

dren's teeth there, also, are deteriorating very fast, and that very little attention is given to their preservation. In one district, out of 6,300 school children examined by him ninety-eight per cent. had decayed permanent teeth, and yet out of that number only twenty-seven children had teeth filled. He further says that in various places which during the last few years had been heavily scourged with diphtheria epidemics, it struck him that the children, in their thirteenth and fourteenth years, possessed exceptionally good teeth in comparison with those of more tender years. This fact, he says, can only be explained in this way: That the children with bad teeth had to a greater extent succumbed to severe forms of diphtheria, inflammation of the lungs, and other infectious diseases. He says that Miller and others, it is known, have shown that most of the disease-bearing fungi appear at times in the unclean mouths of healthy people.

In his opinion, during an epidemic, the diphtheretic fungus will penetrate for a time to the mouths of nearly all the children in a school. He says: "In a clean, well-cared-for mouth, it does not find favorable conditions for its development, but grows vigorously in and near the roots of the teeth of a badly-tended mouth. The most effective sanitary measure in the treatment of diphtheria, during the disease and before, consists of the frequent thorough cleansing of the mouth and throat. A mouth with good teeth and tense gums can naturally be cleaned by rinsing, etc., much more easily than one with diseased roots and loose gums. **The most important preventive sanitary measure on the appearance of any epidemic is the most careful attention to the mouth.**"

His investigations reached the figures of over 13,-