muscle, hypokalaemia 441–449
 Encephalopathy 95–100
 Endoplasmic reticulum, liver enzymes 435–439
 Enteroglucagon, first meals 349–353*
 Enterotoxins 131–137*
 Ergometry, bicycle, hypertension 25–31
 Ergotamine, small arteries 659–666
 Erythrocyte
 adenosine triphosphatase 229–232
 magnesium 225–257
 pitted 109–113
 sodium 229–232, 555–564
 Erythroid cells 185–190
 Essential hypertension 653–658
 Ethane-1-hydroxy-1,1-diphosphonate, renal tubular phosphate absorption 171–177
- Exercise
 adrenaline 543–548
 creatinine kinase 595–597
 forearm haemodynamics 675–679
 hydrogen ion balance 245–246
 immunological responses 225–228
 isometric 139–143
 lactate and gluconeogenesis 537–542
 sensory nerves, cardiorespiratory responses 145–155
 sympatholytic drugs 139–143
 Expiratory flow–volume curves 11–15
- Facilitation, adrenergic 343–348*
- Fatigue, respiratory muscle 463–466
- Fat-modified diet, long-term 81–86
- Fatty acids, free, caffeine 527–535
- Ferritin, microheterogeneity and sialic acid 259–262
- Fibrin, glomerular deposition 47–53
- Fibrinolysis 47–53
- 5-Fluorouracil, toxicity and pharmacokinetics 707–710
- Folate
 catabolism 221–224
 deficiency 131–137*
- Forearm haemodynamics 675–679
- Free fatty acids, turnover 87–93
- Free radicals, scavenging enzymes 211–219
- Fructose bisphosphatase, muscle 451–456
- Frusemide
 active and inactive renin 393–398
 renal papillary osmolality 467–469
 renin and indomethacin 479–482
- Gastric inhibitory peptide, first meals 349–353*
- Gastric mucosa, bicarbonate secretion 427–433
- Gastrin, first meals 349–353*
- Gastrointestinal hormones 349–353*
- Geriatric patients, sodium transport 555–564
- Glomerular filtration rate, haemorrhage 703–706
- Glomerulus
 fibrin deposition 47–53
 proteinuria 693–702
- Gluconeogenesis
 hepatic, ischaemia 537–542, 543–548
 renal, sodium transport 419–426
- Glucose
 intravenous salbutamol 579–585
 propranolol 675–679
 turnover 87–93
- Glutathione, liver 211–219
- Glutathione peroxidase, iron overload 211–219
- Glutathione reductase, iron overload 211–219
- Glyceryl trinitrate, small arteries 659–666
- Glycocholic acid, hepatic extraction 65–72
- Glycylsarcosine, intestinal absorption 221–225
- Growth, adrenoceptor blockade 33–40
- Gut hormones 349–353*
- H₁- and H₂-receptor antagonists 363–370
- Haemochromatosis 211–219
- Haemodialysis
 fat-modified diet 81–86
 hypotension 165–170
- Haemorrhage, renal renin 703–706
- Head-up tilt, subcutaneous blood flow 213–216
- Heart
 adrenoceptor blockade 33–40
 chronic bronchitis 371–375
 ferritin 259–262
 sensory nerves 145–155
 sympatholytic drugs 139–143
- Henle's loop, ascending, sodium rejection 467–469
- Hepatic artery, blood flow 355–361
- Hexokinase, muscle 451–456
- Histamine receptors, asthma 363–370
- Hydralazine, small arteries 659–666
- Hydrochlorothiazide
 calcium metabolism 101–107
 renin substrate concentration 591–593
- Hydrogen ion balance, exercise 245–246
- β -Hydroxybutyrate, plasma 87–93
- 4-Hydroxy-3-methoxymandelic acid, borderline hypertension 25–31
- 3-Hydroxy-3-methylglutaryl-CoA reductase, liver microsomes 435–439
- 25-Hydroxy-vitamin D
 plasma chylomicrons 241–243
 ultraviolet irradiation 235–242
- Hypercalcaemia 201–210

