

## Root Canals Contain Toxic Bacteria

New DNA study confirms decades old research that root canals contain toxic bacteria that may be the "root" cause of many diseases.

Root canals have become ubiquitous — almost 60 million are performed each year. "You need a root canal" is now almost as common as hearing you need a filling. And, it is not lost on the dental profession that people do not want to lose their teeth. It is the only treatment protocol available to retain a tooth that is diseased. Yet, just how safe are root canals? And what is the science behind their being a non-toxic alternative to tooth extractions?

These questions are not new, nor are the findings. Indeed, Dr. Weston Price and Mayo Clinic of 1910 to 1920 described finding bacterial growth in root canals that could be transferred into animals and create the same diseases the donor human had in from *80 to 100 percent* of the animals. Heart disease, in particular, could be transferred 100 percent of the time. His research has since been suppressed by the various Dental Associations in the United States.

The Toxic Element Research Foundation (TERF), using state of the art DNA testing technology, identified **multiple pathological bacteria** found within root canal teeth, the bone adjacent to the teeth, and even more in extraction sites where healing has not taken place. This non-healing occurs in greater than 99 percent of wisdom tooth extraction sites. Additionally, large defects of non-healing are often found upon surgical exploration into the bone — about the size of the original wisdom tooth. Other sites leave what are called "cavitations" as well.

Dr. Weston Price's death-bed wish was for someone to pick up his hard earned baton and make this information available to the public. The Toxic Element Research Foundation has done just that, using present day advanced testing techniques to confirm Price's research.

**The question now becomes: What will patients, government agencies and the dental profession do about it?**

TERF, a non-profit research foundation, is dedicated to stimulating interest in the research community as well as informing the public to become aware of potential problems associated with dental materials and procedures. Being informed of potential problems makes for better informed decisions by the patient, especially where health is at risk.

## Root Canals

For years, comedians have poked fun at root canals and the pain associated with the procedure. Little did they know that the pain was not short lived. As far back as 1908, microbiology researchers from Mayo Clinic and from the dental association at the time found that bacteria and their toxins from root canals could enter the blood stream and travel to any point in the body, and generate disease in that tissue or organ. The dental association, concerned about liability issues, insisted that the nerve chamber in the center of the tooth could be effectively sterilized, and that the body would accept a root canal tooth as — not a "dead tooth" as it was previously called — but a "non-vital" tooth — a new and much more acceptable term for a root canal.

Incidentally, *non-vital* means dead!

One of the most decorated dental researchers of all times, Dr. Weston Price, was ridiculed by his dental peers, and, even 60 years after his death, leading dentists still maintain his research is not valid. Why? Fear. For disclosing the truth about the toxicity from root canals would heap tremendous liability upon the dental association as well as individual dentists. It would also ruin a very lucrative practice in dentistry. The association, even today as the American Dental Association (ADA), insists that they have proved Mayo Clinic and Dr. Price to be wrong. There is no research to support this claim, and none can be produced. Yet dentists are continually threatened with license revocation if they expose the truth about root canals or even suggest they may be dangerous.

Just as they have seen many colleagues lose their licenses for exposing the toxicity of mercury in so-called "silver" fillings, which actually contain 50 percent mercury, dentists fear for loss of their income source if they mention root canals as a source of disease.

Today, there are many diseases termed, "of unknown etiology," which means, *"we have not the first clue where they are coming from."* Many health oriented dentists and physicians are beginning to recognize that these incurable, non-responsive diseases are showing improvements by techniques involving removal of root canal teeth and fortifying the patient's immune system. Threats, law suits and professional humiliation have been used against dentists who stand up for their patients, and against the ADA.

How big is the problem of root canals? In 1990, the ADA set a goal (quota) of dentists performing 30 million root canals per year in the US by the year 2000. Dentistry accomplished this by 1999. Now the bar has been raised to 60 million root canals per year.

Ask your friends. How many have root canals? How many of those friends are taking medications for some vague disease on a daily basis? Of those people treated for non-responsive diseases, perhaps as many as 90 percent have root canals. Research accumulated by TERF, based on treatment of thousands of people, suggest this is the case.

For example, Dr. Josef Issels of Germany found that in his 40 years of treating "terminal" cancer patients, 97 percent of his cancer patients had root canals. He would not initiate his successful treatments until all root canals had been removed.

TERF believes it is no coincidence that in the US root canals have been found to abound in people with Multiple sclerosis, Lou Gehrig's disease, Lupus, leukemia, diabetes, arthritis, and a host of other autoimmune diseases. Reversal of these diseases, as shown by improvement in physical conditions as well as positive changes in blood chemistry, occur after the removal of dental toxic challenges (mercury, nickel, aluminum, root canals and cavitations) in conjunction with stimulation to the immune systems of these people.

Thousands of lives are challenged daily by the placement of root canals, and when these patients' genetic weak links break, they and their families are doomed to financial and health losses that destroy their ability to work, play, raise families and enjoy life, liberty and the pursuit of happiness. It is believed by TERF that many of these diseases do not have to happen.

