

The restricted diet was continued, and the patient was further placed under a plan of medical treatment which I purposely refrain from mentioning here, as it has no concern with the subject of this communication. The urine underwent a gradual improvement, and between the 7th and the 23rd of January its condition was found to be as follows:—

	Quantity of urine per 24 hours.		Sp. gr.	Quantity of sugar per fluid oz.		Quantity of sugar per 24 hours.	
	Pints oz.			Grains.	Grains.		
Jan. 7th	1	18	1029	2.40	91		
„ 8th	2	18	1022	Trace of sugar.			
„ 9th	2	8	1030	„	„		
„ 10th	4	0	1020	2.40	192		
„ 11th	2	6	1028	Slight sugar.			
„ 12th	2	7	1030	No sugar.			
„ 13th	3	6	1027	„			
„ 14th	2	14	1024	„			
„ 15th	2	8	1023	„			
„ 16th	3	6	1022	„			
„ 17th	2	6	1024	„			
„ 22nd	2	4	1025	„			
„ 23rd	2	6	1029	„			

The urine was collected from six o'clock one morning till the same time the next, so that the specimen under date of the 23rd was for the day and night of the 22nd. On the morning of the 23rd the medical treatment was discontinued and the diet changed to seven pints of skimmed milk per diem. At the patient's request the quantity was increased on the following day to eight pints, and afterwards continued at this. The following shows the effect produced:—

	Quantity of urine per 24 hours.		Sp. gr.	Quantity of sugar per fluid oz.		Quantity of sugar per 24 hours.	
	Pints oz.			Grains.	Grains.		
Jan. 24th	5	0	1014	No sugar.			
„ 25th	5	0	1017	4.80	480		
„ 26th	5	16	1033	13.32	1545		
„ 27th	5	6	1027	24	2544		
„ 28th	6	0	1037	17.13	2055		

On the 28th the skim-milk treatment was discontinued. I had intended to have persevered with it longer, but the patient simply refused to comply. I am alive to the non-compliance of diabetic patients that sometimes happens in carrying out their dietetic instructions, but I have reason to believe that in this case my orders were implicitly obeyed. During the five days the patient was under the treatment he lost four pounds in weight. Three weeks after admission his weight was 10 st. 5 lb. By the time of commencing the skim-milk it had increased to 10 st. 13 lb., and on leaving it off it was 10 st. 9 lb. The report says that during the last two days of the treatment the patient complained greatly of thirst, although he was taking eight pints of skim-milk per diem. It may be mentioned that the milk supplied to the hospital is daily examined, and is required to come up to a standard of good quality.

The patient was kept in the hospital till March 12th. At first, after discontinuing the skim-milk, he was placed on the restricted diet, and subsequently the former medical treatment was resumed. The weight on Feb. 15th had risen to 11 st. 3 lb., and at the date of his discharge it was 11 st. 7 lb. The urine again fell in quantity to from two and a half to three pints per diem, and the sugar to an average of about 600 grains. It never returned to the satisfactory condition that existed before the skim-milk was commenced, and I am under the conviction that the skim-milk exerted a direct pernicious effect upon my patient.

I am, Sir, yours obediently,

Grosvenor-street, June 2nd, 1873.

F. W. PAVY.

To the Editor of THE LANCET.

SIR,—As a discussion is now going on in THE LANCET on the skim-milk treatment of diabetes, I desire to record briefly the following case now under my care:—In a girl, twenty-one years of age, suffering from the disease in a severe form, of long standing, and extremely emaciated, I have succeeded, by means of the skim-milk treatment, in reducing the daily quantity of urine from 9 and 10 pints, to 4 and 4½ pints, and the specific gravity from 1050 to 1020.

The patient now rests at night, and has no thirst; she used to drink until waterlogged, her stomach being distended visibly. She has never been thoroughly on the skim-milk. I found she would eat crusts of bread, and could not prevent it. I therefore recommended gluten bread, of which she takes two or three pieces in the day. For two days she was without this bread, and had nothing but skim-milk for nearly three days, when the specific gravity of the urine fell as low as 1015. I find the specific gravity is always greatest in the morning, sometimes as high as 1025; and in the evening it varies from 1015 to 1020, and still contains a considerable quantity of sugar. However, the health of the patient is very greatly improved, and she now enjoys a comfort to which she had long been a stranger. The case appears to be too far advanced to permit of the complete arrest of the disease; nevertheless, it is a striking illustration of the great degree of relief obtainable by the treatment in the worst form of the disease.

I am, Sir, your obedient servant,

Villiers-street, Sunderland, June 2nd, 1873.

JAMES WILSON.

## MEDICAL BENEFIT CLUBS.

To the Editor of THE LANCET.

SIR,—I have received numerous letters from medical men both in town and country with reference to the above subject, and all seem to agree that such a scheme, if well organised and managed, would be a great boon to the profession, and also be likely to succeed in a pecuniary point of view. They differ, however, very materially in their suggestions as to the best mode of carrying out the undertaking. After careful consideration, I conclude that we have two plans before us. The first, and most simple, is to induce some good Assurance Office now existing to commence this branch of business, and I have no doubt this could easily be done by a little combined influence. The second is to form a central committee for the purpose of establishing a new Medical Provident Society, scale of payments to be calculated by a competent actuary, and a small subscription commenced for preliminary expenses. Before doing this, however, it is necessary to discover how far the profession would be inclined to support such a society; and it has been suggested to me that those medical men wishing to join in the formation of this benefit club should communicate with me so that we might have some idea of the probable number of members in the first instance.

I am, Sir, yours, &c.,

WM. AKERMAN, L.K.Q.C.P., M.R.C.S., &c.  
20, Golborne-road, W., June, 1873.

## IRELAND.

(From our own Correspondent.)

NOTHING of importance has occurred in the Irish medical world during the last few weeks until last Monday, when the several medical societies held their annual meetings, as is usual on the occasion of the election of the Council for the Royal College of Surgeons. Four members of the Council lost their seats this year, amongst whom was Mr. Hargrave, the representative of the College in the General Medical Council. The thirtieth annual report of the Council shows that 4 candidates were admitted to the Fellowship during the year, and 125 gentlemen received letters testimonial, 15 candidates being rejected for the final examination. The entire number on the lists of the College now amounts to 371 fellows and 2424 licentiates. The income for the year was somewhat over £4000, the expenditure somewhat under £4000, leaving a balance of £350. The President and Council, in their report, express an earnest desire that the scheme for a conjoint examination agreed upon by the University of Dublin, the King and Queen's College of Physicians, and the Royal College of Surgeons in Ireland, should receive, at their earliest convenience, the sanction of the General Medical Council. During the year examinations upon the dissected subject had been decided upon. A Professorship of Aural and Ophthalmic Surgery had been decided upon, and Dr. Henry