- Hypertension
 adrenergic facilitation 343–348*
 angiotensin I-converting enzyme 491–498
 borderline 25–31, 653–658
 essential 653–658
 indomethacin 479–482
 neurogenic 471–477*
 noradrenaline 483–489
 pulmonary 599–605*
 spontaneous 229–232, 491–498
- Hypertension, experimental
 captopril 387–392
 renal 387–392, 625–631
- Hyperthyroidism, sodium transport 555–564
- Hypnosis, isometric exercise pain 145–155
- Hypokalaemia
 cardiac and skeletal muscle 441–449
 sodium transport 555–564
- Hypotension, haemodialysis-induced 165–170
- Hypothyroidism, primary, creatine kinase 595–597
- Immunity, cellular 225–228
- Indium (¹¹¹In)-labelled platelets 243–248
- Indomethacin, renin response 479–482
- Inspiratory pressures 513–518
- Interrupted electrophoresis 617–623
- Intestine, small
 calcium absorption 101–107
 dipeptide absorption 221–225
 oxalate absorption 411–418
 passive permeability 115–118
 peptide transport 607–615*
 phosphate absorption 55–63
 vitamin D₃ absorption 241–243
- Ion transport, kidney 419–426
- Iron
 overload, tissue damage 211–219
 uptake 185–190
- Ischaemia, lactic acidosis 537–542, 543–548
- Isoleucine, blood 95–100
- Isometric exercise
 sensory nerves and cardiorespiratory responses 145–155
 sympatholytic drugs 139–143
- Isoprenaline
 blood pressure 399–404
 forearm blood flow 571–577
 lymphocyte cyclic AMP 587–589
 small arteries 659–666
- Jejunum, dipeptide absorption 221–225
- Kallikrein, pancreatic 199–205
- Kidney
 albumin excretion 693–702
 blood flow, hypertension 653–658
- Kidney—continued
 calcium absorption 101–107
 fibrin clearance 47–53
 high-molecular-weight renin 639–651
 hypertension 387–392
 phosphate absorption 171–177
 potassium transport 549–554
 renin molecular weight 41–46, 119–130*, 639–651
 sodium transport 419–426, 555–564
 venous renin 703–706
- Kidney disease
 cancer 201–210
 haemodialysis hypotension 165–170
 hypertension 653–658
 lipoprotein lipase 73–80
 renal failure, erythrocyte sodium 555–564
 phosphate absorption 55–63
- Lactate, blood, propranolol 675–679
- Lactate metabolism, ischaemia and acidosis 537–542, 543–548
- Lactic acidosis 543–548
- Lactulose, intestinal absorption 115–118
- Leucine, blood 95–100
- Leucocyte
 cyclic AMP 587–589
 zinc content 237–239
- Leucocytosis, stress 225–228
- Leukaemia, myeloblasts 191–198
- Limb capacitance, morphine 5–9
- Lipoprotein lipase 73–80
- Liver
 blood flow 355–361, 653–658
 bile acid extraction 65–72
 enzyme induction 221–224
 free-radical scavenging enzymes 211–219
 glutathione 211–219
 microsomal fractions 435–439
 oxygen consumption 355–361
- Liver disease
 bile acid extraction 65–72
 carcinoma 681–688
 cirrhosis 95–100, 207–212, 681–688
 hypertension 653–658
 organelle pathology 207–212
- Lung
 alveolar volume 507–512
 circulation 599–605*
 fluid balance 1–4*
 gas mixing 17–23
 haemorrhage 507–512
 imaging, ventilation/perfusion 17–23
 mechanics 17–23
 volume 249–253, 667–674
- Lymphocyte, cyclic AMP formation 587–589
- L-Lysyl-L-lysine, intestinal absorption 221–225