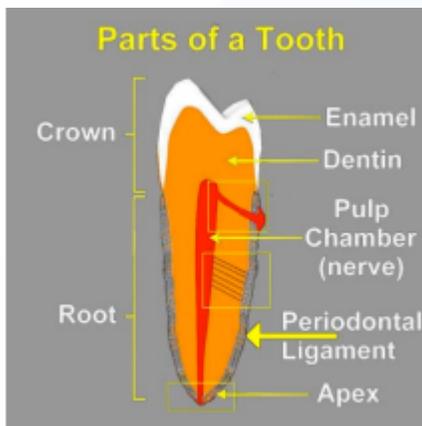
The reason is simple. Extremely toxic anaerobic bacteria have been found and identified in and around root canals.

All reasonably informed citizens of the US understand that alcohol and tobacco potentially create health hazards. They have a choice. Citizens are not informed of the multiple disease-producing bacteria living in their root canals. TERF is convinced that if people were informed of the hazards created by "anaerobic" bacteria living in the periodontal ligament surrounding these root canal teeth, they could at least make an informed choice about whether or not to risk this potentially life altering procedure.

These anaerobic bacteria have now been identified by DNA analysis of the teeth, blood adjacent to the root canal teeth, and cavitations," or the bone defects left behind by tooth removal in which the contaminated periodontal ligament is left in place. These patients have been informed by their fear laden, but trusted dentist, that root canals are perfectly safe. They are told that root canal teeth are "sterile."

**This simply is not true.**

A protective barrier is formed around many root canal teeth that allow nutrients from the blood to enter, but prevent access of antibiotics and white blood cells of the immune system to try to heal the areas. As toxins seep out into the blood stream when the owner of the root canal bites down on food, toxins are forced into the blood with access to every location in the body that might have a weak spot. "Sterilizing the tooth" just does not happen. Yes, a column of air in the pulp chamber is cleaned, but the real problem is in the periodontal ligament that surrounds the tooth. That is the incubator in which billions of bacteria can breed.

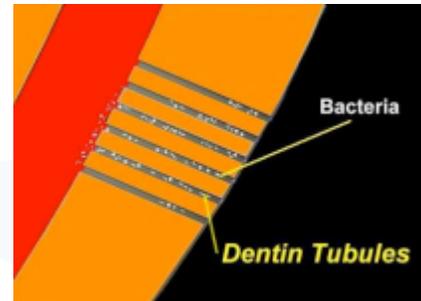


Dr. Weston Price — head of research for the dental association for 14 years in the 1920s and '30s, published the results of 1000 extracted teeth in which canal sterilization was done in the dental research laboratory. Researchers in the laboratory used not just the routine sterilizing chemicals, but extremely potent sterilizing agents (more toxic than could possibly be used in the mouth) and in a highly controlled sterile environment. Their microbiology specialists found that 97 percent were cultured to find re-contamination within 48 hours. In other words, they were still there. Many of the bacteria found

were quite pathological. Today's DNA research has found not only the ones that Dr. Price discovered in the '20s but many more that have the ability to create disease.

Where did these pathogens (bacteria that can cause disease) come from? They were in the dentin tubules – over three miles of tiny tubes per tooth that constitute the mid-section of the tooth called the dentin. This is located right below the enamel, and adjacent to the pulp chamber.

Where do these bacteria go in real life? They travel down the tubules to the periodontal ligament which is the attachment between tooth and bone; impossible to sterilize, and where neither antibiotics nor white blood cells of the immune system can. Every time a person bites down — as in chewing — some of these bacteria, or worse yet their toxins, are squirted into the body's lymphatic drainage system. From here they go to the blood stream. From there — everywhere.



Why should the public be concerned? With millions of root canals out there, and thousands having been told they need one every month, the potential for problems is past epidemic, almost to the *endemic* stage. Again, it must be pointed out, those people are not informed about the hazard they are about to have inflicted on themselves. In most cases, neither is the dentist.

Everyone who receives a root canal has an incubator in those dentinal tubules that is growing anaerobic bacteria that can create whatever disease their genetic weak link would prefer. This is no longer a one-microbe, one-disease, one-drug-to-cure world. Multiple bacterial families, joining hands with toxic metals like mercury and nickel, now endeavour to create new diseases unfamiliar a hundred years ago.

It is contended that dentists "sterilize" the dead tooth. And that is true, they do. However, no matter what the pulp chamber is embalmed with (a wax cone called gutta percha is generally placed into the canal), *the tooth is still dead*. The body does not accept dead structures as safe. In fact, it launches an autoimmune response against the dead tooth. This is the origin of many autoimmune diseases, compounded by the presence of pathological bacteria and their toxins.

**What about these anaerobic bacteria? The ones that live in the absence of oxygen? Who are they, and in which patients are they found?**

TERF spokesperson, Dr. Huggins states: "Our observations over the past 40 years suggest that the old theory of one microbe — like Strep pneumonia — gives one disease, like pneumonia, that is cured by one drug — penicillin, is being replaced by group warfare. Toxic dental metals are known to alter the integrity of the cell membrane, called cell membrane permeability. Reduction of quality allows weaker bacteria to invade the cells, but once inside the membrane, even a weak bacterium can cause lethal results to the cell.

