Table 2.

Cr 5գգ	oss	es 5ර්ර්	pairs tested	No. of	offspring ਰੋਹੋ
f	х	f	60	3 1 40	3128
m	x	m	60	1224	1303
f	х	m	200	0	0
π	×	f	200	677	635
$(m \times f)F_1$	x	f	100	2298	179 2
$(m \times f)F_1$	x	m	50	365	301
\mathbf{f}^-	x	$(m \times f)F_1$	50	0	0
m	x	(m x f)F ₁	50	0	0

Farnsworth, M. W. State University of New York at Buffalo, Buffalo, New York. Effect of prolonged CO₂ exposure on flight.

In the course of studies of energy metabolism with the Canton S strain of D. melanogaster, we have had occasion to employ thoracic sarcosomes of the adult and have made some observations which may be of interest to any worker employing

CO2 as an anesthetic. Thoraces have been obtained by removing head and abdomen of adults with watchmakers forceps. The procedure can be carried out either with well chilled flies in a cold room or with CO2 anesthetized flies at room temperature. For the latter method, flies are placed in a dry plugged vial into which is inserted a small glass tube connected to a CO2 generator consisting of a stoppered sidearm flask containing dry ice. It was noticed that chilled flies returned to room temperature seemed unharmed by the experience, whereas a large number of those exposed to CO2 intermittently or continuously for periods of 45 minutes or more were unable to fly after recovery from anesthesia. Although the wings could be lifted, flight was not attained even when flies were shaken out of a vial in mid air. Walking and hopping movements, however, were normal. In most such individuals, the condition appeared to be permanent since the inability to fly was still evident the following day and as long as observed thereafter. Microscopic examination showed no abnormalities of thorax or wings. Fertility of males and females was not seemingly affected and the condition was not inherited by subsequent generations. To determine if the effect on flight was induced by anoxia alone, rather than by some more specific effect of CO2, flies were exposed to a nitrogen atmosphere. The results were similar to those obtained with CO2 indicating that extended periods of anoxia are a reasonable cause of the deleterious effect on flight. Since walking and body movements were normal, presumably the relevant musculature of the appendages was also normal. In contrast, the more highly specialized flight muscle seemed sensitive to anoxia. One likely site of injury in flight muscle is the sarcosome and thus the possibility that these specialized mitochondria were no longer able to effect coupled oxidation of an appropriate substrate was tested. Sarcosomes were isolated from untreated and CO_2 treated adults and P/O ratios were obtained by conventional Warburg techniques using ⟨ -glycerophosphate as substrate. Methodology followed that of Gregg et all (Biochim.) Biophys. Acta, 45 (1960) 561). Results of 10 experiments with CO2 treated flies gave a mean P/O ratio of 1.54 as compared to 1.49 in an equal number of experiments with controls. Oxygen uptake in uatoms/mg protein was 2.42 and phosphate esterified as ATP was 3.73 umoles/ mg protein in the experimental while corresponding values for controls were 2.24 uatoms O/mg and 3.42 umoles P/mg. Thus, no significant differences in the ability of sarcosomes to effect oxidation and coupled phosphorylation were revealed in treated and untreated groups. It is obvious that the site of injury has not been identified. By analogy with mammalian systems, it is possible that inability to fly after prolonged anoxia may be of neurological origin. In any event, the use of CO2 or other gases as anesthetic agents may result in physiological side effects requiring assessment in some types of experiments. (Supported by research grant HD 01240 from NIH).