

URAEMIA, ITS PATHOLOGY AND TREATMENT.*

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SOME three days ago I learned from our committee on papers that no one had volunteered a paper for this meeting and, after soliciting a contribution from several members of the Association, who quite properly declined on the ground of too short notice, I concluded, rather than have no subject for discussion at this regular meeting, to fill the breach myself, and, utilizing the limited time at my disposal, to prepare a short paper on uraemia.

I had hoped at a later date, when relieved of the onerous duties of the secretaryship, to go into this subject more fully, and to be able to present something more worthy of the consideration of the Association; but the very short period of time I have had to prepare will, I hope, excuse me, in asking at the outset, your indulgence for the manifold imperfections of a hurriedly prepared paper.

The subject is a most interesting one, and no class of cases which we are called upon to treat, leaves a more vivid impression on our memories, than do those severe cases of uraemia which we so often unsuccessfully battle with, so insidious and frequently so sudden in their onset, so frightful in their manifestations to relatives and friends, who are, perhaps, compelled to restrain by violence the maniacal struggles of a loved one, who hitherto had always been of a gentle disposition, or to listen to a torrent of most shocking, profane and sometimes indecent language from lips which, in health, had never been even suspected of being possessed of such capabilities.

The word uraemia may be defined or stated to be a convenient and comprehensive term for a variety of toxic symptoms met with in the course of several forms of renal disease or other conditions in which the eliminative functions of the kidneys are interfered with. Many theories have been advanced explanatory of the symptoms, but the view most widely held, perhaps, is that they are due to an accumulation in the blood of excrementitious material or body poisons which the kidneys have failed to throw off.

In view of the complexity of the symptoms, it would seem impossible to find a single theory which shall afford a satisfactory explanation of all cases, but the different theories may be divided into two classes: 1. Mechanical, 2. chemical.

MECHANICAL THEORIES.

Numerous minute hæmorrhages have been found in various parts of the brain, but these are so rare and so uncertain as to suggest they are the result rather than the cause of convulsive seizures.

* Read before the Northern Alberta Medical Association.