

Teeth need their own specific care.

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The teeth of people vary tremendously from all being out by age 30 to all in at 90, and people's coping with amalgam vary for no problems to creating allergies, and boils.

Google for 'Teeth Root of all disease.pdf' for information on Root Canals. They are frequently a cause of chronic health issues as they send bacteria to different parts of the body.

Top health specialist Dr Tessa Jones (see Human Health Specialists) wrote -

"It is still the view of the New Zealand Department of Health and the New Zealand Dental Association that the mercury in dental amalgam poses no particular health threat.

"How wrong they are. [I agree. Amalgam had given me boils for decades, which stopped after its removal. VJ]

"Amalgam is the generic term for the most commonly used dental filling in the world. It is a mixture of 50% mercury (a glue) which is to glue silver, copper, tin, and zinc. [My dentist, Dr David Blom, (See Human Health Specialists) stopped using amalgam in 1997. VJ]

"Do not take vitamin C orally for 36 hours before dental treatment or amalgam removal, as it can inhibit the action of the local anaesthetic.

"The Dr Oz show on the fastest growing cancer in women, thyroid cancer was very interesting as he mentioned that the increase could possibly be related to the use of dental x-rays and mammograms. He demonstrated that on the apron the dentist puts on you for your dental x-rays there is a little flap that can be lifted up and wrapped around your neck. Many dentists don't bother to use it. Also, there is something called a "thyroid guard" for use during mammograms. By coincidence, I had my yearly mammogram yesterday. I felt a little silly, but I asked about the guard and sure enough, the technician had one in a drawer. I asked why it wasn't routinely used. Answer: "I don't know. You have to ask for it. If I hadn't seen the show, how would I have known to ask?"

"Someone was nice enough to forward it to me. I hope you pass it on to your friends and family."

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Amalgam Removal

So what is all the fuss about my amalgam fillings? Plenty of people have them and they seem to be OK!

It has been known for centuries that mercury is toxic.

Silver amalgam is a compound that has been used to fill people's teeth for the past 160 years (and before that in ancient Egyptian times). When modern amalgam fillings were re-introduced the technology of the times was such that leeches or leeches were used to suck out blood and cure illnesses. In the mid 1800's dentists in the USA who used gold leaf were against the use of base metals contained in mercury amalgam by untrained tradesmen.

It has been shown that mercury vapour comes off these fillings and it has been shown that this mercury can be methylated. Methyl mercury compounds are more toxic than other forms of mercury.

Dentistry's silver amalgam is composed of a powder containing approximately 33 ~ 37% silver, 3-6% copper, 12-13% tin, and 1% zinc mixed with mercury, such that the final mixture contains 48 ~ 52% mercury. Today dental alloy manufacturers are turning to what is termed "state of the art" amalgam, or high copper amalgam which contains around 30% copper.

The work of Savare (1972,1981,1984) and Vimy (1985) documents the fact that mercury escapes from silver amalgam fillings. Brune (1984) showed that mercury is released from the high copper amalgams (30% copper) 50 times faster than conventional amalgam (3 ~ 6% copper). The question is how much of a toxic substance is bad for you.

These are the guidelines currently followed in my practice as of 22.06.2001:

At an initial consultation a full mouth examination including radiographs is undertaken. You will be advised if composite is not strong enough in any of your teeth and advised of alternatives. A quote will be given and you will be advised that we cannot promise you any benefits to your health by carrying out any dental procedures. A consent form will be explained to you and you will need to sign this before I agree to treat you. It is the current view point of the New Zealand Department of Health, the New Zealand Dental Association that the mercury in dental amalgam poses no particular health threat.

If you have had the electrical charges on your fillings measured then we can advise you of the order in which we will carry out your treatment. Mr Geoffrey Jones who currently visits our practice on Thursdays can do this for you, as well as testing which dental materials suit you best. In addition he can give you the homeopathic support you need to eliminate mercury from your tissues.

