

molar teeth. For ten years this growth was gradual and gave her practically no trouble. Then deformity of the face began to be noticeable and increased steadily. It was, however, only within the last year that marked increase in the size of the mass had been observed and troublesome symptoms had developed. On examination, the growth was found to fill the whole right cheek and to have produced great flattening of the right side of the face and the right nostril. It had ulcerated through the upper lip at one point, and the whole lip was greatly swollen. The point which presented at the angle of the mouth was evidently calcareous, but I mistook this for a simple coating of calcareous matter. The fetor was horrible and the mouth was so sensitive that no manipulation was possible. I looked upon it as a growth from the upper alveolar border, probably originally of the nature of epulis, but having recently (coincidentally with the history of rapid increase in growth and symptoms) become malignant, and advised removal of the upper jaw. She went home, but returned and was admitted to the hospital on October 12th and prepared for operation on the 19th. When she was fully anesthetized I was able for the first time to make an examination of the mouth. I then found to my surprise that the mass consisted simply of a large concretion the size of a large hen's egg lying free in the mouth, having formed a cavity for itself by displacement of the soft parts and absorption of the alveolar border of the lower jaw. It was so large that I removed it with considerable difficulty. A couple of teeth were embedded in its lower border, and it was clearly an enormous growth of "tartar" from the teeth. The ulceration of the mouth and lip healed rapidly, and the patient was discharged in a week quite well, except for the deformity which had occurred during the growth of the mass. The mass, which was oval in shape, measured $13\frac{1}{2}$ cm. in its greatest circumference and 11 cm. in its smallest circumference.—*James Bell, M.D., Surgeon to the Royal Victoria Hospital, in Montreal Medical Journal, April, 1897.*

THE JUDICIOUS EXTRACTION OF THE FIRST PERMANENT MOLAR.—The medical profession have so many opportunities of instigating this treatment that its value may be demonstrated and insisted on. These teeth are often found the only defective ones in otherwise healthy mouths; their calcification commenced several months before birth, the proper completion of this function is liable to disturbance both by deviations in health of the mother and the many ailments of early infant life. Imperfect calcification of the teeth cannot be repaired after birth by medical treatment and intelligent diet and care, as rickets and many other infantile troubles, hence that susceptibility to decay now so prevalent. In the mouths