is to watch the excretion of uric acid and urea from day to day while giving a constant diet, and if a certain meat or fish increases the uric acid out of proportion to the urea, then avoid it.

In a series of interesting experiments along this line, Haig found that tea and coffee headed the black list, containing as much as 175.0 and 70.0 grains per lb. respectively. Then followed meat extracts and juices, and what he calls hospital beef tea (1 lb. of meat cooked for 8 hours). Liver, kidney, sweetbread all contain high percentages.

The quantity of nitrogenous food required for proper nutrition is best based upon the **a**mount of urea exercted, taken in consideration with the weight, strength and endurance of the patient. A good rule for an adult man is to multiply his weight, say 140 lbs., by 3.5, which is the number of grains of urea per lb. per diem, and then multiply the result by 3, which number stands for the amount of albumin required to produce the urea; and this gives you the amount of albumin in grains that he has. consumed each day.

Sir W. Roberts' experiments indicate that starch, sugar and fat have not the least direct influence on the production of uric acid, but as free use of them restricts the intake of nitrogenous food, they indirectly diminish the average amount of uric acid.

What about carbohydrates?

We know that the conversion of azotized foods is more complete with a minimum of carbohydrate; therefore, they should be used moderately. Potatoes are useful, as they dissolve the uric acid and take it up from the tissues. Plenty of water should be drunk, moderate regular exercise, tepid alcohol rubs and mineral waters.

The removal of the excess of urie acid from the body and blood is best obtained by keeping the blood alkalinity as high as possible, which, as I have stated, prevents precipitation of the urie acid.

Lavage and electricity applied to stomach wall, and all measures directed to improving the secretion of the gastric juice and tone of the gastric muscles are best calculated to bring about a condition of the blood suitable for keeping the uric acid in solution.

Acid salicylie is one of the best drugs we have for dissolving and eliminating uric acid from the system, but it is not supposed to cause new formation of uric acid, and acts better where the alkalinity of the blood is not high. For this reason it is a mistake to give alkaline salts of potassium and sodium along with it.

Piperazidin also acts well in certain cases as a solvent and