

simply criminal the way they jab uncleaned instruments from the mouth of one patient to that of another."

The modern and better class of dentist keeps his instruments clean, though rarely perhaps aseptic. The uncleanly ones are however too common, and more than that few dentists can tell the mucous patch of syphilis from an ordinary ulcer. From what I can learn, there has never yet been a clinical demonstration of syphilis of the mouth exhibited to the students in the Dental College in Toronto. My opinion is that dentists should be more practically educated in reference to the diseases of the mouth, so that in all cases where there is a possibility of contagion, they will not only have their instruments properly cleansed, but also rendered thoroughly aseptic.

The ordinary medical practitioner, too, is all too ignorant frequently of oral diseases, and if dentists were better educated in this respect, they would be often invaluable in consultation with their medical confreres, and especially in the country.

The mouth serves as a breeding place for the specific germs of many diseases. Among these are diphtheria, syphilis, tuberculosis, pneumonia and typhus.

Diphtheria bacilli have been found in the saliva of healthy people, thus proving that the saliva is not inimical to the life of this dread germ. Mild and even advanced cases of diphtheria and the various forms of tonsillitis are not unfrequently found in patients occupying the dentist's chair.

The pneumonia coccus is also found in the mouths of healthy people, while a primary tuberculosis of the mouth seems to indicate that the tubercle bacillus occasionally finds a favorable abode in the fluids of the mouth.

The mouths of consumptives, too, who are expectorating much, are peculiarly prone to contain immense numbers of these germs, and dental instruments may easily be the means of transferring the germs to the mouths of healthy persons.

Microscopical examinations which I have made from the sputa which has adhered to the teeth in consumptive patients, has demonstrated the presence of thousands, and in one case millions of tubercle bacilli.

In regard to syphilis, leaving out sexual intercourse, the great majority of infections from this disease take place from the oral cavity. The oral fluids seem not only to be non-destructive to the syphilitic germs, but to serve as carriers of the poison.

Many cases are recorded of syphilis being transmitted by dental instruments. I. Duncan Bulkley (on "The Dangers Arising from Syphilis in the Practice of Dentistry") has enumerated many such cases. Dalles, Otis, Lancereaux, Giovanni and others have recorded cases where chancre of the lip occurred two or three weeks after dental operations. Lydston, Roddick and Parker have recorded cases of syphilis following tooth extraction.