

been given her for menorrhagia a year and a half previously by a leading medical man. A small amount of mercury was contained in this, and he had neglected to warn her against the prolonged use of it. The consequence was she gradually lost a beautiful set of teeth.

Cases of enlargement of the glands about the jaw come frequently under notice, and are very interesting from the fact that generally speaking so much can be done to relieve them if a careful examination be made of each case. A superficial observer, especially if the patient be thin and pale, jumps at once to the conclusion that the enlargement is due to a scrofulous condition of the blood. If so, why are the glands about the body not enlarged? For this reason, that in four cases out of five the cause is local, and can easily be removed. Either a tooth is decayed, or the socket is inflamed, or a wisdom tooth is in vain trying to work its way through the gum. The irritation produced by any one of these causes, if long enough continued, will be found sufficient to produce enormous enlargement of the glands in the neighborhood, inflammation of these glands or even the formation of large abscesses about the neck. It is always advisable, when such cases present themselves, to make a careful examination of the mouth, teeth, jaws, etc., to see if such causes exist, and if they do, to remove them at once. The remainder of the treatment consists in attending simply to the general health of the patient, making no local application whatever. The following remarkable case supports what I have said:

A very pale delicate girl, age 20, was admitted in the following condition: there was symmetrical enlargement of the glands of the neck to such an extent that the outline of what had once been a very regular well-shaped countenance was completely lost. This state of things had been coming on gradually for a year. Her mother had sought advice for her at several hospitals, and had received the same answer at all of them, that this enlargement was due to a scrofulous condition of the blood, and that the only treatment that they could recommend was a course of cod liver oil and a prolonged residence at the sea-side. She was admitted into hospital with a view to giving her good nourishment, etc., preparatory to going to the sea-side. The surgeon under whose care she was placed fortunately for her had long taken a great interest in such cases. On making a careful examination of her mouth, he found the gum covering the wisdom tooth on each side thickened, inflamed and very painful. For more than a year she had suffered from this cause. The gum was carefully cut away so as fully to expose the crown of each tooth, and

care was taken afterwards to prevent its closing over again. She had a slight attack of facial erysipelas, from which she soon recovered, and from that time the swellings gradually subsided, the face began slowly to resume its natural form, and at the end of two months the girl went home quite well. I relate this case on account of the enlargements being perfectly symmetrical, which, without making a careful examination of the mouth, would incline one to say that the cause was constitutional. Many other cases came under my notice where the affection, whether simple enlargement or suppuration of the glands, manifested itself on one side only, the irritation existing on that side. In contrast to the case just related I might mention that of a girl about the same age, where the glands, not only of the neck but generally throughout the body, were enlarged, in the axillæ, groins, etc., which clearly pointed to a constitutional cause, whether scrofulous or not it was difficult to say. The following case of a small abscess situated in the angle of lower jaw, due to the irritation produced by a decayed tooth, will show how much suffering, disfigurement, expense and loss of time may be saved by careful attention to the teeth:

A housemaid, age 25, strong and otherwise healthy, was admitted with the following condition of the lower jaw on the right side. There was great thickening at the angle, the movements were very painful and much hampered, and there was circumscribed inflammation of the skin and tissues over the jaw. For a long time one of her teeth had troubled her, and in spite of the great agony she suffered, she refused to have it removed until the jaw was in the condition above described. The pain became greater, the movements of the jaw more and more confined, until she could not move it at all. About this time there was slight discharge of pus from an opening below the angle. Her general health continued good during this time, but the pain became so intolerable that she could obtain no sleep even with large doses of opium. She was placed under the influence of chloroform, an incision was made over the angle, and a small trephine was applied to the bone, which revealed a small abscess between the outer and inner plates. Great relief was experienced from this, and she made a slow recovery. An interesting case where removal of both upper jaws was performed is worth mentioning from the rarity of the operation as well as as from the rapidity with which the patient recovered.

A strong healthy woman, aged 35, the wife of a soldier, presented herself in 1864 at Charing Cross Hospital with a tumor of the left upper jaw, which had been twice operated upon, and which she said