The propositions laid down by Dr. Arthur, as a basis of reasoning and practice, are as follows:

"1st. That caries will attack the proximate surfaces of all the teeth, except the inferior incisors, of the great majority of persons of the better classes in the United States of the present day.

"When caries of the superior incisors occurs on the proximate surfaces, previously to the twelfth year, its occurence, sooner or later, on the same surfaces of all the teeth, except the inferior incisors, is almost certain. In the greater number of such cases, the caries will show itself before the twenty-fifth year. This predisposition to caries is greater in the female sex.

"2nd. That caries is not liable to occur at the points indicated, unless the teeth are in contact.

"3rd. That an artificial, permanent separation of the teeth will arrest superficial caries, or prevent its occurence, if the attack has not actually begun.

"4th. That it is a popular fallacy to suppose that caries necessarily follows the removal of enamel.

"5th. That the most efficient means of preserving the teeth is to anticipate the attack of caries by separating them, when it is ascertained that caries is likely to occur on the proximate surfaces."

The position laid down by Dr. A., that when the caries atttcks the superior incisors previously to the twelfth year, that it will also attack the proximate surfaces of all the teeth, except the inferior incisors, cannot be successfully controverted. The teeth, in their various degrees of development, are necessarily subjected to the same influences that operate either to the benefit or injury of the structure. If therefore, caries be found on the proximate surfaces of the incisors, it may reasonably be inferred, that sooner or later it will make its appearance on all the teeth mentioned. Where this result does not follow, it must be from one of two causes:

1st. That the proximate surfaces of the teeth are not closely in contact, and admit freely the passage of the brush or fluids between.

2nd. That the patient by the exercise of constant care, has kept the surfaces free from all collections.

When decay attacks the incisors at a later period in life, it does not necessarily follow that the surfaces mentioned will be affected.

If, then, this position be true, it becomes a question of serious import whether, if one of the incisors be decayed at this early period, we