

of blood, nearly always microscopic, was noted in however slight quantity, and only rarely over a number of days in succession; casts occurred generally in concert with albuminuria, twice as isolated instances, and five times in cases which died; this leaves but fourteen instances of their being found, generally in connection with albuminuria. Two of these were previous cases of nephritis, so we have the appearance of casts in a dozen instances as being due to scarlet fever. It will, however, be less confusing if I deal only with the albuminuria. First of all, no case died of nephritis, and 7 of the 56 observations were in patients who died, and two others were in cases who were chronic nephritis at entry, which leaves 47. In 32 of these, albuminuria was found on one, at most on two occasions; of two others I have neglected the particulars, but there are 13 cases left with what may be called nephritis, of which 5 cases lasted from three to ten days; of the remaining 8, 3 cleared up entirely before leaving the hospital; 2 others were slight in degree, but even without cutting out the last 5, we have at most 8 cases (2.5 per cent.) in which nephritis can be said to have happened as a result of scarlet fever. In 7 cases, a late occurrence of albuminuria was attended by a sudden rise in temperature to a considerable height. Four times a very considerable degree of puffiness of the face occurred without any albuminuria; one case, a small child, presented a remarkable recurring puffiness of the hands, which came on suddenly and disappeared quickly, reappeared and again disappeared; this was thought at the time to be a phenomenon related to angio-neurotic edema.

We have no instance of a nephritic convulsion. Oliguria has been observed but rarely—22 times on various occasions. Let it be replied to this, that we have been exceptionally favoured with a light class of case; for our purposes, it does not matter. What I wish to come to is treatment.

I have found it an excellent working rule that every case is kept upon milk diet for three weeks from the day of onset, and in bed for the same length of time. This is quite irrespective of the severity of the case; I explain to adults in many cases, the reason, and we have no complaints upon this score. It is the ward rule, and since there are no exceptions, there are no objections. Milk diet, too, means milk diet; this includes only junket and whey and ice cream, when procurable; fruit juices are allowed.

My reasons for this are that the kidney is to be relieved of every possible strain; take the substances that are supposed to entail work upon the kidneys—urea, hippuric acid, phosphates, alloxuric bodies,