hand decreased permeability with slow appearance and prolonged excretion has been demonstrated in the chronic interstitial variety.

ACUTE NEPHRITIS.

An opportunity to study only four cases of acute nephritis has presented itself. One case of scarlatinal nephritis had a severe angina and exhibited evidence of grave toxemia. It was impossible to determine whether the toxemia was due to the nephritis or to the angina. One injection of 6 mg. of the phthalein was followed by the appearance of the drug in the urine in 23 minutes. Forty-four per cent. of the drug was excreted in the first hour. This patient recovered, and the nephritis completely cleared up in the course of a few weeks.

The other patient, with scarlatinal nephritis, was in bad clinical condition at the time of his first test. He had scanty urine of high specific gravity, smoky from blood and containing much albumin and many casts. The prognosis seemed bad.

The usual phthalein test was administered, the drug appearing in the urine in 22 minutes and only 4.8 per cent. being excreted in one hour. Three weeks later, the nephritis having almost disappeared and the clinical condition being greatly improved, as well as the condition of the urine, the test was repeated, showing the appearance of the drug in 7 minutes and an excretion of 38.1 per cent. for one hour. Six weeks later the patient was entirely well and excreted 50 per cent. of a 30 mg. dose in the first hour.

The third case, a boy of 7 years, was a case of nephritis of obscure nature associated with purpura haemorrhagica and profuse hematuria. The time of appearance of the phthalein was not obtained, but he excreted 19.4 per cent in the first hour and 19.1 per cent in the second hour. Death occurred suddenly five days later from a suspected internal haemorrhage. No autopsy could be obtained.

The fourth case, a boy, aged 8 years, was admitted with typical acute nephritis of a severe grade: the prognosis being considered untavorable. The phthalein output on admission was 11 per cent. for two hours. Four days later the clinical condition was much better and the phthalein output had increased to 28.4 per cent. for two hours. Two weeks later the nephritis had practically cleared up and the phthalein excretion increased to 68.8 per cent. for two hours.

While no conclusions can be drawn from four cases, it is suggestive that in none of them was there increased permeability, but that on the centrary the permeability was markedly decreased when the condition was considered clinically grave.