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things are not used, and the teeth receive judicious treatment, why does it take place? and what is the treatment for arresting it, or to excite a reformation of the lost parts? In elderly persons he attributes it to the usual waste and repair of the body, and the greater density of the teeth, and consequently a less amount of vitality, and which vitality was necessary to maintain the affinity between the gums and the teeth; such affinity no longer existing, the gum pulls off and supports itself, leaving a portion of the roots exposed to the ravages of decay. He feels a lively interest in the subject from a personal standpoint, having almost every tooth-neck so exposed. By using a tooth powder composed largely of chalk, he prevents the softening of the exposed portion of the root. To restore the gum, he has used as stimulants chloride of zinc, nitrate of silver, iodine, etc., but without any perceptible reparative result. The zine and silver diminished the exquisite sensibility of the comentum, without discoloration, but after a time it again returned

Dr. Trueman reported twelve cases of capping exposed pulps with oxychloride of zinc. Five were cases of recent exposure; the teeth (two lateral incisors, one biscuspid, and two molars) had given but little pain; all in young and healthy patients. The exposure in each case was complete. They gave no pain during the operation, and, as far as heard from, are comfortable. The biscuspid was filled Jan. 1869; the others are more recent. Four (one biscuspid and three molars) were more favorable cases, the pulp being protected by a covering of dentine, but not sufficient to bear the pressure of filling without the capping. IIe preferred, in these cases, prepared gutta-percha, or Hill's stopping. In three cases the pain was so severe that the capping was removed and arsenie applied. Although the success attending these experiments was quite flattering, he was not yet prepared to indorse capping exposed pulps as current practice. The cases selected were for patients he frequently met with, and who would report immediately if they gave any trouble. With these experiments he intended to let the subject rest until sufficient time has elapsed to pronounce judgment upon it. He also spoke favorably of Dr. Stellwagen's modification of Dr. McQuillen's lead-water and laudanum mixture for periosteal inflammation, suggested by Dr. S., at a meeting of the Society, Jan. 1869. Since then he had used it quite frequently with the happiest result.

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