

MONTREAL MEDICO-CHIRURGICAL SOCIETY.

Stated Meeting, May 16th, 1896.

A. D. BLACKADER, M.D., President, in the Chair.

DISCUSSION ON ALBUMINURIA.

Dr. R. F. Ruttan and Dr. H. A. Lafleur introduced the subject.

Dr. F. W. Campbell said he would confine the few remarks which he would make to a form of albuminuria, of which he had had a great many cases, in fact was meeting with very frequently—he meant what is termed normal albuminuria. Most medical writers use the term albumen, but the most modern authorities call it albumin. The word albumen is simply the Latin word, meaning “white of the egg,” though as a matter of fact it is applied to every form of albumin, the latter representing the proximate principle. In Watt’s Dictionary of Chemistry, one of the most important works of its kind in the English language, the termination *in* is exclusively used. That the mere presence of albumin in the urine or its absence does not indicate that nephritis exists or does not exist, is not generally recognized. The former is, however, often a phenomenon of such grave import that its recognition and meaning is a matter which demands serious consideration. It is now fully admitted that albumin may be met with in the urine as a physiological event, sometimes small, sometimes in fairly large quantity; sometimes transient, sometimes remaining for weeks, and be perfectly compatible with perfect health. In this category he did not include the albuminuria following deranged digestion, great mental or physical exertion, excesses in eating or drinking, or exposure to low temperature, because although it is sometimes found in the urine during all these conditions, its discovery under such circumstances is extremely difficult, even with the most delicate tests. The cases to which he referred were those where with the ordinary tests albumin is readily found in the urine of persons enjoying perfect health, and we cannot find any assignable cause. It was during his work as a life insurance examiner that he met with the great majority of these cases. He referred only to renal albumin and not to cases which accompany blenorrrhoea, vaginitis or cystitis. The first suggestion of its existence was made by Gabler in 1865. In 1870, Ultzmann recognized albumin in the urine of eight perfectly healthy persons. From that time onward the number of cases largely increased, this discovery in the majority of instances being due to life insurance examinations. He said how this came about would be readily understood when he stated that a few years ago the urine of a life insurance candidate was only examined under special conditions, and therefore rarely, whereas now it is examined in every case. Such an important fact has attracted a great deal of attention, and some writers have attempted to explain that its presence was due to some pathological cause, which in many instances is of so slight a nature as to be overlooked. Chateauburg found that the urine of 46 out of 50 pupils at one of the government schools, who were busy preparing for examinations, contained albumin. The same authority after numerous experiments came to the following conclusions:

1. Albumin is found in the urine of the majority of persons, more or less abundantly, and transient in its character.
2. Rest in bed has a clearly marked influence in diminishing the amount of albumin excreted.
3. Bodily fatigue greatly influences the production of physiological and transient albuminuria.
4. Intellectual labor augments with most people the quantity of albumin existing in the urine.
5. Cold bathing exerts considerable influence in increasing physiological albuminuria.
6. Sexual excitement and menstruation manifestly affects albuminuria in the healthy.
7. Albuminuria is as frequent in children as in adults, but the quantity of albumin excreted is less.