Annotations.

Up to this date, proper sterilization of all cavities to be filled, seems not to have been sufficiently insisted upon. We live in an age of antiseptics and germicides, and those who ignore their efficiency deprive themselves of agents of the utmost value. Proper sterilization of cavities requires the agent to be seated in the cavity an ascertained length of time. To do this most effectively, most cavities will require preparation at one sitting, and the insertion of the filling at another.

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In my opinion, the treatment of acute abscesses should be relegated from the office to the patient's house, and regular visitations made by the dentist during the continuance of active inflammation. Dr. L. A. Faught, in *International Dental Journal*.

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Dr. Faight refers to the use of the clinical temperature thermometer in dental practice, and gives a record of cases. This has been in use for many years among practitioners in Canada, and, no doubt, elsewhere, especially in diagnoses of abscesses and diseases of the gums. In its use, previous to the administration of nitrous oxide gas, it was found invariably that the very act of using it increased the temperature, and gave undesirable alarm in nervous patients, the same as the display of extracting instruments.

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From the report of the American Dental Association, in the *International*, we learn that there are thirty-eight dental colleges in the United States. The number of graduates in 1891 was 1,241, in 1892, 1,483. The average in the last seven years is 904 per annum. The superfluity of many of these colleges was well demonstrated last year, when attention was called to the fact that it required the strength of fifteen colleges, more than one-third of the number, to graduate less than 100 students; eight more turned