



James Shosenberg
BA DDS DDPH MSC FRCD(C) FCAM

“Justice and Right-doing is His Invariable Motto” Henry Tunstall Wood



Henry T. Wood,
Founding Member and ODA
President, 1878.

Henry Tunstall Wood was born in March 1827, in New York State, the son of a gunsmith. When he was seven years old, he nearly died when a runaway horse struck him down. The blow made Henry partially blind for nearly three years, which curtailed much of his formal education. This early misfortune, however, didn't seem to limit Henry Wood's skills, intelligence or ambition. He eventually became one of the founders of the Ontario Dental Association, answering the call of Barnabas Day to join him in Toronto to organize a professional association. His professional enthusiasm and ability did much to build the dental profession in Ontario.

At the age of 14, Wood apprenticed to a carriage maker, with whom he served nearly six years. In 1846, he immigrated to Canada, settling in the village of Jordan, west of the town of St. Catharines, where he worked at his trade. During a visit south six years later, he became acquainted with Dr. Menney, a New York dentist, who gave him his start in dentistry.

Over his long career, Wood practised in Jordan, Brighton, Picton, Cobourg and finally in Toronto. He was one of the founders of the ODA and one of the first members of the Board of Directors of the Royal College of Dental Surgeons of Ontario.

In later years, Wood wrote about the problems of practising dentistry before the founding of the Ontario Dental Association. “All dental operations before 1868 were performed by hand, and our burrs and drills were revolved by the fingers. In preparing a cavity for filling, a chisel was used in cutting away the thick walls, and excavators, burrs and drills were used for forming retaining pits and completing the cavity. Gold and tinfoil were inserted and consolidated solely by hand pressure. This involved great care and no slight risk. I remember an unfortunate mishap under the old method. It occurred when filling an upper cuspid with gold, from the inside outwards. My plugger suddenly glanced from the tooth and so great was the force that it pierced the lip of the patient before I could stay my hand.¹ Tinfoil fillings were used a good deal in those days. Oxichloride of zinc was first used in 1858. Amalgam was in general use at that time, particularly by a certain class of travelling dentists. It was in fact their only filling medium. I have seen approximate cavities in the incisors that were all filled together with black amalgam, made by mixing silver fillings and tinfoil with quicksilver. Such fillings were frequently loose, but not sufficiently so to fall. They were highly satisfactory to their innocent owners, who supposed that they contained some mysterious property which preserved the teeth from decay.”²

Wood noted that there were many styles and varying quality of operating chairs. “In many cases an ordinary house chair was used, which was occasionally improved by a primitive head-rest. They were made ... so that they could be fastened to the back of the chair by a thumb screw. A little later, high-backed chairs were raised on a platform and did good service. Later on, the dentist would make a sketch and call on a cabinetmaker to build a chair specially for him. Some of these chairs were very nicely upholstered, and comfortable for the patient, if not for the operator.”³

The introduction of new materials and tools aided dentists, for the most part. Wood wrote that, “... the invention of hard vulcanite made quite a revolution in the dental laboratory, adding new appliances suitable for the manufacture and finishing of this new material. The introduction of the mallet to consolidate gold fillings in the teeth was a welcome aid. This made other improvements necessary in order to keep the teeth dry long enough to complete the operation. The napkin in many cases proved a failure, and other appliances were invented and used. Duct compressors and tongue holders were only partially successful and in fact nothing was found to be perfectly successful until [the invention of] the rubber dam ... in 1864. The next improvement was the automatic plugger in place of the hand mallet. Then came the dental engine, with all its improvements and appliances.”⁴

Despite technical improvements, Wood recalled, “the dental profession was, as a body, very weak. We were not in a position to professionally protect ourselves and the public. We were acting as individuals instead of cojointly [sic] and what we really wanted was organization.”⁵

A short time for a momentous change was, however, fast approaching. Light was springing up in the east and the ‘Day’ star was beginning to shine. A short time before the end of 1866, Dr. Barnabus Day of Kingston mailed a circular to every reputable dentist in Canada West, convening a meeting, to be held in the city of Toronto at Queen’s Hotel, on the third day of January 1867.”⁶

