It is the decomposition of the canal contents, and the gases accumulating from that decomposition all the time forcing themselves into the pulp-canal that cause the pain in such cases; the gases cannot get outside, because the cement upon the surface of the root is living tissue, consequently all openings into the structure are closed to the escape of gas, except that which would be taken up in the circulation. In the other way, the opening is there, so that all the gases pass into this pulp-canal.

In the substances that we use for root-filling, we must bear this in mind, that the results of decomposition are what we have to deal

with, not the decomposition itself.

DR. GEORGE CUNNINGHAM (Cambridge, England).—It is now some years ago since I had the opportunity of knowing what Prof. Miller was doing, and of employing some of these tabloids. So far as cases of this kind are concerned, they are limited, as Dr. Abbott has said. I have no doubt there is a certain percentage of failures. I am acquainted with Dr. Herbst's method of treatment, and I do not believe in his system of hermetic sealing. I support Prof. Miller's statement, which I believe is right, that we can get as good hermetic sealing by his process as by tin in

the cavity.

I have tried the Herbst system with so-called "cobalt." Dr. Herbst kindly sent some to me, and my colleague, an eminent chemist, after examining it, said: "In that bottle your have enough arsenic to kill the whole British nation." Prof. Miller delivered an introductory course of lectures on operative dentistry, and showed these experiments in retaining the pulps alive by the cupric and sulphate method. I have used that method in wisdom-teeth. Of course, the alternative treatment is the forceps. If we could find for poor people some means which would shorten the treatment, I trust it will be the practice as used by Dr. Abbott, which will give the opportunity to fill at one sitting. I think the paper we have had to-day is of very great importance, because it has pointed out one way that we can bring our operations within the reach of larger numbers of the community.

DR. SCHREIER (of Vienna) addressed the Congress in German

and it was translated by Dr. Ottofy, as follows:

It is indifferent what antiseptic is used; each one leads to the same result. It is only necessary to find material which is easily applicable. If anyone says that he can take an antiseptic material and inject it into the fine canals, it is a matter which is impossible to comprehend. It is necessary that the material should be one which is readily introduced into the root-canal, and whose effect is prompt and immediate. Such a material Dr. Miller did not mention in his essay, but I have published a material of this character—potassium—sodium—which, on another occasion, I will present to the members of the Congress.