

Response to the SCENIHR preliminary report on "The safety of dental amalgam and alternative dental restoration materials for patients and users"

The committee keeps the protests secret! They must be public or sent to a superior authority!
My aggressive response is different to others due to different education and way of thinking.

Main comment to questions 0, 1, 2 and 5:

Disagree due to

- 1. Unsatisfactory conclusion from the scientific point of view**
- 2. Relevant information missing from the analysis of the situation**

Question 0: About general observations

A copy was sent to a very high Commission-officer.

As proved below, 2, your methods do not permit a correct evaluation of amalgam. Instead we must begin at its properties laid down since Creation as the cause of ill health and study their aggressiveness on health determining organs. Universities neglect these facts and leave physicians and dentists in the lurch.

1. Mercury, Hg is released from the fillings in considerable amounts: It evaporates through all surfaces, also the invisible ones directly to the blood; by friction and by corrosion when gold etc. is present. All amalgam metals corrode, Hg 10 x faster; their properties are similar - apart from vaporization - and they show synergy between them.
You are convinced by measuring a) the vapor pressure in the mouth, b) the electric current between fillings, 10-20 times stronger than those used by the brain, c) Hg missing in old fillings, after 12-15 years half of it has gone. d) Autopsy studies confirm: Ref (1) correlates Hg in brain and kidney tissues with amalgam surfaces. It adds: Suicides had levels 3 times higher than the others confirming that Hg in the brain promotes violence. Many similar autopsies have been published. Thus much Hg in amalgam is not fixed in an alloy.
2. There is not much point in detecting Hg in blood and urine, when it is stored elsewhere. In brain tissue half time is > 25 years. Blood-Hg is the small amount on its way from source to deposit and urine-Hg is what has been free to pass the kidneys. These analyses do not tell of Hg stored in organs. This is also valid to the report.

Ref: (1) Guzzi_2006_Am J Forensic Pathol. 42-45, pdf: Dental Amalgam and Mercury Levels in Autopsy Tissues, Food for Thought

Question 1: Is there scientific evidence that supports a link between amalgam and allergic reactions, neurological or other disorders?

3. The world famous Prof. em. Maths Berlin, Univ. of Lund, Sweden, head of the committee of WHO on amalgam 1991 and well-known to EU prepared his survey to his government in 2003 based on some 90 references (2).
4. Distribution of radioactive Hg-203 in sheep (3), monkeys, pregnant ewes and their lambs (4) were published 1989-90 with indisputable results. All of them show Hg in several tissues as time passes, e.g. in maternal and fetal blood and the amniotic fluid 2 days after placement. 43 diagrams show accumulating Hg versus time. Since 1985 this Canadian group has published a series of peer research on the damages of Hg.

5. In (5) the abstract says: “These results strongly *support what has been suggested previously* that dental fillings in primates cause absorption of mercury released from amalgam fillings through lungs and intestinal tract, and that depending on exposure mercury is distributed to most organs and will eventually be found in the central nervous system”. The lists of organs with Hg-deposits in papers (3) to (5) are enough to cancel the report.
6. Strange proteins in the cerebrospinal fluid of MS patients disappeared in 1-2 days after replacement of amalgams (6).
7. The aggressiveness of Hg consists of
 - a) creating the strongest free radicals existing, the hydroxyl radicals. They split all substances hit and are pathogenic. Even *Encycl Food Sci Nutr*, Acad Press, 2nd ed, 2003, p. 284 lists some 50 chronic diseases involving free radicals. Updated Hg-toxicology is dealt with, i.a. p. 3858-63.
 - b) oxidizing to Hg⁺/Hg⁺⁺. They bind avidly to -SH in cysteine, the particular amino acid of almost all proteins. Enzymes e.g. are active due to cysteine in their centers. When they seize Hg the enzymatic reactions stop; in principle it applies to all reactions. Proteins like DNA and RNA are blocked.
 - c) converting to methyl-Hg like other organisms from algae/bacteria upwards. Streptococci do it in the mouth. It is fat-soluble, cytotoxic, penetrates all barriers which admit other contaminants. It is a matter of cell membranes, blood/brain and blood/retina barriers, placenta and mammary glands. The fetus gets Hg during pregnancy, the baby at breast-feeding, just the time of brain development.

