

# Dental Infections

## Wear Out Your Immune System

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By Clive Buirski

This article explains how metal-based dentistry is the road to poor health and a relentless stress on your immune system. Dentistry can be a huge factor in wellness but when restorations fail and become infected, they can directly affect normal function of organs, glands and bone.

In addition to the toxic bacteria and heavy metals leaching from the majority of mercury (silver) fillings, porcelain-over-metal crowns, root canals and implants, improper dental-work creates short circuits in the body's bio-meridian, electric pathway, which connects all organ/gland systems. Interruption of our bio-electric network contributes to specific organ/gland dysfunction. We may not realize the source of many of our health problems because pain-less dental infections take time to build, but they are relentless.

Restoring dental health can influence immediate and long-term health, especially where immune issues are concerned. Knowing the right questions to ask your dentist, puts you in control. If a restoration is done correctly, it will last a life-time, saving your health and your money.

As of the year 2016, Standard Of Care dentistry is still taught in all but a few Dental Schools around the world. In essence, this means using metal fillings made with 55% mercury and 5% silver and the rest is made of other toxic metals, even though the EPA states that mercury is the most toxic substance known. The American & South African Dental Associations claims mercury is safe in the mouth and does not leach into our brains, nerve, kidney and tissues of other organs and glands, despite heavy metal tests confirmed worldwide.

### **Metal fillings break teeth**

Over time, the mercury expands and contracts causing hairline cracks in the walls of the tooth. Eventually, the tooth breaks, then Standard Of Care trained dentists prepare the tooth for a crown. This means drilling the tooth down to a stub, onto which a steel-jacketed porcelain crown (porcelain-over-metal) is installed. The Standard Of Care adhesive used is water soluble, allowing crowns to "leak" within 3 to 5 years, which creates an environment for infection. Leaking, infected crowns can stay in place for many years before wearing out and ultimately falling off and can be pain-free, even with a raging infection.

Dental X- rays are not able to show infection under Standard Of Care crowns, as they are made with a steel jacket. Infected, leaking crowns are relentless and over time, can exhaust our immune systems. Tens of millions of people have several teeth restored with Standard Of Care crowns, another nail in the coffin for the tooth, after it's destroyed by a mercury amalgam, sold as a "silver filling".



Infection under a crown

Once Standard Of Care crowns fail outright, allowing the nerve to die, the next step in the decline of the tooth, is a procedure known as a root canal – the removal of the nerve, ligament and its blood vessels. The canals of the root are then filled with a material called gutta percha, which starts out as a natural rubber, but is blended with heavy metals in order to be seen on Xray. Within weeks or months, the gutta percha contracts away from the walls of the canal, leaving a space for bacteria to grow, undetected for years, without pain. 100% of root canals left long enough to fester, progress to osteo necrotic lesions in the jaw-bone (see below), requiring surgical removal of infected gum and bone.

Standard Of Care dentistry's remedy for dental infections, is to cut away the infected gum and bone. Some infections are deep into the bone, requiring significant surgery.

### **What's an alternative to surgery?**

1) *10 to 20 second laser treatments* 1 or 2 times weekly - from your friendly dentist ☺ Laser dis-infection of the jaw-socket greatly reduces inflammation and infection and speeds healing - bio-stimulation of dentin, gum and bone.

2) *Apply clay-packs* in and around the tooth socket, once the dead tooth (root canal) is removed. Some people have significant infections that require as many as 50 or 60 or more clay packs to clear the debris for rebuilding healthy bone. Mud-packs work by cation exchange, like magnets of opposite poles.

### **How to prepare and apply Dental Mud-Packs**

1 tablespoon of each: Green French clay powder and Zeolite powder – add 2 teaspoons pure water to a clay-mud texture and apply into and around the tooth

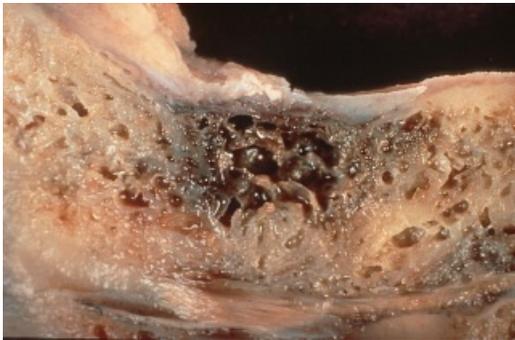
socket. Leave in place for 10 minutes. Rinse out. You can apply 2 to 4 mud-packs daily. Consider adding Aloe Ferox Bitter Extract powder to the mud-packs for increased immune support at the site.

Consider applying these mud-packs to the front of your throat - thyroid area to assist detoxification of thyroid and parathyroid.

