ed in a few months, and the jaw bone proper becomes a hard bony mass; consequently there is no place for new teeth to be formed, unless nature should be so kind as to supply a new sett of alveoli cells, an operation she seldom if ever takes the trouble to perform.

FILLING FRAIL CAVITIES.

BY W. GEORGE BEERS, MONTREAL.

In the variety of cases which come under the observation of the operative dentist, there is none that afford more scope for patient ingenuity and artistic manipulation than filling frail cavities with gold. When in addition to the frequent difficulties of access, excessive flow of saliva, and hyper-sensitiveness, we have frailty and friability of walls in a conspicuous tooth, the steadlest nerve and most delicate manipulation is imperative at every point of progress if the frail walls are to be preserved in their existing integrity.

In this connection we particularly refer to the incisors, cuspids, and bicuspids, as the broadest human grin seldom has more latitude; and the sacrifice of tooth substance for firm borders, beyond the latter teeth, is not only of less consequence for appearance sake, but most often indispensable for the success of gold operations.

It is easier, and to some, more tempting because easier, to extract a frail incisor and replace with an artificial substitute, or to sacrifice tooth substance for firm borders, and perhaps "building out;" but we consider the preserved natural shell of a conspicuous tooth, well filled, infinitely preferable, and more attractive than the most superb specimen of building out ever performed. No one can justly ignore the real science and art of restoring broken angles and fractured crowns with gold, but we are aware of several instances where natural incisors shells, which were capable of preservation, were partially sacrificed to a mania for this operation. Such a tendency should be carefully avoided; for however fashionable the operation may become, nature is superior to art; and a good shell of a conspicuous natural tooth, if possible of preservation, is preferable to any artificial substitute, whether it be of gold or porcelain. Where science and patient taste preside over the manual execution, the results of filling these frail cavities with gold will be more often satisfactory. The danger of fracturing friable enamel when introducing the filling, and the belief that good work cannot be done beside thin borders, leads many to cut away more than is always necessary, but there is a simple way to strengthen the thin walls while filling, and past successes are proof that