

the one direction. In like manner, the larger tubes of your air-passages are lined by forests of these little cilia, and the greater part of the 5 per cent. of dust and germs which manage to escape through your nose are caught by the moisture on the walls of your air-passages and are slowly wafted back to the mouth by the waving action of the cilia. That germs and dust do, nevertheless, reach the lung tissue at times is proved by the small deposits of coal dust found after death in the lungs of many coal miners, or by the quantities of stone dust found in the lungs in a disease called anthracosis, common among stone-cutters. Experiments have been performed on animals which seem to prove that tuberculosis germs may enter the lungs direct and start up trouble in the lung tissue just where they alight.

What happens most frequently is that the germ enemy gets in through the wall of the air-passages, enters the trenches of the white cells, and makes his way under disguise to the blockhouse gland. This happens not only through the walls of the air tubes but through the lining of the back of the nose, the throat and the tonsil, and is very much more liable to occur when these structures are in an unhealthy condition and there are minute cracks or breaks in the membrane, as is the case in a chronically inflamed tonsil.

In the mouths of many individuals, the enemy that enters by chance is greeted by a sort of reception committee. In the single recess of a decayed tooth, in the minute gum-abscess under an old-time crown, or in the fissure near an unhealthy tonsil, are