

and not by an expansion when setting. This may not always be the cause of bulging, but by very little experimenting, one can easily convince himself that it cannot be relied upon, not to flow in cavities where there is an opportunity with heavy pressure of mastication constantly brought against it. Dr. Black's tests were made out of the mouth, and it is reasonable to believe that the flow would be increased with a raise of temperature. There are other things which were brought out in Dr. Black's experiments which will open our eyes to the true conditions and tendencies of that important material and factor in dentistry. I have now under way some experiments, which I hope will bring me a better knowledge of what, and how, to get the best returns for our effort. If I succeed in developing anything worth giving to the public, I will remember you in the future.

Abstracts.

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DR. A. C. HEWITT, of Chicago, says that in no case should nitrous oxid gas be administered to a pregnant woman.

MENDING BROKEN PLASTER CASTS.—Nothing equals oxyphosphate for mending broken plaster casts or plaster teeth.—*Gordon White.*

SETTING CROWNS WITH CEMENT.—Before setting the crown, wipe the gum around the root with a solution of perchlorid of iron, which will prevent weeping, protecting the cement till crystallized.—*E. L. Custer.*

CLEANING GREEN STAIN.—Pyrozone (3 per cent.), moistened with pumice, adding one or two drops of phosphoric acid, used for cement fillings, is good for green stain on teeth. A tumbler of warm water, containing a little carbonate of soda, is good for rinsing the mouth.—*S. B. Palmer.*

SIMPLE METHOD OF CLEANING IMPRESSION TRAYS.—Give the impression trays a coating of sweet oil with a woollen cloth dipped in the oil. Put them in strong soapsuds (made with soap shavings or powder), boil and wipe dry. Now polish with whiting by using a woollen cloth, or fine leather. In this way you can keep your trays bright and clean, and the plaster will not adhere to them.—*E. B. Edgers, D.D.S.*