

Could Dentistry Be a Major Factor in Human Poisonings?

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I. Introduction

After decades of working with dentists, the author can sum up. Of the problems that patients' organisms have with poisons of all kinds, a large part comes from dentists. Modern dentistry with its preference for preservation of teeth and an aesthetically beautiful surface seems to be an aberration. It leaves a multitude of toxic substances in the mouth. These negatively affect combined organs. It should be taken into consideration that each tooth is connected to one or more organs or systems. A severe disease of an organ or system does not exist without the associated tooth or its root also having a pathological finding.

Examples of dental treatments that may result in accumulation of toxic materials or devitalized tissues (cadaveric poisons):

- Topic **Dental root canal treatments**. They are not successful in about 80% of cases. To clear all root canals of root debris, the dentist must be active for about 80 minutes. This is not realistic, dead root parts remain. The chemical agents placed in the root canals have side effects. The procedure of the treatment itself is a strong energetic and nervous load for the related organ. As a result, there are accumulations of unnatural and dead substances, which have an effect in the future as focus.

- Topic **Devitalized teeth**. Their saving is a senseless measure. They represent cadaveric toxins and place a heavy burden on the body's detoxification organs. Although they do not cause pain and are therefore considered problem-free, the general rule is that everything that is dead should be removed from the body.

- Topic **Metals**. The nasty toxic effects of amalgam are well known. Nevertheless, it is still used as fillings. If the dentist removes the fillings, the necessary care is not taken, i.e. with a slow-rotating drill, intensive suction and protection with a Cofferdam. Gold is often used as a substitute. Since it contains palladium, platinum and other heavy metals as hardeners, it has negative effects on the brain, among other things.

Implants with titanium pins are very popular. This was acceptable in the past. In the meantime, however, allergies to titanium have developed in the population (e.g., due to the ubiquitous titanium dioxide in tablets). Therefore, only ceramic implants are almost free of side effects. It should be noted: Metals do not belong in the mouth. At most, iron or steel are tolerable.

- Topic **Non-infectious jawbone inflammations** (e.g. NICO, oily maxillary osteitis, sclerosing maxillary osteitis). They are not usually sought or recognized or treated. They cause little discomfort, but they are involved in triggering serious diseases such as cancer. They are difficult to see in a normal X-ray. One must refer to the laboratory value "Rantes", but this is rarely done.

- Topic **Adhesives**. There are adhesives and cement with toxic potential. The stronger an adhesive binds, the more toxic it can be, e.g. acrylates. It would be necessary to require that every substance of this type be tested on the patient before its use to determine whether it is tolerated by the organism or not. Test methods exist, not only kinesiology, but also objective methods such as heart rate variability (HRV).

- Topic **Wisdom teeth**. The 8-teeth and possibly the 7-teeth are a big problem. On the one hand, they are the most significant of all teeth, but on the other hand, normal growth and positioning are the exception. The solution of extraction is complicated by the fact that they cannot be pulled out vertically due to lack of space. The dentist has to tilt, usually breaking at least one tooth root. This then represents a dead tissue and a focus. The same applies to crooked, twisted or impacted 8s. The surgeon often leaves a "battlefield", the scar of which later also becomes a blockage for the flow of energy. Stringent follow-up with removal of all remnants of the roots is necessary. However, this is rarely done. Heart, circulation and other systems are stressed.

- Topic **Periodontal disease**, gingivitis and tooth pockets. These problems are mostly treated locally, and with rather brutal methods. In reality, the gums represent the state of the environment of the intestine. Without its remediation, local therapy will have to remain unsuccessful. It is necessary to treat in the intestine possible fungal colonization, worm settlements, frequent dysbiosis and lack of physiological germs. This would be a holistic therapy, which can be successful over a longer period of time. Helpful for the environment in the mouth are also oil pulling and the introduction and rinsing with normal cocci.

- Topic **X-Ray**. The usual panoramic X-ray methods are inadequate. CT and ultrasound would be necessary in order to detect the problems: Newtom-CT with the result of a tooth root or jaw bone focus. In the last years a further instrument was developed, it is the CaviTAU ultrasound examination.

II. Conclusion

Unfortunately, the question in the title must be answered in the affirmative. It seems that the minor skills of previous barbers to extract affected teeth and clean the substrate was the more successful method for the overall organism. Acceptable was also the use of dentures that did not contain materials that had a negative effect.

A reconsideration of dentistry seems necessary.

References

- [1]. <https://en.wikipedia.org/wiki/CCL5>
- [2]. <https://www.dr-lechner.de/kieferostitis/>
- [3]. <https://www.newtom.it/de/>
- [4]. <https://www.cavitau.de/>
- [5]. https://en.wikipedia.org/wiki/Osteonecrosis_of_the_jaw
- [6]. https://www.researchgate.net/publication/319057541_Kieferherd_und_systemische_Entzundungen_-_Literaturrecherche_zu_RANTES_Publikationen
- [7]. [dungen_-_Literaturrecherche_zu_RANTES_Publikationen](#)
- [8]. <https://timewaver.com/en>

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