

There are cases of abscess with which we meet that are so stubborn that any means fail to restore to health, or ordinary means fail to keep restored, and they return to work periodically upon slight constitutional derangement, such as a cold or a bilious attack, wet feet or constipated condition of bowels ; and again, we sometimes find cases in which the utmost care will not avoid the tendency to run into periosteal trouble, and end in abscess or extracting. These we call the inflammatory diathesis, and of all the trying and exasperating things these are the worst sent to us to try the material of which we are composed, like overdrawn bank accounts and protested notes. They set us to thinking, and prove how helpless we are with violated Nature sometimes.

In such cases we can only assist Nature to throw off the incubus by saline aperients, cathartics, refrigerants, alteratives or constitutional treatment, along with counter-irritants and such local treatments as is thought advisable.

We do sometimes meet a case where there is fistula without an apical opening, or if there is one we are not able to find it, and no remedy can be forced through without drilling. In such a case we will find a broken Morey drill made sharp by stoning two sides to a cutting edge, or by using the regular Morey cutter very effective, using due care in choice of roots to be opened or such as are accessible to straight drills, and open them only at the apex. In dealing with roots of this kind I have been able, especially in inferior teeth, to force a passage by warming gutta-percha and pushing it into the chamber and canals with the tip of the forefinger or thumb, or an instrument quite as large as the cavity, thus making a strong piston force.

In still other cases where we have a curved root, and in consequence a liability to make a side issue or other good reasons for not piercing the apex, by using a syringe with hydrogen peroxide and getting as near the seat of the abscess as possible through the external opening, and a very mild pressure on the piston, we may be able to persuade the contents of the sac to imbibe sufficient of the antiseptic to effect a cure. There is still another way of getting at an abscess, which for one reason or another we are not inclined to apply other means of remedying, and this is through the process : by using cocaine or other local or general anæsthetic or by proceeding without these aids. The operation is not very painful, and is soon done with. In doing this a sharp fissure drill in the engine may be rapidly run over the end of the root, completely severing the connection between root and sac, followed by any good antiseptic and soothing remedy thought best. Cut, and in a few days all trace of abscess disappears.

In the foregoing remarks I have avoided as much as possible strict detail, out of compliment, no doubt, to the intelligence and experienced sagacity of my audience to follow out the ideas to their logical conclusions.