THE PRINCIPLES OF ACIDOSIS AND CLINICAL METHODS FOR ITS STUDY

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The Principles of Acidosis and Clinical Methods for Its Study by Andrew Watson Sellards

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ANDREW WATSON SELLARDS

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BY

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PREFATÓRY NOTE

THE development of the theory of acidosis has been a gradual and complicated process. Now that the subject is beginning to take definite form, it has seemed advisable to analyze the more important and representative articles. Two excellent reviews of acidosis have appeared in the past, one by Kraus and Honigmann * in 1895 and another by Ewing † in 1908. Since this time fundamental advances have been made.

My own interest in the subject dates from the study in Manila at the Philippine Bureau of Science of acidosis in the nephritis of Asiatic cholera. This was followed by an investigation, along similar lines, of various nephropathies in the clinic of Professor Lewellys F. Barker in Baltimore. The interest in the results has been considerably enhanced by combining the study of the subject in tropical and general medicine; unfortunately these two phases of internal medicine often tend to develop along separate and independent lines.

In order to limit the size of this volume, complete evidence is not quoted for the statements and conclusions which appear, but full references are given in each instance to the literature. In its present form this monograph is intended to cover the requirements for the routine of the clinic as far as theory, application and technical methods are concerned. The classical arrangement as regards the expected sequence of definition,

 Kraus u. Honigmann. Ergeb. d. allgem. Path. Morph. u. Physiol. d. Menschen u. d. Tiere, 1895.

† Ewing. Arch. Int. Med. 1908, II, 330 and 448.

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etiology, diagnosis, and therapy has been sacrificed completely for the sake of simplicity of presentation.

I have endeavored to condense the subject as fully as is consistent with a comprehensive presentation and without neglecting to point out, sometimes in detail, the places where our information is incomplete. The apparently unavoidable length is a source of much regret to me.

I take this occasion to express my indebtedness to Dr. Richard P. Strong, Director of the Harvard School of Tropical Medicine. It also gives me much pleasure to acknowledge the very helpful assistance of Dr. David L. Edsall, Dr. Otto Folin, Dr. Thomas R. Boggs, and Dr. Francis Peabody.

To Miss Catherine M. Casassa, the Secretary of this School, I wish to make grateful acknowledgment for her efficient and conscientious care of the manuscript.

BOSTON, MASSACHUBETTS, May, 1917.

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