

to extract, but it should only be done after mature deliberation, as operators are often at a loss to decide at the moment, and may have to regret a hasty decision. Much depends upon circumstances ; but never extract in expectation of a crowded condition. It would be about as wise as to take the remedy before the disease had manifested itself. "Woodman, spare that tree."

I have written the foregoing to give my estimate of the first molar. Many a time I have found them, in my long practice, the only good masticators left, and thousands of partial plates are now in wear supported by these same teeth.

A FEW HINTS.

By G. V. N. RELYEA, L.D.S., Oswego, N.Y.

OBSTINATE BLEEDING.—I will relate a case just treated. The servant girl of my family physician called to have an inferior molar extracted. The fangs diverged, which caused it to come very hard, but, taking time and care, I brought it out safely. Here let me say, better be a minute in getting a tooth out than a second in breaking it. My patient left me, and, as usual, I forgot about it until the doctor came in the next morning to inform me that it commenced to bleed three hours after the operation and continued to bleed all night ; he also reported much pain combined with the bleeding. Calling to mind the difficulty in extracting, I suspected a fracture of the process. However, after a close examination I found no injury had been done, and after removing the coagulated blood it should have been syringed out with tepid water ; but I did the best I could under the circumstances, and, in a word, I arrested the bleeding, and the young lady went out riding the next morning. I will now give my manner of treatment when all the necessities and conveniences are at hand. After the accumulations are removed, roll up a piece of bulbous paper hard, about the size of a small pea. This, fully loaded with wood creasote (not the commercial article, but *pure wood creasote*), force down hard, and continue to pack as you would gold in a cavity of a tooth. When three-fourths full, roll a larger piece and place in the mouth of the cavity, which must be forced down and left in for several hours. Should it show signs of bleeding again, remove and repeat the packing system, and, if properly done, success is certain.

MODELLING COMPOSITION will be found an excellent temporary stopping. It is easily manufactured, is a non-conductor, and the temperature of the mouth keeps it in a condition to be easily removed, and it will wear for weeks and months.