

The final discussion stressed a number of the highlights of the meeting as well as guidelines to future work. One important point, a negative one, was the danger, especially in the case of the salmon, of prejudicing future population studies by the artificial transfer of fish from one area to another. Another, a positive one, was the need to validate the genetic basis of what are essentially studies of phenotypes, by carrying out breeding experiments with every species for which this is possible. The Council (ICES) resolved to publish the papers and the discussions following them in their *Rapports et Procès-verbaux des Réunions*.

A. E. MOURANT
Serological Population Genetics
Laboratory, St. Bartholomew's
Hospital, London E.C.1, England

Bioelectrical Impedance

Because of the increasing use of electrical impedance to measure physiological phenomena, those interested in this technique convened under the chairmanship of S. E. Markovich (1) to present their findings in the use of impedance to measure blood volume changes in the head, thorax, abdomen, and limbs and to measure respiratory volumes. Intra-cerebral impedance values in a variety of brain lesions were also described. Thirty-three papers were presented in 2½ days; they will be published in the *Annals of the New York Academy of Sciences*.

There was much evidence of enhanced activity in three areas (clinical use, underlying physiological factors, and instrumentation). Increasing use is being made of transcranial impedance (rheoencephalography, REG) to characterize waveforms in normal persons in various age groups and in patients with known cerebrovascular disease and intracranial lesions. Studies were also reported in which the component extracranial circulation was reduced (by temporary bilateral occlusion of the temporal arteries); other reports described changes in the REG during the Valsalva maneuver. Direct-coupled systems have been used to obtain indicator-dilution curves made by injection of hyper- or hypoconducting solutions into a carotid artery. These studies indicate some promise of ability to study differences in perfusion of the regions supplied by these arteries. There were no reports of successful establishment

of a quantitative relation between change in impedance (ohms) and the amount of blood flow (milliliters per minute) passing through the region between the electrodes.

The changes in transthoracic impedance which accompany the ejection of blood from the ventricles and those which accompany respiration are being used clinically to monitor stroke volume and tidal volume. The correlation between stroke volume (milliliters of blood ejected per heart beat) and the change in neck-abdomen impedance (in ohms) after the waveform is processed were described. In normal subjects, over a moderate range in cardiac output, the correlation is quite good. In relation to the left-to-right transthoracic impedance changes that accompany respiration, the amplitude of the impedance change is proportional to tidal volume but calibration with an air-volume measuring device (spirometer) is necessary in the individual subject. In general, the smaller the subject, the larger the increase in impedance per cubic centimeter of air inspired.

Chest-to-back changes in thoracic impedance which demonstrated differences in ventilation between the lungs were reported. Reduction in basal thoracic impedance with hydration and pulmonary edema were also described.

Much controversy still exists regarding the factors which underlie the basal impedance and its changes that can be recorded between electrodes on living tissue. Information in this area is urgently needed for a proper evaluation of the limits of ability to calibrate bioelectric impedance measurements. Both theoretical and practical studies to identify the pathway of current caused to flow through inhomogeneous living tissue were reported. Although electrode sizes and locations can be selected to permit optimum detection of desired physiological events, the important basic studies in the living organism in each area are slow in coming, despite the obvious need.

There is a considerable difference of opinion regarding the appropriate type of instrumentation for the study of a given phenomenon. There were advocates of the use of two, three, and four terminals, crusaders for low and high frequency, and adherents of either constant-current or constant-voltage. It is too soon to draw definite conclusions on the efficacy of any one method over another in obtaining the best measurement of a physiological event under all circumstances, which consider conveni-

ence and safety to the subject as well as time required to make the measurement. Fortunately, all agree that bioimpedance should be measured with a current that will not stimulate the subject or alter the event being measured.

L. A. GEDDES
Department of Physiology,
Baylor College of Medicine,
Texas Medical Center, Houston 77025

Note

1. The International Conference on Bioelectrical Impedance, held in New York City from 29 September to 1 October 1969, was sponsored by the New York Academy of Science. The 70 participants included delegates from Canada, Austria, Czechoslovakia, Finland, Bulgaria, and Italy in addition to workers from the United States.

Inelastic Behavior of Solids

If scientific progress thrives on controversy, the field of the inelastic behavior of solids is due for major advances. Fifty scientists, representing both the theoretical and the experimental viewpoints, were present at the recent Battelle Institute Colloquium on the Material Sciences, which was held in Columbus and Atwood Lake, Ohio, 15–19 September 1969. During the conference, inelastic behavior was discussed in terms of continuum, quantum, and statistical mechanics, of the classical reaction rate and the classical dislocation theories, of experimental metallurgy, and of phenomenological studies. Primary areas of controversy were identified, but little consensus was reached on the issues involved in treating any one aspect of inelastic behavior.

The conference was designed to bring together the leading proponents of each of the two fundamental approaches to the subject: continuum mechanics and dislocation dynamics. In applying continuum mechanics, the discrete mechanisms by which a material actually deforms in response to applied loads are ignored in the hope of interrelating the pertinent macroscopic parameters. The advocates of the microscopic viewpoint, on the other hand, are directly concerned with individual crystal defects and their interactions. Thus, material behavior is currently being described by (i) treating the material as a continuum that deforms according to some experimentally determined constitutive relation and by (ii) treating the deformation as the aggregate of the movement of each of the numerous discrete defects that it contains. Results necessary for the constitutive equations