

This is 100 per cent., but there are four cases which are doubtful; when these cases are excluded the percentage remains the same.

The percentage of negative results in passive congestion is also high, corresponding with those of other observers.

In closing, it would seem that the following observations might, at least partially, express the present status of the levulose test:

(1) The levulose test is positive in a high percentage (75-100) of cirrhosis cases.

(2) This test may be considered as determining the presence of cirrhotic processes in the liver where passive congestion is the chief clinical feature.

(3) It is suggested by this study, and that of others (Hohlweg), that the test should be more carefully considered in its relation to malignant disease associated with jaundice. It may be possible to distinguish the obstruction of gall stones from the obstruction due to malignant disease.

(4) This test—like all others of the kind (bio-chemical)—can be of use only when the whole case is considered.

(5) It is suggested that the term "hepatic insufficiency" might properly find a place in the columns of diagnosis when this test is positive.

My thanks are due to Dr. Bruere of the Clinical Laboratory, and to several house physicians, among whom Dr. Landry and Dr. Carney should be mentioned.

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REGENERATION OF SHAFT OF TIBIA FOLLOWING EXTENSIVE OSTEO-MYELITIS.

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The following are brief notes taken from the hospital report of a somewhat unusual case of the regeneration of the shaft of the tibia: H. L., aged 12, was admitted to my service at the Montreal General Hospital on March 11, 1908, suffering from a large swelling in the