

oxalic acid crystals in all variations, mixed with cylinders, cylindroids, epithelia and lixiviated erythrocytes.

Of these cases, the two first might be classed under lithemia, the third as lithemia with a marked tendency to gout. If lithemia is sufficient to explain the psychic and physical array of signs and symptoms present in these cases, why ascribe them to neurasthenia? Osler associates neurasthenia and lithemia, saying: "In all forms of neurasthenia, the condition of the urine is important. Many cases are complicated with the symptoms of the condition known as lithemia, and so marked may this be, that some have, indeed, made a special form of lithemic neurasthenia." Savill (Lectures on Neurasthenia) differentiates lithemia from neurasthenia. He says: "Take lithemia, for instance, one of the commonest of toxic blood states. Many of the symptoms of neurasthenia have so strong a resemblance to those of lithemia that there is sometimes considerable difficulty in the diagnosis between the two conditions." Reference is here made, no doubt, to nervous irritability of temper, which is a striking symptom of lithemia, while dizziness and headaches are also among its most annoying symptoms. Depression of spirits is inveterate and unpleasant in lithemia, the patient imagining he is the subject of every known disease, and frequently thinking of suicide.

Beard says (Practical Treatise on Neurasthenia) that one of the most marked differences between neurasthenia from fatigue and lithemia from auto-intoxication is the mental confusion of the latter, and he holds that confusion of thought is almost universally the result of auto-intoxication and peculiar to it. Another marked difference between lithemia and neurasthenia is irritability of disposition and outbursts of bad temper in lithemia; in non-toxic neurasthenia, irritability is not so great, although depression and a deep sense of misery are noted.

A patient who is mentally depressed and confused, sleepless, constipated, who has noises in the ears and passes considerable quantities of uric acid, is lithemic. The cause of his varied symptoms is the use of unsuitable food and drink, associated with indolent habits of life. The employment of a treatment which common sense and observation would suggest, and the result of it will justify the diagnosis of lithemia. If the patient will give up, or considerably reduce, his meat ration, totally renounce alcoholic