SUMMARY AND CONCLUSION
3) The subjects were divided into 5 groups of 6 patients each and a plan was so devised so that marrow aspirations were available for histochemical staining for iron from the 3rd to 12 days from start of iron dextran therapy. Haematological data was also available for study and correlation with bone marrow iron staining results. Sections for liver biopsy were also, available for histochemical iron staining for the first 6 to 12 days therapy period.

4) The amount of iron presumed to be deposited in the storage sites on various days of treatment was calculated after giving due allowance for the iron utilized for new haemoglobin synthesis and for the amount of iron remaining unabsorbed at the site of injection.
5) It was seen that with the therapeutic regime of 100 mg. iron dextran complex given intramuscularly daily, the storage iron became demonstrable histochemically on the 6th post therapy day and remained stainable, thereafter for at least as long as the iron therapy was continued.

6) When the storage iron with this schedule of iron therapy became stainable in the bone marrow, it was not yet demonstrable in the kupffer cells of liver.

7) The stainable reticular iron in the bone marrow smears represented a minimum average of $371.3 \pm 40.3$ mg. of iron deposited in the storage sites as a result of treatment. The procedure adopted in calculating the results has been discussed and found valid.

8) The amount of minimum iron present in the storage sites during the first 10 days of treatment was not found to be influenced by factors like age and sex, severity of anaemia, quantum of rise in haemoglobin and the total dose of iron administered for the period specified in the study.