essential, particularly in young persons. Rest from over-work was essential to these sugar-consuming cells, and was always followed by improvement and ultimately recovery of power and strength.

Dr. Tyson (Philadelphia) said: Whatever may be the etiological

and pathological difficulties in the way of a thorough understanding of diabetes mellitus, and the consequent obstacles to a rational treatment, practically, in my experience, the cases fall very easily into one of two categories for treatment—the mild and severe. I include in the mild cases all those in which the glucose is removable from the urine, and presumably from the blood, by dietetic treatment only. In the severe cases I include all those whence the sugar is not thus easily removable. Of great practical importance is the fact that, if neglected, the mild case may pass over into the severe one. For the first class of cases the dietetic treatment may be regarded in a sense curative; for it is certainly true that as long as the urine of such a diabetic is free from sugar he is practically well. I believe this is acknowledged by all who have had very much experience in treating the disease. The degree of rigidity in diet required varies, of course, with the cases. In some the exclusion of the pure carbohydrates alone, such as sugar and starches, is sufficient. In others all kinds of bread except the purest gluten—which is at once difficult to obtain and most unpalatable as a bread—must be omitted. In a large number of such cases a very considerable latitude is permitted in the use of vegetables, and it goes without saying that a diet so little restricted is totally without disadvantage to the patient. It has happened to me in a few cases that a continuance of such a diet for some time has apparently resulted in a cure-by which I mean that the patient has subsequently been able to use an ordinary mixed diet without return of sugar. It may have been that in these instances Nature has been working a cure which she was unable to make on the ordinary diet. In other cases such improvement as that just referred to has been followed sooner or later by a relapse, in which, however, the same treatment again sufficed to bring about the same change for the better. In a certain other proportion of cases such a moderately rigid diet does not altogether remove the sugar, but reduces it to such a small percentage—say below 2 per cent., or 1 to 10 gr. in the twentyfour hours—that the patient is still practically well, and can go about his business as though nothing was the matter, though perhaps in strict truth such a patient has a tendency slowly to get worse. In such a case, too, I consider it a matter of the extremest importance that at intervals of, say, a month he should be put on a diet sufficiently rigid to take out all the sugar, and it often happens that such diet must be purely albuminous. To live upon such a diet for one, and