Present attack.—Previous to Apr. 7th patient felt tired out; general indisposition; dull ache over kidneys and could not do his work. Apr. 7th, had attack of colic over left kidney, followed by increased frequency; pain upon urination; no temperature. Frequency for few days was every half hour or so; on Apr. 18th, visited for first time a physician. Urine showed pus; no blood; had no fever nor chills. At present, constipated and gas present with much intestinal flatulency.

Temperature in afternoon, 99; sometimes 100. Gave history of having had severe attack of constipation two days previous to Apr. 7th; now drinks 4 to 5 glasses of water daily, but previous to attack only 2 glasses; sometimes not that; drank two or three cups of coffee daily, this often being the limit of fluid ingested. Apr. 18th, had lost much weight. Diet bread and milk only. Frequency of urination continued, nocturnal, once or twice; diurnal, 6 to 7 times, as did the general malaise.

Cystoscope showed slight congestion of trigone; right ureteric opening, normal; left, slightly elevated, with slight con restion surrounding same.

Examination catheterized specimen from each kidney showed following:

CATHETERIZED URINE

Right Kidney.

App. contains slight floc. suspen-Floc.

sion.

Color, straw color.

Reac., acid.

Sp. gr.

Albumin, no.

Numerous leucocytes.

Very few r. b. c.

Few sq. cells from pelvis occurring in masses.

Very few bacilli.

No T. B.

Cultures made, growth after 18

hours (B. coli).

present. Same. Sp. gr. (blood present)

blood

Few leucocytes. Much blood.

Very few sq. cells from pelvis. No bacteria.

Left Kidney.

sediment, much

No T. B.

Acid.

Culture, no growth.

Diagnosis.—Coli bacilli infection of left kidney due to constipation and indigestion of insufficient quantity of water.

Treatment.—Dietetic and hygienic; no local treatment; no vaccine advised. Patient's recovery reported.