## SOME INTERESTING CASES.

By GEO. A. WEBSTER, D.D.S., St. Albans, Vermont.

A few weeks since I was called to my office late one evening by a friend, an attorney, who was suffering intensely from apparent alveolar abscess. Found the right superior first molar decayed to gingival margin, with marked pericementitis. Extracted the two buccal roots without difficulty, each having a large-sized abscess attached. Patient soon experienced some relief, and wanted to leave the remaining root till some future time, but finally allowed its attempted extraction. Finding, on attempting its removal, that after it was free from its alveolus there was still an obstruction of some nature, I exerted bu, little force, and that steadily until I had drawn from the floor of the antrum an abscess nearly an inch in length. Hot water, followed by antiseptic solutions, found ready exit through the nasal opening, and but a few days sufficed for permanent cure.

CASE 2.—Early last February (1895), married lady, about thirtysix years old, presented herself for the extraction of several inferior roots. Noticed second left bicuspid root badly decayed below alveolar margin, and containing small vascular fungoid growth. From examination judged it to be a simple pulp-fungoid tumor, so extracted root, but arranged to see patient again in a few days. Upon returning at the end of about ten days, found marked recurrence of the growth, somewhat more dense than before, and the size of small hazel-nut. Could find no history of cancer vice in the family, but inquiry elicited the fact that this tooth was extracted many years ago, by carelessness of dentist, and replanted. Advised immediate attempt at extirpation. The operation occurred a few days later, February 20th, using the lancet freely in the soft tissues and surgical burrs and hand curettes for the process and bone until convinced I was well beyond the affected zone. Packed with iodoform gauze, and treated for about two weeks with antiseptic solutions, principally phenol sodique. Patient being naturally healthy and of bilio-sanguine temperament, wound healed quickly, and to-day tissues are as hard and healthy appearing as could be desired. Had slide mounted with section of tumor, which revealed cells of encepholoma and was finally confirmed as such by the best of authority. Now eleven months having elapsed, the query seems pertinent: (1) Is it eradicated? (2) Is it possible microscopist erred? (3) If a benign tumor, did replanting have anything to do with it?