

NORTHWESTERN UNIVERSITY DENTAL SCHOOL

DEAN'S OFFICE

NORTHWESTERN UNIVERSITY BUILDING  
CHICAGO ILLINOIS

Oct. 19, 1910.

Dr. F. S. McKay,  
700 Exchange National Bank Bldg.,  
Colorado Springs, Colo.

Dear Doctor:-

I suppose your letter of July 21st came before I returned from my vacation, and when I came upon it in answering the accumulation of mail that was here, I evidently stuck it in my pocket to read at home, then changed my clothes and lost sight of it. At least I came upon it yesterday and read it.

I was particularly sorry not to go to Denver and to Colorado Springs this summer, but with the condition of my throat it would seem almost like suicide to do so and do even the private talking that would be necessary, so I took to the woods, and shunned the people that talked, pretty generally. The result is that my throat is so much better than I am doing my work very comfortably, and am in a better physical condition than usual. I was greatly interested in reading your experiences at the meeting at Denver. A great many people say they have seen these things, but when they come to count cases against them and show its prevalence in your part of the country, they generally come to the conclusion that they have never seen it and don't know what it is. We have one very typical case here with us this year - a student. He came from your city, and we are able to show it to every one, but when we give the figures of the percentage of such cases in your city, it staggers our people here. A few cases that have been seen occurring elsewhere have been regarded as freaks and no particular account taken of them.

I particularly enjoyed your account of our beloved brother, M. L. Rhein and some of the others. Nobody will realize what this

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thing is without a good deal of careful study of it. A few cases don't count, but when they go into Colorado Springs and see it by the wholesale, it is different.

I am greatly pleased also with the way you are getting along with the work. You and Dr. Burton and the rest of you are doing a noble thing in this work, and it will take a good deal of time to work it out, but I am satisfied that you will get there. Of course lately I have done nothing with it. I want sometime to make a few more sections, but that part of it is pretty well worked out I think. We know what it is. The point that I am least satisfied with is that which you mention, regarding the time of the deposit of the coloring matter. Since I found that I could dissolve it out and replace it with shellac that had been colored, it has seemed to me quite possible that it might occur after the teeth come through, and I am particularly anxious that this be well observed in children who are cutting their teeth and as their teeth come through. You can certainly after a little, fix it with certainty as to whether that coloration occurs after the teeth are through or not.

The point that made me so certain at first that the discoloration came before the teeth were through, was the fact that so many atrophied cases are colored in the same way, and these I have always supposed occurred during the development of the enamel, and not afterward. Further observation of these may change my whole notion regarding these things. I have never tried to dissolve out

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the coloring matter from atrophied teeth.

What you say about the coloring matter of the blood is probably the explanation of it if it occurs before the eruption of the teeth, but the discoloration in that case might occur after the eruption of the teeth, even though the material for the coloring matter was present. When the blood globules are broken up from any cause, and the coloring matter dissolved in the tissues, it causes discoloration. It is this that causes the blue color or dark color in contusions, bruises and the like, and you will see that according to your notions expressed in this letter, this is the same variety of coloring matter apparently, lending a strong supposition to the idea that this may be the correct solution of that part of the problem. I have found also in some cases that I have traced through, that when very severe abscesses at the roots of the temporary molars have destroyed the enamel organ of a bicuspid before the enamel is completed, these cases have a discolored enamel in every case that I have been able to note and to watch through until they have erupted.

I am writing now in some haste. I hope to hear more from you on this point, and especially as to the observations of children's teeth during the eruption of them. Please keep me posted as to what is going on. I have had a number of cases reported directly to me from regions-round about, but some distance from, Colorado Springs. Some of these seem to be isolated cases observed by

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parties who have not seen the cases at Colorado Springs. The observations are probably correct, however. These cases you will find as you go around from place to place. The observations at Eastonville are especially interesting, and I shall be interested in what you find later in that place.

Remember me to the boys and tell them that I have not lost interest by any means in the work you are doing. I should like especially that Dr. Burton read this letter, as I cannot consider you two men separately very easily.

Very truly,

*G.V.B.*

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