

is a medicine of too great activity to be safely administered by those who are unacquainted with the practice of physic: but, we fear, that, even in the hands of medical practitioners, arsenic, generally adopted as a substitute for the bark in the cure of intermittents, would be productive of infinite mischief; and that a remedy which is capable of exciting virulent effects in such very minute doses, and which is frequently (as we learn from Dr. Fowler's work) rendered insupportable to the patient by the variation of only the sixtieth or eightieth part of a grain, would, in many cases, be worse than the disease.

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XVI. *Of Diseases, supposed to be venereal, produced by transplanted Teeth.* Vide *A Treatise on the Venereal Disease, by John Hunter.* 4to. London, 1786.

SINCE the practice of transplanting teeth has been adopted in this country, several cases have occurred in which the venereal infection has been supposed to be communicated in this way, and they have been treated accordingly; but the ingenious and respectable

author of the work before us is of opinion, that, when all the circumstances attending them are considered, there will be found, in all of them, something which is not exactly similar to the usual appearance of the venereal disease when received in the common way.

In all the cases of this kind which have fallen under Mr. Hunter's observation, the time of local affection, after the insertion of the tooth, has been almost uniformly a month, which he considers as too long a period for the venereal infection to take effect in at a medium. He observes farther, that where constitutional symptoms have been produced in these cases, these also have followed the local symptoms more closely, and with more regularity as to time, than could have been expected if they had been venereal.

The first case of this kind which came under his care was that of a lady, who had one of the bicuspidati transplanted. The transplanted tooth, we are told, fastened very well. About a month after she caught cold after dancing, and had a fever, which lasted near six weeks. In this time ulceration in the gum and jaw took place, though it was not then known; but when she was beginning to recover it was observed,



observed, that not only the gum and socket of this tooth were diseased, but also those of the tooth next to it. The two teeth were taken out, and the sockets of both afterwards exfoliated, but the parts were very backward in healing. This circumstance gave rise to various opinions, the principal of which was, that the complaint was venereal. In the meantime, a rising of the indolent node kind appeared on one of her legs, and was considered as a corroborating proof that the case was venereal: but Mr. Hunter being of a different opinion, recommended sea bathing, which was accordingly had recourse to, and the patient, we are told, got perfectly well, and has remained so ever since.

The second instance he met with of this disease was also in a young lady. In this, as in the former case, the transplanted tooth fastened extremely well; but, at the end of about a month, the gum began to ulcerate, leaving the tooth and socket bare. The ulcer continued, and blotches appeared on the skin, as did also ulcers in the throat. The disease was treated as venereal, and the patient at length got well, but not, it seems, till after the symptoms had recurred several times. This return of the

symptoms in this patient, after continued courses of mercury, was much more frequent, the author observes, than is usual in venereal cases; and he had his suspicions, he tells us, all along that the complaint was scrophulous.

In the third case, which was that of a gentleman, the transplanted tooth remained, without giving the least disturbance, for about a month, and then the edge of the gum began to ulcerate, and the ulceration continued till the tooth dropped out. Some time after spots appeared almost every where on the skin; they had not, however, it seems, the true venereal appearance, but were redder, or more transparent, and more circumscribed. He had also, we are told, a tendency to a hectic fever, and complained of restlessness, want of sleep, loss of appetite, and head-ach. After he had tried different remedies without finding relief, he was put under a course of mercury, and his complaints disappearing, he was thought to be well; but some time after the same appearances returned as at first, with the addition of swelling in the bones of the metacarpus. He was then put under another course of mercury, more severe than the former, and in the usual time all the symptoms again disappeared. Several months



months after the same eruptions came out again, but not in so great a degree as before, and without any other attendant symptoms. He now had recourse again to mercury for the third time; but he took only ten grains of corrosive sublimate in the whole, and got quite well. The time between his first taking mercury, and his being cured, was, we are told, a space of three years.

Could this case, asks the author, be venereal? — The circumstance of the two first courses of mercury having removed the eruptions, would, he observes, seem to prove that it was; but the third course, which consisted of only ten grains of corrosive sublimate, having also removed them, seems, he thinks, to prove that it could not be venereal; for, if it had, the appearances which returned after the second course, in which a considerable quantity of mercury had been given, would, he is of opinion, not have yielded to ten grains of corrosive sublimate.

The subject of the fourth case mentioned by the author was a young lady, whose gum began to ulcerate at about the same distance of time after the transplanting of a tooth as in the preceding cases. The surgeon who was first consulted

sulted advised the use of mercurial medicines ; but Mr. Hunter, who was afterwards desired to see her, advised that mercury should not be had recourse to, and this he did to ascertain the nature of the case ; for if she took mercury, and got well, it would, he observed, be adding one more to the number of the supposed venereal cases that had arisen from such a cause. He recommended the extraction of the tooth, that it might be seen what effects would be produced by the removal of the first cause. The tooth was accordingly drawn, and the gum healed as fast as any common ulcer, and has remained well ever since.

With respect to this case, Mr. Hunter remarks, that if the patient had gone through a course of mercury, she would probably also have got well ; for the tooth, in the time necessary for completing the course of mercury, would have dropped out ; and if this had really happened, he thinks, we need not hesitate to affirm, that the case would have been considered as venereal.

In the fifth case, which was that of a young lady, eighteen years of age, who had one of the incisores transplanted, ulceration of the gum took place six or seven weeks after the operation,



operation. The tooth was immediately extracted, the bark was given without any other medicine, and she got well in a few weeks.

