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THE FORUM

Dr. W. S. G.

Q. What is the treatment of choice for this case? Patient, age 8, presents with swelling in upper right deciduous molar region. There is no fluctuation; there is tenderness to pressure; temperature is 102°. Oral examination shows roots of deciduous molars.

A. More information than has been submitted is necessary as a basis of diagnosis and treatment. The general physical condition and history of the patient as to recent contact with contagious diseases being unknown, only general treatment may be outlined.

This case suggests two probabilities:

1. Periostitis due to acute alveolar abscess.
2. Acute epidemic parotitis.

There should be no difficulty in making a differential diagnosis, but the following expectant treatment would apply to either case: internal medication for promotion of elimination and control of pain and fever; liquid diet; intermittent application of cold to the face; frequent use of a mouth wash. In case (1) there should be signs of resolution or fluctuation within forty-eight hours. Upon the first appearance of fluctuation incision and drainage, preferably under general anaesthesia, should be instituted. The roots may be extracted simultaneously, or later, as circumstances indicate. If it transpires that the case is mumps, warm external local applications are indicated, and the patient should be confined to the house during the period of contagion.

Dr. J. L. D.

Q. Why aren't palatal bars used more generally in upper partial restoration?

1. In order to obtain retention more clasps must be used.
2. Ready-made bars are not often suited for palatal bars because of their shape.
3. The expense connected with the cast palatal bars sometimes prohibits their use.
4. If one of the teeth clasped must be extracted later, it is sometimes necessary to remake the whole case.
5. If ideal conditions are present and the fee is not prohibitive, palatal bars are more desirable than rubber bases.

Dr. T. C.

Q. Patient engages to have dentures made, and it is agreed to place on the lower some gold that had been removed from extracted teeth. After impressions and bite were taken, patient went away to another city and remained for over two years. She returned recently to have the service completed and insisted on the old agreement with reference to the use of the old gold, but during this interim the gold material had been "lost, strayed or stolen." What are the legal rights involved?

A. Explain to the patient that her being away so long releases you from the old agreement, that it is unreasonable to expect you to keep the scrap gold safely and intact over so long a period. Make a new arrangement, fair and agreeable to both, and complete the service. To avoid future worry in the case, have the patient release you from further obligation in the case.

Dr. F. B.

Q. A set of full dentures was made with sanction of relief agency for a patient on relief. The patient proves to be unreasonable to the point of refusing to be satisfied, though I have remade both dentures in an effort to satisfy the patient. The relief agency will not pay for the service unless the patient gives her O. K. What steps should I take to collect the fee?

A. If you feel that the dentures are of such that a reasonable patient should be satisfied with, you should have the service inspected by two or three men of the profession whose reputation in denture work is at least the average and above. You should then write a comprehensive letter explaining the case in detail to the relief agency and request a settlement. Support your letter with letters from these men of the profession who have examined the case.

—————oOo—————

All is not false which seems at first a lie.—*Southey*.