

stitutional change takes place when it is rapidly eliminated. This deposit in its direct action on the tooth, in regard to health, is innocent, as it is an exterior formation on the surface of the tooth, and serves rather to prevent than to produce decay. On the other hand it is well worth the notice of the dentist and should never be allowed to remain, as from its tendency to increase on the most protected points, it will naturally force the gum to recede, the alveolar process to absorb (where there is pressure there is absorption), and if left unmolested will not only loosen the teeth but finally cause them to drop from their sockets.

Green and brown stains, doubtless, are caused exclusively by the mucus. This stain is not, like tartar, a formation on the tooth, but enters into the composition of the enamel and tends to produce decay and the destruction of the entire tooth. To this disorder young persons are especially liable, as the enamel is of a lower order of density and the acids of the mouth will therefore act upon it with greater rapidity than in more advanced age.

As a general rule the anterior superior incisors are most liable to be attacked by this disease, owing to their position in the dental arch, where the saliva is only sparingly retained, and where the cleansing if not polishing action of the tongue is almost entirely excluded. This will to some extent account for the reason this disease selects the labial surface in preference to any other.

The remedy for the former of these diseases (tartar) is purely mechanical, but for the latter (stain) it may be necessary to combine the mechanical with therapeutic treatment.

Giving attention first to tartar, I shall endeavor to explain the *modus operandi* in relieving the teeth of these disagreeable and destructive affections. There are two methods of removing salivary calculus from the teeth: the one by chemically decomposing the deposit by the use of some acid, the other, mechanical, by scaling and scraping with appropriate instruments. The former should never be resorted to, as the chemical action of the acid does not stop with the decomposition of the calcareous deposit, but by the same affinity attacks the tooth itself, and with almost equal readiness destroys it. The removal of tartar by the second method does not involve a very great amount of skill, and with suitable instruments is easily performed. To accomplish the operation with success, appliances and instruments of various forms and curves are necessary, adapted and adjusted to the various situations to be operated on. All instru-