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SOME OBSERVATIONS ON DIABETES MELLITUS.*

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In discussing diabetes, my object is to direct attention to a few interesting facts in connection with its pathology, its prevalence in this country, and to institute a comparison between the older authorized treatments, and the latest treatment by bromide of arsenic, as far as my experience has extended.

Diabetes, or distinctively *Diabetes Mellitus*, is, as you all know, a disease characterized by an increased flow of saccharine urine. The disease has been known for many years, and the term *Diabetes* was formerly applied to any augmentation of the urinary flux. In 1674, Willis discovered the sweetness of the urine, previous to which time the true nature of the disease had not, that we know of, been suspected; since that time, however, the presence of sugar has been regarded as a character of the disease, and the name *Diabetes* has now become almost synonymous with glycosuria.

Dr. Cullen, over one hundred years ago, wrote as follows:—"Doctor Willis seems to me to have been the first who took notice of the sweetness of the urine in diabetes, and almost every physician of England has, since his time, taken notice of the same. Though neither the ancients, nor,

"in other countries of Europe, the moderns, till the latter were directed to it by the English, have taken notice of the sweetness of the urine, it does not persuade me that either in ancient or in modern times the urine in diabetes was of another kind. I myself, indeed, think I have met with one instance of diabetes in which the urine was perfectly insipid. . . ."

But enough of what at the present time we all know. Although this disease is not of very great frequency, its generally fatal character; and when not fatal, the slavish restrictions which it imposes upon its subjects, are sufficient to induce us to hail with welcome any and every method of treatment which holds out a fair prospect of cure, or of a large measure of relief. The disease is not common in childhood, although I have found a number of cases in children reported in the medical journals, and other works which I have consulted, some of them in subjects as young as 3, 2½ and 2 years of age; and such were all fatal. In the early part of adult life, death is more certain from it than in the latter part; elderly persons bearing the loss of assimilated nutriment entailed by it, better than younger ones. The tables of mortality in the Reports of Deaths for Ontario in 1884, afford us a great many interesting facts relative to this disease. I shall quote some of them here.

Out of 21,702 deaths reported in that year, 70 were from diabetes, or 1 in 310. The males were 48 and the females 22. The proportionate number of deaths at different ages are given as follows: under 5 years, 0; from 5 to 10 years, 3; from 10 to 15 years, 6; from 15 to 20 years, 5; from 20 to 30 years, 10; from 30 to 40 years, 13; from 40 to 50 years, 3; from 50 to 60 years, 10; from 60 to 70 years, 7; from 70 to 80 years, 6; from 80 to 90 years, 2; over 90 years, none. According to this tabulation, men suffer more than twice as frequently as women from this disease; childhood is comparatively exempt from it, and the greatest number of deaths from it occurs during the most active periods of life. All the deaths from diabetes which have come under my notice have occurred before, or about, the middle period of life; but I know of several elderly persons who have had the disease for a number of years, and who, by a little proper medication and severe restrictions in diet, are enabled to remain in comparatively good health. It is evident that diabetes is neither epidemic nor

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