Starving tissues are fed not by the food ingested by the patient, but by the amount of nutrient material absorbed by the gastric and intestinal mucous membrane. To illustrate the discomfort, if not positive harm that is caused by too generous feeding, the following case may be cited: A male patient, after being in residence for a period of three weeks, received an urgent call to return to his family. Before leaving I was asked how it was that a satisfactory gain in weight had been made with but three regular meals a day, while on similar rest and under ideal surroundings, with the best of medical care at home he suffered from indigestion, having to take calomel quite frequently for what he termed biliousness. This patient averaged eight raw eggs a day, sometimes twelve, one pint of cream, three pints of milk, together with Cod Liver Oil, besides his regular meals.

I feel that an organism half starved should be fed generously, but not burdened, and that while a gain in weight up to or a little above the normal is desired, it should not be pushed much beyond this, and certainly not at the expense of the physical health.

Not only does surplus weight make a great daily demand upon digestion, assimilation and elimination, but the getting rid of the unassimulable food surplus is an unnecessary waste of energy.

At least 33 per cent. of our patients have impaired digestion. Most of them suffer from constipation and may have to be treated for intestional indigestion with diarrhoea.

In my judgment rapid and large gains in weight are very apt to encourage a feeling of false security in a patient, as well as to oftentimes bolster up friends and relatives with a confidence in the patient's apparent well being or improvement not supported by the facts in the case. I have known this confidence to be responsible for many indiscretions on the part of patients, some partly from necessity, but many others through folly.

Not only is it thought necessary by many physicians to materially increase the quantity of food ingested, but in very many cases the principal addition is made in the form of protein. By reason of the increased amount of tissue waste to replace, it is probable that a tuberculous patient does need a larger protein intake.

It would hardly seem reasonable, however, to expect that a patient could handle an excess of this component part of food as well as a healthy individual.

It has been demonstrated by Professor Chittenden<sub>5</sub> that the ordinary standards for healthy individuals contain too high a proportion of protein, and these do not therefore need to be exceeded in order to produce the desired results in tuberculous patients, or in other words the ordinary standard is quite sufficient.