response^{3,5} and includes reactions which are independent of one another and of macromolecular synthesis. Therefore, it was necessary to invoke an intermediary agent between external signal and intracellular response with the capacity to modulate many different metabolic pathways at the same time. The only specific enzymatic steps then known to be accelerated by the stimulatory treatments were the transphosphorylation reactions of glycolysis^{7,10}, all recognised as control points in this pathway and all requiring Mg²⁺ (refs 11-13). It has also become evident that some key regulatory enzymes vary in activity with their degree of phosphorylation^{14,13} and that the activities of the protein kinases or phosphatases which determine this degree are sharply dependent on [Mg²⁺] in the physiological range. In a slightly different cellular domain, we have shown that the rates of uptake of hexoses and uridine into chicken embryo cells, which are governed coordinately by external effectors, can be controlled by Mg²⁺, but not by Ca²⁺, in a manner that simulates in detail the kinetics of the physiological response¹³.

It is generally agreed that over 90% of the Mg²⁺ in cells is bound, largely to membranes and macromolecules¹⁷⁻²⁰. Changes in configuration of the binding structures or in their microenvironment would alter the availability of Mg²⁺ for its metabolic tasks. Increasing the permeability of the cell membrane to Mg²⁺ would also tend to drive up the intracellular concentration of Mg²⁺ (ref. 21). Because the estimated concentration of free intracellular Mg²⁺ is less than that required for maximal activity of many key regulatory enzymes¹¹⁻¹⁴ any small change would have far reaching effects²².

By contrast, the concentration of free Ca²⁺ in cells is far too low²³ to affect the regulatory enzymes of the pathways involved in the coordinate response^{3,5}. Perhaps some mechanical responses which involve proteins with a very high affinity for Ca2+ are under its control. But, the remarkable sequestering power of the cell for Ca²⁺ (ref. 24) would ensure that such a response would be short-lived, unlike the coordinate response which is maintained for many hours, requires continuing stimulation, and culminates in accelerated cell division.

There would seem to be some merit in Durham's suggestion that the inhibition of cell metabolism which accompanies infection by cytocidal viruses is caused by a gross increase in intracellular Ca²⁺ following damage to the cell membrane. This follows from the observation that an internal Ca²⁺ level, $[Ca^{2+}_{i}] \ge 10^{-4} M$ interferes with key Mg²⁺-dependent the reactions in cell^{25,26}. Beyond such pathological effects, however, the role of Ca²⁺ seems likely to be restricted to short-term structural and mechanical responses in keeping with the pulse-like, localised nature of its fluctuations, and to the limited number of proteins which can respond to [Ca²⁺] within the physiological range of <10⁻⁷-10⁻⁵ M. Longterm inhibition of metabolism by Ca²⁺, deprivation may be the indirect result of lowering free Mg^{2+} within the cell⁴. H. RUBIN

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DURHAM REPLIES-The best current estimates of ion concentrations in resting eukaryotic cytoplasm are around 10^{-3} M for Mg²⁺ and 10^{-7} M for Ca²⁺. This 10⁴-fold difference explains why Ca²⁺ and not Mg²⁺ is used as a shortterm intracellular signal in movement, hormone action, synaptic transmission, protozoan chemotaxis, vision and bioluminescence. Powerful homeostatic mechanisms tend always to maintain very low cytoplasmic Ca2+ concentrations. Prolonged overwhelming of these mechanisms would produce a spectrum of changes strikingly like those produced by many lytic or transforming viruses.

Rubin and his colleagues have shown clearly that changes in extracellular Mg²⁺ concentrations can greatly affect cells. Others have shown analogous responses to extracellular K⁺ or H⁺ levels, and to agents that affect polyamine metabolism. Responses to extra-

cellular Ca²⁺ are notoriously variable, however, even for processes that undoubtedly involve intracellular Ca2+. One reason is that eukaryotic cells conduct most Ca²⁺ fluxes across internal membranes, to and from substantial calcium reservoirs for which there are probably no magnesium equivalents. In the long term, feedback relationships between different ions tend to obscure the primary ion fluxes, so that one is probably wise not to make categorical statements about any one ion.

Rubin's statement that the cytoplasmic Ca²⁺ concentration is too low to affect the "coordinate response" is wrong. Micromolar Ca acts on adenyl and guanyl cyclases and phosphodiesterases, with consequent effects on cyclic nucleotide levels and kinase activities. It also acts on K⁺ and other ion fluxes, and on DNA precursor synthesis. Rubin's implication that intracellular Ca²⁺ ions act via Mg²⁺dependent reactions can be only partly true.

Rubin and I agree that cell biologists frequently postulate, and then expensively seek, macromolecules to fill roles that ions can fill much more simply.

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Cholinergic link in yawning

HOLMGREN et al.1 recently focused attention on the basic mechanism behind the act of yawning. They reported that physostigmine and pilocarpine induce yawning in young male rats and hypothesised that a central cholinergic link may be involved in the reflex. Our results support such a proposal.

Yawning is a characteristic sign of withdrawal from morphine in man² and monkeys³. When naloxone (0.5 mg per kg body) weight), but not physiological saline, was injected subcutaneously (s.c.) into three 'ex-addict' baboons (two male and one female, 4.4-5.2 kg), 98 d after abrupt withdrawal of morphine, a low incidence of yawning (2-4 episodes) occurred within 15 min; on this occasion, other signs of long-term withdrawal were absent. Seven days later, the same baboons were again challenged with naloxone, 20 min after physostigmine (0.05 mg per kg s.c.). Although this dose of physostigmine per se did not elicit yawning, with each animal there was a threefold increase in the incidence of yawning.

Although a cholinergic link may indeed be involved in yawning, it should be recognised that other factors are also important. Thus, dimethyltryptamine causes