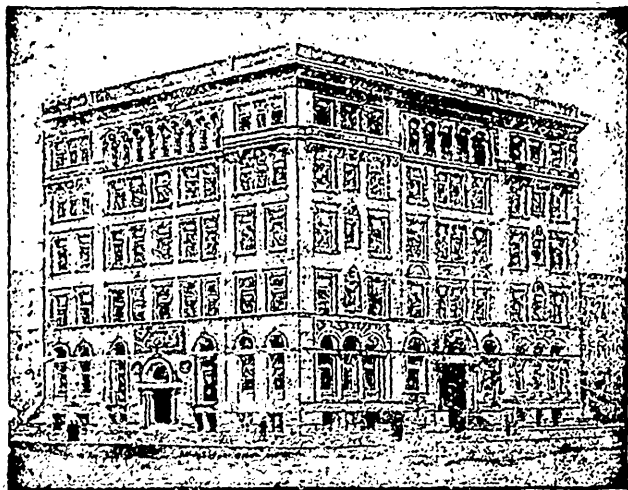


a therapeutic point of view, that when uræmia has ceased we must seek to modify the altered tissues, and that the medication necessarily varies according to whether it is the connective and vascular tissues, or the epithelial tissues, that are involved—in the first case potassium iodide was to be preferred, in the second case cantharides had given him the best results. Two cases of epithelial nephritis with albuminuria and considerable anasarca had been cured in less than three months under the influence of cantharides; while in the case of a patient who had considerable anasarca and passed only 15½ ounces of urine in twenty-four hours, the renal secretion became abundant within two or three days after the ingestion of twelve drops of tincture of cantharides, and in eight days the anasarca had disappeared. The question under dis-

cussion, says the author, is certainly one of great importance. Acute catarrhal nephritis often results in death from the uræmic and congestive symptoms it causes, in the presence of which the physician is too often powerless. Since M. Lancereaux's communication, Du Cazal has had occasion to apply the treatment in a number of cases of nephritis, and in four cases out of five has obtained complete recovery in a surprisingly brief period, the fifth case showing considerable amelioration only. Three of these cases were acute nephritis, one consecutive to pneumonia that had been treated by cold water; the others were of scarlatinous origin. It was his first trial of the treatment, and the rapidity and persistency of the recovery were a great surprise to him. In the third case, one of acute catarrhal nephritis of influenzal origin, the

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