should at once proceed to make a separation in the balance to avoid the results almost certain to follow? I understand Dr. A. to answer, "that it is the best practice to make the separation before the progress of the caries has rendered this method of treatment impossible."

While I endorse the fact that caries will attack these anterior teeth, I do not think it advisable to enter at once upon the separation of all the proximate surfaces anterior to the biscupid. There is always a doubt whether this result will follow, and we should give the teeth the benefit of this doubt, and wait until decay manifests itself. I make exception in the case of these anterior teeth, because they, above all others, are immediately under the supervision of the operator and patient; very few of the latter will permit caries to make any progress betore calling the attention of the dentist to the fact. Separation can then be made of the proper form, and the simple cavity filled producing no disfigurement to the tooth.

The same reasoning and mode of practice does not, it seems to me, hold good with the bicuspids. Further removed from observation, and closely pressed together on their proximate surfaces, the ordinary opportunities for observation are not present.

Without entering into the theories of caries, that have at varions times been promulgated, I may say in brief, that the destructive agent, having once effected a lodgment, soon breaks down the tubular structure of the dentine, and that is removed with great rapidity, without a corresponding loss of the hard enamel tissue. This is the process common to all the teeth.

We find in the proximate surfaces of bicuspids, superior and inferior, caries penetrating the teeth at the point of juncture of the surfaces, or slightly above it. It will then pass into the dentine, and very commonly destroy a large interior surface, before either dentist or patient is aware of the fact. To the properly educated eye, this progress of caries is manifested from its first entrance into the dentine, by the slight change of color of the enamel. If this infallible sign were always observed and attended to, there would be but little difficulty in the management of these teeth, but, that it is almost entirely neglected, is patent to all observers. The teeth are allowed to remain until the cavity is exposed by the breaking of the surrounding wall, or the pulp is nearly or entirely exposed, producing pain.

Caries may, however, be present in the enamel and give no indica-