Ref: (2) Berlin_2002_Dent Mat Comm. 1-33, Mercury in dental-filling material – an updated risk analysis in environmental medical terms.

(3) Hahn_1989_FASEB J. 2641-2646, Dental “silver” fillings: a source of mercury exposure revealed by whole-body image scan and tissue analysis.

(4) Vimy_1990_Am J Physiol. R939-945, Maternal-fetal distribution of mercury (203Hg) released from dental amalgam fillings

(5) Danscher_1990_Exp Mol Pathol. 291-299, Traces of Mercury in Organs from Primates with Amalgam Fillings.

(6) Huggins_1998_Altern Med Rev., 295-300, Cerebrospinal Fluid Protein Changes in Multiple Sclerosis After Dental Amalgam Removal.

Question 2: Is the use of dental amalgam safe for patients and dental staff? Are certain populations particularly at risk, e.g. pregnant women or children?

8. The population is divided into 2 groups: Those genetically tolerant to Hg and the rest. Group 2 is estimated to some 20%. As chronic diseases mostly appear in older days, it is a large part of the elderly. Those already sick are at high risk. The difference ought to gain high attention of scientific research. Even a large manufacturer acknowledges the intrinsic dangers and names many disorders well-known to circles of alternative medicine: Caulk Company 1998, the manufacturer of Dispersalloy, <http://www.caulk.com/MSDSDFU/DispersDFU.html>
9. Dentists and assistants are steadily inhaling Hg-vapor and dust through the nose with open access to the brain via the olfactory bulb. They must be protected by carbon filters. Patients should at any rate be fully protected with kofferdam protecting the throat and get an oxygen mask, that dust and vapor do not enter the brain access. Fillings are removed in correct

order at correct intervals. Diastrous ill health may otherwise happen.

10. Girls have got more than enough Hg as fetus and infant. They should never be given any amalgam, as they store and deliver Hg to their babies. The first one gets most. Neither is there any motivation to load boys with more than they got in infancy. Altogether there is no excuse to use amalgam any more; biologically we do not need a single atom, every one is a poison.

Ref. None

Question 3: Is there scientific evidence, that supports a link between alternative materials and health disorders?

11. Provided health professionals are without direct contact to the ingredients of the alternative filling and the final one does not contain monomers, no adverse effect should be experienced either by patients or professionals. Alternative materials are still developing and experience is going to choose the best ones, e.g. composites on the basis of polycarbonate basis.

(Alternative materials replacing all amalgams have served my family perfectly for 20 years.)

Question 4: Is alternative restoration treatment safe for patients and staff? Are certain populations particularly at risk, e.g. pregnant women or children?

12. The comments to question 3 also apply to pregnant women and children.

Question 5: Is dental health equally ensured by dental amalgam and alternatives?

13. Most of the information given above is outside your expertise, because the Establishment considers the problem a taboo and does not teach it. The statements are based on everlasting rules given by Nature; they are exact and superior to statistical evidence. Amalgam is primarily a problem of chemical nature with chronic diseases in consequence.
14. The chemical aggressiveness of amalgam metals, Hg in particular, is far more severe than other pollution, although these may show similar symptoms. None has the same ability to react. Needless to say that it is pathogenic; 1.000's of biochemical and medical papers – out of some 20.000 in opposition – prove it. It may cause almost all kinds of chronic disorders of the present epidemic, reduced intelligence and fertility.
15. If you ask Google about “Chronic diseases induced in animals by mercury” you get some 450.000 hits. A few pct. may be relevant. Don't you know a few of them?
16. To conclude: Providence has settled that due to ignorance societies have allowed dentists to poison their patients for generations, and those unable to stand it must eventually get a mental or other chronic disease. Its use for some 170 years - since 1940-50 systematically - without toxicological evaluation nor proof of safety, has been the largest non-controlled experiment ever in the West! Forced against severe protests all the time and the legal demand for applying the principle of caution.
17. Orthodox medicine is still not taught to be qualified for the subject. It must learn a) to accept the supremacy of nature, b) why amalgam is the clue to the current epidemic of chronic diseases and c) how to help the victims to a correct detoxification.
18. All this information was received by the Commission-officer some time ago to persuade as to the urgent need of a new balanced report to help patients cheated, reverse the cost escalation of mental ill health and solve the ethical problem.