

*cardiac inhibition* among cold-blooded animals, except what was brought out by the researches of Goltz on the frog.

The case for the Slider Terrapin was tested in twelve specimens. The following forms of stimulation were employed:—

1. Injury due to removal of plastron, etc.
2. Electric stimulation of the brachial plexus and sciatic nerve with the rapidly interrupted current.
3. The same sort of stimulation applied to the main sympathetic stem in the upper thoracic region.
4. The same applied to the viscera.
5. Sponging over the peritoneum and muscles.
6. A stream of cold water over the peritoneum.
7. Goltz's "Klopf-Versuch" (tap) over peritoneum, especially in the region of the bladder.
8. A pushing-down force with the end of the wooden handle of a seeker, in the same region as that noted in 7.

Without giving details in each case, the results may be thus stated: A stream of cold water allowed to flow over the lower part of the peritoneum, and injury from operative procedure have almost always been followed by more or less cardiac inhibition, frequently lasting for many minutes (often complete stand-still of the heart for a shorter period). The relatively greater effect of such forms of stimulation, as sponging over the peritoneum, as compared with electric stimulation, even with such stimulation of the great nerves, is very striking.

Stimulation of the main sympathetic, in the thoracic region, has produced more decided effects than corresponding stimulation of the brachial plexus, etc. In some cases the latter had not the slightest effect. Electric stimulation of the viscera has generally produced little effect.

When trying the "Klopf-Versuch" (abdominal tap), I was forcibly reminded of what Prof. Goltz had told me when explaining his own method of performing this experiment on the frog, that there is the greatest difference in individual frogs of the same species as to susceptibility to reflex inhibition. That this applies to all the chelonians, my experiments abundantly show. To get the above results, the cardio-inhibitory centre in the medulla and the vagi must, of course, be intact. The afferent nerves are numerous, doubtless.

There are a number of other points connected with the pneu-