

must be recognized as an unexceptional duty to know and neutralize the active agencies as well. It is very easy phonetically or otherwise to record opposite each appointment the tests of the saliva; and one important effect will be that you impress upon your patients the ease and importance of detecting these changes for themselves and counteracting their influence. The careful use of litmus-paper, by keeping it clean and dry, not allowing it to touch the lips, the mucous, or the margin of the gums, but dipping it into the mixed saliva as it accumulates, and then letting it dry upon a clean napkin—these little things are important. Tests vary in the same month. Often there may be no marked reaction in the ordinary run of our patients. To be faithful records, they must be made before and after meals,—in fact, at least six times a day. Intelligent patients can be taught to assist us. They ought to be taught that nature intended the saliva to preserve, not to destroy, the tissues it bathes. Instruct them in its normal and abnormal conditions; the acids, such as lactic, acetic, and oxalic, which may be formed in the gland itself or in the mouth by decomposition of food, mucous, etc.; the uric, which is caused by the retention of urine, or by disease of the kidneys, which fail to eliminate it from the blood; the acids which are the result of medicines; the conditions which are the result of disease. Again, an excess of alkali may be present, which, while not acting upon enamel, will act upon exposed dentine, and thus the normal reaction may, by its excess, become *the* exciting cause of decay.

Any special and prolonged irritation of the uterus may induce acidity of the saliva. Any serious depression of the vital powers during pregnancy unbalances the circulation, and centres the nervous force in one organ. Where there is rapid decay at this time, there must not only be a diminution of phosphate of lime, and an increase of the more soluble carbonate, but that inevitable acidity,—to which two circumstances it seems reasonable to attribute the marked softening of the teeth. The pharmacist as well as the hygienist must work here hand in hand.

Just a few words now upon another condition. There are at least twelve times in each year, for about thirty years of a woman's life, when she is abnormally sensitive to pain, and salivary changes often occur which directly affect the teeth. I refer to the menstrual period, especially in dysmenorrhea. During the early and the last months, especially with the first child, because the novelty of the occasion induces more exalted reflex action, patients who at other times bear pain well then flinch from its slightest approach. In hysteria, for instance, a woman may be unable to control herself enough to brush her hair. Each particular hair seems to stand on end, if not "like quills upon the fretful porcupine," as sensitive as if they were pulps of teeth. She may have hysterical neuralgia and