3) Ask your dentist about stem cell restoration of the bone socket. Dr. Elizabeth Piela, DDS (Belmar,

NJ) is a pioneer in this field. Phone 732-280-9700

The key to positive results with mud-packs is repetition. Enough mud packs need to be applied over 6 to 9 months or more if necessary.



#### Infection from root canal

If the dead (root canal) teeth are removed before infection sets into the surrounding bone, then Standard Of Care dentistry calls for titanium implants, a bolt that is screwed into the jaw to hold a “crown”. Consider that 100% of titanium implants eventually get infections around the post, going undetected for years. Titanium post infections can overwhelm your immune system. Implants require viable bone to properly adhere. Is this the case with already infected bone?

Alternatively, a partial denture made of non-toxic material such as **Valplast** or **Dentsply**, works well to chew with and looks like a natural tooth. It can be clipped out, cleaned and replaced daily. No drilling into the jaw required. **Metal bridges** are a compounding problem because they require destruction of adjacent teeth to “hang” the bridge on. I would choose a dental appliance that can be removed, cleaned and that does not destroy teeth for any reason. The teeth are circuit breakers in our bio-meridian electric pathway.

To help your body heal itself with dental infections, consider including therapeutic amounts of **real vitamin C** like Camu Camu Vitamin C Fruit Powder from immunologic.net (not ascorbic acid) along with other immune supporting herbs such as Olive Leaf Extract and Aloe Ferox Whole Leaf Caps in your daily regimen. Maintain an alkaline whole-body pH of 7.2 to 7.4 measured of urine and saliva consistently. Alkaline body pH concentrates oxygen into blood and

cells for rapid healing and infection management.

### **Insist on digital x-ray systems vs. the older analog units?**

1) Digital x-rays produce about 90% less radiation compared to analog systems. Radiation is a health hazard.

2) Digital x-rays provide a much higher resolution for better diagnosis. It is impossible to properly assess the status of a tooth without a large, high-resolution image. Most dentist using digital x-ray systems now also use Intra-Oral (digital) cameras for taking pictures of single teeth for display on a monitor. These high-resolution images enable a discussion with you and your dentist, as to the options you have to properly restore the tooth.

### **What's the critical difference between anesthesia options?**

Standard of Care **and** Biological Dentists often use a highly toxic substance called Lidocaine which breaks down in the body to a chemical called aniline. Aniline is a direct carcinogen. One ampule of lidocaine to numb the jaw produces the same amount of aniline as 650,000 un-filtered cigarettes. Most adults need 1 1/2 to 2 ampules per anesthesia. Ask your dentist for Septocaine, a non-toxic anesthetic.

### **What is a rubber dam?**

A rubber dam is placed in the back of the mouth to prevent mercury bits from being swallowed. However, a rubber dam does not protect you from the mercury vapor breathed while the tooth is being drilled.

### **Insist on high volume internal and exhaust systems?**

Preventing mercury vapor from being breathed and swallowed during preparation of the tooth requires a high-volume exhaust placed in the mouth, directly at the tooth being worked on, while an additional high-volume exhaust is place just outside your mouth. Medical-grade clean air is provided via a nasal cannula for further protection. Non-volatile dental procedures do not require special exhaust or nasal cannula.



### **Insist your dentist use magnification "loops" with light?**

Although the dentist may have normal vision, it is not enough for exacting dental work. Magnification with directed light ensures best vision for accurate preparation of teeth.



### **Dye-stain with certain procedures?**

Dye-stain is used during preparation of teeth to ensure that all decay is removed. Visual magnification with light does not ensure complete clean-up of the tooth. Dye-stain exposes decay for the dentist to detail. Long-term viability of the restored tooth, depends on the level of dis-infection, using both dye-stain, laser and ozone.

### **Ask your dentist to use a new burr (drill bit) when your tooth is being prepared (drilled)?**

New burrs enable the dentist to save as much tooth structure as possible. This is key considering that a tooth can only survive a limited amount of trauma. The more tooth structure that can be saved, the longer the life of the tooth.

## Don't get tricked with "Biological" dentistry

Compare "Biological" dentistry compared to 21<sup>st</sup> Century Laser-Adhesion dentistry materials. Most "biological" dentists use composite (white fillings) which are considered *immunologically* compatible but are *neurologically* toxic due to their aluminum dioxide content which can exacerbate neurologic diseases such as multiple sclerosis, alzheimer's, parkinson's and dementia. Composites (white fillings) often contain xeno-estrogens creating hormone imbalance. Women concerned about breast, ovarian and cervical cancer should be aware of this, especially if the goal is to restore many teeth with this potentially toxic material. How can composite dental materials (xeno-estrogens) be immunologically compatible, if xeno-estrogens are cancer promoters?

