

AMERICAN DENTAL SOCIETY.--*Niagara Falls, July 28th.*—Dr. Westcott, Syracuse, described his means of regulating an upper and under set of teeth, of which casts were presented. He said the first effort to move a tooth should be very slight, for then more could be done at the second effort with less pain. Neither spring nor elastic substances should be used if it were possible to avoid them; and to the almost exclusive use of wooden wedges, in the present case, did he attribute the absence of inflammation, notwithstanding the great extent of the movements attained. Preferred not to use a plate; but where that was unavoidable, it should be dispensed with at the earliest possible moment. Made it a rule to obtain the lateral movements first, and finish that, before beginning the longitudinal movements. Where teeth are so short as to make it difficult to get hold of them, he drilled into them, and insert a gold screw or staple by which to make attachments. Any ill effects of any regulating apparatus, upon the substance of the teeth, might be obviated by removing the plate and cleaning it after each meal, cleansing the teeth and rinsing the mouth with soda water.

Dr. Ringsley presented several improvements designed to remedy defects congenital or acquired, in the hard or soft palate. He distinguished between congenital and accidental deformities. Patients suffering from the former require months, and sometimes years, to overcome the difficulties of articulation, while in accidental lesions, not only is the appliance much more simple in its character, but the results are attained immediately on its introduction.

He exhibited his instruments, and also his moulds, describing the various processes of manipulating. Dr. Bogue, from the standing Committee on Dental Pathology and Surgery, recapitulated the points which, in this department, had attracted special attention during the year. The question of the contents of the dentinal tubuli; of the efforts of the dental pulp to protect itself from the approach of decay by the consideration of the intervening dentinal tissue; and the results of recent efforts for the preservation of exposed pulps. He inferred that the pulp is as capable of reparative processes as other vascular structures. Salivary calculus was treated as a direct source of injury, and its perfect removal necessary, to be followed by an application of escharotics to induce renewed action of the peridental membrane. In the treatment of epulis, an apparent extirpation was not deemed sufficient, but a removal of the surrounding healthy tissue was demanded, to be followed by thorough cauterization.

Dr. J. S. Dodge, jun., referred to certain dark-colored nodules found upon the roots of teeth, and even upon their extreme ends. He could not agree with the common opinion which considered these to be depo-