

lingual glands. They are made up, in large part, of calcium phosphate, combined with mucin. 3. This variety comprises the small, dark, hard, scaly deposits found beneath the gum-margin, which excite the most common and most curable variety of pyorrhœa alveolaris. This calculus is at times associated with the first and second varieties. 4. The fourth variety consists of those small nodular calculi found deep in the pockets of pyorrhœa cases and upon the apices of the roots in cases of long-continued apical abscess. 5. This includes those deposits which are found upon the sides of roots in cases of gouty necrosis of the pericementum, and which exhibit in some degree a reaction to the murexid test. These deposits in their typical form are irregular and more friable than either the sublingual deposits or other root-deposits named. The bulk of the calculus is made up of calcium phosphate, a common associate of deposits of urates in other parts of the body.—*American Medico-Surgical Bulletin*, April 25th, 1898.

**SALICYLATE OF SODIUM IN TOOTHACHE.**—Dr. Frederick C. Coley (*Practitioner*; *North Carolina Medical Journal*; *Southern Clinic*, June) believes salicylate of sodium to be the best remedy in toothache arising from catching cold. A dose of fifteen grains will usually relieve the pain promptly, and if repeated every four hour the inflammation may entirely subside, leaving the carious tooth to be disposed of according to circumstances. Fifteen grains of sodium salicylate, with fifteen minims of tincture of belladonna, will often procure refreshing sleep instead of a night of agony. Dr. Coley's first experience of it was on his own person, and since then he has used it with many brilliant successes and few failures. It is especially valuable with children, where extraction of teeth is to be avoided, if possible, lest the development of the maxilla should be injured.—*N. Y. Med. Journal*, June 25th, 1898.

**A SUBSTITUTE FOR THE GUM LANCET.**—Dr. Wallan (*Alkaloidal Clinic*, May), in reply to an article by Dr. Love in that journal, urges that when irritation from non-advancing teeth occurs, it is because the normally flinty teeth, to which the soft gums can offer no practical resistance, are suffering from lack of nutrition. While admitting that the gum-lancet gives temporary relief and possibly faintly stimulates the local nutritive process, yet, since it supplies none of the lacking elements for which the child's system is so loudly clamoring, and transforms normal into cicatricial tissue, which is ten times as hard for the tooth to displace, it is radically wrong, an outrage to Nature, and an imposition on the helpless little sufferer. In place thereof the writer recommends correcting any faulty conditions in the infant's alimentary tract and placing it upon a mixture of the calcic salts, approximating the proportions as nearly as possible to those found in the teeth. For example :