

that time. The first child, born ten years ago, died from congenital syphilis and there have been none since.

To return, in the meantime the teeth had become firmly set, and the hinge had lost both its elevation and mobility. Shortly afterward the crowns softened, losing their lime salts and leaving the pulp cavities exposed as they are at present level with the gum. We will probably scoop out and fill with gutta percha or cement. No other teeth have since arrived. I sent an account of this case to Dr. Ballantyne, whose reply was most courteous and was as follows:

DEAR DR. OLDRIGHT,—The editor of *The Edinburgh Medical Journal* sent on to me your record of an interesting case of congenital teeth. Allow me to thank you for this record which contains several new features. I find the after history of these teeth when they are not removed at once is rather obscure. In some cases they are certainly replaced by milk teeth and are then really supernumerary as well as previous, but in other cases they seem to be the only milk teeth which the infant has. The exostosis is interesting, but its meaning is far from clear. Since I wrote my paper I have had several records sent me, and two of these I have embodied in an article on "Congenital Teeth" in the forthcoming supplementary volume of "Keating's Cyclopædia of Diseases of Children." In one of these the child presented by the face, and the teeth were diagnosed before delivery—a truly unique circumstance, I suppose. I send you a reprint of my paper, also one of another curious case of abnormal dental development. I am specially interested in all congenital anomalies and shall always be glad to hear from you regarding such. The syphilis may have had to do with the early decay of the congenital teeth in your little patient, but I scarcely think it could be regarded as the cause.

Believe me, yours faithfully,

J. W. BALLANTYNE.

24 Melville street, Edinburgh, Feb. 7th, 1898.

Dr. Ballantyne very kindly sent me his monograph from which I will quote his conclusions:

(1) Congenital teeth form a rare anomaly, but one which has long been known both to the profession and to the public.

(2) Their presence has often an ill effect upon lactation, partly on account of imperfect closure of the infant's mouth and partly by injury to the mother's nipple; sublingual ulceration may also result, and infantile diarrhoea and atrophy are more distant consequences. Sometimes, however, symptoms are altogether absent.