



THE  
CANADA JOURNAL  
OF  
DENTAL SCIENCE.

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VOL. I.]

JULY, 1868.

[No. 2.

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ORIGINAL COMMUNICATIONS.

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EXPLORATION OF THE MOUTH.

BY W. H. WAITE, D.D.S., LIVERPOOL, ENGLAND.

In order to make a thorough examination as to the condition of a patient's mouth, it is desirable that the seat of the operating chair should be raised, so as to bring the mouth within easy command of the operator's eye, without necessitating any awkward or uncomfortable attitude. The patient, being seated, may be directed to rinse the mouth with tepid water, in order to remove any fragments of food, mucus, etc., which may be lying between the teeth. Then, defending the lip by a napkin, a probe is taken, and exploration commenced upon the right deus sapientia, proceeding around the upper jaw to the left wisdom tooth, then descending to the lower of the same side, return to the right lower wisdom teeth. The points of each tooth most liable to the attack of disease may be thus enumerated :

3rd molars. The disto-buccal angle, and masticating surface.

2nd molars. Masticating and buccal surfaces.

1st molars. Masticating and mesial surfaces.

2nd bicuspids. Distal, and often mesial surfaces.

1st bicuspids. Mesial, and sometimes distal surfaces.

Canines. Approximal, specially distal surfaces.

Laterals. Approximal surfaces, and lingual rarely.

Centrals. Approximal and labial surfaces.

These may be called the highways of disease, but careful examination frequently discovers various by-paths in divers directions.

Having ascertained the actual state of each tooth, it is well to acquaint the patient at once with the result, and at the same time indicate the treatment required. This done, there are just two or three things to be observed, viz. :

- 1st. Not to make more than a *proximate* estimate of the cost.
  - 2nd. Never to promise *positively* any result in doubtful cases.
  - 3rd. Promise to do the best in our power.
  - 4th. Never to find fault with other persons work.
  - 5th. Always to treat patient's opinion with respect, at the same time insisting on the maintenance of our own.
  - 6th and lastly. Always to do to our patients as we would be done by.
10. Oxford Street.

## DISEASES OF THE MAXILLARY SINUS.

BY J. O'DONNELL L.D.S., PETERBORO', ONT.

*Read before the Dental Association of Ontario, Toronto, January 1868.*

### CONTINUED.

The first symptom of disease in this quarter, is the dull, heavy, deep-seated pain in the region of the *middle turbinated bone*, between the orbit and the lower part of the cavity—of course on the side affected. The pain is sometimes spasmodical, and follows the different nerves that supply the antra, to the main line or fifth pair and the portio-dura of the seventh or facial. The pain is not of an excruciating nature, but becomes general, from the ear forward and upward. This is the first stage of inflammation of the lining membrane of the cavity, and generally the forerunner of a more desperate and unwieldy form. This is generally caused by violence. A blow on the face, an injury to the teeth, or anything that will disturb the tranquillity of the cavity, will cause inflammation of its membrane. A disease caused by violence may not make itself known for a considerable length of time after the accident happens, and depends a great deal upon the constitution of the patient. In persons of a scrofulous nature, the disease is more aggravating, and much earlier discernible. After the pain before mentioned, the mucus membrane of the antra commences to secrete, and shortly afterwards is followed by a discharge of pus, of a dark colour and purulent nature, or of a watery substance, through the natural opening, if not closed. This will be noticed

more particularly when the patient blows the nose, this being the natural way of evacuation; or in the morning, when the patient wakes, he will find this discharge, particularly after lying on the opposite side of the head, affected. When those symptoms appear, the case should be immediately attended to. My mode of treatment has been, to remove, if decayed, the first molar; if this should not be decayed, then, with a view of not sacrificing any sound teeth, I remove any that may be diseased, whether bicuspid or molars; but, all things being equal, I prefer the one first mentioned. This being done, the next thing is to perforate the floor of the socket of the palatine root. If there should be a discharge, which is generally the case, I use a mild disinfectant and detergent; syringe the cavity once a day, usually, in the first stages of the disease. After the opening is made and the cavity is cleared, the local pain ceases. This, although being a good sign, should not prevent further attention and treatment. The cavity should be kept open, and regularly attended to. I have used tincture of myrrh, chloride of soda, *nitric* and *carbolic acid*. The latter, I think the most effectual of any yet used. It would be dangerous to use any of these without diluting them; for the strength of which you must use your own discretion. Of nitric acid I have used one drop to thirty of water; while of carbolic I have never used more than from one to forty. Constitutional remedies are also necessary; for, although the disease may not have arisen from constitutional defects, still there is always a derangement of the system, that will prevent so speedy and effectual a cure as desired. The best recommended is *syrupus iodi feri* (syrup of iodide of iron), and the compound extract of *sarsaparilla*, in doses three times per day. I also use those for caries and merasis of the maxillary bones, as well as for diseased antra.

*Case 1.*—About seven years ago, a man of robust health and strong constitution, called on me to get a tooth extracted. He complained of a severe pain, but said it was not like toothache. I examined his mouth, but could not find any diseased teeth. He pointed to the second superior bicuspid, left side. I found that this was perfectly sound, and refused to extract it. It was my impression, from what little information I could get from him, that he had diseased antra. Upon further enquiry he informed me that an engine wheel flew to pieces while grinding some instrument; one of the large pieces striking him on the side of the nose, about a year previous. Further, the pain was the same as already described; that, generally in the morning, there was a putrid discharge from one of his nostrils. He allowed me to remove my favorite tooth. I then inserted a trochar, making the cavity about one-eighth of an inch in diameter. The pus was dark blue, and of a most purulent nature;

so much so, that I was obliged to leave the patient for some minutes in order to recover my equilibrium. I used the remedies mentioned, kept the cavity open, and in one month he was as well as ever. This was a case of secretius of the antrum, brought on by inflammation of its lining membrane. Many cases of a milder nature have come under my notice, all of which I have been successful in combatting.

*Case 2.*—The worst case of diseased antra I ever saw, was one that caused the death of the patient. I was so fortunate that I had not the treatment of the case. It came to my notice by the person calling on me to extract some of her teeth, which was recommended by the family physician. At this time the mucus membrane of the roof of the mouth, as far back as the dens sapientia was in a granulated state. The disease had made such progress that the floor of the antra, on the side affected, was entirely destroyed, but not removed, but would show no resistance to an instrument. The pus had formed a passage down by the palatine root of the first molar, about two years previous, and had always been discharging, and had poisoned the mucus membrane of the mouth. The physician imagined the disease was sore mouth, and confined to that alone. The treatment, in the first place, I believe, was the application of a powerful poison to the protuberance at the edge of the tooth. The constant use of this, I believe, in a great measure assisted to destroy the mucus membrane. The pain was so excruciating that she was unable to sleep. The day after the teeth were extracted, the doctor called on me for my opinion of the case, which I freely gave; recommended, in addition to constitutional remedies, an application of strong carbolic acid, in order to cause a reaction in the lining membrane, and would consequently slough off the dead. I did not see anything more of the person, but heard she died in mortal agony. This case was of a similar nature to the one above mentioned, but further advanced, and caused also by violence—a blow from a stick of wood. The person was of strong constitution, but of low habits; age about 40.

Another case, also of an aggravating nature, was of a person in the last stages of consumption. This person came to me to extract a tooth, or the root of one; he had pain in the region of the nose, but did not feel any in the region of the root; he thought, however, that the root might cause it. He informed me of the symptoms. I enquired his mode of previous living, which proved to be one of a nature that would be hard for the strongest constitution to stand. I extracted the root, which was only kept in its place by the attachment to the gums. The consequence was, that about a tablespoonful of the most poisonous, purulent, black matter followed, which, if anything, was worse than the case

above mentioned. In sapping the cavity, I found the malar bone so far gone, that it was necessary to keep a handkerchief over the nostrils, to prevent the enema from passing through. The only thing I could do for him, was to assist in preventing his suffering. The injection used was carbolic acid. As long as I was treating him, he did not suffer any consequence, but if a day was missed, he was unable to sleep during the night. He died of consumption, but without any pain in the antra, and very little discharge, which of course was caused by the constant treatment.

