A DISCUSSION ON THE DIETETIC TREATMENT OF DIABETES.

BY

I.—ROBERT SAUNDBY, M.D., F.R.C.P.,

Physician to the General Hospital, and Professor of Medicine in Mason University College, Birmingham, England.

When not many months ago your distinguised President paid me the compliment of inviting me to open a discussion in this Section, I fully appreciated the brilliant opportunity afforded me; and I can only express my regret that in this year of festivities, amid the bustle of many engagements, I have not been able to do for you all I wish, and you deserve. I should not have accepted this position but for the consideration that we who were intending to cross the Atlantic to represent British medicine upon your shores were after all but a small band, and that each was bound to do his best for the honour of England, if not for the edification of Canada. At the same time it gives me great pleasure to address you upon a subject in which I take great interest; and, although assured beforehand of your courteous reception of any views I may express, I venture to hope that they may find some echo among you, and that they will travel back to Europe with the authority of your approval.

When the diagnosis of diabetes mellitus has been established, sometimes when only the presence of sugar in the urine has been detected, it is the very general practice to place the patient upon a so-called "diabetic diet." That is to say, he is furnished with a list of permitted and forbidden articles of food and drink arranged upon the principle that all carbohydrates are injurious, and he is told that he must keep to this diet until the sugar has disappeared from his urine. The extent to which this regimen is followed depends upon the authority of the doctor and the docility of the patient, but any relaxation is regarded as a departure from the right rule. It may be conceded to the exigencies of the patient, but is never offered as part of a rational scheme of dietetics. I believe this to be a perfectly fair statement of the general practice in Europe, and I suppose in America as well, in spite of the fact that not a few protests against it have been made by those who have a right to be heard on this question.

Diabetes mellitus is nothing more than the name given to a clinical group characterised by the presence of persistent glycosuria. The causes of this glycosuria and the proper classification of the compon-