

the patient in many instances where surgical interference has been employed. One would urge the importance of recording carefully all cases coming under observation, and a faithful effort should be made to appreciate the true significance of the various clinical phenomena which present themselves.

A little more than two years ago I wrote a paper reporting a case of chronic Bright's disease¹ in which I had operated. I have no doubt the life of this patient was saved at the time, and the subsequent course of the disease was somewhat remarkable. The case was as follows:

A boy, 10 years of age, came under my care in the Hospital for Sick Children in November, 1901, suffering from chronic nephritis. The history of the onset of his illness was obscure, but for six months before he came under my observation he had general anasarca and ascites. During that time paracentesis abdominis had been performed seven times. On admission to the hospital the urine contained 1.6 per cent. of albumin, the abdomen was enormously distended with fluid and there was great swelling of the face and oedema of the extremities. Paracentesis abdominis was performed and 180 ounces of fluid drawn off. The urine, in addition to albumin, contained numerous hyaline, granular and epithelial casts. On November 21st I cut down on the right kidney in the loin and found it much enlarged. I made an incision two inches long through the capsule and subsequently drained the lumbar wound for a fortnight. As a result of the operation the amount of urine secreted in 24 hours gradually increased from 14 ounces in 24 hours to 40 ounces on the seventh day after the operation, whilst the percentage amount of albumin diminished from 1.6 to .8 per cent. The child's condition did not continue to improve, however, and it appeared that permanent relief of symptoms had not been secured. One was encouraged by the profound effect produced upon the condition of the patient by the simple operation upon the right kidney of splitting the capsule, and it was therefore thought justifiable to perform a more extensive operation upon the left kidney. Accordingly, on the 20th December, 42 days after admission to the hospital, I cut down upon the left kidney and removed the capsule in its entirety. The child was critically ill for some days subsequently, and unfortunately contracted pneumonia towards the end of the first week after the operation. We despaired of his life, but he gradually recovered from the pneumonia and the renal symptoms underwent a most remarkable abatement, so that whilst the amount secreted in 24 hours rose to 44 ounces, the amount of albumin diminished to .03 per cent., in fact there remained little more than a mere trace of