I have had many other cases which I have been successful with, and believe that the second case mentioned above might have been cured and the person performing her duty if a proper and timely mode of treatment had been adopted.

It may be asked that supposing an old person is attacked with any disease of the Antra, the teeth are all gone, and consequently the alveolar process filled up by ossification,—what would be the most advisable mode of procedure. In reply I would say by all means the canine fossa; this being the nearest and most easy road of access.

I regret that I am not prepared with a more thorough paper on this subject, but my excuse is (which I hope you will accept) want of time in preparation. I hope, however, to be able to return to the subject again, when I will attempt greater justice to it.

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AN ADDRESS READ BEFORE THE DENTAL ASSOCIATION OF ONTARIO, AT TORONTO, JANUARY 21st.,  
1868,

BY B. W. DAY, M.D., PRESIDENT.

GENTLEMEN:—I have great pleasure in being present here on this occasion, a pleasure the more thorough from the knowledge of the fact that the effects of the present Association have so far been crowned with success; that all true members of the Dental profession have just cause for congratulation. It is not necessary for me, gentlemen, on this occasion, to advocate the claims of the profession to a protection from the invasion of outsiders, charlatans and quacks, which has been so thoroughly accorded to the other branches of the Medical profession, and which is calculated to place it upon its legitimate and proper standing; nor is it of consequence for me to point out to you the manifold benefits at large, as well as to ourselves, from such a consummation; for with these, I feel assured you are equally as well acquainted as myself, and it would be equally

supererogatory for me to say most emphatically that our great aim has not been the formation of a Society for the purpose of monopoly and self aggrandizement, but to guard the public, as well as ourselves, against the pretensions of those illiterate empirics who swarm in almost every profession, and who prey upon the credulity or ignorance of a large portion of the community, and whose qualifications to take rank in the dental corps are about on a par with those of a Hottentot or South Sea Islander. I feel confident, gentlemen, that with this great end in view—alike benefits to the public and ourselves—I can certainly count upon your earnest co-operation with me, and that our united and untiring efforts shall not relax until complete success crowns our exertions, and little shall remain for us to wish for; and in this place, gentlemen, let me occupy your attention for a brief space, by a retrospective glance at the efforts of our labors thus far.

It will be in the recollection of some gentlemen present that in January of last year, in answer to a circular issued by myself, urging the absolute necessity of an organization of the present kind for the protection of the dental profession, nine members of the profession, from different portions of the Province, promptly responded to the call and at once came forward and threw the whole weight of their time and talents into the carrying out of the present scheme, and liberally spared neither time nor money in furthering our great object. To these gentlemen, I think, the Society is indebted not a little for its present prosperous condition, nor can I withhold the just award, so well merited, of praise due to the other gentlemen who so quickly followed their noble example and who now are working unitedly to achieve a complete success. In January then, gentlemen, we must consider the Association to date its rise,—the Association was then formed. And upon the promulgation of the scheme, so well did it take with the dental profession generally, that at a second meeting some six months after, the names of over thirty members were enrolled. This, certainly, was most cheering, and the cause for congratulation among us at this second meeting was the more striking when contrasted with previous efforts which, when directed in the same channel, had invariably proved abortive, and any attempt had resulted in failure; nor was this all, for not only had we actually an enrolment of *bona fide* members, but a fair prospect of being speedily joined to the greater portion of the Dental Profession in the Province. Well, gentlemen, in view of our signal success, and while we felt that we had achieved much, and had just cause for congratulation, we also felt that something more was yet to be done—that the goal was yet to be reached—and, consequently, with this view, we determined to frame a bill for the better and fuller realization of our views as professors of dentistry, in Ontario, and which

we hoped should ultimately extend its benefits to the whole of the Dominion. This was accomplished, and the paper which I now hold in my hand is that bill, and which, I have no hesitation in saying, that not the slightest cause exists for doubting, that in a very short time it will pass into an Act of Parliament, and become a law of the land.

Allow me here to remark, while upon the subject, that it was found necessary to make some alterations in the bill from that which was first submitted for the approval of the Association. These changes were made at the instance of legal advice, which considered the amendments necessary to render the bill more binding and perfect in all its details. These several amendments I shall have the pleasure of pointing out to you, gentlemen, before we separate. Now, gentlemen, I feel certain that you can but agree with me in the conviction, that nothing can be more cheering, nothing more gratifying, than the present aspect of the Association; the Rubicon has been passed, the first great preliminary steps have been taken, and the fact has become patent, that the old style of dentistry—clogged with the rust of ignorance and prejudice of bygone years—is fast sinking into oblivion, and a new era, brighter and more enobling, is fast dawning upon the profession, and in a few years, this organization shall be able to rank under its banner every true member of our important calling throughout the length and breadth of the Dominion of Canada, and when each individual, proud of such membership, shall use his utmost energy to increase and uphold the dignity and high character of the Association, and add one more to the advancement of knowledge and science.

Little more remains for me to say, gentlemen: I had intended to have taken a wider view of the profession from an early date and to have pointed out its steady advancement down to the present time; but time would fail me, and there are other gentlemen present who, no doubt, will favor us with a few remarks on the present occasion; but I cannot take my seat without cordially thanking those gentlemen who so ably seconded, by their time and talent, my humble efforts for the formation of an Association in its early stages, and those who so quickly responded to our call at our second meeting; for I feel, that without such cordial assistance, I should not be here to address you on this occasion, and that the old tale of failure would have been the only thing to tell, instead of, at present, the bright prospect of an organization whose benefits will eventually be felt throughout the whole land. And now, with thanks to those gentlemen on that occasion, and to all of those now present, for the courteous attention accorded to my few imperfect and discursory remarks, I will take my seat.



## THE EFFECT OF TOBACCO UPON THE TEETH.

BY CHARLES A. MONDELET, D.D.S., OTTAWA, ONT.

The dentist is frequently consulted concerning the effects of tobacco upon the teeth, whether it exercises an injurious tendency or is beneficial to them. Were it not for the almost universal habit of smoking, no apology would be sufficient for such a question, as the visible effects must be evident to every one who will impartially examine for himself.

Some writers, and a few eminent practitioners, have encouraged and recommended its use, denying that it was productive of injury, and, excepting some isolated cases, have based their decision upon such, without sufficiently investigating the real nature and effect of its operations. That it must be injurious may be inferred from two circumstances.

1st. The action upon the gums, and thence indirectly upon the vital functions of the tooth.

2nd. By absorption of its active properties into the bony substance of the tooth.

Individuals long accustomed to the use of tobacco are very apt to have turgid and swollen gums, and the sympathetic action between the teeth and gums soon produces a morbid condition in the former, by which they are the more predisposed to disease. The teeth, not only externally, but upon an anatomical examination, will be found highly impregnated with a yellow fluid, evident only in the teeth of persons who use tobacco.

Again, the use of tobacco produces disease of the salivary glands and the pancreas, and injures the power of digestion, by occasioning the person to spit off the saliva which he ought to swallow.

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ANÆSTHETICS.

BY J. W. ELLIOTT, L.D.S., TORONTO, ONT.

I propose to notice a few of the many anæsthetics now in use by the dental profession, as they become fixed in my estimation.

Ether is too well known to require much comment; it being one of the oldest, and perhaps one of the best practical anæsthetics in use at the present day. But there is one case in connection with its use, which occurred about twenty years since, that I will mention. A lady came to me desirous of having a tooth extracted under the influence of ether. The tooth was extracted satisfactorily, and the following day the lady called upon me with her infant at the breast, stating that the

child's breath was strongly impregnated with ether, as was also her own. It is needless to state that the effect on the child was not beneficial, and this fact caused me to use it with great caution.

