

of the solutions of the usual strengths (5 to 10 per cent.) is certainly far more dangerous to life than the administration of chloroform. The higher solutions of cocaine surely diminish the exudative process and retard the healing, and in some cases actually destroy the trophic filaments, so that gangrene has been known to occur. Nothing of the sort has been found to result from the infiltration of the solutions recommended in this article. Anæsthesia is complete and occurs immediately, and lasts long enough for almost any external operation. There is no objection at any time to repeating the injection if feeling should return during the operation. Indeed, we might safely operate for hours upon a small area if so inclined. The advantages of the method are also evident from its simplicity, safeness and celerity.

The method has gained credence and is now in common use by many busy practitioners. Operations have been done, from the removal of ovarian tumors and amputations, down to the opening of boils without pain, and with satisfaction both to the physician and patient. I have personally done half a hundred operations upon the eyelids, etc., by this form of anæsthesia, as well as various operations upon other parts of the body while prosecuting the investigation. My first operation was done upon a deep-seated felon. I have assisted at a number of circumcisions, excisions of tumors, and minor operations, making the injections myself. I have had reports from many surgeons in different portions of the United States, of its use for operations varying in severity from ingrowing toe-nail to hernia, in which the anæsthesia has been satisfactory. Healing has been by first intention, and in only three instances have we had reports in which it has been delayed.

For most office operations the Schleich method is an invaluable contribution to our therapeutics. It should do away with the injection of dangerous solutions of cocaine and take the place of general anæsthesia for many operations.—*Journal of the American Medical Association.*

SIMPLIFIED TREATMENT OF TEETH WITH EXPOSED PULPS.*

By WITOLD LINDEMANN, of Rybinsk, Russia.

The pulp laid bare during excavation is covered with iodo-cement, which serves as a simple capping; this can, however, only be accomplished in those cases in which the exposed part has only the circumference of a point. The slight hæmorrhage which occurs here almost regularly is stopped by means of carbolic acid

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