At that meeting, the chairman [Day] stated that the object of the convention was to organize a dental association and to take steps to procure a law requiring dentists to pass an examination. A constitution was adopted requiring that “candidates for membership, in addition to professional knowledge, shall have practiced successfully for five years in one place and one established office.”⁷

The second meeting was held in July 1867, in Cobourg, Ont., and 31 members attended. Wood noted that, the “success or failure of the object to be attained was no longer in doubt and no one thought of opposing the organization of a ‘Dental Society’ and the drafting of an Act to be presented to Parliament at the next session. A session of the Association was held in Toronto in January 1868. ... A petition was presented to the Legislature praying that the Act be passed requiring dentists to pass an examination signed by the Professors of the two medical schools in Toronto and the leading physicians of Ontario, including several members of the Medical Council. ... The Dental Act came in force on the fourth day of March 1868.”⁸

Henry Wood was one of the members of the Provisional Board of the Royal College of Dental Surgeons of Ontario. He served two terms as President⁹ and served on the Board of the RCDSO for the next 30 years. He was one of the leaders responsible for the construction of the Royal College of Dental Surgeons at 93 College Street, in Toronto, which opened in October 1896. The building was the pride of the profession. The school cost \$50,000, a considerable sum for the time, and was completely financed by the dentists of Ontario.

Unfortunately, as President of the RCDSO, Wood was drawn into a conflict between dentists of the Eastern Ontario Dental Association (EODA) and the College. Since the inception of the school, the teachers had been paid on a per student basis. No one complained when the enrolments were small, but in 1888, the enrolment reached 53 dental students. Rumours spread through Ontario’s dental community that the teachers at the school were becoming rich from the profits on the tuition.

The principal source of these rumours was the EODA and, in particular, Charles A. Martin. One observer reported that he “was led to believe that the EODA was established for the purpose of investigating and correcting the supposed crooked ways of the board.”¹⁰



Bust of Henry T. Wood.
Presented to Ontario’s dentists
by Dr. C.E. Pearson of Toronto.

Because of Martin’s ability as a speaker, he became the driving force behind the EODA’s determination. “And so it came to pass,” recorded an observer, “that in 1889 ... a number of wise men came from the east” to run for election to the RCDSO Board and carry out their investigation.¹¹

The result was that EODA members Charles Martin and L. Clements of Kingston were elected to the Board of the RCDSO. However, when they carried out their scrutiny into the Board’s conduct, they found absolutely nothing.

When Martin returned to the EODA, he was forced to report to his colleagues that “he had been well received and although a few ‘hotshots’ had passed between himself and Dr. Willmott, [the Registrar of the RCDSO], he found him a capable man, well qualified to guide the board on a broad and progressive platform; a man of strong religious principles, aggressive and hard to beat in debate.”¹²

Martin’s opinion of the other members of the board was equally favourable. He found that Chittenden was a “whole-souled, genial companion, capable in many ways and honorable in his intentions and actions.” Rowe was a “most conscientious man, straightforward in all his actions on the board.” And, Dr. Wood “is by nature incapable of doing a dishonorable act; justice and right-doing is his invariable motto.”¹³

So, instead of finding anything crooked, Martin was forced “to report most favourably on the members of the board” being impressed by the “integrity and force of character of the leaders.”¹⁴

In an address to the members on the 30th Anniversary of the ODA in 1898, Woods summarized his professional philosophy. His words remain true today.

“Honour your calling and it will honour you. Give to it the best qualities of your head and heart, with patient and unflagging energy, and those of you who take part in the anniversary of the Dental Act will be able to hand on to another generation a profession better fitted to alleviate the pain and minister to the necessary and comfort of your fellow countrymen than we have bequeathed to you. May it be said of us that we loved and honoured our profession and strove to advance, perfect, and hand it down, with a fair and creditable record, to our successors.”¹⁵ 