Chloroform.—This anæsthetic stands higher than any other in the estimation of the medical profession. Much has been said and written of its merits and demerits; and were it not that we occasionally hear of death from its use, it would stand prominently above all other anæsthetics. But when we consider the extent to which chloroform is daily used throughout the civilized world, we cannot wonder that some deaths might occur. In many cases where death has resulted from inhalation of chloroform, it has been caused by a wrong mode of administration, and not unfrequently by impure chloroform. As an instance of the truth of the above, not one single accident has occurred at the hospital in Edinburgh, although used in that institution for twenty years—they attributing this success to the use of pure chloroform and a proper administration.

Nitrous Oxide Gas does not possess the power of chloroform and ether, and is equally dangerous to life, often causing the patient to say or do that which, in their natural senses would make them blush. It would never stand the test that chloroform has done, and after awhile will only be heard of as an exhibition for school-boys.

Freezing the gums, like freezing any part before a surgical operation, had its day and its advocates, but is now only used by a few in the place of something better, the patient receiving little or no benefit from it, which they find out during the operation. Ether spray is only another mode of administering ether; the vapor being inhaled during the process of forcing the ether upon the gums; its mode of action being rather to etherize the patient than the freezing effects upon the parts.

Of other anæsthetics I will pass them by, not considering them worthy of notice, either in dental or other surgery.

But I hope the day is not far distant when a new agent, both safe and efficacious, will take the place of those now in use; and until then I shall pin my faith on pure chloroform and a proper mode of administration.

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## ROYAL COLLEGE OF DENTAL SURGEONS OF ONTARIO.

By H. H. NELLES, D.D.S., L.D.S., LONDON, ONT.

The writer was present by invitation at the last meeting of the examining Board of the above Corporation, and was pleased at the unanimity that marked the proceedings.

There seemed to be a desire on the part of all the Board to exercise the power entrusted to them with prudence. Some applicants for license were but little known to the Board, and lest some injustice should be committed, after some consideration the cases were laid over for further consideration.

I did not attend the election of the Board in the evening, as through some previous informalities of that body, they were the only legalized voters, and consequently elected themselves. I do not feel disposed, however, to allow this grievance to influence me in offering any opposition to the present Board, nor yet do I approve of the public attack upon this body in a late number of the *Toronto Leader*, inasmuch as it can do no possible good and will only have a tendency to alienate the members of the profession at large from the Board, and embarrass the latter in the performance of their duty.

I think I can say without fear of contradiction that some of the members of that Board rank foremost in our profession, and are men whose honesty of purpose in advancing the interests of the profession, can hardly be called in question. And in view of the indefatigable labors of the few, who were the most earnest in securing the passage of our late "Act," I think we ought to show them all possible forbearance.

I would urge upon every dentist in the country the necessity of overlooking past grievances, and of coming forward nobly and manfully, and uniting with the Board in their laudable endeavors to stamp out traveling dentistry, and all such species of quackery from our midst. Let us try, at least, to elevate our profession to such a position of eminence as will enable it to command the respect of every intelligent Canadian.

I am not aware that the Board have any plans matured as yet, for organizing a dental school; but there seems to be an impression prevailing, that, if it is at all possible, some legitimate means of instruction will be provided at an early date.

I would advise all unqualified dentists to avail themselves of every means placed within their reach, and endeavour to prepare themselves for a respectable examination.

I hope the younger dentists, especially, will avail themselves of your reliable journal and of the Dental Association, as valuable sources of improvement. When they have done this, other means, in the way of lectures, &c., will not be wanting.

## CORRESPONDENCE.

## ANSWER TO AN ANONYMOUS LETTER.

(MESSRS. EDITORS, *Canadian Journal Dental Science*.)

Dear Sirs,—Through your valuable journal, I wish to call the attention of others to the communication of a *Dentist*, as published in the *Leader*, of the 11th June, and also kindly hint to him, that if he had only signed his name to his article, it would have been answered. I have no design or desire to contradict the facts he speaks of, concerning the no quorum; or the right to get married, &c.; but wish to give some of the facts in this connection. We of the Dental profession, have, for some time, felt the need of something in the form of legislation to give tone to our profession, and require certain fitness on the part of those practising on the human person and form divine, to prevent abuses, and secure efficiency in general for the good of all; making it worth while to spend time means and energy, to become a licentiate of the dental profession of Ontario. While some from inability, and others from press of personal professional duties, suffer this great and growing *need* to pass unattended to, our neighbors on the other side got quite the start of us in many respects, putting us to the blush before the other professions of our own country; thereby prompting the more generous and self-sacrificing to make a start, which they have nobly done.

It would be a strange thing to have all wake up to the importance of this need at once, and act in concert without any *petty* jealousies that somebody will get the best of it in the shape of honors and emoluments. Give them the honors they have so richly earned for two years, and by that time we can choose from among them and ourselves, those we deem most fit to represent us in future, and settle all fairly.

It is not becoming a noble people to fall out with one another on the eve of a great battle or struggle; better suffer the weakness of our brother than give the enemy the advantage. Let us work together for our general good, and that of the community.

Yours, &c.,

Toronto.

W. C. ADAMS.

## PROCEEDINGS OF DENTAL SOCIETIES.

### PROCEEDINGS OF THE DENTAL ASSOCIATION OF ONTARIO.

By J. B. MEACHAM, L.D.S.

*Assist. Recrd. Sec. Brantford, Ont.*

*(Continued from last number.)*

It was agreed that Mr. Chittenden's essay "Hints to our Patrons," should be published by subscription. 16,500 were subscribed for.

The Corresponding Secretary read a letter complaining that a member of the Association was exhibiting a show case containing specimens of Mechanical dentistry, contrary to a resolution of this Association. The member promised to take it in after his return.

13. J. H. Bryant moved, seconded by Chas. Kahn, "That the President be requested to appoint a Committee on the Constitution and By-Laws, to report at the next meeting."—Carried.

The Chairman appointed E. Ryols, L. Lemon, and J. H. Bryant, as such Committee.

14. J. H. Bryant moved, seconded by Mr. Peek, "That a vote of thanks be tendered to F. G. Callender for his able paper on Operative Dentistry."—Carried.

15. F. G. Callender moved, seconded by W. C. Adams, "That a Committee be appointed to revise Dr. Chittenden's paper for publication, and to supervise the printing of the same; that cards to be inserted be referred to the same Committee, and that Dr. Chittenden be the Chairman."—Carried.

The President appointed as such Committee: C. S. Chittenden, J. O'Donnell, F. G. Callender, and J. Stuart Scott, M. D.

16. J. Stuart Scott, M.D., moved, seconded by J. Bowes, "That when this Association adjourns, it stands adjourned to meet at Queen's Hotel, half-past two o'clock to-day, to proceed to Parliament Buildings, and to meet here at seven this evening."—Carried.

W. C. Adams moved, seconded by J. M. Brimacombe, "That Messrs. R. Trotter, H. T. Wood, and J. B. Meacham, be requested to read papers at the next meeting of the Association."—Carried.

17. J. O'Donnell moved, seconded by R. Trotter, "That 300 copies of the proceedings of this session be printed in pamphlet form, and that the Recording Secretary order the same."

The Association resumed at half-past ten and proceeded to attend the Session of the Legislature, for the purpose of being present when Dr. G.

W. Boulter, M. P. P., presented a petition of the profession and others, praying that an Act be passed requiring that Dentists should be required to pass an examination. About one hundred members of the profession attended.

. EVENING SESSION.

ST. LAWRENCE HALL, TORONTO, Jan. 23, 1868.

*Present.*—B. W. Day, M.D., President, in the Chair; J. B. Meacham, Assistant Secretary. Members and visitors.

J. Stuart Scott, M.D., presented the following report:

*To the President and Members of the Dental Association of Ontario.*

GENTLEMEN: Your Committee to whom was referred the President's Annual Address, respectfully report, "That they have considered the subjects referred to in the Address, and concur so generally with the ideas therein advanced, that any lengthened reference to them is unnecessary.

"That there is cause for congratulation in view of the signal success which has marked the efforts thus far put forth for the elevation of the profession in this Province.

