DEATHS FROM THE SWALLOWING OF ARTIFI-CIAL TEETH.—The case reported in the daily newspapers last week of a police constable who met his death from the impaction of a set of artificial teeth in the neighborhood of the larynx should draw general attention to a danger to which many are daily exposed. It will be remembered that in this particular case the constable, summoned by the whistle of a comrade conveying a prisoner, whom there was an attempt to rescue, to the police station, came running up and took hold of the arm of the prisoner, but almost immediately fell to the ground. He was at once conveyed to King's College Hospital, but died on the way there. The post mortem examination revealed a set of false teeth impacted just above the larvnx, and this had caused death from suffocation. The report adds that the teeth were of inferior make, and no doubt became loosened through the deceased running. Year after year there are recorded cases of death from swallowing artificial teeth, and probably many occur which are not reported or even suspected. As a rule, these artificial teeth are what is known as "partial cases," where a few teeth are mounted on a small plate, with clasps attaching them to two or three of the remaining natural teeth. plates may be so ill-fitted as to be loose from the first, and thus easily displaced; but more often the supports—the natural teeth—decaying little by little, the hold of the plate becomes very precarious, yet so gradual is the loss of anchorage that the patient in some instances hardly notices it, and by means of the tongue and the opposing teeth of the other jaw keeps them in position, while the muscular movements are unconsciously performed. The danger in this latter class of cases is the greater because of the insidious growth of its cause. It has been urged that these small dentures ought never to be inserted, but this contention is hardly practicable; the dentist, however, should always impress upon his patient the necessity of seeking advice should they become loose, especially where they are worn during sleep. The extraordinary foolhardiness which is sometimes displayed in such a case is shown by the following history. A man wearing a gold plate carrying three or four front teeth attached by means of clasps to the bicuspids returned home one

night after a carouse, and, in attempting its removal, allowed it to slip down his throat. After waiting patiently for three days he found, to his joy, that it has passed per rectum and he proceeded straightway to place it in its proper posi-He saw his dentist a few days later, and told him that he had taken aperients, and passed a great part of his time looking for the lost The plate was green and slimy, but nothing could induce him to have it removed from his mouth or to have a frame made which would be impossible for him to swallow. ever it is not always the small artificial sets which have been the cause of death by suffocation, for the pharynx is sometimes large enough to accommodate a whole upper suction case, and in the museum of the Middlesex Hospital there is a preparation showing a loin mutton chop, including the bone, impacted in the pharnyx, which is surely as large as anything made in the way of artificial teeth .- Lancet.

INCREASE OF CHOLERA.—Disquieting intelligence reaches us from the East regarding the increase of cholera. The disease for some time time past has been smouldering in Persia, but now accounts are forthcoming of its active appearance in that country and in Cashmere. The chief places affected appear to be Meshed, where the mortality is said to have reached 60 per cent., and Srinagar, where the deaths have ranged between fifty and sixty per hundred of the cases. These reports may be, and we hope are, unfounded and exaggerated. Nevertheless, grave cause for apprehension exists, the more especially as cholera is reported to have shown itself at Turbeti Sheikh Djami, a town on the Perso-Afghan frontier. This looks as if there were going to be an extension into Afghanistan, and thence into India. Thus, Western civilization is at present exposed to invasion by cholera at two points, viz., overland from Persia through Russia, via the Central Asian railway communications, and by sea from India, through the Suez Canal. With regard to the former, the Russian government is taking precautionary measures, chiefly of an administrative character, It is satisfactory to learn that "saniat Tiflis. tary precautions" are being taken at Djami. If these are carefully carried out in Afghanistan, the disease may not acquire an epidemic foot-