is not of any great importance because probably if the dropsy be increasing that of itself is an indication that the condition of the patient is worse. On the other hand an alteration of the diet, and particularly the free administration of milk, often leads to an increased execretion of urine due purely to the diuretic action of the milk owing to the contained salts and especially to lactose, and the percentage of albumin will undergo a great diminution which is really entirely fallatious, the daily excretion remaining the same and in many instances the patient's state becoming aggravated owing to impaired nutrition resulting from a prolonged exclusive milk diet. In all observations of the albuminuria, especially of chronic renal disease, the percentage ought always to be controlled by observations on the quantity of urine excreted.

There is a great tendency to measure both acute and chronic organic disease of the kidney by the amount of albumin actually present, still more often by the mere percentage amount present. Doubtless in many serious organic diseases there is much albumin in the urine, but the gravity of the state should be measured rather by the consideration of other factors. Thus for example in acute nephritis two very definite types of the disease may be recognized even when the malady is dependent on such a cause as scarlet fever, in one the urine is greatly diminished in quantity, loaded with blood and contains very large amounts of albumin, in fact the condition of the patient as gauged by the examination of the urine would seem to be most serious. In the second variety the urine is often not so greatly diminished in amount, blood may be absent and the quantity of albumin notably less, but whereas in the first class of case dropsy is absent in the second class of case dropsy may be the leading clinical picture of the The severity of the renal lesion as gauged by the ultimate effect on the patient is very often much greater in the second class of case than in the first, notwithstanding the fact that the examination of the urine would rather tend to the opposite conclusion. Scarlatinal nephritis, and I only quote this as an instance for the remarks, apply equally well to other forms of acute nephritis, affords a very good instance of the erroneous deductions which may be drawn from con-