"That your Committee recognized most distinctly the efforts of those members who joined the enterprise when once they had the opportunity of doing so.

"It is a cause of regret that there is at present, no means of preventing the ignorant quack from praying upon the credulity of the public. Yet, your Committee look with confidence to future legislation to guard the Profession of Dentistry as other professions are now guarded, and to keep out of its ranks the unqualified, by means of judicious examination. It is desirable, however, that full justice should be done by all parties, and that the means of instruction should be afforded the unqualified before they are cut off from practice. If reasonable opportunities of improvement are neglected they can not justly complain, if prevented practising a profession for the duties of which they are unqualified.

"Your Committee wish to record their appreciation of the valuable services of the President, Dr. Day. He has laboured as, perhaps, few others have done. When success seemed doubtful, he still exerted himself for the elevation of our own specialty, for which he is entitled, as he will receive, the hearty thanks of the whole profession of this Province.

" Respectfully submitted,  
(Signed,)

" H. T. WOOD,  
" F. G. CALLENDER,  
" J. STUART SCOTT."

J. B. Meacham, Brantford, moved, seconded by J. O'Donnell, Peterboro', "That the Report just read by Dr. Scott be adopted, and that the thanks of this Association be tendered the President for his valuable services."

The resolution was supported by several members and adopted unanimously.

J. O'Donnell reported for the Committee on Credentials, G. W. Hale, of Toronto, as worthy of membership. Report adopted. Mr. Hale ballotted for and elected.

1. J. O'Donnell moved, seconded by H. T. Wood, "That the thanks of this Association be tendered to C. J. Brydges, Esq., Manager of the Grand Trunk Railway Company, for his kindness in granting return tickets at one fare for the meetings of this Association."—Carried.

2. M. E. Snider moved, seconded by F. G. Callender, "That the thanks of this Association be tendered to His Worship the Mayor and the Corporation of the City of Toronto for the use of a room in the St. Lawrence Hall free of charge."—Carried.

3. Moved by F. G. Callender, seconded by J. B. Brimacombe, "That three persons be appointed to perform clinical operations at the next meeting in Hamilton."—Carried.

Dr. Day, C. S. Chittenden and F. G. Callender, were appointed in accordance with the above resolution.

4. Moved by R. Trotter, seconded by W. C. Adams, and adopted, "That as some Dental Practitioners in this Province have been in the habit of turning out students to practice, after a few months' pupilage, it is therefore resolved that this Association express its utter condemnation of such practices, believing it to be degrading to the Profession, as well as prejudicial to the interests of the students themselves and the public."

Second Report of the Committee on Finance:

"Your Committee report the following accounts correct, and recommend the same for payment:—

R. Romain, printing .....	\$15 20
J. O'Donnell, postage .....	3 66
James Beaty, advertisement .....	7 50
George Brown, " .....	8 25
C. B. Price, attorney's bill .....	7 50
<i>Daily News</i> , printing .....	4 50
B. W. Day, M.D., postage .....	1 00
J. Stuart Scott, M. D., disbursements ..	12 08

Respectfully submitted,

R. TROTTER, Chairman.

## COMMITTEE ROOM,

Toronto, January 23, 1868.

H. T. Wood, Pieton, moved, seconded by J. O'Donnell, Peterboro', "That the Report of the Finance Committee, just read, be adopted, and that orders be drawn on the Treasurer for the amounts therein recommended to be paid.—Carried.

J. B. Meacham, Brantford, said he had been using Nitrous Oxide Gas with success for some time; that he would like to hear from the President and others who had experience with this Anæsthetic as to their mode of administering, as well as their manner of preparing it.

B. W. Day, M.D., replied that Laughing Gas was a permanent *Tonic*; that it could be administered in a greater range of cases than Chloroform or Ether, that it was contra indicated in certain conditions of which the family physician should be the judge. He advised care in its use, and that Dentists should introduce it to the public by getting the Physicians in his locality acquainted with its use. As it was particularly appropriate for extracting teeth, Dentists were the pioneers in its use, yet they should not ignore the superior knowledge of medical men who are proverbially humane, and would assist in any legitimate way to relieve pain when properly approached. As to the manner of preparing it, one wash bottle was all that was necessary. It could be kept for any length of time over water, and was best administered from a gasometer.

H. T. Wood said he was using gas made in the way just described, and met with perfect success. He had some difficulty at first, but got on well now.

J. Stuart Scott, M.D., had administered the gas over three hundred times. He met with difficulty when using nitrate of ammonia with nitric acid in excess. The patient would frequently clench the jaws, evidently in consequence of irritation, caused by a trace of nitric acid being present in the gas. He had used one lot of nitrate of ammonia of fifty pounds, and during its use he had not a single case of clenching of the teeth together. He had now abandoned the old way of placing a cork or other substance between the teeth, and used an inhaler with a flange, covering the mouth entirely. He had used some nitrate of ammonia prepared by Dr. Day, and it was second to no other specimen he had tried. He preferred it in the crystal form, it would not absorb so much moisture in keeping. The pulverized, called *juvel*, nitrate of ammonia, was exceedingly difficult to keep even in well corked jars. He hoped Dr. Day would continue to prepare it, that the profession might have an article on which they could rely.

Dr. Day said—In consequence of difficulty in procuring a uniform ar-



ticle, he set about preparing it for his own use. He had the apparatus complete for making it, and he could have it prepared for the profession, if any wished to use it, the same as he had it made for his own use. The *Fused* variety was only the crystal form pulverized, and the smaller the particles the more surface would be exposed to absorb moisture.

Dr. Scott said—He wished to qualify his statement with regard to patients clenching their teeth. A few cases had occurred in his practice in which patients from fear or other causes had not inhaled the gas freely, and in these cases he had noticed some rigidity of the muscles of the face, when partially under the influence of the anaesthetic.

The Association adjourned, to meet in Hamilton on the 14th of July, 1868.

ACTIVE MEMBERS OF ESTABLISHED OFFICE PRACTICE OF FIVE YEARS  
OR MORE.

W. C. Adams, L.D.S.....	Toronto.
J. Bowes, L.D.S.....	Ingersoll.
D. A. Bogart, L.D.S.....	Hamilton.
W. H. Branscombe.....	Picton.
J. M. Brimacombe, L.D.S.....	Bomanville.
J. H. Bryan.....	
J. A. Brown.....	Port Hope.
C. S. Chittenden, L.D.S.....	Hamilton.
S. B. Chandler.....	Newcastle.
F. G. Callender, L.D.S.....	Cobourg.
W. H. Card.....	Whitby.
L. Clements, L.D.S.....	Kingston.
B. W. Day, M.D., L.D.S.....	Kingston.
E. D. Greene.....	
Wm. E. Hughes, L.D.S.....	Aylmer.
W. H. Hale.....	Toronto.
T. J. Jones.....	Bomanville.
Charles Kahn, L.D.S.....	Stratford.
J. F. Kennedy, L.D.S.....	Perth.
A. D. Lalonde, L.D.S.....	Brockville.
L. Lemon, L.D.S.....	St. Catharines.
A. May, L.D.S.....	St. Catharines.
H. Meyers.....	Toronto.
J. B. Meacham, L.D.S.....	Brantford.
J. C. McCausland, L.D.S.....	Barrie.
H. McLaren.....	Strathroy.

John O'Donnell, L.D.S.....	Peterboro'.
J. Peck.....	Aurora.
D. Pentland, L.D.S.....	Peterboro'.
W. H. Porter, L.D.S.....	Holland Landing.
J. Oscar Proctor, L.D.S.....	Brighton.
Robert Reid, L.D.S.....	Galt.
G. V. N. Relyea, L.D.S.....	Belleville.
M. E. Snider.....	Toronto.
J. Stuart Scott, M.D., L.D.S.....	Toronto.
A. C. Stone, M.D., L.D.S.....	London.
R. Trotter, L.D.S.....	Brampton.
L. VanCamp, L.D.S.....	Berlin.
H. T. Wood, L.D.S.....	Picton.
J. B. Wilimott, L.D.S.....	Milton.
W. E. Whipple, L.D.S.....	St. Thomas.
D. A. White.....	Ridgetown.
Lyman Wells, L.D.S.....	Simcoe.
H. D. Neugant, L.D.S.....	Morrisburgh.
Z. Zimmerman, L.D.S.....	Zimmerman.

