

Medical Department.

Edited by A. H. BERRS, M.D., C.M., D.D.S., L.D.S., Cookshire, Que.

TUBERCULOSIS OF THE ALVEOLAR PROCESS. Carl Zandy (*Arch. f. klin. Chir.*, LII, No. 1, p. 178).—While this is considered to be a rare condition the author was able to collect thirty-seven cases from the literature of the last twenty-five years. He also gives the history of a patient observed at the clinic of Bonn. The teeth are of the greatest importance in the etiology of this condition. Carious teeth are the seat of entrance for tubercle bacilli. Wounds of the alveolar process, especially those caused by extraction, are of grave importance. Whether the bacilli come from a phthisical lung or from the outer world, they need no better soil for development than the alveolar cavity left after extraction. There is no seat of predilection in this disease, and any part of the alveolar process may be affected. As a rule, other parts of the buccal mucosa are involved at the same time. It is very likely that the pulmonary lesion which is found at the autopsy is secondary to the alveolar disease. Syphilis is no bar to a tubercular involvement of the alveolar process. The disease seems to develop between the ages of fifteen and fifty. Males are more frequently affected than females. Usually the gum will swell and become loose, soft and bleed very rapidly. This will soon be followed by ulceration, with pale, sluggish granulations. Following this the teeth will get loose and fall out and the bone may become necrotic. Pain is not very marked, but salivation is very profuse and the mouth has a very foul odor. A differential diagnosis is to be made from syphilis and carcinoma. The diagnosis will be facilitated by the presence of tuberculosis of the larynx or lungs. The best therapeutic measure is through curetting and removal of all suspicious tissues. This can be followed by applications of equal parts of lactic acid and distilled water to all recurring foci.—*Amer. Med. Surg. Bull.*, August 15th, 1896.

MOLDING OF THE SUPERIOR MAXILLA IN ADENOID VEGETATIONS.—According to *Rev. Hebdom. de Laryng., d'Ortol., et de Rhin.*, Korner, in 1891, drew attention to the particular change of form which takes place in the upper jaw, at two different periods. When adenoids obstruct the nares during the first dentition, elevation of the palatine vault is produced, along with a sudden retardation of development in the whole upper jaw; the transverse diameter is shortened, and the longitudinal lengthened. After the second dentition, the following changes are added to the above: The bony palate becomes still more elevated; the alveolar borders approximate still closer, and the maxilla seems to be compressed