from the mere fact that gold is a metal that may be tolerated almost better than any other, and that it is dovetailed in there, suggests the idea that it may be of practical use. We know of an operation of that nature that was brought out here by Dr. Carr. The idea was the implanting of roots in the alveolar process. Although it was taken up with enthusiasm by many that saw it, yet there are many of us who have some mechanical ideas who did The idea of inserting four posts in the alveolar pronot like it. cess, and expecting them to retain a full upper denture was a ridiculous idea. Of course it was brought as a startling proposition and a new one, and it was accepted by a great many that did not give it the proper thought that it required. This, however, seems to me to be the most practical proposition that we have yet had before us. The spreading of the capsule, as illustrated by the Doctor, is a thing of great importance in the operation.

Dr. C. B. Root—Mr. Chairman, I don't think that you can compare that operation with implantation. In the implantation of a tooth every part of the tooth may resist a certain pressure. But in this gold capsule operation the thing rests pretty closely against the walls, and a slight pressure would be sufficient to allow it to move. If the pressure is forward or back it will be only one part of the bone against which the capsule rests that will resist the pressure, instead of the whole root of the tooth, as in the case of

an implanted tooth.

Dr. J. N. Ward—Mr. Chairman, if the tooth can be made so as to be perfectly immovable, it might be a success, but, as Dr. Root has said, the slightest pressure would be sufficient to disturb it. With a natural tooth, it seems to me, there is a natural cushion to relieve that strain. In this case you get no cushion at all. You all know how easy it is to move a tooth with a little piece of cotton or anything else. It is impossible to retain that tooth immovable in the mouth; it is bound to move more or less, perhaps a great deal more.

Dr. Thomas Fletcher—Mr. Chairman, I would ask the members of the Association if any of them ever had any success with that method set before us at the Midwinter Fair Dental Congress, of which Dr. Teague has spoken. I saw two cases only where they had been used, but the set post was not there at the time I saw the cases. I had to use the old-fashioned method to restore the lost tissues, and had a little more lost tissue to restore than I should have had otherwise. I would like to know if any have had personal experience with those posts that Dr. Carr showed us at that time—if they can give us a suggestion as to the utility of that class of apparatus?—Pacific Dental Gazette.