"Bacterial invasion is not consistent. If we identify the bacteria of several root canals in a person with Multiple sclerosis (MS) or Lou Gehrig's disease (ALS) with DNA technology, we do not find the identical bacteria in each dead tooth.

"For instance, in root canals or cavitations in people with MS, a bacterium, *Enterobacter* was found. It was also found in ALS and Alzheimer patients (AD). Is there a similarity, since they are all neurological diseases? *Enterobacter* is noted for involvement in endocarditis (inflammation around the heart), bone infections — "can cause disease in virtually any body compartment;" and "cause considerable mortality and morbidity rates. Exposure to one type of *Enterobacter* can result in neurological disorders. They do not usually cause immediate death."

TERF believes these types of finding warrant further investigation.

In the study that is the subject of this news release, TERF found that by looking at DNA reports of 43 root canal samples, a total of 42 *different* species of anaerobic bacteria were found out of a potential of 85 choices. The number of different microbes ranged from 11 to 40 in individual tooth tests. In cavitations, which are unhealed bone defects, primarily where wisdom teeth have been extracted, from 118 samples, 67 different bacteria were identified. Individual tests ranged from 19 to 53 per single sample. Again, out of a potential of 85 tested.

*Staphylococcus aureus*, usually reserved for hospital outbreaks, are not the most common, being in less than 23 percent of the MS, ALS, and AD samples studied, none the less can be part of the team destruction process. *Aureus* is noted to kill white blood cells of the immune system. Common denominator? Is it proper to have a reservoir of them with their toxins readily available for distribution each time a person bites down? The way the system operates, biting down on a root canal tooth can squirt toxins out into the system, but antibiotics and white blood cells cannot get in through the combination calcium – blood clot barrier provided by the body's reaction to certain bacteria.

Looking briefly at the bacteria and their published toxicity for connections to these people, these bacteria became suspect in Amyotrophic Lateral Sclerosis (Lou Gehrig's disease, or ALS)

Evaluating 29 samples:

- ***Veillonella parvula*** 58 percent – pathology associated with heart disease and destruction of the Central Nervous System.

- **Candida albicans** – 65 percent – as it changes from yeast to the fungal state, it becomes invasive, causing small holes to occur in the intestinal tract resulting in "leaky gut syndrome". Also increases porphyrin excretion in urine leading to reduced ATP and heme formation, thus reducing overall energy to cells of the nervous system. **Capnocytophaga ochracea** - 58 percent – can cause frontal lobe brain abscesses – associated with dental infections and diseases of the Central Nervous System
- **Porphyromas gingivalis** – 75 percent– alters the integrity of endothelium of blood vessels. Enhances atherosclerosis.
- **Gemella morbillorum** – 68 percent – noted for endovascular infections and meningitis.

Evaluation of 40 Multiple sclerosis samples in which 81 separate microbes were identified, seven are reported here.

Although not defined as a neurologic disease, draining sinuses are common among MS patients with root canals, so Actinomyces was included.

- **Actinomyces naeslundii** – 35 percent – associated with draining sinuses (generally clear up within a week of root canals and cavitation treatment)
- **Candida albicans** – 62 percent – described in ALS section.
- **Capnocytophaga ochracea** – 42 percent– frontal lobe brain abscesses of dental origin – microbe thought to originate in dental decay.
- **Gemella morbillorum** – 57 percent– associated with meningitis.
- **Neisseria meningitides** – 7 percent– associated with seizures.
- **Escherichia coli** – 12 percent- and **Staph aureus** – seven percent are both capable of increasing porphyrins, which will cause less ATP to be available to neural tissues.
- **Streptococcus intermedius** – 27 percent – Cervical spinal cord abscesses – associated with high mortality and neurologic morbidity.

TERF's spokesperson, Dr. Hal Huggins, has researched toxicity of dental materials for 40 years. His January presentation for the Toxic Element Research Foundation covered the most influential diagnostic chemistries selected from his base of 200,000 data points.

He found that many victims of autoimmune disease showed improvements in blood chemistry discussed in this TERF presentation that clearly indicate recovery from disease is a possibility when the challenging bacteria are removed with proper protection for the patient.

Millions of people stand to regain their lives, and countless more millions will never have to contract the diseases thought to be related to the combination of dental mercury, nickel, aluminum, root canal and cavitation anaerobic bacteria as they combine forces to destroy the immune system.

This ground breaking data will be made available to research health professionals worldwide who are willing to use the data to find positive solutions to today's health problems.

Additionally, this information begs the questions:

Should the public be informed about the potential real danger of toxins from root canals and cavitations, regardless of the consequences, financial and otherwise, to the ADA and dentists?

Hopefully, the news media and other agencies will take the lead and assist TERF in generating awareness so people can make an informed choice.

#### **About Toxic Elements Research Foundation**

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