

may be said we call the epidermis "sensitive." but it is only the nerve filaments that make it sensitive. Paralysis destroys the sensation of touch; a palsied hand will respond to stimuli by reflex action without sensation. When the nerve filaments are palsied, the skin *per se* is as dead to sensitiveness as if it were parchment. Everyone knows that when the pulp dies, the dentine loses its so-called sensitiveness, and that with living pulps it is often no more sensitive in excavation than the enamel. Dentine would not be sensitive if the branch of the nerve leading to the tooth was severed. Yet, in these several conditions\* there would be no alteration in the chemical or microscopical character of dentine. We know very well that the sensitiveness is due to the contents of the tubuli, which transmit sensation to the pulp. Dentine is nothing but the passive matrix, in which lie the sources of sensation. Therefore, logically as well as scientifically, the term sensitive dentine is a misnomer, and we should say "sensitive fibrillæ." Perhaps we should not.

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## Proceedings of Dental Societies.

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### Royal College of Dental Surgeons of Ontario.

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#### ANNUAL MEETING.

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The annual meeting of the new Board of Directors was held at 2 p.m. on Tuesday, March 28th, in the council chamber of the College of Physicians and Surgeons, on the corner of Bay and Richmond Sts., Toronto.

The full Board was present, composed of the following members:—Dr. G. E. Hanna, Kemptville, District No. 1; Dr. J. A. Marshall, Belleville, No. 2; Dr. H. L. Wood, Toronto, No. 3; Dr. R. J. Husband, Hamilton, No. 4; Dr. A. M. Clark, Woodstock, No. 5; Dr. J. Stirton, Guelph, No. 6; Dr. J. A. Smith, Windsor, No. 7; Dr. J. B. Willmott, representing the Faculty of the School of Dentistry.

Dr. Wood was elected temporary chairman, and Dr. Willmott secretary *pro tem*.