- α_2 -Macroglobulin, kallikrein interaction 199–205
Magnesium
 deficiency and excess 549–554
 menopause 255–257
Malate–aspartate shuttle, renal sodium transport 419–426
Mannitol, intestinal absorption 115–118
Menopause, serum, urinary, and erythrocyte magnesium 255–257
Metabolic rate, caffeine 527–535
Methandienone, athletic performance and body composition 457–461
Micropuncture, renal 171–177, 549–554
Morphine, forearm capacitance 5–9
Motilin, first meals 349–353*
Muscle, cardiac, hypokalaemia 441–449
Muscle, skeletal
 blood flow in hypertension 653–658
 fructose bisphosphatase 451–456
 hexokinase 451–456
 hypokalaemia 441–449
 inspiratory 513–518
 2-oxoglutarate dehydrogenase 451–456
 phosphofructokinase 451–456
 respiratory 463–466, 513–518
 zinc content 237–239
Myeloblasts, leukaemia 191–198
Myocardial infarction, subcutaneous blood flow 157–164, 213–216
- Neurogenic hypertension** 471–477*
Neurotensin, first meals 349–353*
Noradrenaline
 α -adrenoceptor-mediated vasoconstriction 483–489
 kinetics, age-dependence 217–219
 tetraplegia 399–404
Nutrition, thyroid and catecholamines 183–191*
Obesity
 caffeine 527–535
 postprandial thermogenesis 519–525
Oedema, pulmonary 1–4*, 599–605*
Oestrogen, serum, urinary and erythrocyte magnesium 255–257
Oligopeptides, intestinal transport 607–615*
Oophorectomy, serum, urinary and erythrocyte magnesium 255–257
Optical isomerism, DL- and D-propranolol 675–679
Osmolality, renal papillary 467–469
Osteogenesis imperfecta, skin collagen 617–623
Osteomalacia, ultraviolet irradiation 235–242
Oxalate, diet and urinary output 411–418
- Oxidation rates, ^{14}C -labelled substrates 233–235
2-Oxoglutarate dehydrogenase, muscle 451–456
Oxprenolol, blood pressure and heart rate 139–143
Oxygen
 consumption, liver 355–361
 skin partial pressure 499–506
- Pain, isometric exercise 145–155
Pancreatic polypeptide hormone, first meals 349–353*
Pancreatitis, plasma kallikrein 199–205
Papillary sodium concentration 467–469
Parathyroid hormone
 experimental undersecretion 101–107, 549–554
 gastric bicarbonate secretion 427–433
Parotid gland, ammonia production 565–569
D-Penicillamine, primary biliary cirrhosis 207–212
Peptides, intestinal absorption 221–225, 607–615*
pH, muscle, hypokalaemia 441–449
Phenoxybenzamine, blood pressure and heart rate 139–143
Pharmacokinetics, fluorouracil 707–710
Phentolamine, blood pressure and heart rate 139–143
Phosphate absorption
 intestinal 55–63
 renal 171–177
Phosphodiesterase, caffeine 527–535
Phosphofructokinase, muscle 451–456
Plasma flow, renal renin 703–706
Plasma volume, chronic bronchitis 371–375
Plethysmography
 forearm blood flow 571–577
 venous occlusion 5–9
Portacaval anastomosis 87–93
Portal vein, blood flow 355–361
Positive end-expiratory pressure, clinical use 1–4*
Potassium depletion
 cardiac and skeletal muscle 441–449
 renal tubular transport 549–554
Pressure load detection, respiratory 513–518
Pressure–volume hysteresis, respiratory 249–253
Propranolol
 growth 33–40
 haemodynamics 675–679
 heart 33–40
 metabolism 675–679
 renin substrate concentration 591–593

