

cise appears to lessen the necessity for a prolonged fast. Case No. 765, a trained diabetic, who returned to the hospital in order to become sugar and acid-free, at the end of three and one-half days of fasting, enjoyed, without fatigue, going to the theatre. I confess this was not with my advice, for I have endeavored to prevent exposure to any infectious disease of all diabetic patients during fasting. However, Case No. 938, a child of two and one-half years, underwent fasting treatment successfully in the presence of a mild infection of the upper air passages.

It is surprising how variable is the period required to render the urine sugar-free. Frequently a urine which contains 7 per cent. of sugar becomes sugar-free after four meals of fasting, and conversely a urine with only three per cent. of sugar may still retain traces after the patient has been deprived of food for three or four days. In general cases seen soon after onset become sugar-free promptly, whereas the reverse is generally true for those of long duration. Children showing large quantities of sugar have also become sugar-free very promptly when the duration has been only a few weeks. I have a suspicion that cases of long standing will actually become sugar-free more quickly if they undergo preparatory treatment than if they are fasted immediately. This may be due to the avoidance of even a slight acidosis. Even a slight acidosis must be conquered.

The observation of Folin and Denis that an obese individual, though otherwise normal, developed marked acidosis upon fasting, but went through a second period of fasting with less acidosis than the first and the practice, observed by many clinicians of the old school, who advantageously fasted their diabetics one day a week, has given the cue to intermittent fasting.

For a good many months none of my patients have been subjected to a fast of more than four days. A prolonged fast is unnecessary, and even if the fast is carried out, it is doubtful if the patient would always become sugar-free. The apparent reason for the persistence of sugar in Case No. 610, who fasted for nine days, was the presence of a vulval abscess, and inquiry among my friends shows that an infection of some kind is usually present when glycosuria persists after a fast of a few days' duration. This is not always the case, for the difficulty in rendering the urine sugar-free may be simply due to the extreme severity of the disease.