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## Original Communications

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### A CASE OF TRISMUS FROM SPASTIC IRRITATION OF THE MASSETER.

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BY W. GEO. BEERS.  
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Mrs. W., aged 45, a poor laundry woman, was referred to me on account of the complete closure of the jaws. She had suffered much pain for four weeks on the left side of the face, the contraction of the masseter being due to the irritation of an undeveloped left lower dens sapientiaë. She had been treated for several weeks without any thought on her part, or suggestion from the hospital physician, of the dental trouble, faithfully applying hot poultices externally to relieve the pain, and, as she hoped, to relax the contracture; but the day she came to me an abscess had pointed externally. By probing I discovered the position of the tooth and found that it was partially underlying the second molar. Probing gently through the fistula, the instrument came into contact with the widely divergent roots, and a considerable discharge of pus followed, which was encouraged by massage. However, as the intention was to open the jaws, and extract the unseen tooth, no further attention was paid to the external opening, further than to use proper antiseptic precautions. The patient was etherized, and after no small effort, by means of a mouth-gag, the jaws were slowly separated. All that could be seen of the tooth was the mere surface of the mesio-buccal cusp, the tooth being tipped by the narrowness of the maxillary. The coronoid process and the alveolar process are very thick in the region of the third molar, but the mylohyoid ridge, just as this point is thinner, and as Black has shown, it is not as difficult to extract a dens sapientiaë