There is room, I claim, also in the laboratory for the display of taste in the artistic arrangement of teeth in an artificial denture. There is a charm for one with a turn of mind for that sort of thing in taking a set of plain teeth and making a combination that will defy detection by the unpracticed eye. The inspiration that comes to the artistic soul never reaches the five dollar man, These men must turn out a certain number of plates every week, and their highest ideal is, forsooth, the stereotyped picket-fence, whited-sepulchre arrangement, if only the plate will "stick up." To assist this sticking up, and save accuracy, some make deep air chambers and increase the depth by a heavy bead around the edge so that we often find the soft tissues so drawn that a serious conjection and deformity are the result. This soreness is attributed by some to the coloring matter in the plate, and a black one is substituted and the vacuum deepened. In one of these cases lately I ordered the plate left out for a fortnight and advised massage of the palate to reduce an air chamber pattern of fully a sixteenth of an inch deep. After making a denture with no chamber no difficulty was experienced in retaining it, and no further inflammation was noticeable. Is it not strange that metal dentures of different kinds are retained without air chambers. while in vulcanite they are by some considered indispensable?

It seems to me that with very few exceptions all that is necessary to retain a denture after a careful impression and articulation is a bead extending around the margin of plate, following the back part of palate and edge of gum line. A vacuum chamber is, unless the wearer is very careful as to the cleanliness, a breeding spot for all the bacteria that Professor Miller ever dreamed of. If used at all the chamber should be extremely shallow, about half the usual depth.

When a patient puts himself in our hands for treatment, we should feel ourselves bound to do the very best possible for him. The dentist who will insert a filling and dismiss the patient, leaving the mouth and remaining teeth in such an unhealthy condition as to render the "life expectancy" of the filled tooth much lower than is necessary, without warning and advice, has failed in his "whole duty" and shown that he has not reached the highest conception of his responsibilities.

In this rambling paper I have not so much aimed at originality as to "stir you up by putting you in remembrance," and sincerely hope the paper may be accepted with this in mind.

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