

of chronic Bright's disease, the distinction can usually be made by the consideration of the etiology or the presence of some associated malady or finally by the fact that if chronic Bright's disease were really present, associated lesions of the heart and blood vessels would also be present, and this is not the case in amyloid degeneration. The albuminuria of amyloid disease is a very good illustration of the harm that may be done by a cut and dried system of dieting and especially a system of dieting based on the mere percentage amount of albumin. Such patients require a liberal diet, in fact a diet which is absolutely different to that of chronic Bright's disease. No doubt difficulties present themselves in some instances, perhaps especially in phthisis where both chronic nephritis and amyloid lesions may exist in the same patient, in such cases the other phenomena of nephritis generally reveal themselves.

There is another form of albuminuria to which I should like to direct your attention, and that is the form due to syphilitic nephritis. Nephritis dependent on syphilis is very much more common than is usually supposed and personally I cannot help suspecting that many cases of acute and chronic Bright's disease in young adults imputed to cold are dependent really on syphilitic infection. Nephritis of severe type, closely resembling the more severe forms of acute and chronic nephritis occurs not infrequently within the first two years of syphilitic infection. The true nature of these cases is often only discovered accidentally, as for instance by the occurrence of a typical syphilitic eruption during an illness presenting all the features of Bright's disease. But I think in many instances it is possible to suspect that the nephritis is really of syphilitic origin by the fact that such patients often present no very marked symptoms of illness excepting a most intense albuminuria, thus for example the urine may be absolutely solid with albumin and yet the patient may present no other features of illness except slight anæmia and possibly slight swelling of the face or extremities. But in many cases there is no anasarca but only the intense albuminuria. The albuminuria is not only intense but very persistent, lasting for six or eight months or even longer, I have known it to last