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Original Communications

PYORRHEA ALVEOLARIS.

[The following is a synopsis of the discussion of the paper of Dr. Curtis, which appeared in our last issue.—ED. D. D. J.]

Dr. Curtis added the following remarks: Before the paper is discussed, I desire to present these inferior maxillæ, one denoting health, the other disease resulting from pyorrhœa alveolaris. You will see where the teeth once were, that the sockets and the bone around them, in fact nearly all of the alveolar process, is dead.

It is interesting to note the extent of the disease in this bone. At death the teeth belonging to this jaw were all in position, but when the soft tissue was removed the teeth fell out; while you will see that in the healthy maxillæ the teeth are all in position. This splint is one loaned me by Dr. Fish. You will see how accurately it is adjusted to the teeth, and how firmly it holds them in position. These micro-photographs are of fresh blood, and were made within a few seconds from the time the blood was drawn.

Photographs enable one to make a longer and more satisfactory study of each field, and because of the rapidity in which they were made, allow of a closer study of the normal blood, and also show changes as it degenerates. These photographs are made of unstained blood, and show accurately all there was in focus, and the dim outline of objects beyond. In some of these, a great variety of fibrin is seen. You will see that the serum of this blood, which was taken from a rheumatic patient, is found to be filled with fibrin. This is pathognomonic of rheumatism—the variety showing the character. In one of these photographs you will see uric acid crystals. This blood was also taken from a rheumatic