

It is needless to state that such treatment is very reprehensible. There are cases where an external incision is indicated, but these are the exception and not the rule. In such cases, if the knife is used in a conservative manner, the healing process is speedy on account of the vascularity of the facial tissues, and often no perceptible scar remains.

From an æsthetic point of view, the surgeon should always endeavor to give vent to the pus by an incision inside the mouth, and not by an incision on the surface of the face.

One of the hardest tests to which my powers of argument were ever put was in persuading a fellow-practitioner from making a great gash in the cheek of a lady who had an alveolar abscess, which any good dentist could successfully treat by drilling through the root canal, and giving vent to the pus in that manner.

In regard to antiseptic medication any reliable antiseptic will do. Carbolic acid, peroxide of hydrogen, listerine and campho-phenique are perhaps the favorites with dentists. Thymol, creasote, oil of cloves, oil of cinnamon, sanitas, salicylic acid, iodine, and various other antiseptics, all have their advocates.

In this paper I have purposely omitted going into the detail of treatment of the simpler forms of alveolar abscesses, as they belong to the domain of the dentist and not of the surgeon. I would also strongly recommend that in all cases of doubtful diagnosis a competent dentist or oral specialist be called into consultation. These abscesses respond speedily to proper treatment, and the diagnosis, too, is, as a rule, simple to the dentist or oral specialist; and yet there are innumerable cases where the patient has been disfigured or inconvenienced for years by this disease simply through the ignorance of their family physician, who has failed to make a correct diagnosis. Later on, perhaps, a correct diagnosis is made by a dentist, or someone who is familiar with the disease, and the patient is cured in a few days or a week. Naturally, the patient is much embittered against the medical man whose ignorance allowed such a foul ulcer to remain on their face for such a long time.

Prophylaxis is of importance in the prevention of alveolar abscesses, but this belongs largely to the domain of the dentist. It should, however, be the duty of every physician, whenever he finds decayed or offensive teeth present in any patient, to impress on them the importance of visiting their dentist and having their teeth attended to.