ourselves as may be. Then, again, we should avoid complication; for instance, discoloration caused by infiltration of the tubules by disorganized blood; and, again, by the complication and irritation of surrounding membranes. Hence, when the case has been decided and we have determined to destroy the pulp, we should endeavor to reduce the inflammation and restore the normal condition as nearly as we may deem desirable, and then proceed to the work in hand.

There are several processes by which this result is reached, namely: that of immediate extirpation by use of instruments direct while the patient is in a state of anæsthesia, or by the use of local or circumscribed anæsthesia, as, for instance, muriate of cocaine—crystals or powder—dissolved with carbolic acid in the carious cavity in the anterior teeth and allowed to remain from twenty to thirty minutes. This will, in many instances, produce anæsthesia sufficient to extirpate the pulp and cause little pain in the operation.

Another, and what we may call the heroic method, is where the exposure is large and of easy access—we are speaking now of single-rooted teeth :—To shape a piece of orange wood to fit the canal as near as may be; saturate it in carbolic acid and drive it quickly into the canal to the apex. This is a very convenient method to destroy the pulp and saves lots of time, but is rather rough on the patient.

Another method is to rotate the tooth or remove it, cleanse the canal and replace it in the socket, under antiseptic influences, and hold there with ligatures. This method we do not approve of—it being painful, besides running the risk of losing the tooth from replantation.

And still another method, which is more universally employed, is by the use of arsenious acid.

When advisable, apply the coffer dam, or otherwise keep the cavity dry, and remove the extraneous matter and carious portion so as to expose the pulp and place the agent directly in contact with it, being careful to use no pressure upon it, and cover it with some material to prevent it working out of the tooth and destroying the surrounding tissue. Cotton, saturated with sandarac varnish, is a good material for this purpose, but a covering made of gutta percha or temporary stopping is preferable: Of all the methods employed for devitalizing the pulp, perhaps this has the preference and is generally used. We find a thick paste composed of arsenious acid, morphine, oil of cloves, cosmoline and finely cut, absorbent cotton, to be an excellent agent as a devitalizing com-The application should remain in the tooth from two to pound. four days, when it should be removed and the pulp chamber fully opened and the pulp entirely removed to the apical foramen.

It may be found difficult to remove all the tissue at one setting,