21<sup>st</sup> Century Laser-Adhesion Dentistry uses low-fusing ceramics, practically identical to your original tooth structure. Ceramic crowns are properly installed with a two-part adhesive, set by polymerizing light for a permanent bond that does not leak. 21<sup>st</sup> Century Laser-Adhesion dentists use a laser (ND Yag Erbium lasers) to dis-infect the prepped tooth, before installing a temporary and permanent crown and after extractions. Dental lasers not only dis-infect the tooth, surrounding gum and entire tooth structure, but the laser also bio-stimulates the tooth, gum, nerve, blood vessels, tendon of the tooth for super-fast healing and pain-free dentistry.

"Biological" dentists typically use ozone for dis-infection that only affects the surface which it makes contact with. Ozone does not dis-infect the whole tooth structure and does not provide bio-stimulation and does not reduce pain associated with the tooth being drilled on. Dental lasers practically provide pain-free dentistry. It's like magic! I speak from experience of having my entire mouth properly restored with laser-adhesion-dentistry.

Efficacious restoration materials for low-fusing ceramic crowns include Lava, 3M Vita-Block, Duceram, E-Max, and Zirconia, especially for chewing teeth. Make sure you get the harder material options for the chewing teeth due to their higher density and resistance to cracking.

Esthetex is a non-toxic composite, used on non-bite surfaces only.

## Not all dentures are safe

Some people have lost enough teeth to require a partial or complete denture. The "pink" part of denture contains toxic heavy metals however there are two non-toxic denture materials to request from your dentist. Their material names are "Dentsply" and "Valplast".

## **In-house crowns with Cerec 3D**

Some Laser-Adhesion dentists use Cerec 3D systems. This is an advanced digital imaging system that translates the cleaned-up tooth image to a 3 dimensional milling device, which prepares the new crown in about 40 minutes. The newer systems mill the crowns in about 15 minutes! Cerec 3D allows the dentist to prepare your tooth and install your new crown in the same session, with one anesthesia, vs. a temporary crown installation, then removal when the new crown arrives back from the dental lab. This requires yet another anesthesia.

Find a dentist with many years of experience using Cerec 3D. These dentists are generally well schooled in 21<sup>st</sup> century laser-adhesion dentistry, however, I have discovered that there are still many dentists that are on the fence with metal dentistry, even though they use Cerec 3D. There is only one reason for this: insanity, which could be from mercury poisoning, the very substance they are ok with. Insanity.

## **What is politically correct dental speak?**

More insanity: Most states including Texas have laws imposed by the ADA, that prevent dentists from removing mercury amalgams, if the patient wants them removed for toxicity reasons. However, if you say that you want your mercury fillings removed because **“you don’t like the way the look”**, then the dentist will be happy to take them out for you. If your head explodes from trying to understand this, you are not alone. Germany and Scandinavia outlawed mercury fillings years ago, but in America, South Africa and other countries, it is taught to our new dental students, in 2016 !

## **ONE TOOTH AT A TIME PLEASE**

Many people find a great dentist with all the knowledge, experience and digital imaging equipment, etc, and this big mistake happens... the dentist adds up the total number of teeth that need work, multiplies by average \$1500 for each ceramic crown and tells the un-suspecting patient that the bill is going to be \$9000. Some people have more teeth that need restoration! So the patient does nothing, they “feel fine.” INSTEAD, the patient should discuss with the dentist to determine which is the first most important tooth to work on. Then prioritize the rest. Take your time to do it properly, it will last you a life-time. I took 6 years to fix my mouth, which was practically destroyed from metal fillings and crowns, like millions of people around the world.

There is no benefit in restoring more than 1 or 2 teeth maximum, at one time for a couple of reasons. Too much stress on the immune system from mercury vapor and bits that may be swallowed. It is more difficult to adjust the bite exactly when the jaw is numb, laying down in the dental chair (incorrect position

for adjusting the bite). Ask the dentist to adjust your bite while sitting up or standing.

Let me know if you have questions on this.

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Dr. Gerald Smith, DDS discusses cancer and dental infections.

<http://www.dragonfly75.com/eng/dentalcause.html>

#### Link Between Oral Infections And Cardiovascular Disease

Science Daily July 13, 2009 - A strong connection between periodontal disease and cardiovascular disease (CVD) has been suggested in recent clinical studies. As many as 75 percent of adults in the United States have been affected by periodontal disease, and an estimated 80.7 million adults (1 out of every 3) have been a victim of CVD in 2006, according to the American Heart Association.