- Prostaglandins**
 bone resorption 201–210
 renal hypertension 625–631
 sodium balance 405–410
- Prostaglandins E, F, sodium balance** 405–410
- Proteinase, human renin** 633–637
- Proteins, salivary and seminal** 179–184
- Proteinuria** 693–702
- Pseudorenin** 633–637
- Puberty, sweat gland activity** 689–692
- Pulmonary arterial wedge pressure** 371–375
- Pulmonary circulation, altitude** 599–605*
- Pulmonary oedema** 1–4*
- Renin**
 active 393–398
 assays 591–593
 borderline hypertension 25–31
 captopril 491–498, 591–593
 frusemide 393–398
 high-molecular-weight 639–651
 inactive 119–130*, 393–398
 indomethacin 479–482
 International Reference Preparation 633–637
 isoprenaline 571–577
 low-salt state 343–348*, 377–385
 molecular weight 41–46, 639–651
 proteinase 633–637
 renal hypertension 625–631
 spironolactone 227–233
 substrate 591–593
 tetraplegia 399–404
 volume contraction 479–482
- Renin–angiotensin system**
 adrenergic facilitation 343–348*
 borderline hypertension 25–31
- Renin inhibitor, renal** 639–651
- Respiration, sensory nerves** 145–155
- Respiratory sensations**
 mouth negative pressure 513–518
 muscle fatigue 463–466
- Reverse tri-iodothyronine, metabolism** 183–191*
- R–R interval, blood volume** 193–200
- Salbutamol, asthma** 579–585
- Saliva**
 ammonia 565–569
 proteins 179–184
- Salivary gland** *see* Parotid gland
- Secretin, first meals** 349–353*
- Semen, proteins** 179–184
- Sensory neuropathy, isometric exercise** 145–155
- Sex difference, sweat gland activity** 689–692
- Shock, hepatic lactate and gluconeogenesis** 537–542
- Sialic acid, serum ferritin homogeneity** 259–262
- Skeletal muscle** *see* Muscle, skeletal
- Skin**
 collagen chains 617–623
 subcutaneous blood flow 157–164, 213–216
 transcutaneous oxygen tension 499–506
 ultraviolet irradiation 235–242
- Sodium**
 depletion 625–631
 erythrocyte transport 555–564
 hypertension 471–477*, 625–631
 papillary concentration 467–469
 prostaglandins 405–410
 renal hypertension 625–631
 renal transport 419–426
 saralasin 377–385
- Spironolactone, aldosterone regulation** 227–233
- Spleen, coeliac disease** 109–113
- Starvation, plasma glucose and free fatty acids** 87–93
- Stereoselectivity, DL- and D-propranolol** 675–679
- Stomach**
 bicarbonate secretion 427–433
 first meals 349–353*
 gastrin 349–353*
 gastric inhibitory peptide 349–353*
- Stress, immunological responses** 225–228
- Subcellular fractionation, analytical** 211–219
- Superoxide dismutase** 211–219
- Sweat glands, puberty** 689–692
- Sympathetic nervous system**
 borderline hypertension 25–31
 noradrenaline 217–219, 483–489
 tetraplegia 399–404
- Sympatholytic drugs, cardiovascular response to exercise** 139–143
- Temperature, body, serum creatine kinase** 595–597
- Tetrahydouridine** 191–198
- Tetraplegia, sympathetic stimulation** 399–404
- Thermogenesis, obesity** 519–525
- Thrombocytes, ¹¹¹In-labelled** 243–248
- Thromboplastin, fibrin deposition** 47–53
- Thyroid gland, metabolism** 183–191*
- Thyroparathyroidectomy, experimental** 101–107, 171–177
- Thyroxine, metabolism** 183–191*
- Timolol, growth and heart** 33–40
- Toxicity, 5-fluorouracil** 707–710
- Transaminase, renal gluconeogenesis** 419–426
- Transferrin, monoferrous** 185–190
- Transplantation, renal** 55–63, 73–80

- Transport**
- erythrocyte sodium 555–564
 - intestinal peptides 607–615*
 - renal potassium 549–554
 - renal sodium 419–426, 555–564
- Triacylglycerols, plasma** 73–80
- Triglyceride, lipoprotein, home haemodialysis** 81–86
- Tri-iodothyronine, metabolism** 183–191*
- Tropical malabsorption** 131–137*
- Trypsin inhibitor** 639–651
- Tubule, renal**
- ascending loop 467–469
 - calcium absorption 101–107
 - phosphate absorption 171–177
- Ultraviolet irradiation, vitamin D** 235–242
- Uraemia, lipoprotein lipase** 73–80
- Urinary bladder, sympathetic stimulation** 399–404
- Urine**
- oxalate content 411–418
 - protein content 693–702
- Valine, blood** 95–100
- Vascular diseases** 499–506
- Vascular resistance** 5–9, 659–666
- Vasoconstriction, neurogenic** 483–489
- Veins, intravenous morphine** 5–9
- Venous pressure, skin** 499–506
- Ventilation, lung, sustained inflation** 667–674
- Ventilation/perfusion lung-imaging** 17–23
- Vitamin D**
- plasma chylomicrons 241–243
 - ultraviolet irradiation 235–242
- Volume-pressure hysteresis, respiratory** 249–253
- Water retention, hypertension** 471–477*
- Wedge pressure, pulmonary artery** 371–375
- Zinc, leucocytes and muscles** 237–239

CORRECTIONS

Volume 59

page 191: to the listed addresses below the authors' names should be added Liver Unit, Kings College Hospital and Medical School, London

page 473, Fig. 4 legend: for $C_{18:0}$, Oleic acid; $C_{18:2}$, linoleic acid; $C_{18:0}$, stearic acid; $C_{16:1}$, myristic acid read $C_{18:1}$, Oleic acid; $C_{18:2}$, linoleic acid; $C_{18:0}$, stearic acid; $C_{16:1}$, palmitoleic acid.