

of the most cordial nature. If the patient feels she has full confidence in the gentleness and ability of the operator, she will rest easier in the chair and submit more quietly to the operation. And thus in such a relaxed condition the pain of the operation is much lessened.

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### COMBINATION GOLD FILLING.

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By E. R. RANDALL, D.D.S., Truro, N.S.

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One has not to go very far in dental practice until he will meet with a case which I will endeavor to describe. A front tooth, probably a cuspid, with large shallow cavity on labial surface, extending far beneath margin of gum.

This is exceedingly difficult to fill with gold, as even by using clamps it is almost impossible to get rubber dam up far enough and keep it there. The most satisfactory method which I have found in such cases is to fit a 22k. gold band around neck of tooth 1-16 inch wide at back,  $\frac{1}{8}$  inch wide or less in front, as the case may require, cement this in position pushing it well up under margin of gum. After cement has hardened, preferably at a later sitting the rubber dam may be applied without any trouble, make undercut in cement underneath the band, and put in a gold filling finishing flush with gold band. When all is burnished and polished, you will need to look very closely to detect the joining of the two kinds of gold.

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### RECURRENT APTHOUS STOMATITIS.

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By W. G. B.

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My attention has been many times directed to a form of apthous stomatitis coincident with the catamenia in anæmic patients, which disappears after anæmia has been treated. It is not very difficult for the observing dentist, debarred from the privileges of plain inquiries of the family physician, to discover physical signs and symptoms of menstruation, and within the last seven months I have paid special attention to a number of recurrent cases of the apthous form which periodically appeared with the catamenia or disappeared upon their cessation, with little or no treatment. The signs were of a mild type of oral ulcers covering the gums and lips chiefly, accompanied invariably with hypersecretion of saliva, to which I drew attention in a paper read before the New York Odontological Society, as an almost invariable case of menstruation. Four cases during the