Treatment

For the best results it is recommended to have your dental revision work completed within 30 - 45 days. In order that we do not interfere with your immune system cycles (of 7,14 & 21 days) we will not schedule an appointment on the same week day within a 30 day period. If you have had any illness, cold or trauma in the previous 30 days please advise us as this can also affect your immune cycles. Also we like at least 48 hours between appointments. Where possible we place a rubber dam sheet over your teeth during amalgam removal. We also have medical oxygen for you to breathe whilst the mercury fillings are being removed. In addition to air conditioning we also run a charcoal air filter to clean the surgery. We do not move out of a mouth quadrant until it is completed, nor do we cross from one side of the mouth to the other in the same day. We endeavour to remove all scraps of amalgam from each tooth as well as old lining materials which often hide fragments of fillings from previous restorations. The maximum appointment time is 2 hours regardless of how far you have to travel. We will use the materials recommended for you to the best of our ability.

Supplements:

you will have been advised of vitamin therapy. Here are some of our recommendations:

A cavity starts in a tooth's outer enamel and spreads to the dentin and pulp inside. The typical New Zealand made toothbrushes are hard and wear the enamel down. This, my 23 month old brush is still like new. It is soft with fine pointed bristles that enter the gaps and clean them.



Many countries have banned water fluoridation. They include Austria, Belgium, China, Czech Republic, Denmark, Finland, France, West Germany, Hungary, India, Israel, Japan, Luxemburg, Netherlands, Northern Ireland, Norway, Scotland, Sweden, Italy and Switzerland, including 98% of the Europe.

Fluoride is a cumulative poison, in that the body excretes little, so slight excesses in time produce toxic symptoms in the elderly.

On the days of treatment drink plenty of water (NZNatural spring or filter and purified if available). HERE Amway

Rinse the mouth after treatment with warm water and a few drops of propolis. After treatment the least you need to take is 1000 mg of vitamin C a day preferably with some other type of anti-oxidant such as ACE with selenium. This helps to chelate or mop up free mercury as well as boosting your immune system.

Drainage

This is highly recommended as it clears mercury from the body tissues, which would otherwise stay there - even after the mercury has been removed from the teeth. Alternatives include: I.V. vitamin C Oral chelation such as DMSA, MSM, Chlorella. We currently recommend that our patients see a medical expert such as Dr Mark Austin or Dr Tessa Jones for chelation. Mr Donald Woodman who shares rooms at the Holistic Dental Centre is very knowledgeable in nutritional chelation and support during the detoxification period.

After dental treatment: REST.

If you are having other types of therapy only have one on the day of treatment. Some people feel quite wiped out after amalgam removal, go with what your body tells you and rest. It is important that you have support from those close to you so they can assist you in your recuperation. Massage the day after treatment is thought to be helpful. An osteopathic treatment is highly recommended after dental treatment and again Don Woodman is available for this.

Root Canals and Extractions

Faulty root canals can cause a chronic disease, especially if in a decayed or infected tooth.

If you have a tooth that dies, the standard current treatment is to either clean and fill the inside of the tooth or to remove it.

Dentistry is the only profession that says it is OK to have dead tissue in your body. A dentist wrote, "Whilst I have the most up to date and modern machine to clean the root canals of teeth I can only clean and fill the vertical canals inside the tooth and not the hundreds of horizontal ones. Currently those root canals that work do so by virtue of reducing the bacterial levels within the tooth. However anaerobic bacteria can still live and mutate in these canals causing problems in about 10% of people. I am using a product called Biocalix that is thought to migrate into these microscopic canals reacting with water in them to form Calcium Hydroxide. Calcium Hydroxide is bactericidal and is also a basic component of bone and tooth tissue.

"When a tooth is removed by a general dentist often the infected bone and the tooth ligament is left behind. This can cause pain and possible health problems at a later date. To help avoid this, at the time of tooth removal I clean the tooth socket and irrigate it with sterile saline; this procedure takes a couple of minutes. Prior to tooth removal it is advisable to have prophylactic antibiotics or homeopathic.