INCIPIENT MEMBERS.

Dentists of established office practice of less than five years.

A. Burns.....	St. Thomas.
R. S. Brown.....	Galt.
L. S. Bennett.....	Georgetown.
R. W. Comer.....	Kingston.
J. B. Devlin.....	Oshawa.
J. C. Grasse.....	Cobourg.
W. K. Green.....	
J. E. Huntingdon.....	
J. R. Irish.....	Trenton.
T. Neelands.....	Port Hope.
J. H. Padfield.....	
Thos. Rowe, M.D.....	Cobourg.
E. S. Rupert.....	St. Mary's.
R. G. Trotter, L.D.S.....	Toronto.
H. G. Wiggins.....	

Licenses have been granted to the following dentists who have not as yet attended the meetings of the Association :

H. H. Nelles, D.D.S., L.D.S.....	London.
Geo. L. Elliott, L.D.S.....	Toronto.

J. B. Sabine, L.D.S.....	London.
D. Perrin, L.D.S.....	London.
T. L. Fitzgerald, L.D.S.....	Hamilton.
S. T. Clements, L.D.S.....	Napanee.
Wilson Beebee, L.D.S.....	Dunville.
W. K. Graham, L.D.S.....	Brampton.
J. Y. Dorland, L.D.S.....	Bronte.
John Leggo, L.D.S.....	Ottawa.

### ROYAL COLLEGE OF DENTAL SURGEONS OF ONTARIO.

A meeting of the Provisional Board of Trustees and examiners of the College was held at the Queen's Hotel, Toronto, June 2nd. The following members were present, viz., Messrs. B. W. Day, M.D., Kingston; C. S. Chittenden, Hamilton; J. O'Donnell, Peterboro'; F. G. Callender, Cobourg; J. S. Scott, M.D., Toronto; G. V. N. Relyea, Belleville; A. D. Lalonde, Brockville; Charles Kahn, Stratford; J. B. Meacham, Brantford, and G. L. Elliott, Toronto. The absent members were: Messrs. H. T. Wood, Picton, and John Leggo, Ottawa. The secretary, Mr. O'Donnell, presented a report of 42 applicants for licenses to practice. The following gentlemen having practised five years, were granted certificates according to the act respecting dentistry: Messrs. Robert Reid, Galt; H. H. Nelles, D.S.S., London; J. B. Sabine, do; D. Perrin, do; A. C. Stone, M.D., do; D. A. Bogart, Hamilton; T. L. Filgiano, do; R. Trotter, Brampton; Leonard Clements, Kingston; Laurence Lemon, St. Catherines; Wm. E. Hughes, Aylmer; M. P. Whipple, St. Thomas; W. H. Porter, Holland Landing; J. C. McCausland, Barrie; J. F. Kennedy, Perth; J. Bowes, Ingersoll; H. G. Weagant, Morrisburgh; J. M. Brimacombe and T. J. Jones, Bomanville; I. O. Proctor, Brighton; S. T. Clements, Napanee; W. C. Adams, Toronto; Lyman Wells, Simeoe; Nelson Beebee, Dunville; W. K. Graham, Brampton; D. Pentland, Peterboro'; R. Van Camp, Berlin; J. Y. Dorland, Bronte; R. G. Trotter, Toronto. At 7 p.m. the licentiates of dental surgery met at the St. Lawrence Hall for the election of a board of directors for the next two years, the returning-officer, Mr. O'Donnell, presiding. The following gentlemen were elected:—Messrs. O'Donnell, Day, Callender, Chittenden, Relyea, G. L. Elliot, J. S. Scott, H. T. Wood, D. A. Bogart, C. Kahn, J. B. Meacham, and A. D. Lalonde. The meeting then adjourned till eight p.m. On returning, a vote of thanks was moved by Mr. Relyea, seconded by

Dr. Day, to Mr. O'Donnell, for his able and impartial duties as chairman, Mr. Chittenden in the chair. The following gentlemen were then elected officers:—B. W. Day, M.D., Kingston, President; J. O'Donnell, Secretary; C. S. Chittenden, Treasurer; and H. T. Wood, Registrar. On motion, the following were appointed a General Committee of Finance and Auditors:—Messrs. J. S. Scott, M.D., J. B. Meacham, C. Kahn, F. G. Callender and George L. Elliott. The following were appointed, on motion, a Committee to draft By-laws and rules for the government of the Board:—Messrs. Scott, Callender, Bogart, Relyea, and Meacham. The meeting then adjourned till to-day.

The Board of Directors elected on Tuesday evening, met at the Queen's Hotel, Toronto, June 3rd, at 9 a.m., pursuant to adjournment—the President, Dr. Day, in the chair. The chairman of the Committee on By-laws, Dr. Scott, submitted a code which was adopted with slight alterations. On motion of Mr. Elliott, seconded by Mr. Callender, the President appointed the following members of the Board a committee to conduct the examination of candidates applying for licenses to practise Dentistry, viz.,—Messrs. Callender and Chittenden, "Operative and Mechanical Dentistry;" Geo. L. Elliot, "Institutes of Dentistry;" G. V. N. Relyea, "Dental Surgery;" J. S. Scott, M.D., "Dental Chemistry," and J. O'Donne' and B. W. Day, M.D., "Anatomy and physiology." The following gentlemen having practised five years, in compliance with the latter part of clause 12 of the Act respecting Dentistry, were granted certificates:—Messrs. A. May, St. Catherines; J. Zimmerman, and J. B. Willmot, Milton. On motion, the Secretary was instructed to get 500 copies of the articles for students and requirements for examination printed, and to be distributed among the licentiates of the Board. The articles when executed to be signed in duplicate, and one copy to be deposited with the Secretary. The following were the text books recommended for the use of all preparing for examination:—Gray's Anatomy, Dalton's Physiology, Fowne's Chemistry, Harris' Principles and Practice of Dental Surgery, and Taft's Operative Dentistry. In addition, the person will have to perform operations in operative dentistry, and give satisfactory evidence of his ability as a mechanical dentist. Moved by Mr. Relyea, seconded by Mr. Lalonde, and adopted—That this Board will not entertain the application of any individual who has not had five years established office practice, as required by the Act, in order to get a certificate to practice without examination. Moved by Mr. Relyea, seconded by Mr. O'Donnell, and adopted—That a cordial vote of thanks be tendered to the Mayor of Toronto for the use of room in St. Lawrence Hall; also, to Captain

June  
186

Dick, proprietor of the Queen's Hotel, for his uniform kindness to this Board, and for the gratuitous use of one of his parlors for the meeting. The Board then adjourned to meet at the same place on the 3rd Tuesday in July next, the 21st.

DENTAL ASSOCIATION OF ONTARIO.—The next annual meeting of the above Association, will be held in Hamilton, on the 14th, 15th and 16th days of the present month.

J. STUART SCOTT, M.D.,

Recording Secretary's Office,

Rec.-Secretary.

90 Queen street, west, Toronto, July 1, 1868.

AMERICAN DENTAL ASSOCIATION.—The next meeting of this Association will be held at Niagara Falls, on the last Tuesday of the present month, (28th inst.)

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Illinois State Dental Society, Springfield, May 12.

