

but time and space forbid at this convention. Suffice it to say, at least, I hope I may have hinted at a few points of interest to those of my own profession, while I earnestly desire it may help to spur onward the already moving train of thought and action in the hearts and hands of the dentists of America.

ORAL ACIDITY, LOCAL AND SYSTEMIC.*

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In asking your attention to the treatment of oral acidity, local and systemic, I am fully conscious that the limits of a paper are quite inadequate for more than a general consideration of the subject, but its great importance to dentists and the fact of so little attention being given it by the medical profession is my only excuse for choosing it as a subject, and if, in the limits of this period, so generously allowed me, I may be able to offer any suggestions that will lead to discussion, or any after-investigation, the object of this paper will have been accomplished.

As a consequence of certain nutritional disturbances, abnormal systemic conditions, functional perversion of the gastro-intestinal tract, or from local causes, the oral fluids of a large percentage of persons applying for dental treatment present an acid reaction usually so pronounced that the integrity of the tooth structure and associate parts are threatened, or there already exists evidence of positive injury. The epicure, the dyspeptic and the habitual partaker of sweets, sour wines, or sweet for that matter, and of milk or fruits, at or between meals, exhibit hyperacidity of the oral fluids. In the patient during severe illness, or when tr. chloride of iron or the mineral acids are administered, in the gouty and rheumatic and as is well known during pregnancy, the reaction of the saliva is not unfrequently acid.

In patients of the so-called gouty diathesis, you often, no doubt, have observed the decalcification or chemical erosion—a molecular breaking down of the tooth substance marked by a roughening of the enamel and rendering the tooth painfully sensitive alike to touch and exposure to sudden thermal changes, or the extreme sensitiveness from eating various fruits, grapes in particular, evidencing a systemic acidity.

This condition has an especial tendency to undermine and partially destroy fillings which extend to the gum (showing a hyperacidity of the saliva), and in chronic inflammation of the gum margins, whether resulting in erosion of the teeth or not.

* Read before Vermont State Dental Society, March 19.