"After dental treatment the teeth are often sensitive to bite on and to temperature changes. This should subside with time, however it is best to let us know as your bite may need adjusting and teeth desensitising. Sometimes dental treatment can stir up the nerve of the tooth causing it to die, the symptoms of this are throbbing pain which can be spontaneous or be triggered by heat. If this happens then the alternatives are root canal therapy or tooth removal. This is more likely with teeth that have in the past had deep or very large fillings in them. Generally most people's teeth settle within 3-6 months. It is important to keep your teeth well flossed and cleaned and to try to eliminate white sugar from your diet as this causes tooth decay."

"Post dental revision dietary recommendations eat a well balanced diet following the food pyramid principle. Avoid processed foods such as salami sausage rolls, etc. Avoid white sugar. Take coffee sparingly.

"In the first six months avoid seafood especially shell fish crayfish crabs and shark meat as they all contain high amounts of mercury. Avoid pork, bacon and ham as most have high amounts of mercury.

"As mercury will be coming out of your tissues after it has been removed from your teeth, it is best to carry on taking vitamin C and anti-oxidants for 3 months after removal."

The information is derived from an article by Thomas Levy, M.D., of Colorado Spring, Colorado (Extraordinary Science, April-June 1994).

"The Board of Dental Examiners in California approved a document which says, "Some elements contained in composites have been determined to be cytotoxic and carcinogenic." Mercury is the most toxic (nonradioactive) inorganic heavy metal known.

"Elemental mercury vapor that emanates from amalgams is almost completely inhaled. It easily crosses the blood/brain barrier (the brain and nervous system's natural defence against many toxic substances). It subsequently binds very strongly to the sulfur-containing proteins of the nervous tissue.

"The same affinity for binding sulphur allows its deposit in virtually all of the body's other tissues and organs. In fact, the much-maligned scapegoat in today's health, cholesterol, appears to actually afford a protective mechanism against the slow and insidious release of mercury into the bloodstream by binding it up and allowing it to be excreted before it gets its grips into any of the body's tissues. High cholesterol levels may represent just a healthy metabolism doing its best to neutralise the continual release of a toxin. Patients who undergo amalgam removal consistently show shifts of their cholesterol into or toward the normal range, often within days of such removal."

In defending cholesterol as a protection against mercury in the body, Levy says that investigators have noted that low cholesterol levels or sudden drops in cholesterol appear to cause an increase in the incident of homicides, suicides, and accidents. Sudden fits of uncontrolled anger and temper, severe

depression, and loss of coordination and motor control are some of the most common manifestations of chronic mercury poisoning.

Examinations of cadavers show a positive correlation between the number of amalgams and the amount of mercury found in the brain tissues. Stillbirths are correlated with maternal blood mercury levels, which in turn are associated with the number of amalgams in the mother's mouth. Mental retardation or later psychomotor and behavioural disturbances also result in children, related to the amount of methyl mercury to which the foetus is exposed. Methyl mercury is 100 times more toxic than elemental mercury and quickly develops after oral ingestion of mercury.

Yet the American Dental Association (ADA) "Code of Professional Conduct" advises dentists that it is unethical to suggest or recommend removal of amalgam restorations to the non-allergic patient.

Multiple sclerosis?

The first mercury fillings were placed in teeth in France shortly before the original description of multiple sclerosis (MS) appeared around 1835. In its original description, MS was attributed to the suppression of sweat. We know today that sweat induction is one of the best ways to eliminate mercury from the body's stores.

Dr. Hal Huggins ("Resources," Page 12) has been consistently witnessing improvement in MS patients undergoing amalgam removal, for many years now. This improvement is seen in symptoms and in laboratory tests in 80-85% of his patients. People who had become wheelchair bound recently are walking again. One can call this the "anecdotal" but it doesn't matter. True science is not the placebo-controlled double-blind study, but a comparison of a subject before and after treatment, in my opinion.

Wired?

The brain/central nervous system (CNS) is strongly effected by the electrical current present in all mouths containing metal. If there is more than one metal in the mouth, the current could possibly be stronger. In any case, it is not unusual for the current in the mouth to be 100 to 10,000 times more powerful than the natural currents found in the brain. The base of the brain is roughly only an inch away from the upper teeth. Is it then a surprise that many MS and miscellaneous neurological patients will demonstrate an immediate improvement upon amalgam removal? This often is in muscle strength and coordination. Occasionally there is immediate effects on diverse other symptoms such as severe migraine headaches, chronic cough, jaw pain, muscle cramping, and even depression.