The sixth case was that of a gentleman, aged twenty-three, who had the two front incisors transplanted, and within about the same space of time after the operation, as in the former cases, had an ulceration of the gum, the edges of which sloughed off. A surgeon who was consulted recommended the bark, and the patient, without taking any other medicine, got well, we are told, in nearly the same time as the subjects of the fourth and fifth cases, who had the teeth taken out. The gums, in this case, it is added, healed perfectly, but were considerably shorter.

The seventh and last case mentioned by the author is that of a young lady, whom he saw just as the edge of the gum was beginning to ulcerate. He recommended the frequent application of a solution of corrosive sublimate to the ulceration; but as this did not stop its progress, she applied, he tells us, to Dr. Watson, from whose account of the case, published in the *Medical Transactions* \*, he takes his ma-

\* See the next article.

terials to argue upon; and his remarks on it tend to prove that this case was not venereal.

In the first place, Mr. Hunter contends that the progress of the ulceration in the mouth, which was the first symptom, was by much too rapid for a venereal ulcer; for it must be considered, he observes, if venereal, simply as a chancre or local affection.

In the next place, he is of opinion that the constitutional affections followed the local by much too soon to allow us to suppose them to have been venereal; and farther, he observes, that the appearances from the constitution, when they did take place, were much more violent and rapid in their progress than any similar appearances he has ever seen in venereal cases.

With respect to the cure, Mr. Hunter remarks, that the quantity of mercury employed would be inadequate to the cure either of chancres on the penis, or of venereal sores on the skin, making so rapid a progress as the ulcers in the mouth and the sores on the skin did in this case. And if we take into consideration the effect produced upon the patient's health, with the termination of the whole, he thinks we should pronounce the case not venereal;  
for



for the specific circumstances, if it was venereal, were, he contends, just as uncommon as the mode of catching it.

After having considered the cases of those who had the teeth transplanted, Mr. Hunter proceeds to consider the persons from whom the teeth were taken; and his remarks here tend to throw additional light on the subject. "Let me suppose," says he, "that the young girls from whom the teeth were taken really had the lues venerea, and that the teeth were of course also infected." This is a supposition, he observes, most unfavourable to his real opinion; but he thinks that even if this had actually been the case, there could have been no difference between the gums of the persons from whom the teeth were taken, and the gums of those who received them. If the ulceration, he asks, took place in the latter from contamination, would not the sockets of the persons from whom the teeth were taken likewise have ulcerated? But this, we are assured, did not happen in any of the cases.

Mr. Hunter has here supposed the teeth capable of being contaminated with the lues venerea, although he believes they have never yet been seen to have this disease primarily,

but only in consequence of its breaking out somewhere else, as in the mouth, throat, or nose, and from thence spreading to them; “but still,” says he, “if they are capable of having the disease, and communicating it to others, it becomes very extraordinary that these people should have hit upon the only such teeth that probably were ever so contaminated;” and he thinks it strange that the disease should break out in the receivers, and not in the givers. It is also singular, he adds, that an ambiguity should follow this disease in all its stages; in the mode of its being received, in its appearance, and in its cure.

After having thus fully considered the disease in question, Mr. Hunter sums up all the arguments in favour of its not being venereal.

First, he observes, that two of the patients, whose cases were similar to the others in their origin, recovered without any medicine; and secondly, that they who seemed to be cured by mercury had not a treatment exactly similar to what is followed in cases where the disease is indisputably the lues venerea: thirdly, he considers it as impossible for parts to have the power of contaminating, which have not themselves assumed what he terms the diseased action;



tion; and lastly, he observes, that the parts contaminating were never known to be contaminated themselves.

But it must be nearly the same thing, Mr. Hunter observes, to those who want to have teeth transplanted, whether his reasoning on this subject is just or not; for a disease in consequence of the operation most certainly has taken place; and in some cases this has been worse, or cured with more difficulty, than the lues venerea usually is: and whatever the disease may be, he as yet knows of no mode of prevention, except the drawing of the tooth early, and that has been tried, he says, in one case only, and in that case was successful.

“ From this account,” says Mr. Hunter, “ many may be deterred from having this operation performed; in that light no evil can arise, except being mortified that no means of relief can be had recourse to in cases of bad teeth; but it is to be remembered, that this is a publication of all the unsuccessful cases, which is the very reverse of what is generally practised in medical books; and they are mentioned upon no other principle than that the disease, when it happens, may not be improperly managed.”

It may be asked what is this disease? This is a question, Mr. Hunter observes, which it may be more difficult to answer than what it is not. He would say, however, “that a sound tooth  
 “transplanted may occasion such an irritation  
 “as shall produce a species of disease, which  
 “may be followed by the local complaints  
 “above mentioned.”

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XVII. *An Account of a Disease occasioned by transplanting a Tooth.* By William Watson, M. D. Fellow of the College of Physicians, and Vice-President of the Royal Society. Vide *Medical Transactions, published by the College of Physicians in London, Volume the Third, 8vo. London, 1785.*

THE subject of this melancholy case was an unmarried lady, aged about twenty-one, and of a delicate habit, but in other respects in perfect health. One of the incisores of the upper jaw happening to become carious, she determined to have it removed, and replaced by a sound tooth. This was accordingly done, the transplanted tooth being taken from the mouth of an apparently-healthy person.

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