

Local anæsthesia by cold, produced in this manner, has been used with great advantage in minor surgery; but if too long protracted, or over too large a surface, serious results may ensue.

Rhigolene is highly esteemed as a topical application in periodontitis. It is applied on cotton to the gum after free scarification,—it is extremely volatile rendering frequent renewal necessary.

Rhigolene and ether being extremely volatile and highly inflammable, should be kept securely corked and in a cool place, and not opened or used near a flame.—*Dental Materia Medica*: by J. W. WHITE.

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## A NEW METHOD FOR CONSTRUCTING ATMOSPHERIC PLATES.

BY N. T. FOLSOM, Boston.

I have a method of constructing the atmospheric plates of artificial teeth so that they will not move from their places in the mouth while eating or speaking, neither will food get under them, however difficult the mouth. I will describe it: First take an impression in wax and trim off the surplus, then press out the wax that comes against the labial surface of the dental ridge, to give room for the plaster, after which cool the wax. I now have a cup suited to the case, with which I take the impression in plaster, mixed with a solution of sulphate of potassa (Dr. Chamberlin's rule is  $\frac{1}{2}$  oz. to 1 qt. water,) varnish with ethereal varnish, mix the plaster for making the model the same as for the impression (with the solution of potassa,) and then dip the impression in water and immediately pour the plaster. The next step is to examine the mouth to ascertain where the edge of the plate will extend; then mark that line on the model. Examine the mouth again to ascertain the yielding nature of the parts of this same line, note the hard and soft places, and then with a suitable instrument cut a groove in the plaster model along the entire line of the edge of the plate, one-twentieth of an inch wide, and varying in depth from one-sixteenth to one-sixtieth of an inch. As a general rule I commence cutting the groove in the rear of the tuberosity on the right side of the mouth. At this point I cut it deep, then shallow until I reach the soft part at the side of the back of the mouth, which I cut deeper than any other point, then shallow again till I reach the corresponding point on the opposite side.

From the rear of the tuberosities to the canine teeth, I cut it comparatively shallow. I endeavor to cut a well defined groove around in front from canine to canine, quite deep. A plate made on this cast if not