

For immediate release

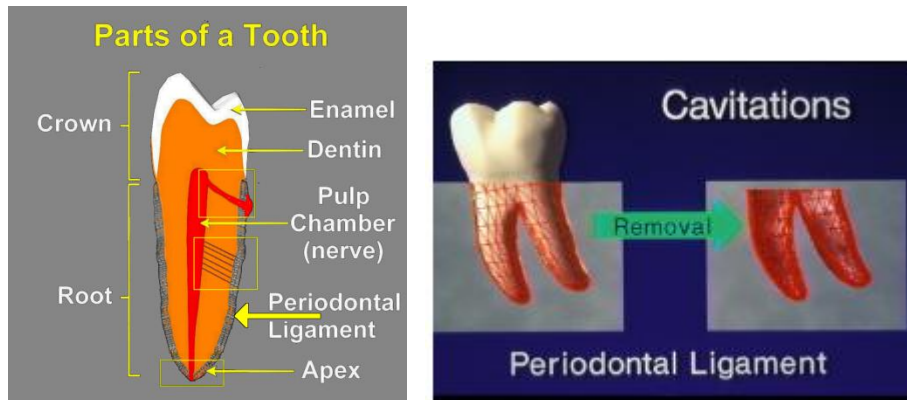
LITTLE UNDERSTOOD DENTAL CONDITION PROVIDES CLUES TO THE SOURCE FOR MANY OF TODAY'S DEADLY DISEASES

CAVITATIONS – SUBTERRIAN TOXINS

Anyone ever tell you that you have a hole in your head? Well, chances are you do. Ever have wisdom teeth removed? Bicuspids for orthodontics? Any permanent teeth removed? Chances are good that you have a hole in your head where the tooth used to be.

They are called cavitations.

When Dentists remove a tooth, they are taught to leave the periodontal ligament. Teeth are not attached directly to bone. Fibers come out of the tooth, and fibers come out of the bone, and they intertwine to form a hammock-like structure called the periodontal ligament.

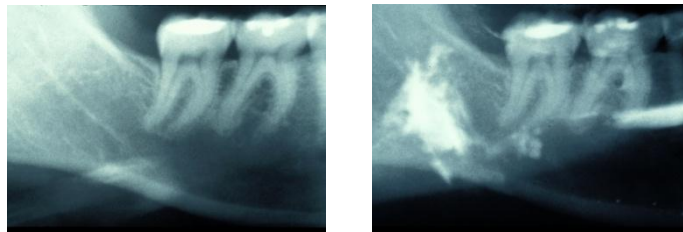


If this ligament is around a root canal tooth, then bacteria creep from the dead tooth into the ligament where they find plenty of nourishment from nearby blood supplies. If a wisdom tooth was removed, the ligament picks up bacteria from the mouth during healing, converts them into “anaerobic” bacteria – the kind that live in the absence of oxygen – and set up housekeeping.

The ligament supplies food and protection. Neither antibiotics nor white blood cells can penetrate the ligament, so they grow unchecked, producing toxins that flow into the blood stream and multiply very rapidly.

Cavitations are very difficult to see on X-rays, for you are looking at a piece of air in bone. Bacteria, of course, are many times smaller than can be seen on X-ray. However, they are significant. The bacteria confined to a jail hole in bone, still produce bacteria that, in turn, produce toxins that have the ability to create diseases.

Although cavitations smaller than the size of a pea can contribute to uncomfortable autoimmune diseases, often they are the size of the extracted tooth or bigger if the bacteria have an appetite for bone.



Here is a picture of an actual patient's cavitation which, even to a trained eye, could not be identified on X-ray. A tiny hole was cut in the top, and a disclosing solution, (calcium iodide) visible on X-ray, but non-toxic, was be injected into the cavern for a few seconds while an X-ray was taken. This solution is used to disclose heart veins, so is considered safe by the medical profession.

As large as this cavitation is, if this woman happened to be in an auto accident, it would be quite easy for her jaw to break, and with the size of the cavitation, plus the fact that the area is teaming with anaerobic bacteria, there is no way it could possibly heal. She had no idea that this 'hole' existed in her jaw. The toxins within it generally seep out, metastasizing to other places in the body to create onset of a disease. Sometimes the diseases are diffuse, like Multiple sclerosis and Lou Gehrig's disease; sometimes localized, like to the kidney.

