within the last few thousand years. Even if, as Fisher et al.⁶ suggest, a compensatory mechanism is

at work, such a mixing is not unlikely. So far as is known, all the peoples of Asia and North Africa have very high Rh-positive frequencies, but until recently no source for the hypothetical Rh-negative element could be found. Etcheverry⁷ has now published the results of Rh tests on 128 persons of Basque descent living in the Argentine, of whom 33.6 per cent are Rh-negative. If tests on larger numbers of subjects bear out this remarkable observation it will be highly probable that the d gene in Europe is mainly derived from ancestors akin to the modern Basques. An examination of the full Rh genotypes and other blood group antigens of as many Basques as possible is much to be desired, and steps are being taken to secure the necessary specimens. There are likely, however, to be many hindrances and delays, and I do not wish to discourage any other investigator from working on the same lines.

Note added in proof : Since the above was written, Dr. M. A. Etcheverry has kindly sent me an extract from his book, "Transfusion sanguinea", p. 113 (Buenos Aires, in the press) and a copy of his paper "El factor Rh en personas de ascendencia ibérica et itálica, residentes en Argentina", Semana medica (in the press). In these works he gives further statistics increasing the total number of Basques examined to 250 with $35 \cdot 6$ per cent of Rh-negatives. He also puts forward the suggestion that the Basques are the present-day representatives of the racial group from which the Rh-negative or d factor in the population of Europe is derived.

A. E. MOURANT

Ministry of Health,

Blood Group Reference Laboratory,

Lister Institute of Preventive Medicine,

London, S.W.1. Aug. 8.

¹ Boyd, W. C., and Boyd, L. G., Amer. J. Phys. Anthrop., 23, 49 (1937).

² Vallois, H. V., Bull. Soc. Anthrop., 5, 9th Ser., 53 (1944).
 ³ Fisher, R. A., personal communication cited by Race, R. R., Nature, 153, 771 (1944).

Haldane, J. B. S., Ann. Eugen., 11, 333 (1942).
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Source of the Hydrogen lons Produced by Gastric Mucosa

Conway and Brady¹ have claimed to show two statements made by Davies, Longmuir and Crane² ". . . to be incorrect, as indicated in the accompanying cyclical scheme". These statements were (1) "... so Conway's statement that ... a cyclical process³ could give a Q_{HCl} far higher than Q_{0} is not justified"; and (2) "These facts rule out theories dependent upon the production of hydrogen ions by the fermentation or oxidative degradation of any carbon compound".

A critical analysis of their new cyclical scheme¹ shows that the overall reaction is really

$$H_2O \longrightarrow H^+ \longrightarrow HCO_3^-,$$

which is exactly that put forward by ourselves^{2,4}. It is unfortunate that Conway and Brady in their present scheme¹ have not made it clear that H₂O is utilized between stages 2 and 3 and not between stages 5 and 6, that the hydrogen ions which are secreted come initially from the hydrogen atoms in water, and that the rate at which they are formed is not limited by the rate of production of organic acids from glucose or other precursor during their oxidative degradation, as previously postulated by Conway, Fitzgerald and Walls⁵ and disproved by our experimental evidence².

The first mention of the cyclical scheme³ seemed to put it on the same plane as the statement³ that ". . . the hydrogen ions from an organic acid may supplement those from carbonic acid", which has already been refuted². We are interested to see that in the fuller explanation of this scheme¹ part of our own mechanism has been incorporated though, since they have not presented any relevant experimental evidence, it seems premature for Conway and Brady to speculate on precisely how water is split by gastric mucosa to form hydrogen and hydroxyl ions.

Their calculations¹ concerning the energy required per equivalent of hydrogen ion are irrelevant, since in this cyclical scheme, starting and finishing isothermally with a compound such as phosphoglyceraldehyde, the free-energy change for its oxidation and subsequent reduction must be zero. In any event, the calculations are based on a relation between oxidant and reductant arrived at by speculation. The energy required is that needed for the fundamental reactions of the water to proceed, and this and considerations of the efficiency relations of gastric mucosa will be discussed elsewhere.

R. E. DAVIES

N. M. LONGMUIR

E. E. CRANE

Medical Research Council,

Unit for Research in Cell Metabolism, Department of Biochemistry,

University, Sheffield.

Conway, E. J., and Brady, T., Nature, 159, 876 (1947).

² Davies, R. E., Longmuir, N. M., and Crane, E. E., *Nature*, **159**, 468 (1947).

³ Conway, E. J., and Brady, T., Nature, 159, 137 (1947).
 ⁴ Crane, E. E., Davies, R. E., and Longmuir, N. M., Biochem. J., 40, Proc. xxxvi (1946).

Conway, E. J., Fitzgerald, O., and Walls, D., Nature, 156, 477 (1945).

In reply to Davies et al., we may say that it has been definitely shown that their two statements quoted by us were erroneous. In the cycle, which explains the high Q_{HCl}, the hydrogen ions appearing in the gastric secretion do not originate in the splitting of water, but from the ionization of phosphoglyceric acid, produced by the fermentation of phosphoglyceraldehyde.

They proceed to summarize our cycle in an overall reaction which is misleading, and, in fact, inaccurate.

In the short space of a letter, we found it convenient to represent bicarbonate formation (conventionally described as an alkalinity) as arising from the neutralization of hydroxyl ions by carbonic acid. Since much emphasis is given to this by Davies et al., a fuller treatment would show that neutralization of hydroxyl ions formed by the ionization of water molecules would not occur beyond a slight initial stage. In a steady state with a steady pH value in the cellular region, the reaction

 $H_2O \rightleftharpoons H^+ + OH^-,$

with H₂O and H⁺ ion concentrations fixed, involves no excess production of hydroxyl ions. But the reactions