match factories are subjected. Cantharides in repeated overdoses may act similarly.

I now come to speak of the treatment. The man has improved much since admission. The dropsy has disappeared and the albumen is diminishing in quantity. Probably the most important lesson which I can impress on you this morning is the fact that there is no direct and specific remedy for this form of Bright's disease. There is no remedy which can be given with the view of acting directly on the condition of the kidney. The treatment must consist therefore essentially, first in placing the patient under such favorable conditions that nature has an opportunity of reasserting herself and working a cure, and, secondly, in combating the symptoms as they arise.

The patient should be put to bed, protected from the operation of cold, and should have absolute freedom from work. Next to the bed, the best protection against taking cold is afforded by the using of woolen garments next to the skin. The regulation of the diet is important. It is desirable to use food which contains but little nitrogen for an important danger depends upon the accumulation of urea in the blood. The urea which it is the office of the kidney to eliminate is comparable to the ashes of the fuel by the combustion of which a steam engine is run. It is not, as was formerly supposed, all derived from the wear and tear of the muscular system. Only a trifling portion of the urea arises thus, the greater part being derived from the food. It is evident that if a food which produces little ash is introduced into the system, the labor of the kidney will be diminished. The very best article of food under these circumstances is milk, because there is less ash, so to speak, after the consumption of milk than after the use of any other article of food. After milk come the vegetables. The greatest liberty may be allowed a patient of this kind in the use of vegetable food, provided the vegetables are digestible. Indigestible food must be avoided, for the nervous system of these patients is excitable, and just as a raisin in the stomach of a child may cause a convulsion, so an irritant in the stomach of a patient with Bright's disease may induce the same phenomena.

Meat contains a large quantity of nitrogen. Will you, therefore, take the patient off a meat diet? The answer to this question will depend on circumstances. If the symptoms are as urgent as in chronically contracted kidney, meat should be entirely excluded. A case like the present one need not be entirely deprived of meat, but may be allowed once a day. Oysters, fish, and the white meat of poultry which contains less blood and less urea than the dark meat, are suitable. Eggs, the white of which is pure albumen, should be used cautiously. It has been experimentally determined that if sufficient albumen be introduced into the blood, as by ingesting a number of eggs, albuminuria will be induced, and the amount of albumen excreted will exceed that ingested, showing that it acts as an irritant. I should permit only the most moderate use of eggs in a case like the one before us, and in a case of chronic contracted kidney I should prohibit their use.

We next come to the treatment of the symptoms. If there is no dropsy or retention there is no occasion for diuretics. There is a popular idea that diuretics must be given as soon Bright's disease is diagnosed. A proper secretion is necessary for the elimination of effete matter, and therefore if the urine is scanty, diuretics may be used, but diuretics seldom act unless there is a free action of the bowels. It is therefore more important at first to secure free opening of the bowels than it is to administer diuretics. Such action being secured, we may use to increase the secretion of urine and to prevent the accumulation of urea in the blood, digitalis, acetate of potassium, bicarbonate of potassium or citrate of potassium.

I have already stated that there are no drugs, which by their internal administration can be expected to act curatively on such a kidney. This is correct, but at the same time there is a rational measure which I have sometimes found decidedly useful in acute and sub-acute parenchymatous nephritis, and that is counter-irritation over the region of the kidney. This may be done by means of plasters containing pitch and very little cantharides, the warming plaster of the shops; or, better, by a mustard plaster made by using equal parts of white of egg and glycerine as the menstruums for mixing, instead of water. The objection to the mustard plaster made in the ordinary manner is that it becomes painful too soon, while the object is to produce gentle but continued counter-irritation. A mustard plaster made with one part of mustard to flour of flour and mixed with the equal parts of white of egg and glycerine can be worn almost constantly. And so it should be worn. If at times it causes too much irritation, it may be removed at night and re-applied the following morning.

Cases of parenchymatous nephritis are less subject to uremia than are those of interstitial nephritis. If this should supervene, the treatment recommended in a previous lecture should be adopted. Jaborandi, or its active-principle pilocarpin, may be employed. In extreme cases of convulsions, I do not hesitate to bleed. It does no harm to the patient to remove sixteen to twenty ounces of blood, while by so doing you remove a large quantity of the urea-loaded blood which is irritating the nerve centres.

## INFANT DIGESTION.

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The question of infant growth is one of assimilation. Assimilation of food will depend upon the integrity of the digestive function. The digestive system of the new-born is not formulated at once, but develops in logical ratio with the expansion of