

I should like to reiterate Dr. Cabot's congratulations to this body for having heard the very comprehensive and clear and complete description of modern kidney-functional tests that we have had the opportunity to hear this afternoon. I cannot add anything to what Dr. Cabot has said; but it is noteworthy that we have had the statements from many who are actually doing the work that is necessary—the experimental work in the production of known kidney lesions; and also the clinical material, and then the careful clinical studies, including treatment, by Dr. Janeway.

Now urine-examination is very old, and a good deal of it is very good; but until recently it suffered, I think, from an unmistakable tendency that applies to all medical diagnosis: that is, the tendency to rely on a single diagnostic method and miss the complete examination of the sick man. For example, for a long time we depended on albumin tests. Too many patients were neglected or were allowed to be perfectly reckless on the basis of a single examination for albumin. The same thing was done with casts. We all remember how terribly the urea examination in urine was abused for years; and uric-acid examinations would have been much more abused, except for the fact that there were no easily applied methods of making them. When cryoscopy was put forth, many people looked on it as a complete relief from the other methods of time-consuming examination; take the freezing point of the urine, and you had the whole thing there.

It is a very interesting thing that the old methods of examination of the kidney function have been included in the papers and especially emphasized this afternoon by the speakers. The authors missed none of these well-known methods of examining the patient's condition. Physical examination, blood-pressure, and everything else were mentioned. Still more recently, however, there have been devised very exact methods of examining the blood, as elaborated by Folin and Marshall, and others. This advance can hardly be overestimated, and practically it means this: that in no clinic, no matter what kind of clinic it is, can these discoveries be neglected. I do not mean to say that they must be used blindly; but unless they are used as fully as their importance warrants in every individual case, then the patient will undoubtedly be a victim of malpractice.

Just how some of these examinations may be made, has often been stated. I shall not go into details; but in the last couple of years I had an opportunity of seeing at the hands of some of my