

Dr. H. P. WRIGHT (Ottawa) said: I have been for years in the habit, based upon a somewhat extensive experience, more in private than hospital practice, of dealing with glycosuria and diabetes—the former an ailment associated with, usually, digestive derangement, and always with sugar in the urine, and having no known or discoverable pathological background; the latter having some evident serious pathological cause associated with emaciation, thirst, and sugar in the urine, with polyuria. The glycosuric cases usually occur in elderly people, and with an observed, though not restricted, diet, do well and enjoy fair health for many years. The diabetic cases do not do well under any treatment, though helped in many instances. I am therefore fully in accord with the views held by Dr. Saundby. I should like here to speak of another type of case, that I discovered accidentally in life insurance examination, and would like briefly to recite one case occurring in a healthy adult, 44 years of age, muscular beyond the average, and fully up to the usual weight. As he was a patient of my own I had many opportunities of examining his urine, and always found sugar, even when a “diet” was observed. In such a case I would like to know from Dr. Saundby; should a “diet” be observed, and particularly, if I may be allowed to sidetrack the question strictly under discussion, should such a patient be accepted by any life company?

The PRESIDENT stated how greatly he was impressed with the value of Dr. Saundby's paper in dealing with the question of the limitation of diet in diabetes, and with his protest as to a rigid routine of diet in all cases. He had showed how important it was to ascertain by observation the limits to which starch and sugar could be given with advantage to the patient, being guided rather by the body weight and nutrition than by the amount of sugar in the urine. By this means much better results were obtained than by the attempt to cut off all starch and sugar.

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