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The object of *Gut* is to publish original papers and reviews concerned with practice and research in the field of gastroenterology. The field is that of alimentary, hepatic, or pancreatic disease, and papers may cover the medical, surgical, radiological, or historical aspects. They may also deal with the basic sciences concerned with the alimentary tract, including experimental work. The report of a single case will be accepted only if it is of sufficient interest in relation to a wider field of research.

There will be a section devoted to short papers on laboratory and surgical techniques and methods of investigation where these are not part of a larger survey.

COMMUNICATIONS Papers should be addressed to the Editorial Secretary, *Gut*, Central Middlesex Hospital, Park Royal, London, N.W.10. Papers are accepted only on the understanding that they are not published elsewhere without previous sanction of the Editorial Board. They should be in double-spaced typewriting on one side of the paper only. On the paper the name of the author should appear with initials (or distinguishing Christian name) only, and the name and address of the hospital or laboratory where the work was performed. A definition of the position held by each of the authors in the hospital or laboratory should be stated in a covering letter to the Editor. Communications should be kept short, and illustrations should be included when necessary; coloured illustrations are allowed only if monochrome will not satisfactorily demonstrate the condition. It is not desirable that results should be shown both as tables and graphs.

ILLUSTRATIONS Diagrams should be drawn in Indian ink on white paper, Bristol board, or blue-squared paper. Diagrams should be twice the size of the finished block. The legends for illustrations should be typed on a separate

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ABBREVIATIONS In general, symbols and abbreviations should be those used by British Chemical and Physiological Abstracts. In particular, g. and mg. (not gms. or mgms.) are abbreviations for grammes and milligrammes, and ml. (not c.cm.) is the unit of volume. In any paper concerning electrolyte metabolism, it is desirable that data be calculated as mEq./l. as well as (or alternatively to) mg./100 ml.

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appear to have at least an extra day of life in hand when they have reached the extrusion zones.

Secondly there is a difference in behaviour of the dead or dying cells in various areas. Shedding from the basement membrane generally occurs but is strikingly apparent in the small intestine. Here the villi are denuded by massive desquamation, whereas in the pylorus and colon fewer cells are lost.

From these findings it is clear that the villi are uniquely vulnerable to epithelial loss. The collapse and disappearance of the normal villus shape after cell desquamation shows that its form is almost entirely due to an intact epithelium.

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The December 1961 Issue

THE DECEMBER 1961 ISSUE CONTAINS THE FOLLOWING PAPERS

Long-term medical management and complications of 'resistant' ascites WILLIAM H. J. SUMMERSKILL, BERNARD F. CLOWDUS, II, and JOHN W. ROSEVEAR

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Plasma free fatty acid in liver disease A. MORTIAUX and A. M. DAWSON

Changes in the portal and splenic veins in portal hypertension and their relation to splenomegaly JOHN B. WILSON

Radiological investigation of the small intestine W. G. SCOTT-HARDEN, H. A. R. HAMILTON, and S. MCCALL SMITH

The intestinal absorption defect in cystinuria M. D. MILNE, A. M. ASATOOR, K. D. G. EDWARDS, and LAVINIA W. LOUGHRIDGE

The effect of corticotrophin and corticosteroids on the external secretion of the pancreas in dogs WILFRED SIRCUS

Light- and electron-microscope studies of the effects of 4-aminopteroylglutamic acid (aminopterin) on the mucous membrane of the small intestine of the rat. A. WYNN WILLIAMS

Secretion of blood group substances in duodenal, gastric and stomal ulcer, gastric carcinoma, and diabetes mellitus R. DOLL, H. DRANE, and A. C. NEWELL

Experiences with extraperitoneal colostomy and ileostomy A. ELLIOT-SMITH and NEIL S. PAINTER

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