For reasons beyond my understanding, Huggins got better results with MS patients when he removed amalgams according to the amount of current measured on each one, removing the ones with the highest negative current first. Huggins also found that nutritional support was extremely important to retain health improvements. The stores of mercury in recovering MS patients remains high. Patients need to be vigilant by, for example, avoiding mercury in foods.

Huggins later recognised that chronic dental infections played a role in illness. These he believes are in every root canal job and cavitations (healed over holes at the sites of previous extractions). When these cavitations were cleaned and the teeth with root canals were removed, the recovery rate of MS people improved even more.

Surprising is the fact that the Multiple Sclerosis Society has actively campaigned against looking into the mercury issue. They say they have "thoroughly checked" the literature and found no correlation between amalgam and MS. I say, huh?

Huggins polled 1,320 patients (non-MS) and found in the majority unexplained irritability, numbness and tingling of the extremities, depression, chronic fatigue, tremors and difficulty with memory. When amalgams were removed, these people responded as well or even better than MS patients.

In recent years, Huggins' MS patients are younger and their diseases progress more rapidly. This seems to have occurred at a time when "high-copper" amalgam use has

increased in frequency. High copper amalgam releases 5 times more mercury than the previous conventional amalgam.

Even more toxic effects?

Mercury has an affinity for the cells in the pancreas which produce insulin. "Diabetics requiring insulin shots who undergo amalgam removal frequently show a decreased need for insulin

subsequently."

Chronic mercury poisoning also affects autoimmune and collagen vascular diseases. Lupus is one of these diseases. "In experimental animals, mercury exposure induced such autoantibody production in greater than 90% of the time." Huggins has seen a good response from patients with these diseases who have undergone full dental revision.

Leukemias, as well as other malignancies have also been observed to respond favorably to the Huggins protocol. Similar claims are made for Lou Gehrig's disease, Parkinson's disease and even Alzheimer's disease. It is noted that though these diseases often respond, the improvements are generally not as profound or as quick to appear as in other diseases such as chronic fatigue syndrome or MS. One of Levy's patients in an advanced neurological syndrome who was unable even to bend and conform to his wheelchair, was moving all of his limbs and able to speak simple words for the first time in a long time, after complete dental revision. Levy says no amount of cynicism from colleagues will convince him that he didn't see what he saw because it wasn't in a "controlled clinical trial."

[Publisher: In a earlier issue of Blazing Tattles, we published an interview with Alan S. Levin, M.D., who gave a stinging critique of the so-called "scientific method" in medicine -- the placebo controlled, double blind study.]

Materials of Concern

Nickel is rapidly gaining a reputation for its toxicity. Most partial dentures are made of nickel. Approximately 80% of crowns use nickel, even "porcelain" crowns. Braces usually are nickel. Stainless steel is usually nickel alloy. Nickel compounds have been unequivocally implicated as human respiratory carcinogens in epidemiological studies of nickel refinery workers, and there appears a relationship between nickel crowns and breast cancer in women.

Cast glass crowns and inlays often contain more than 25% aluminium as aluminium oxide. About 80% of patients with such dental work show laboratory findings consistent with some drop in immune function. Levy says dentists are fed propaganda that all of the components in this "glass" remain tightly bound and safe, just like initial reassurances that amalgams were going to stay intact forever.

Dr. Weston Price, whose work has been forgotten, published extensively in his time and did an astonishing amount of research. "He found that there seemed to be hardly any disease or disease process that was not either primarily caused by dental infections or just worsened by them. The heart and circulatory system appeared to be favourite target sites for the bacteria and/or their toxins. He observed angina pectoris, phlebitis, hypertension, heart block, anaemia, and inflammation of the heart muscle often to be side effects of root canal therapy. He also reported that he would sometimes see heart patients with outwardly normal appearing root canal teeth resolve most or all of their symptoms upon removal of those teeth.

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