

of the anatomic study of the autopsies in cases of nephritis at the Boston City Hospital during the past ten years, and notices especially the marked heart enlargement in this form. The cases of amyloid infiltration are closely associated with it, but there is absence of heart hypertrophy. In the cases of chronic glomerular (parenchymatous) nephritis there also appeared to be some of cardiac hypertrophy, though to a less degree. The frequent association of acute glomerular nephritis with pneumococcal infection is remarked, as also that of the acute interstitial form with diphtheria. Certain conclusions are forced on one, he says, by the careful examination of the kidneys in a large number of more general morbid conditions. Kidney diseases can not be considered as an entity; even the simplest bacterial lesions are secondary to infections elsewhere. Every acute infection probably leaves its traces in the kidney. Albumin and casts, though they mean injury to the organ, do not always indicate the severity of the condition, and too much importance may be attached to their occurrence. It is difficult to explain the association of lesions shown at autopsies, the cardiac hypertrophy and oedema, and the numerous hypotheses that have been offered show our ignorance. It is not probable that anatomic studies can throw much light on the obscure problems of renal pathology. Clinical, pathologic, chemical and anatomic methods must all be used, and the hypotheses offered tested by animal experiments. Only thus, and by reducing the questions to their simplest components, can such knowledge of chronic diseases as will permit us to form acceptable hypotheses for their explanation be obtained.

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At a meeting of the Saskatchewan Medical Association held at Saskatoon, on March 15th, 1906, it was moved by Dr. Seymour, seconded by Dr. Kemp, and carried unanimously: That the Secretary of this Association be instructed to memorialize the Dominion Government as to the necessity of taking immediate and definite action with regard to the treatment and prevention of tuberculosis among the Indians on reserves and in the Industrial and other schools in this Province by the establishment of sanatoria in the vicinity of Indian Reserves. Attention is directed to the amount of tuberculosis existing among the Indian children attending schools and the necessity of removing infected children to sanatoria where they may be treated separately, and be no longer a source of transmitting the disease to others, and also that cases of tuberculosis occurring among adults and others not in the schools may be properly isolated and treated.