

Clinical Notes on Some Common Ailments.

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NEPHRITIS.

(Concluded from page 124.)

The kidneys themselves can be stimulated to a certain extent either by local applications to the loins or by drugs. Of the former, hot fomentations applied just over the site of the kidneys are often comforting, and it is possible that they may sometimes increase the excretion of urine to a slight extent. A rather more powerful method is the old-fashioned practice of dry or wet cupping, whereby glasses, out of which the air has been driven by holding them over the flame of a spirit lamp, are placed on the loins; in "wet cupping" the skin is first scarified with knives, so that a small quantity of blood is abstracted when the glasses are in position. Cupping acts by determining an increased flow of blood to the kidneys underneath the site of application.

But the kidneys can be acted upon more effectually by certain drugs which are known as diuretics, because they increase the quantity of urine passed. Of these the most powerful are some derivatives of caffeine and theobromine, the alkaloids obtained from coffee and cocoa respectively; indeed, a strong cup of coffee will often of itself cause the kidneys to act more freely. Nitrate, acetate, and citrate of potash are also diuretics. Probably all these act on the nerves which control the flow of blood through the capillaries generally, causing the vessels to dilate, and thus determining an increased flow of blood through the kidneys. Digitalis also acts as a diuretic, but in a different way—namely, by increasing the power of the force of the heart, so that more blood is pumped into the smaller vessels. In practice the caffeine derivatives are used in emergency when a very great flow is wanted at once, and the potash salts, which may be taken daily for some time, when a more prolonged action is required. Most of the quack medicines for the "back and kidneys" contain nitrate of potash, which has the merit of being both harmless and cheap.

In attempting to diminish the effect of urea on the system we should obviously try first to get rid of the waste matter itself in one or more of the ways mentioned above, but, apart from this, we have to relieve headache, arrest convulsions, assuage the difficulty in breathing, and so on which are caused by the urea that cannot be at once excreted. For this purpose morphia is probably the most useful drug that

we possess, but it is a two-edged weapon, and requires considerable care and skill for its administration; still its effect is often almost magical.

In children, however, we cannot use morphia with safety, and sedatives, such as bromide of potassium or chloral hydrate must be employed instead; inhalations of chloroform are sometimes necessary to check the convulsions.

Having seen the weapons which we have at our command, we will now discuss the way in which they are used in the treatment of each of our selected diseases.

In acute nephritis, the main indication is to take the work off the kidneys as far as possible, so we give baths, packs, and so on, with purgatives. Then the diet should consist of milk alone for as long as it can be borne, and then it should contain as little nitrogen as possible, and that in a vegetable form—*e.g.*, bread, milk puddings, and so forth. Absolute rest in bed is essential, at all events as long as blood is being passed in the urine. If suppression occurs, we must redouble our efforts to make the skin act, and we may try cupping in addition, though I cannot say personally that I have ever seen it do much good. Any stimulation of the kidneys by diuretics is not only useless but harmful; it is rest they want, not the whip. In convalescence, we treat the anæmia with iron.

In the subacute tubular nephritis, we act on the skin as before, but (especially in the more chronic cases) we have to think also of the dropsy, and it is often necessary to stimulate the kidneys a little with diuretics or remove the fluid by tapping, and, if uræmia supervenes, to give morphia as well. The nitrogen in the diet has to be kept low, but when the patient is about his work we must obviously allow him a more plentiful diet than if he were confined to bed; but we must forbid meat, though fish and sometimes fowl may be allowed.

In patients suffering from a contracted granular kidney, in addition to treating uræmic symptoms when they appear, we have to think of the condition of the general circulation. The first point is to keep the blood pressure at the level which is the best for the man's own requirements. If his tension gets too high, there is a risk of apoplexy from the giving way of a small vessel in the brain, and in practice many patients do succumb to this complication; on the other hand, if we lower it too much by injudicious treatment, or, if it fails from weakening of the heart's action, the kidneys do not receive a sufficient supply of blood, and a diminished excretion of water occurs, and dropsy is the result and probably uræmia also.

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