

SILVER NITRATE.*

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In presenting this subject, it is not because I have anything new to offer ("Verily there is no new thing under the sun" says King Solomon), but because I think there may be not a few of the young men who, like myself, when commencing the profession, are averse to it because of its caustic properties.

There was a time in my practice when I did not have it among my stock of medicines. I thought it was a deadly poison and so caustic that if introduced into the soft tissues of the mouth it would burn its way out. These fears have passed away since I have become familiar with its use, and now I use it more freely where it has to be employed than I would carbolic acid, and with less danger to the mucous membrane. I say with less danger, for there is this difference in the cauterization of mucous membrane by the two. Carbolic acid destroys and induces a slough and the ulcerative process, but if we touch a part with silver nitrate, the eschar remains for a time and then falls off, leaving the subsequent parts healed, or if an ulcerative surface secreting pus be touched by silver nitrate the succeeding discharge is immediately converted into lymph. It is the property of carbolic acid, on the contrary, to induce not only ulceration but suppuration. The silver nitrate and carbolic acid are as the poles to each other; the former preserves, the latter destroys; the former induces cicatrization, the latter ulceration. In our professional use of it, such a slight amount of it is required that if properly handled no harm can arise. But should an accident happen, the application of sodium chloride (common salt) to the part is all that is necessary.

Before using this remedy in connection with any disease of the dental organs, it is well to advise the patient as to its effect in discoloring, for once applied it is only with difficulty that it can be erased. Regardless of the great objections to its use, viz., discoloring, I will enumerate some of the cases where it may be employed in treatment of the diseases of the teeth.

Devitalizing receded pulps where an endogenous growth seems to obliterate the pulp chamber. Such teeth are generally bothersome after the death of remaining tissue. A five per cent. solution introduced into the root, I have found beneficial, preventing trouble from thermal changes, and in relieving soreness on percussion.

In bridge work, where the enamel is cloven from the tooth to any

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