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## Original Communications.

### Sensitive Dentine.

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The subject which I have chosen, for what I fear will prove a somewhat incomplete paper, is by no means novel, but is, nevertheless, interesting to both operator and patient. So long as a large proportion of our patrons approach our rooms with feelings akin to those experienced by the victims of the Inquisition in bygone ages, we, as practitioners, will be interested in the discussion of Sensitive Dentine. On this subject so much has been said and written that I cannot hope, at best, to do more than present known facts in a somewhat new aspect, and to make some deductions, which may possibly suggest a method of combating the difficulty, more intelligent, perhaps more scientific, than some which have been in use.

Though all are agreed that human dentine is endowed with the function of sensation, there is no general agreement as to the minutiae of the process by which a sense of injury is conveyed to the brain so that we may take cognizance of it.

The theory elaborated by Dr. Black, in "American Dentistry," is reasonable and accounts for the phenomena observed. In this view, experiment has demonstrated that protoplasmic cells are sensitive, and manifest their sensibility in response to contact with stimulants both chemical and mechanical. The tubules of the dentine are occupied by projections from the protoplasmic odontoblast. The central end of the elongated odontoblast is in close association with the fine nerve filaments in the periphery of the pulp.