

(5) The term *myotonia acquisita* should be limited to non-hereditary and non-congenital cases, in which otherwise healthy individuals present the typical motor disorder or the typical reactions of Thomsen's disease. This term should not include the rigidity accompanying marked intestinal disorder or pronounced psychopathic states, even though the rigidity in the latter conditions may be increased by involuntary movement.

(6) The tendency to spasm on attempted voluntary movement, unless accompanied by the typical motor disorder or the typical reactions of Thomsen's disease, should be classed as *intention spasm*.

(7) The term *myospasm*, clonic or tonic, may be used instead of myoclonia and myotonia when it is desirable to include under one head the various forms of involuntary muscular contraction without known organic basis.

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Concerning the Benzoyl Esters of the Urine in Diabetes Mellitus, and the Clinical Significance of an Excess of Glycuronic Acid.—EDSALL (*University of Pennsylvania Medical Bulletin*, April, 1902, p. 84) points out that Mayer has shown that glycuronic acid is a normal constituent of the urine, and that it can be easily recognized by the orcin test, if the glycuronic acid compounds be previously split up by heating with dilute sulphuric acid. Mayer believes that glycuronic acid is one of the steps in the normal oxidation of sugar, and, owing to the close chemical relation between glycuronic acid and glucose and the frequency with which he found glycuronic acid in cases where there was suboxidation, he believes that he has demonstrated definitely that diabetes is due to suboxidation. The clinical importance of the presence of glycuronic acid in the urine is that it is probably more frequently mistaken for glucose than any other carbohydrate. Glucose and glycuronic acid are then both found normally in the urine, and under certain conditions both are increased. According to Mayer, it would appear that glycuronic acid had much the same significance that glucose has.

Rosin and v. Alfthan demonstrated that the benzoyl esters are increased in diabetes mellitus. Mayer believed that this increase was due to an increase of the glycuronic acid, and not to an increase of the unfermentable carbohydrates, as Rosin and v. Alfthan believed. Edsall agrees with the latter view, and found in three cases of diabetes in which glycuronic acid was absent that the benzoyl esters amounted respectively to 12.56, 13.43, and 13.88 grammes. The normal is less than 5 and not more than 2 or 3 grammes.

The importance of an increased elimination of glycuronic acid and of the benzoyl esters in diabetes mellitus is, considering that both belong to the carbohydrate group, that it demonstrates that the metabolic disturbance in diabetes does not involve the dextrose alone, but that there is in this disease an actual disturbance of the whole carbohydrate metabolism. Edsall has shown that the source of the benzoyl esters is chiefly the proteid elements of the food, and that the amount varies directly with the variations of the diet.

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Eosinophilia Associated with Hydatid Disease.—SELIGMANN and DUDGEON (*Lancet*, June 21, 1902, p. 1764) report an instance of marked eosinophilia in association with hydatid disease of the liver in a young woman, twenty-two years of age. The disease was probably contracted as a result of fondling a pet dog which constantly licked her hands.