through the foramin of the root, and whether the cavity is filled or not an abscess may form. After a tooth is filled the nerve often dies from inflammation produced by the operation. Abscesses may be formed and exist for a long time without being apparent, and in persons of good health, have existed and been cured by nature alone. I have seen cases where there had been abscess and no external signs of lesion, and the persons themselves had no knowledge of its existence, clearly showing to my mind that an abscess may exist and be radically cured by nature alone. The next among the causes that we shall mention is mechanical violence; this, like many other causes, has its peculiarities. Mechanical violence may be in any direction that will bruise the periosteum of the tooth. But the most favourable is the lateral. You may force a tooth in the socket with such violence as to bruise or otherwise wound the membrane and cause inflammation. It may, first be in the form of periostitis, but if the inflammation is not allayed a plasma will be wiped out and matter formed; but as before stated the most favourable kind of violence for the production of abscess is the lateral. Strike a tooth on either side and not only bruise the investing membrane, but the nerve itself is liable to be injured, either of which will cause thickening of the membrane and produce the same result. An alveolar abscess is sometimes caused by simple inflammation of the PERIOSTEUM this is often the result of sudden transitions of temperature. These are some of the exciting causes; there are others that might be named, but for the present we will omit them. There are general or constitutional causes which contribute largely to the formation of abscess,—persons of a manifest inflammatory diathesis or those in which there is considerable local inflammation from some local exciting cause. Those of a manifest strumous diathesis and persons living in miasmatic districts are more likely to be attacked than those of a healthy condition.—*Dental Register.*

(*To be continued.*)

IODINE AND ACONITE IN PERIODONTITIS.

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THE best remedy, and the one that works the most conveniently, for periodontitis, I have ever used (and I have tried nearly everything recommended), is a mixture of equal parts of—officinal tincture of iodine and tincture of aconite root, applied to the gum around the roots of the tooth with a camel's-hair brush, or a portion of cotton wound on the end of a