NOTES FROM THE PROCEEDINGS OF DENTAL SOCIETIES.—Dr. Dean read a paper on *filling pulp cavities*, of which the following is a brief synopsis:—

“ He commenced by saying that the nerves of the roots were supposed to be devitalized, and the roots and surrounding parts in a healthy condition before the subject under consideration came to his special notice. That this narrowed down the subject to the operation of preparing and filling these nerve cavities. He considered this a simple operation, when proper care was taken in preparing the cavities, as a rule. He described his mode of filling rather minutely, and condemned cotton, Hill's stopping, tin and wood. They were all destructible materials and penetrable by the fluids and gases. Cotton, if saturated with creosote, would answer very well until the kreosote had become dissipated, which it would certainly do sooner or later, and that other fluids would certainly take its place—to decompose and generate gases destructive to the surrounding parts. Hill's stopping was a non-conductor, but he considered this of no practical importance. Should it be desired by any, it might be used after the foramen had been sealed with gold and in this place, if used, simply as a non-conductor; after filling the apical portion, he would prefer well-fitted corks. The pressure of filling directly upon it would produce corresponding lateral pressure against the tubular walls, rendering the

filling perfect. He thought that the entrance of the fluids into the canals by endosmotic force, might be somewhat prevented by the kreosote and tannin which have been used in their treatment, entering the canaliculi of the dentine and fixing the albuminous matter which they may contain, rendering them impermeable to either fluids or gases. His reasons for preferring gold to any other material, is because it is incorruptible and non-irritant—easier carried to the apical foramen, and if thoroughly packed absolutely shuts out the subtlest intruder.”

Dr. C. S. Smith advocated the use of cotton and creosote for filling up pulp cavities, and contended that creosote forms with the animal matter of the tooth—insoluble, thus closing up the dental tubuli, and rendering the canal impervious to the secretions.

Dr. Black uses gold in the form of a ribbon rolled on a broach, and forces this into the canal to the apex of the root.

Dr. Cushing cited several cases in which he extracted teeth, and found gold in the form of wire, protruding through the foramen, in one instance three-eighths, and in another one-eighth of an inch—uses cotton and creosote for filling canals.

Dr. Rivers thought that the majority of fillings in fang filling, was attributable to the imperfect manner in which the operations are performed. Uses gold generally.

Dr. Judd coincided with the essayist in the main. Regards the indestructibility in a material for filling fangs absolutely necessary. Gold cannot be forced through the apical opening of a fang, unless the cementum which closes the foramen be removed by absorption.

Dr. McKellops advocated the use of gold for filling roots on account of its indestructibility; has removed teeth where gold has become exposed by absorption of the cementum from the apex of the fang.

Dr. Lewis asked whether a tooth in which a broach had been broken off in the foramen be kept dry and filled, would oxidize.

Dr. Judd answered that the cementum at the apex of the fang is permeable by the fluids, and that there was a probability of the secretions reaching the broach and causing oxidation.

(We lately removed a gold filling from a central incisor,—in which the nerve was alive,—which had become a dark brown color, apparently from the oxidation of a steel excavator point which had been broken and left in the cavity. W. G. B.)

The chair announced “Receding of the Gums in persons of middle age, Cause and Treatment,” as the next subject for discussion.

Dr. Judd thought we had failed to discover a satisfactory cause of the disease. It was not known whether the gums receded by absorption, or

are washed away by an acid fluid secreted by the gums, and acting upon the structure; thought the use of a stiff brush, with constitutional remedies, would be the proper treatment in such cases.

Dr. Dean thought the absorption, when not caused by local irritation, is the result of defective nutrition.

Under the suspension of the rules, Dr. Freeman offered a paper on the "Observed effect of premature Extraction of temporary Teeth," in which he affirmed that the premature extraction of temporary teeth frequently produced irregularities, and sometimes, as he thought, retarded the early coming of the permanent teeth.

Dr. Forbes thought that the development of the maxillary bones did not depend on the presence of the teeth; that the blood vessels that permeate the maxillary, supply the osseous material for its formation; had not observed any ill effects from premature extraction of deciduous teeth.

Dr. Cushing never removed deciduous teeth, unless they became a source of irritation through disease.

Dr. French regarded the presence of the temporary teeth necessary for the development of the jaw.

*Amer. Journ. of Dent. Science.*

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## EDITORIAL.

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### "LOCAL FEELING."

We regret that some regard this Journal from a *local* stand-point with local feelings, and seemingly withhold their support because it is not under the editorial wing of this or that man, or printed and published in the upper Province. We never once thought of boundaries, politics, parties or men in starting this project; it was an apparent necessity; and was, with us personally, the renewal of a similar attempt made two years ago, under less favorable auspices than at present. The question "how best to promote and extend progress, add to our knowledge, develop our native talent, protect our interests, and harmonize our views," did not seem to our mind to require any local view for solution. It was felt that the Association would create a cosmopolitanism and liberality of sentiment which would extend unbiassed sympathy and support to any Dental enterprise in *Canada*, whether it smacked of Gaspé, or of Sarnia.

To impede or refuse to aid a good object simply because it is not under the stewardship of any particular man or men, or not "to the manor

born." is ungenerous in the extreme, and unworthy of a community or a profession ambitious of improving and elevating their vocation and country. If we adopt new principles and methods in our practices, irrespective of their source, why refuse to extend the same feeling to a periodical especially devoted to the home interests of our Canadian profession? If we determine to look at the project in a local light, when will all be satisfied; where can the journal be published to accommodate every body? We in Canada, have the benefit of the experience and experiments of our brethren of the United States, and England, and may point a moral from the old and dire effects of local feeling in their cases, and the new and happy results of broad and generous views.

*The Canada Journal of Dental Science* owes its origin to the movement in the Province of Ontario; depends mainly upon it for support, and naturally looks to it, as containing the large majority of Canadian practitioners incorporated, as the representative province of Canadian Dentistry. It has so far given precedence and prominence to all matter interesting to this majority, and will continue to do so, as simple justice. But it aims, as well, to affiliate, in one noble confederacy of desire and action, the entire profession of Canada; to coalesce and blend their sympathies, and so arouse a strong intelligent army throughout the Dominion to do battle for the cause born in Ontario. We trust, when the modifications are completed in the Ontario Act, that the profession of the other Provinces will imitate the action of our *confrères* of the west. They will find this Journal their willing auxiliary.

Now that the *Canada Journal of Dental Science* has seen daylight, it seeks to be accepted as the representative organ of Canadian Dentistry; and if the Canadian profession do so much—as we are glad to know—to sustain foreign dental periodicals, should they not generously support one—the only one—at home? We can assure our friends that it is a matter of perfect indifference to us whether the journal is printed in Quebec or Ontario, so long as it is established, and we have a Canadian Dental journal. We would not object to transfer “the weebairn” to Ontario, if the atmosphere of that province would be thought more salubrious. All we ask is prompt, large support to establish it, now that it is commenced; and if thought best, we will transfer the publication of the second half of the present volume, or the beginning of the next, to the upper Province. Our motives in starting it were sincerely the common good of the Profession; and we trust the meetings in Hamilton this month will smooth away all impediments in the path of its progress, and all progress; conciliate, woo, and win reluctant and opposing parties, and for ever give a quietus to all local feeling.



## TO THE PROFESSION IN ONTARIO.

Success has marked every effort thus far put forth for the elevation of our specialty, in this the empire Province of the Dominion.

Sixty members of the profession have, in the short space of one year, identified themselves with the Association organized in Toronto, January, 1867. Several others attended the meeting in Toronto in January, 1868, and signed the petition asking for the Act respecting dentistry. Under this Act over forty licenses have been granted; about thirty to members of the Association, and the balance to worthy members of the profession, who have as yet been unable to attend at the Association meetings.

Soon after the Association had obtained a *status*, an invitation was extended to it to send delegates to a meeting of the Medical Alumni Association of Victoria University, to be held in Yorkville. J. O'Donnell, L.D.S., of Peterboro, and R. Trotter, L.D.S., of Brampton, attended as representatives of our Association, and as such were introduced to a meeting of one hundred physicians, including delegates from Montreal and New York, when they presented an address from our profession setting forth the objects of our organization, creditable alike to us and to themselves as delegates. The address was referred to a committee, and the object set forth in it approved of by a resolution of the meeting.

The labor of presenting our cause before the public, and of securing the passage of the present law, has devolved upon a few.

