two hours (20 per cent. for first hour), which is the lowest phthalein in this group. D $\frac{38^{\circ}}{30'}$ was only 2, while the freezing point was reduced to -...64. All the findings are in harmony and point to a more serious involvement than clinically was thought to exist. The drop in d $\frac{38^{\circ}}{30'}$ to 0 three weeks later, at which time the albumin had practically disappeared, is inexplicable as the patient seemed much improved in every way and was discharged in good condition.

No evidence of cumulative phenomena has been encountered in this group except in the instance just referred to, in which the finding was in keeping with the phthalein and diastase findings.

It appears, therefore, that findings of all the tests are in harmony in nine of the twelve cases and that the findings of all the tests, with the exception of diastase, are in accord throughout. The diastatic activity has indicated severe functional involvement in three cases of nephritis in which the clinical picture, history, phthalein test, tests of retention and the subsequent course of events, all showed that the involvement was but slight.

Group B—Severe Nephritis.—Fourteen cases of severe nephritis were studied. The diastatic activity was decreased in all but three instances — $d_{\frac{30}{30}}^{38^{+}}$ being 1.7 or lower in ten cases. Two of these patients died, but only one came to necropsy. Zero value for diastase was encountered three times. K. M., No. 14, showed a zero value shortly before leaving the hospital, at which time clinically he seemed much improved. Normal diastatic values were found in Nos. 19, 23 and 24.

In No. 19 the finding is in harmony with all other tests with the exception of salt, toward which a retention existed. The case is of great interest as an instance of hyperpermeability in nephritis and has been reported in detail. Normal diastase findings in Nos. 23 and 24 are irreconcilable with other findings, since the phthalein was markedly decreased and cumulative phenomena were present in both cases.

Depression of the freezing point to —.61 was only once encountered (No. 18), the patient dying one month later. In the presence of very severe nephritis, the freezing point was not markedly decreased in three instances (Nos. 13, 14 and 16). Cumulative phenomena as evidenced by urea and total non-protein N of the blood were present in six cases. The low N content in Case 19° (referred to above) is of interest in connection with the high freezing point and normal phthalein

6