

## CONCLUSIONS.

1. The phenolsulphonephthalein as used by us has many advantages over all other functional tests so far proposed.
2. Phenolsulphonephthalein itself is better adapted for use as a functional test than any other drug previously employed for the same purpose, on account of its early appearance in the urine and the rapidity and completeness of its elimination by the kidney and the reliance to be placed on its findings.
3. The method of quantitative estimation of the amount of drug excreted is simple and exceedingly accurate.
4. It is of immense value from a diagnostic and prognostic standpoint in nephritis inasmuch as it reveals the degree of functional derangement in nephritis whether of the acute or chronic variety.
5. In the cardio-renal cases so far studied the test has proven of value in determining to what degree renal insufficiency was responsible for the clinical picture presented.
6. The test has proven of value not only in diagnosing uraemia from conditions simulating it, but has also successfully indicated that uraemia was impending when no clinical evidence of its existence at the time was present.
7. The test has proven of great value in revealing the true renal condition in cases of urinary obstruction. It is here of more value than the urinary output, total solids, urea or total nitrogen, and enables the surgeon to select a time for operation when the kidneys are in their most favorable functional condition. The improvement in the renal condition in cases of urinary obstruction following the institution of preliminary treatment is strikingly indicated by this test.
8. In unilateral and bilateral kidney disease the absolute amount of work done by each kidney as well as the relative proportion can be determined when the urines are obtained separately.

It is with the greatest pleasure that we thank Dr. Young for his early and continued interest in this work and for the generous supply of clinical material referred to us by him, to Dr. Barker to Dr. Thayer and the other members of the hospital medical staff for the opportunity of studying the cardiac and nephritic cases, to Dr. F. W. Hobleman for his valuable assistance in carrying on the work, and to Dr. Dunning of the firm of Hynson and Wescott for kidney, furnishing us with sulphonephthalein used throughout this study.