

The *Stomatological Gazette* reports a clinic given by Dr. R. H. Cool, at a meeting of the Stomatological Club of California, the operation consisting of the removal of salivary calculus, cleansing and polishing the teeth, using iodine, pulverized pumice stone, chalk, silk ligatures, wooden points. This is considered by some to be the simplest operation in dentistry, but Dr. Cool says he finds very few of his employees have any idea what cleaning a set of teeth means. The best astringent he knows is the thorough removal of all foreign substances beneath the gums. He uses iodine evaporated to one-third, making it three times as strong as the officinal tincture; where deposits cannot be removed, use lactic acid. As an antiseptic solution for instruments, Dr. Cool uses one per cent. trikresol. No point or stick should be used a second time, because pyorrhœa is infectious, and for the same reason the Doctor objects to brushes.

TREATMENT OF PULPLESS TEETH.—By Dr. J. J. Grout, Rock Rapids, Iowa, read before Northern Iowa Dental Society, September, 1895. When I have a pulp to destroy, I use a paste of arsenic and creasote, applying from 1-60th to 1-120th of a grain, according to the size of the pulp and the ability of the patient to present himself for treatment. Where practicable and possible I apply tannin and glycerine after the pulp is devitalized and leave it six to eight days, when I extract the pulp entire with a broach, cleanse the root with pyrozone and campho-phenique thoroughly dry, moisten the canals slightly with eucalyptus oil, pump chloro-percha to the ends of the roots and follow with gutta percha points. Where the pulp is putrescent, I follow a little different course of treatment. After removing all septic matter possible with pyrozone, and drying, I introduce on a shred of cotton:

Carbolic acid,	-	-	-	-	-	1 part.
Oil cloves,	-	-	-	-	-	2 parts.
Oil cassia,	-	-	-	-	-	3 parts.

Seal this in with Gilbert's stopping, leaving it from two to ten days as indicated, then fill as above described. Judgment should be used in all cases as to amount of paste necessary, length of time it should be left in the tooth, what medicament should be used later, general conditions of the tooth, and the patient's ability to present himself when needed, etc. But in each and every step be conscientious and thorough. I always use the dam when possible. I also use root drills, burs and sulphuric acid to open up the root canals, when, in my judgment, they are indicated. No arbitrary set of rules can be laid down for the treatment of all cases. My advice is, use as little medicine and as few treatments as are consistent with good and thorough work.—*Dental Digest*.