

the central was perfect on the lateral side and, as seen in Fig. 1, turned towards the median line.

My patient was now treated as follows: It will be remembered that Fig. 2 was the result of the first operation. A few days afterwards I extracted the supernumary lateral, on the left side of the median line. I then extracted the left normal central which was so high on the upper part of the alveolus that the lip entirely concealed it (see Fig. 1). After excising the apex of its root, I pushed it slowly up into the socket of the latter I had just extracted, fortunately securing the beautiful relation and contiguity seen in Fig. 3. In two days the transplanted tooth was apparently as firm as its neighbor which had undergone torsion; and there they are to-day, after four years, as comfortable and alike as if they had grown into the regular harmony they now present.

The cuspid was drawn by ligatures back to the bicuspid, and the irregular central brought easily into place. The latter was a very easy matter as any one familiar with regulating teeth is aware.

Both operations were done in the presence of my friend and former colleague, Dr. Chas. Brewster, who has himself admirably succeeded in some cases of both torsion and transplantation. The patient kindly allowed several other conferees to see the case.

I may add that I shall not be amazed some day to learn that the teeth are loosening in their sockets. I do not here stop to consider constitutional conditions which should dissuade any one from attempting a case like this. These conditions have been well discussed elsewhere, and are familiar to the profession.

The above case was published in the *Canada Journal of Dental Science* eleven years ago. The uncertainty at the time of its permanent success makes its history interesting fifteen years after the operation. About two months ago I learned that the patient has repeatedly displayed the firmness of the teeth, by placing stout cord between his teeth and pulling it forcibly. He has never had the least trouble with the teeth; no periosteal trouble; in fact is unconscious that they were ever any differently placed.

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### A Plea for Tube Teeth.

By C. H. WILLES, L.D.S., Huntingdon, Que.

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During a brief practice in the old country some years ago, I was forcibly struck with the many advantages of the English tube over the pin tooth, and the conviction remains with me, that even critics here who have never used them and who therefore are apt to despise them, would probably change their opin-