The profession at large have but a faint idea of the expense borne by some, compared with which the twenty dollars for a license, and the three dollars for this journal, sink into insignificance. Several have each contributed cheerfully, from one hundred to two hundred dollars, in time and expense. Let no dentist or student, wishing to become one, now shrink from promptly supporting this journal, the organ, not as some suppose, of the Board only, but of the *whole profession of the Dominion*.

When we had no organ, and no means of communication, Mr. Beers came forward and, at his own expense, established this journal in our interest. He depended partly upon advertisers—they have met his expectation: partly upon subscribers—let us not be wanting in this small amount. It is hoped no local feeling will be allowed to influence Ontario dentists prejudicial to the interests of this enterprise. *Canada* can only support one journal at present.

This number of the journal is sent to every dentist in the Dominion whose address can be obtained; on the receipt of which we hope every Ontario dentist will remit the amount of his subscription *at once*.

J. S. S.

## DENTAL ASSOCIATION OF ONTARIO.

The annual meeting to be held in Hamilton on the 14th, 15th and 16th of the present month, will evidently be one of unusual interest. Since the last meeting, the Act respecting dentistry, approved by the Association, has, with slight alterations, become law.

There are three classes of persons affected by the Act, first: Dentists of five years established office practice immediately preceding the passing of the law; who will, by furnishing the Board satisfactory proof thereof, receive a license to practice without passing any examination. The Secretary of the board, J. O'Donnell, Peterboro, will furnish all necessary blanks and information relating thereto.

Dentists of established office practice of less than five years, in addition to the above requirements, will be entitled to receive a license and the *title of Licentiate of Dental Surgery*, upon furnishing proofs of moral character and passing a satisfactory examination.

A student is required to be articled to a licentiate for two years; and to pass an examination in Anatomy, Physiology, Chemistry, Dental Medicine, Dental Surgery, Operative Dentistry, Dental Science, Art and Mechanism, and Institutes of Dentistry.

The following text books are recommended by the Board: Gray's Anatomy, Dalton's Physiology, Fownes' Chemistry, Harris' Principles and Practice of Dental Surgery, Taft's Operative Dentistry, Richardson's Mechanical Dentistry, Bond's Dental Medicine, Nitrous Oxide, by Prof. Barker.

We are constantly receiving letters of inquiry upon the above points, and as this number of the journal will be sent to all the parties, they are requested to accept the above explanation as an answer to their several letters. In future, unless of immediate urgency, letters of the above nature will be answered through the journal.

Dr. Chittenden writes that he has arranged with the principal hotels to entertain dentists attending the meeting at reduced rates. The Corresponding Secretary is also communicating with railway and steamboat companies for return tickets at one fare, which will probably be granted as on former occasions. Dentists, not members of the association, will please apply to Dr. O'Donnell, Peterboro, for these tickets. The Recording Secretary will be supplied, and forward them in time to the members of the association.

Messrs. R. Trotter, H. T. Wood and J. B. Meacham, are expected to read papers before the association.

The Act respecting dentistry, with its provisions for the three classes of operators above alluded to, will evidently receive much consideration.

• It was thought advisable at one time to supply the members of the Association with the proceedings through this journal, but as some of the members desired them in pamphlet form, the Recording-Secretary has had them printed complete with the *Act*, and sent to all the members.

In studying the *Act*, dentists will find it somewhat complicated, but if they will bear in mind the three classes of operators legislated for, they will more easily understand its provisions.

As the American Dental Convention will meet at Niagara Falls the week following, the presence of some American dentists of distinction, may be looked for.

We have already received intimation that Dr. Atkinson of New York, and Dr. Whitney of Buffalo, will be present.

J. S. S.

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## ROYAL COLLEGE OF DENTAL SURGEONS OF ONTARIO.

From the proceedings of the examining Board of the above corporation, it will be seen that the first examination of candidates will take place at the Queen's Hotel, Toronto, to commence on the 21st day of this month. The Board have divided the labor, and the examiners will be prepared with questions upon subjects on which each will be expected to examine.

Two days will probably be devoted to the written examinations, and the oral will most likely be concluded on the third day. Dentists of less than five years practice are required by the *Act* to pass this examination previous to 4th March, 1869. The Board have determined to charge ten dollars to each candidate to defray the expense of the examination. In case the candidate is not passed, five will be returned. This is in addition to the license fee, which is twenty dollars. Dentists of five years established office practice, who have not as yet applied for license, will receive it upon the same terms as candidates who have received their license.

A report is being circulated among the younger members of the profession to the effect that the Board intend to carry a high hand, so to speak, towards dentists of less than five years practice. We are in a position to say this is mere nonsense. The Board have no interest in the matter not in common with every other practitioner of dentistry in the Province. The youngest member of the profession will receive equal justice with the older operators. We advise all who feel themselves qualified to pass, to present themselves at the next examination,

while those who feel doubtful, and those who know themselves to be unqualified, to prepare for the examination in January next. While all will receive equal justice, it becomes candidates, in the mean time, to avail themselves of every opportunity of preparing themselves for the examination, which will be a *reality*.

Should any operators be unable to pass at the examination in January, from what we know of the honor of the Board, we are satisfied no obstacles will be thrown in the way of the students who may not be able to prepare in the time specified in the Act. For the credit of the profession, let all pass who are qualified at the examination.

We advise all to attend the meeting of the Association to be held in Hamilton this month, to commence on the 14th. The matter of examination forms no part of the exercises, but the examiners are among the foremost promoters of the Association, and much practical information will be brought out in the discussions.

J. S. S.

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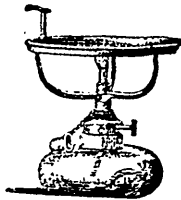
HONOR TO WHOM HONOR IS DUE.—It gives us great pleasure to notice the reference made to the valuable services of Dr. Day, in the report of the Committee of the Dental Association of Ontario appointed on the President's address. His name has always been associated with earnest endeavours to elevate the self respect, and improve the position of our specialty in Canada. The success of the movement which he started in Ontario, and for which he, with his coadjutors, has worked so hard, must ever reflect upon him the highest praise, and command the sincere gratitude of every lover of progress.

PERSONAL.—We wish it to be distinctly understood that both editors of this journal give their services gratuitously, and neither desire nor expect remuneration. Every cent of its income, and more, will be expended upon it. The expenses of originating the project, and several incidental expenses since, have not and will not be charged against it.

We earnestly ask subscribers to remit immediately. The amount is small to each individual, but in the aggregate is large. We should like nothing better than to be able to surprise our readers by enlargement within a few months; but subscribers must furnish the "sinews of war" as soon as possible. The journal will be worth ten times the subscription to any dentist.

— We are indebted to our foreign exchanges and the press of Canada, for kind notices and approval of this journal.

**A CORRECTION.**—The selected article in the last number, on “The use of Oxy-chloride of Zinc over exposed nerves,” bears the name of Dr. I. A. Salmon, and we see by a correction in the *Register*, from which it was copied, that it was written by Dr. T. B. Hitchcock.



**THE WHITNEY LAMP.**—The accompanying cut represents an annealing lamp, designed by B. T. Whitney, M.D., of Buffalo, N. Y. It is intended for annealing gold, while filling. The arrangement for raising and lowering the wick at the pleasure of the operator is complete, giving the degree of heat required. The gold can be taken from the tray with any *instrument*, without having the temper of the instrument drawn by the heat. Alcohol is the proper material to burn in the lamp.

—The next No. of the Journal will contain the proceedings of the Hamilton meeting of the Dental Association of Ontario.

—Parties having more than one number of No. 1, and others to whom No. 1 was sent and who do not wish to subscribe, would confer a favor by returning them by post.

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## SELECTED ARTICLES.

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### NECROSIS OF THE LOWER JAW.

Jacob M., æt. 12. This patient, a stout, hale looking boy, came under Prof. Gross' observation last summer.—He had had a tooth extracted; during that operation the probability is that the alveolar process was broken, leading to inflammation followed by necrosis of the right side of the lower jaw-bone. The parts were scraped, some dead bone removed, and for a while the case was progressing favorably. Afterwards an abscess formed, and the lad presented himself last week with two papillæ, nipple shaped processes, over the right ramus of the lower jaw.

