

W. Betton 20/2/88.



Cher Monsieur,

Voici la diagnose demandée :

Ctenium Newtonii Hook.

Herne. Culmi glaberrimi. Vaginae teretes, inferiores cum laminae basi patenti-pilicornulae. Ligula brevissima, truncata, membranacea, glabra. Laminae convolutae-filiformes, acuminatae, supra, marginibusque scabrae.

Spica solitaria, recta, elongata (circ. 14 cm. longa), gracilis (3-4 mm. lata), rachis angusta glaberrima.

Spiculae subhorizontales, archifine imbricatae, sessiles, dentis aristis 4 mm. longae, ^{oblongae,} ~~ovoidales~~:

gluma I^{ma} spicula duplo brevior, ovato-lanceolata, subulato-acuminata, nervis, glabra; II^{da} spiculam aequans, lanceolata, bicarata, dente

altero longiore subulato, binervis, nervo carinati
papilloso, laterali in medio evanescente inque
setam glumae apicem vix attingentem patentem
excurrente; III^a oblonga, obtusa, bidentata, 1-nervis,
medio dorso aristas circ. 6mm. longam exserens, superiorae
(sed ~~non~~ ^{non} apice) ciliata; IV^a similis, sed infra apicem
aristata, apice ciliata; V^a florifera inter apicis
ciliata dentes aristata, 3-nervis. Paleae binervis,
bidentata, glabra. Antherae 2mm longae, & utrinque
profunde bifidae, connectivo brevissimo. Stigmata
subnulla, breviter penicillata.

Prope Zumbodji C. Newton.

Affinis *C. eleganti* Kunth, quod vero rachis
ciliata, gluma II^{da} ^{nervo} carinata, praeter ~~quod~~ papillas rigidas
pilosula, laterali ~~in~~ ~~tuberculo~~ dentiformi
terminato etc. differt.

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