

About the only correct warning is when the patient informs the surgeon of a trouble of this nature on a previous occasion. When a case of this kind is presented, it is well to take every precaution when performing operations of a similar kind for any members of the same family, as the trouble is said to be hereditary, and good grounds are presented from past experiences for so believing.

After a tooth has been extracted, the blood comes spontaneously and flows for an unlimited time in a degree such as will not cause any alarm. Usually after five minutes' flowing there is a process of clotting taking place. This stage in the flow of blood is called primary hemorrhage, and is usually all that the surgeon has to deal with, as the blood generally stops flowing as soon as the clot is formed ; but sometimes after the clot has formed, even eight or ten hours after, there appears a flow of blood more rapid than the preceding and in a somewhat pulsating manner. This is known as secondary hemorrhage. When this occurs, it is first advisable to remove the clot which has formed in order that a more definite application may be made.

Some surgeons advise the use of a large burr as a first means of arresting the hemorrhage. The burr is passed up the socket and then given a half turn. This carries out, to an extent, the Torsion method of dealing with hemorrhage. But while this may be all sufficient, it is open to doubt, as frequently the blood comes from the underlying portion of gum, and should this be the case, the foregoing method would fail.

What seems more practical is to take a strong solution of alum, formed by dissolving alum in warm water, and first applying with a syringe ; after a few applications in this manner, pellets of cotton may be saturated with the solution and forced into the socket. Some think that a greater effect is produced by applying powdered alum to the pellet after saturation. This may make the action more powerful. However, if this is not effectual, it is well to repeat the treatment ; or should we prefer another treatment to this : the wound may be syringed with peroxide of hydrogen, which is said to have an immediate action causing a clot which is not soluble in the blood. Pellets may also be saturated and inserted into wound.

While the patient is being treated, it is well to lose no time as patient is growing weaker, and the blood is losing its clotting