quite supply the oxygen ordinarily needed, not to speak of the increased amount required for diabetes, much less can they oxidize products unphysiologically eliminated through them. The lack of oxygen increases depression and apathy, which in turn decreases cardiac and lung energy. The liver has its nerve energy lessened, yet has increased poison destroying work thrown upon it. The diabetic, when elimination is lessened, is in a very serious and unstable condition, which the slightest shock will jar into coma, a comatose state, an epileptiform or apoplectiform convulsion. The premonition of these is generally given by lessening polyuria, suppression of urine, or by the finding first of cylindroid, then, hyaline or granular casts. Albuminuria per se often means merely the urethral or prostatic irritations of diabetes. predisposing to microbic attack, are of serious augury, but not as to coma, etc. The sudden disappearance of sugar or sugar acids with increased casts is ominous of renal insufficiency and resultant toxemic cerebral states.

Another part of the etiologic moment is the condition of the arteries, whether due to diabetes, age, lues, rheumatism, gout, the exanthemata or mental or school overstrain.

Apoplectic extravasations during the coma, epileptiform, or apoplectiform states may here lead to permanent, mental or nervous disorders.

Hereditary defect may show itself in the etiologic moment peculiarly at the periods of stress: 2 to 6, 12 to 14, 14 to 25, 45 to 55, and from 60 on, when the system is undergoing evolution or involution.

There are many eye, ear, nose, throat, gums, skin, and genitourinary phenomena found in diabetes which bear one of these relationships to the disease. They are an outcome of diabetes and are modified by it, or modify it, and finally they may be mere coincidences.

The common erroneous assumption that morbid states occuring during a diathetic state are due to it, is peculiarly accepted as to diabetes. While there is more truth than usual in the assumption as regards diabetes, still treatment of these local conditions will often do as much to relieve diabetes as treatment of diabetes does to relieve them.

The so-called "reflex" disorders exert their influence on the general constitution through continuous nerve irritation producing nerve waste and resultant autotoxemias, which, as has been shown, are a peculiarly dangerous addition to the general burden of the diabetic. Treatment of all these conditions is required not only from the local standpoint, but likewise from the constitu-