

course, for judging by the attitude assumed by the medical profession, competency counts for nothing—possibly if it did we might find it harder to secure anesthetists. The conditions under which we would ordinarily consider a man competent to administer anesthetics would be: familiarity with the character of the agent used, its method of action, a full comprehension of the complications that may be associated with its use, and a thorough knowledge of the resuscitative agents with which to combat them. We may well ask, of what use are all the hours spent on the subject of anesthesia, and subjects bearing on it, if we make no more use of them than we do? Even under so safe an anesthetic as nitrous oxide accidents have occurred, but we find no voice of opposition from the medical profession. Is it because *they* do not use it? If so, may we not readily deduct a reason for their vigorous opposition to our using other general anesthetics? Again, why is no opposition raised to the number of dentists using obtunding agents hypodermically, those agents in many cases being of a secret or proprietary nature? Here is a chance for earnest guardians of the public welfare to call a halt. It might be noted even in this case as the others cited, that the use of these agents takes no money out of the medical man's pocket—this is just mentioned incidentally.

In regard to the use of drugs for internal administration our position may not be so sure.

We may first ask ourselves, Is the use of internal remedies necessary to a dental practice? In some cases it certainly is, and whether it should be undertaken in conjunction with an M.D. or not is debatable. If we undertake the matter alone, and any complications arise, we should certainly be involved in legal difficulties which might be unpleasant. Morally, we are certainly within our bounds should we practise dental therapeutics to the full extent of the term, but there is lacking that condition of the legal end of the line that is essential to undisputed right.

Simple as may be the operation of tooth-extracting, I doubt if less than seventy-five per cent. of the graduates could not be placed under the head of "incompetent," were we to classify them according to their skill in this direction. We hear no complaint, however, from them on this score, however much the public may suffer by their unskilful handling of the forceps. Summing the matter up, we can easily reach the conclusion that in order to remedy the existing evils in the dental profession to-day we must assist in (1) Favorable legislation—or at least legislation non-antagonistic; (2) the education of the public to recognize and appreciate the professional ability of the dentist