rare, and believed it was a deposit of salvary calculus through a fistulous opening of a long-established abscess.

Dr. Eisenbrey thought the deposit on this specimen, judging from its character, was from the saliva, and not from the mucous glands. The deposit thrown down from the mucous secretions of the mouth partake largely of organic material, and are very injurious both to the gums and teeth when decomposing, while that from the salivary secretion furnishes an excess of inorganic material; and such appears to be the composition of tartar on the present specimen. The character of tartar, though very irritating to the soft tissues, exerts a preservative effect on the teeth themselves, though eventually it proves their destroyer by taking away their support. It is not at all uncommon to find teeth under the tartar sound, white, and as well preserved as it is possible for them to be, and if it fill a cavity of decay, it will often preserve the tooth.

How this deposit got to the apex of the root is a question that each one can answer for himself, but none can describe it satisfactorily. Just as it collects around the necks of teeth, so it may reach and collect at the apex. This specimen presents the appearance that an effort has been made to remove the tartar, which was unsuccessful; hence the result was the loss of the tooth, from the inability to remove the cause. Had thoroughness attended the operation, he makes no doubt that the tooth would have remained comfortable and durable for a long time to come.

Prof. Stellwagen explained a manner in which the tooth might have been held in a position by a small portion of the periosteum (peridentium, pericementum), a portion of which was still firmly attached to the specimen on one of the approximal surfaces of the root, and which seemed to have been the only point of attachment left at the time the tooth was extracted, since there was no trace of any other, and the tooth, it was said, had been very easily removed, showing this slight point was that by which the tooth was suspended in a cavity formed by the alveolus, lined perhaps with periosteum. (Such cases are often met with in alveolar abscess, when the pus discharges around the neck of the tooth.) The free motion of the tooth, oscillating like a pendulum, surrounded where it emerged from the cavity by the mucous membrane, made it a kind of pump piston, sucking and forcing the fluids of the mouth up to the top of the cavity; in this the free margin of mucous