One case is well known to the dentists of a western town, where a party, whose experience of twenty years ought to have taught him better, mistook the swelling from several ulcerated roots for a tumour, and who actually opened the cheek, and "operated" without once discussing in his mind whether or not the diseased teeth had anything to do with the trouble. After suffering inexpressible anguish, the pus was discharged under the chin, and upon consulting a dentist, she was assured that the diseased roots were the cause. Relief was had after their extraction.

This morning I had a case of the kind. A beautiful young lady who had been under treatment in a town of New England, for a swelling of the cheek, which had extended so far as to close the eye on A relative, who was in his second year at a medical college, undertook to cure her. He explained the nature of the tumour, as he called it; told her it was "just as easily removed as a button from a coat," and led her to believe that he was thoroughly competent to operate. With the aid of a fellow student, he gave her chloroform, made a transverse slit under the mental foramen, as could be seen; and as the young lady said to me, "he scraped, and rasped, and I awoke very stupid, and he showed me some little bits of bone which he said was the tumour." At all events the swelling did not disappear, and being obliged to remove to Montreal, she was brought to my office by a lady friend. The second inferior bicuspid was badly decayed and had been very tender to the touch for some weeks before the above scientific operation. Extraction was clearly indicated; a large abscess clung to the apex of the fang, and pus was discharged into the mouth from the socket. In the course of a week she was cured, but has her face disfigured for life by the scar. Other cases where the cheek has been lanced externally for such swelling are not very rare. It is common too, to hear patients say that they were advised not have an ulcerated root extracted until the inflammation subsided. A little study into the pathology of the matter will prove all external operations, hot applications &c., to be wrong, and the retention of diseased roots or teeth to be the greatest impediment to Hot applications over the seat of disease in the mouth are proper; but where there is any tendency of the pus to point externally, cold water, ice, &c., should be used to the outside of the face. I purpose referring more fully at another time, to the subject of alveolar abscess and its treatment.