

The results were very striking. Analysis of the different classes gave the following:—

DISEASE.	No. of Cases.	Bacteria Found.	Negative.
Acute Parenchymatous:			
Typhoid.....	5	B. Typhi 2, B. Coli (?) 2.....	1
Ulcerative Phthisis.....	5	Diplococci and Bacilli 2.....	3
B. Aërogenes Capsul.....	2	B. Aërogenes 2.....	0
Diabetes.....	1	Diplococci with halo; very small, 1....	0
Lobar Pneumonia.....	2	“ Lanceolatus 2.....	0
Mitral Stenosis.....	1	“ with halo, 1.....	0
Diphtheria.....	1	B. Löffleri and Cocci 1.....	0
Pyemia.....	1	Staphylococci, 1.....	0
Eclampsia.....	1	Long B. with rounded ends, B. Coli (?) 2.....	0
Puerperal Septicæmia.....	1	Staphylococci and B. 1.....	0
Epid. Cerebro-Spinal Meningitis.....	1	Diplo. Intracellularis, 1..... (Weichselbaum)	0
Acute Interstitial :			
Lobar Pneumonia.....	1	Small Diplo. (?) Diplo. Lanceolatus;....	0
Pyemia.....	1	Cocci and Bacilli.....	0
Puerperal Septicæmia.....	1	Cult. gave Streptococci.....	0
Acute Diffuse :			
Cancer with septic peri- tonitis.....	1	Diplo. in cultures. 1.....	0
Typhoid.....	2	B. Typhi in areas, of infiltration,.....	0
Lobar Pneumonia.....	1	Diplo. Lanceolatus 1.....	0

Of the 32 acute forms of various kinds, bacteria, generally the specific germs of the disease, were found in 23. The overwhelming proportion of positive results leads me strongly to the conclusion that in the vast majority of cases, if not in all, acute nephritis is due to the presence of specific microbes. That there were four negative results does not invalidate the conclusion, for the infection being embolic it is very probable that in such kidneys there are sporadic areas of inflammation surrounded by comparatively healthy tissues. Indeed, this sporadic form is recognized by several of the recent French observers, and is quite analogous to embolic suppurative nephritis.

It is suggestive that minute diplococci with halos were found in one case of pancreatic diabetes, and in one of mitral stenosis with passive congestion of the intestines, while in an eclamptic patient, bacilli were found strongly resembling the B. Coli. The significance of this will be seen later.

In the eight examples of chronic parenchymatous nephritis, four showed minute diplococci with a delicate halo mostly between the lobules in the cortical area. Of these one case, which was associated with *Atrophic Cirrhosis* of the liver, showed a few well marked minute diplococci with a halo. In two, one an alcoholic kidney, bacilli of doubtful nature were seen. Two others gave negative results.

The chronic glomerulitis case showed a slight acute interstitial in-