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Editorial.

THE SIGNIFICANCE OF URIC ACID IN THE NASAL REFLEX NEUROSES.

Walter A. Wells, M.D., of Washington, D.C., in an interesting paper in the *New York Medical Journal*, Nov. 12, 1898, discusses this subject in an instructive manner, and throws some additional light on the role enacted by uric acid. In regard to the pathogenesis of the nasal reflex neurosis, Dr. Wells contends that a diathetic condition obtains, consisting of an instability of the vasomotor sympathetic associated with an increase of eosinophilic white blood-corpuscles during the attacks associated with increased production and excretion of uric acid. The latter occurs in such nasal neuroses as asthma, migraine, neuralgia, epilepsy, angina and exophthalmic goitre; it also occurs in hysterical affections and Raynaud's disease, neurasthenia, etc. Haig's theory is that uric acid is formed in a definite ratio, and its increase in the blood is owing to retarded eliminations, this depending on a diminished alkalinity of the blood. The retained uric acid is then deposited in the arterioles and capillaries of different parts of the body, causing various manifestations according to the locality. Dr. Wells thinks this mechanical action is not sufficient to explain all the phenomena, but the theory of irritation of the sympathetic nervous centre does. The most eminent authorities now