

believe that a great part of the failures in root filling have arisen from allowing the secretions of the mouth to gain access to the root canals after the nerves have been removed. Sandavch varnish or Gutta Percha cut in Chloroform form excellent coverings for a dressing when it is intended to remain but a few hours, but it requires something more durable when the patient is to be absent for any length of time. I frequently cover my dressings with L. M.'s Stopping, and allow them to remain for days and even weeks, and find all right when the patient returns. I frequently find it an excellent plan also, to fill the pulp cavity with tin foil in order to exclude the saliva, when the grinding of the food will wear out the Hill's Stopping.

5th. When I find that there is no tenderness in the tooth on percussion, and other circumstances indicate that "all is well within," I proceed to fill the root canals with gold. I usually introduce a little creasote first, for this reason, creasote is laid down in the Pharmacopœias as a stimulant, an escharotic, and an anti-septic, and as there is, in nearly every instance some probability that a small portion of the devitalized nerve has been left near the apex of the root, I hope that the anti-septic properties of the drug will prevent putrefaction and the formation of gasses, which, if not counteracted will excite the periosteum about the end of the root, and cause a sensitiveness in the tooth on the occlusion of the jaws, if it does not proceed further and cause an abscess. I can give no positive rule as to the manner of introducing the gold, as I am governed by the circumstances of the case.

6th. While I am of the opinion that it is best to fill the roots with gold, I am fully persuaded that teeth may be preserved for a long time, if not for life by filling them with Hill's Stopping, or a piece of wood, or cotton saturated with creasote. In favorable cases, no doubt good results have followed the practice of leaving the root unfilled. Indeed, I can see no reason why the nerve, when cut off at the end of the root of a tooth, should not cicatrize as healthily as when severed at any other point, if no dead, or partially devitalized portion is allowed to remain in contact with it.

8th. I think that there is a much greater chance of *perfect* success with some teeth in the same mouth, than with others. There can be no doubt whatever, as to the incisors in ninety-nine cases out of a hundred. I have found that the bicuspid, particularly the lower ones,