

a large V shaped space are obviated, and the facility of performing an operation in this manner is equal to, if not greater than other methods.

Dr. Driggs, It is one thing to know how to perform, but quite another to do it. I still adhere to the old method of preparing cavities, have selected the old masters as my copies. There is a disposition in the profession to avoid extremes—to refuse to operate upon teeth that can not be saved with certainty. My practice is to cut down all thin, friable walls or edges, except perhaps upon the incisors; in the molars always cut away the thin edges or walls, and do not make much protrusion of the gold; do not attempt to make contour fillings. I do not believe they will ultimately prove permanent; in a small proximal cavity of a molar, do not think the best method of effecting an entrance into the cavity is by cutting down from the masticating surface of the crown, but obtain an entrance by a separation of the teeth, making as little cutting of the tooth as possible, to secure a good entrance into the cavity. I am in favor of conservative filling; do not extract all badly decayed teeth, nor do I always cut down a large portion of the tooth; but aim to have strong walls, and fill flush with their edges, and in favorable cases, build out somewhat so as to make a convex surface to the filling.

Dr H. A. Smith, I regard the principles announced by Dr. Driggs, in the main correct; there are, however, various methods of making very good operations.

I desire further information in regard to the new preparations of gold for filling. I am somewhat in doubt as to the advantages claimed for them; and shall be glad to know that they are all right.

Dr. Goddard, I have used about two ounces of "Morgan's Plastic Gold," and chiefly in connection with soft foil; but am not yet fully satisfied with the tests I have made. I fear from some things I have seen, that it may fail; but, as with many other things, so with this, time will decide.

About eighteen months ago, I operated upon a superior central incisor, a large cavity upon its anterior surface; after properly forming the cavity, I fitted into it as neatly as I could a piece of natural tooth; this I set in the cavity with os-artificial, it is yet worn without any apparent change. Can not operations of this kind be frequently made?

Dr. Watt, I have in three instances performed operations in the