

rewarded if I succeed in giving some credit to this essay, and in deserving a smile of approbation from those for whom I undertook especially to compose it.

OSSEOUS TUMOR UNITED TO A MOLAR.

BY W. G. BEERS, L.D.S.



The accompanying illustration, though poorly engraved, represents an hypertrophy of the cementum, united to the first inferior molar, left side, and which was removed from the mouth of a young nun, aged 17, at one of the Convents in Montreal.

The tumor had been gradually increasing in size for some years, without causing any pain until a few weeks before its extraction, when a dull ache was felt, similar to that connected with periodontitis. There was no perceptible discharge, or tenderness, to speak of. The tumor distended both the inner and outer sides of the alveolus, and disfigured the cheek. The crown of the tooth was perfectly sound and well developed. A section of the tumor showed it to be cementum. Weight, seven and a half pennyweights. Evidently the entire external surface had been covered by healthy periosteum, which, doubtless, secreted the osseous element during the period of the development of the cementum.

DISCOLORED TEETH FROM OXY-CHLORIDE OF ZINC.

BY N. Y. Z.

I had one bottle of oxy-chloride of zinc some time ago, which gave me considerable trouble. In every case in which I used it, it turned the tooth from a light brown to a black. In three instances, in which it discolored a part of the teeth, I removed it, where it was placed over exposed pulps as a temporary filling, and found the pulps alive and healthy. The question in my mind is, "What was the cause?" Possibly it may be traced to some admixture of other metals than zinc, or some impurity in the latter.

En passant, I hold it as necessary to keep oxy-chloride of zinc tightly corked as chloroform. It deteriorates from exposure in the dry state to the air. I prefer very much the oxy-chloride of zinc prepared by Dr. J. H. Smith, of New Haven, Conn.