Necrosis is a very common affection not only of the jaw bone, but of various portions of the skeleton. In the jaw bone it may be produced by violence or be the result of ordinary inflammation, or inflammation of a specific character, scrofulous or syphilitic. In this case it was produced by injury inflicted in the extraction of a tooth. The alveolar process was

fractured, followed by its inflammation, death and removal of a portion; for some pieces of bone had been discharged before the patient applied for treatment. At the operation referred to, several pieces were also removed. The case was doing well for some time, but it was apparent the lad was not cured. Subsequently the inflammation extended to the ramus and posterior portion of the body of the bone, leading to necrosis, as is indicated by the nipple shaped processes present.

The boy was put under the influence of chloroform. The probe came in contact with a rough surface of bone. The two openings were connected with the knife, and a large piece of dead bone extracted. The two masses of semi-organized granulations were scraped away, which must always be done, for as long as they exist there can be no healthy action.

The part should be kept clean by syringing with tepid water, or water impregnated with permanganate of potassa, or chlorinated soda, making a detergent lotion.

This case illustrates the fact, that the extraction of a tooth not well performed may be followed by prolonged suffering. It was upwards of a year ago that the extraction was affected.—*Philad. Med. and Surg. Reporter*.

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## MISCELLANEOUS.

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THE NEW ANÆSTHETIC.—“Although laughing-gas has only quite recently and suddenly come again before the notice of the profession, the properties of the oxides of nitrogen have not been wholly neglected by physiologists. In two papers published about four years ago, Dr. Hermann arrived at some interesting results touching the physiological action of nitrous and nitric oxide. (Reichert Du Bois Reymond's *Archiv*, 1864, p. 521; 1865, p. 469.) From these researches it would appear that, while laughing-gas is very readily absorbed by blood, it neither enters into combination with, nor produces changes in, nor suffers changes from, the action of blood. As our readers are aware, it is now generally believed that the oxygen present in blood exists in a peculiar loose combination with the blood corpuscles, and is not retained by simple physical laws of absorption. Laughing-gas, on the contrary, is merely physically absorbed, and blood will take up rather less of it than it will of water—that is to say, 100 volumes of blood will, at the temperature of the body, absorb somewhat less than 60 volumes

of laughing-gas. Blood saturated with laughing-gas shows no sign of change; the spectrum appearances are the same; the blood corpuscles are unaltered; and, according to Hermann, the oxygen is not driven out. In the blood, and probably in the body, laughing-gas suffers itself no change. It does not give up its oxygen for purposes of oxidation, as Sir Humphrey Davy thought. It gives rise, therefore, to no free nitrogen, but goes out of the body as it comes into the body, pure and simple laughing-gas. Hence it is itself of no respiratory use; and, when mixed with a quantity of oxygen sufficient for the needs of the economy, has no more direct effect on respiration than has nitrogen or hydrogen. From these facts, we may gather that the mode of action of laughing-gas is that of a body having distinct effects on certain parts of the system, and does not depend, like that of some other agents, on any direct interference with the function of respiration. Readily absorbed by blood, and yet with its limit of absorption soon reached; passing away from the blood into a pure atmosphere as quickly as it passed into the blood from the receiver in which it was previously confined; suffering no change itself, and causing no obvious gross chemical changes in the fluids or tissues of the body, it certainly seems peculiarly fitted as an agent for producing temporary conditions of the economy. On the muscles and hearts of frogs it has no more effect than nitrogen or hydrogen.—*British Medical Journal*.

**TREATMENT OF DENTAL PULPS.**—Dr. W. H. Atkinson, at a meeting of the Brooklyn Dental Association, gave the following method of treatment:

“When a pulp is exposed and aches, I remove all extraneous matter from the part; if this does not arrest the pain I dry out the cavity by applying to it pieces of bibulous paper until it is perfectly dry.

I then apply pure creosote and hold a dry napkin around the tooth for a minute, and if the pain continues I remove the napkin and syringe the cavity with tepid water, washing out all the creosote, and then apply a fresh napkin and proceed as before; then apply the best chloroform upon a pledget of cotton.

If this does not succeed repeat it again, and apply the tincture of acornite. In most cases it will not be necessary to repeat this process. I next proceed to prepare the cavity for the filling. I apply the napkin or sheet rubber to keep dry, and then, delicately, fragments of bibulous paper until all moisture is removed, when I place a drop of creosote on the exposed part, and then put a soft mass of osteo-plastic over the creosote.

I wait for the osteo-plastic to firmly set, then remove the excess and fill boldly.”

ANTIQUITY OF TOOTHPICKS.—Toothpicks were in common use in the time of the Cæsars. Martial tells us that those made of a chip of mastic wood—*Lentiscus*—are the best; but, if you run short of such timber, a quill will serve your purpose.—See Lib. xiv., Epgr. 22.

## DENTISCALPIUM.

*Lentiscum* melius; sed si tibi frondea Cuspis  
Defuerit, dentes *penna* levare potest.

In another epigram he ridicules an old fop, who was in the habit of digging away at his gums with his polished *Lentisks*, though he had not a tooth left in his head.—Lib. vi., Epigr. 64.

## AD ESCULANUM.

Medio recumbit imus ille qui lecto,  
Calvam triflem semitactus unguento,  
*Poditque tonsis ora lax: lentiscis;*  
Mentitur, Esculane:—non habet dentes.

LEGISLATION IN OHIO.—The law compelling dentists to get a diploma from a Dental College, or a certificate of qualification from the State Dental Society, or some local society, now exists in Ohio. It does not operate on those now in practice until 1873. A similar bill was before the Indiana Legislature last year.

DENTAL COLLEGES.—There are now seven Dental Colleges in the United States, one in England, one in Germany, and one in Canada. 220.  
173

THE LONDON (Eng.) DENTAL REVIEW has ceased to exist after a valuable career of ten years.

DR. JACOB GILLIAMS the oldest Dentist in the United States, if not in the world, died in Philadelphia, on 4th of February at the age of 85.

A METHOD FOR REMOVING AMALGAM FILLINGS.—Dr. J. Payne gives the following method for removing amalgam fillings which may save much time and labor: "I have two instruments made of silver, or silver points, somewhat resembling pluggers. One of these is straight and strong enough to bear considerable pressure. The other is smaller and bent at an angle of about forty-five degrees, so that it can be introduced between the back teeth. The points of both are flattened. When I wish to remove one or more plugs, I scrape the surface bright



and dip the silver-pointed instrument into a quantity of quicksilver. The silver having an affinity for the mercury, a quantity will be taken up, adhering to the point which may be carried to the plug. There is a stronger affinity between the quicksilver and the amalgam than between the quicksilver and the instrument, and it will therefore immediately leave the instrument and unite with the plug. The quicksilver will reduce the hardest amalgam plugs to their original plastic condition in a few minutes, when they can be removed without trouble. Ten or a dozen plugs may be removed in this way in as many minutes, which otherwise would be a good half day's work. The operation may be facilitated by using considerable pressure in rubbing the mercury on the plugs with the instrument. I rub it on all the plugs, and then commence on the first one and cut into it with a strong excavator or sharp drill, and then add more mercury and pass on to the next plug, and so on excavating and adding more mercury till I have gone over all the plugs. In the absence of the proper instruments, a strip of thick silver plate, or a piece of silver wire fastened in any ordinary handle will answer as a substitute. Before dipping the point of the instrument in the mercury, it should be well scraped to remove any oxidation caused by the mercury at a previous time.—*Amer. Jour. Dent. Science.*

EDUCATED STUDENTS AND DENTISTS.—If we expect competent dentists, we must have educated students. An old physician once told us that, "an uneducated community never supports an educated physician." And the converse of this is true. An educated community will never support an uneducated dentist. Let the *training* be thorough.—*Dental Office and Laboratory.*

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