

remedies when I first saw the case; but two important facts are revealed by it, viz.: the comparatively short time required for a fatal termination at this age, and the change in the character of the urine, the thirst, and the appetite, towards the termination of the disease.

The Second Case was that of a young farmer, æt. 22 years. He was brought to my surgery on the 25th of May last. He was pale, emaciated, had a dry shrunken look, was so weak that he staggered as he walked. His lungs had not given way, and what he chiefly complained of was utter prostration of his physical powers, and continuous thirst. A few questions elicited the fact that he had diabetes, and an examination of his urine confirmed it, by showing a sp. gr. of 1040, and sugar in abundance, perhaps more than 40 grains to the fluid ounce. On the 27th I was called to visit him at his home; there was no improvement, but he was "easier and inclined to sleep," as his mother expressed it. On the 28th I was sent for in haste to come and see him again; I told the messenger who came for me that I could not do "Charlie" any good, but to please the family I would go. I found that the ease and tendency to sleep of the previous day had passed into coma, and that it was almost impossible to rouse him sufficiently to recognize his nearest friends. The coma deepened, and the following day he died.

On the strictest inquiry I could not find that anything wrong had been suspected in this young man's case, before the latter part of March previous, when his intolerable thirst attracted attention. He had been in the city at school during the winter, and a younger brother who boarded with him told me that he thought it curious that Charlie "made water" so often, during the latter part of the winter. From all the information I could gather, I concluded that this young man did not suffer over four or five months from the invasion of the disease; and then certainly in such an obscure way as not to attract much attention up to a few weeks preceding his death, for he worked on the farm till about a week before he came to see me.

The Third Case is that of Mr. F., a farmer from Amherst Island, æt. 65. He had suffered from diabetes for about a year before coming to me; but latterly he had been growing so much worse that he thought it necessary to apply for relief; this

was in the spring of 1881. He was then passing from 10 to 12 pints of urine in the 24 hours, with a sp. gr. of 1030, and containing over 20 grains of sugar to the fluid ounce. As he was losing weight and becoming feeble, I placed him upon a supporting course of treatment, wrote out for him an anti-diabetic regimen, but making it as liberal as possible, substituted glycerine for sugar as a general sweetener of foods and drinks, enjoined moderate exercise out of doors, but no hard work, and strictly charged him to use daily friction of the skin and to wear constantly warm flannel under-clothing. He visited me several times, extending over a space of three or four months, took a quantity of medicine home with him, and got so much better that he did not return again for over six months. Having at that time experienced an exacerbation of his disorder, he came to me again in a condition quite similar to, but not so bad as he was in the first place. He attributed his relapse to hard work and errors in his diet. A course of treatment similar to what I had previously prescribed for him had the desired effect of removing his alarming symptoms, and since that time I have not seen him. Last spring, a sister of his came to consult me; I inquired of her regarding her brother's condition, and she replied: "Oh, he keeps quite well; if he were sick again, you would soon hear of it." The old gentleman is now about 70 years of age, has lived six years since diabetes first became manifest in him, and by a strict regulation of his diet and general habits, he is able to keep himself in comparative comfort. The starting point of the disorder in him was, as far as he could discover, working in low lands repairing fences and similar employment during the variable weather of spring, suffering wet feet the most of the time, and getting occasionally drenched by a sudden shower of rain; causes you see which would readily produce rheumatism and kindred disorders.

Bromide of arsenic was not then generally known as a remedy for diabetes, and the medicinal treatment I gave him was as follows, viz.: Five grains of crystallized pepsin, with 20 minims of dilute hydrochloric acid, in water, were given three times a day before eating, and two grains of permanganate of potash dissolved in pure water three times a day, two hours after eating. One twentieth ($\frac{1}{20}$) of a grain of hydrochlorate of pilocarpine placed upon the tongue from two to four times a day