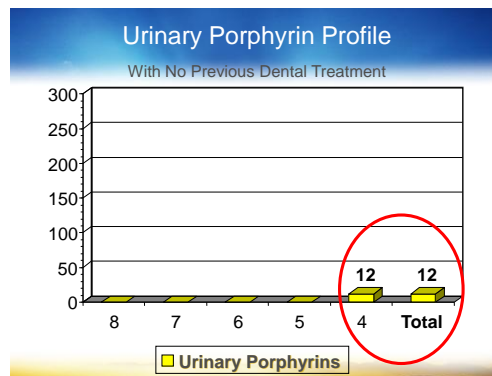
Only recently have these bacteria in cavitations been identified through the efforts of the Toxic Elements Research Foundation through DNA testing of hundreds of tissue samples.

THE PROBLEM

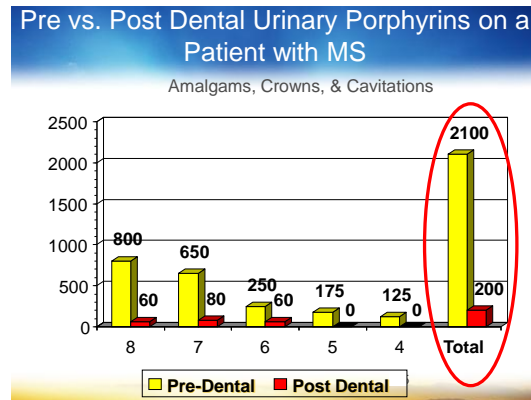
Professional Dental organizations still claim problems from cavitations do not exist.

Can there existence be proved?

One biochemical way is to look for changes in porphyrin levels. Porphyrins are the chemicals responsible for forming heme, which turns into hemoglobin and ATP, the primary energy molecule in the body. If there is interference in the formation process of heme, porphyrins drop into the urine. When there is no interference and health reigns, there are very little porphyrins in the urine – less than 40 micrograms. Here an example of what can happen when there are no dental materials in the mouth.



By way of contrast, here is the measurement of porphyrins when there are known toxins such as amalgams, nickel crowns and cavitations all present.



The left columns represent the amount of porphyrin in the urine before body chemistry balancing and dental toxin removal. The right (red) column shows the tremendous reduction of porphyrin in the urine in less than 10 days. This person was diagnosed with Multiple sclerosis. After having all dental toxins removed AND her cavitations cleaned out, they improved to the point that they could walk within a few days.

Although TERF has discovered over 50 different anaerobic toxin producing bacteria overall in cavitations, below are some of the more deadly bacteria that have been found, and the known toxic actions of those microbes:

Actinomyces naeslundii ‘2’

A. naeslundii is categorized in malignant groups, acute myelocytic leukemia, chronic myelocytic leukemia, and lymphoma and myelodysplastic syndrome. Different species of actinomyces are usually associated with tumors, or initiate tumors in patients. Of the other 5 actinomyces found in cavitations, ‘*israelii*’ is associated with abdominal diseases, ‘*naeslundii* ‘1’ is associated with draining sinuses, and ‘*odontolyticus*’ is associated with thoracic involvements.

- *Campylobacter rectus* is known to impair immune response, while its close cousin *C. showae* is known to create increased risk for heart attacks.

- *Clostridium difficile* damages mitochondria resulting in ATP depletion and cell apoptosis.
- *Gemella morbillorum* is noted for acute invasive infections leading to meningitis and endovascular damage.
- *Haemophilus* species are noted to cause endocarditis, brain abscesses, meningitis, osteomyelitis and arthritis, nerve disorders, fever, and possible mental retardation.
- *Neisseria gonorrhoeae* and *N. meningitidis* are known pathogens that induce calcium fluxes, create debilitating headaches and cause seizures.
- Many varieties of *Streptococcus* (*anginosus*, *constellatus*, *intermedius* etc appear) briefly, *anginosus* induces platelet clumping in heart valves causing infective endocarditis; *constellatus* and *intermedius* are plentiful. *Constellatus* is associated with occasional myocardial abscesses and severe brain swelling. *Streptococcus intermedius* has been cited as a cause of infection in the brain, respiratory system and liver. It is also associated with colorectal cancer.
- *Staphylococcus aureus* is one of the crowning blows of infectious bacteria. It produces leukotoxin which kills white blood cells (our immune system). It is also implicated in breast carcinoma.

CONCLUSION

TERF believes that the Dental Profession has inadvertently been subjecting patients to unnecessary dangers from anaerobic bacterium by not acknowledging the existence of cavitations and their dangers. TERF strongly suggests that Dental Professionals be trained in the proper procedures and techniques to clean toxic

cavitations and, when teeth are extracted, to properly clean out the periodontal ligament.

Until this happens, patients, especially those diagnosed with diseases associated with these known toxins, are urged to find Dentists that do provide cavitations.

About Toxic Elements Research Foundation

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. Informed consent of potential problems makes for better informed decisions by the patient – especially where health is at risk.