

For Immediate Release

## LOW COST MATERIAL USED IN DENTISTRY CONTAINS HIDDEN DANGERS

### Nickel for your thoughts?

A few decades ago the price of gold skyrocketed, turning dentistry's thoughts to nickel as a replacement for gold crown in crowns. Nickel is far harder than gold and lots cheaper. It was a little hard to work with for accuracy, so cobalt, chromium and molybdenum were added. However, the primary constituent was still nickel. But, as it turns out, nickel is carcinogenic, the combination of cobalt and chromium is carcinogenic, and molybdenum is a neurotoxin. Overall, from the mechanical standpoint, it was a good substitute because it was cheap and strong – the primary requirements for dental materials.

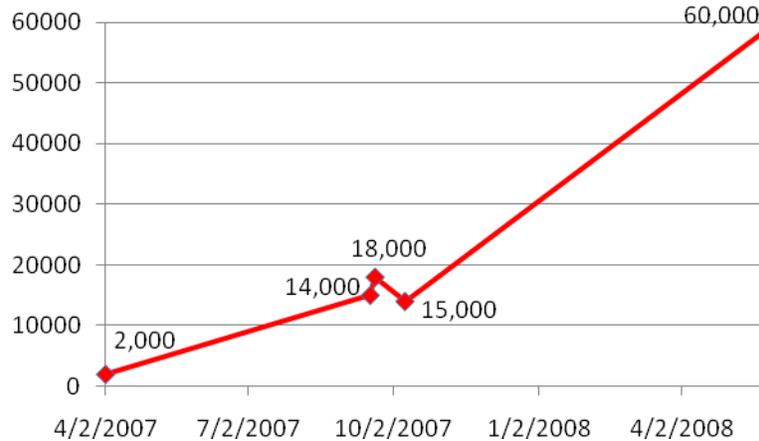
Nickel is the primary component in what are called “chrome crowns” used in children's mouths.



Chrome crowns are preformed in a variety of sizes. Typically a dentist will pick one that is closest to the size of the child, and take only a metal cutting pair of scissors to trim to make it fit a baby tooth.

Years ago the Toxic Element Research Foundation (TERF) noted that kids with chrome crowns frequently wear glasses by age 3 to 5. Not only glasses, but sometimes trifocals. Their behavior and mental development did not seem to keep up with others their age, and there were problems in the blood chemistry. For instance, platelets. These not only contain a clotting mechanism, but manufacture and distribute serotonin – the neurotransmitter frequently referred to as the “happiness hormone”. Not really a hormone, but is easy to remember this way because high levels mean happiness, and low levels are associated with depression.

TERF has noted platelets as low as 5000, where the normal range is 150,000 to 450,000, and our stability range is 225 to 250,000.



Stability Range is 225000 to 250000

This graph shows platelet changes in a five year old boy.

It was observed that this little fellow could sit still for hours with very little movement -- until his crowns were removed. He reminded one of a smiling zombie. Within two days of removal of the chrome crowns, he was a highly mobile, smiling, happy normal kid. Sixty-thousand is still low, but far more clotting protection than the five-thousand of a year earlier.

Actually, the first discovery of the problems presented by nickel was allergy. Related and was the first metal to be identified as a metal allergen according to Dr. Swartzendruber, of the University of Colorado. He was concerned that dentistry

used so much nickel as well as mercury, and was the first to come up with compatibility testing for dental materials versus the immune system.



In this compatibility test, the white areas in this picture demonstrate that an antibody – antigen reaction has taken place. The collision of the two chemicals (one nickel, the other our immune antibody) creates a “reaction product” chemical much larger than either one separately, and would have a hard time flowing through tiny vessels in the kidney, brain, or wherever small vessels occur. This would be like tiny strokes, and not commensurate with good health.

Many people react to even touching nickel. For instance, many women cannot wear jewelry made from nickel, even though it is named *stainless steel*. An even better cover-up name for nickel is *surgical stainless steel*. White Gold? Full of nickel.

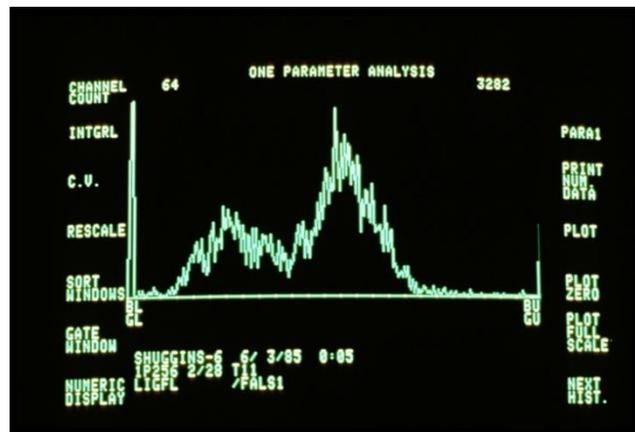
Orthodontic braces are made of nickel for the most part. There are a few methods that use gold and plastic, but nickel is still state of the art. Anecdotally, teachers notice a difference with braces. When placed within one of their students, they anticipate a drop in the student’s grade average of about 1 ½ points. That is, from B+ to C minus. This can impact their hopes for college, and may be one of the sources for what is called “teen age behavior”. It may, in fact, be just a toxic response to nickel.

There is an even larger problem. The combination of amalgam (mercury) and braces. Mercury alone has been found to create what is called floating suicidal

thoughts in adults. It has been observed by the media that suicide is the number one cause of death in teenagers. Is it reasonable to assume that teens are somehow immune to this attack, especially when compounded with the challenge offered by nickel? Immature minds may not be able to resist these thoughts of unknown origin, and teens are not willing to discuss this abnormal thought behavior with their parents, teachers, religious leaders, or even their friends. Adults for the most part will not discuss suicidal thoughts until asked, “Can you identify with floating suicidal thoughts”? Well over 80% of the adults patients with amalgam can and do identify with this immediately, often with a sigh of relief. There is a toxic reason for the thoughts. These unwelcome thoughts generally disappears within 2 to 3 days of the application of the total protocol treatment.

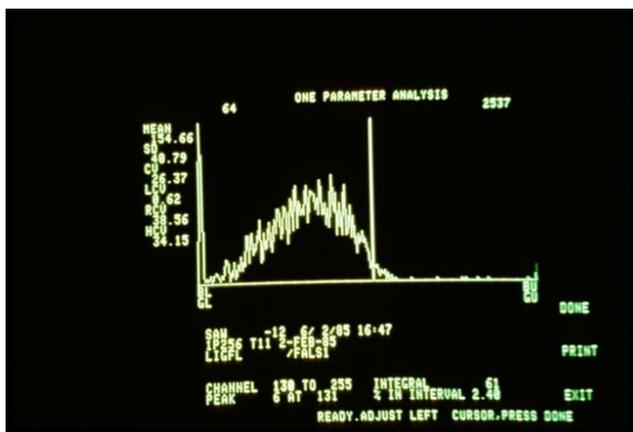
## CASE STUDY

We placed bands on an adult female – planning a 3 month refining treatment for slight collapses after orthodontic treatment 10 years before. The patient became lethargic and aggressive, an unusual combination. She slept 20 hours a day, and her aggressiveness made everyone wish she would sleep twenty-four. Little was shown by blood tests at that time, just some white cell discrepancies. Pre-braces placement flow cytometry tests had been run for an indication of the health of the immune system. It looked like this:



This was considered “textbook” perfect.

Then, a current one was run, and



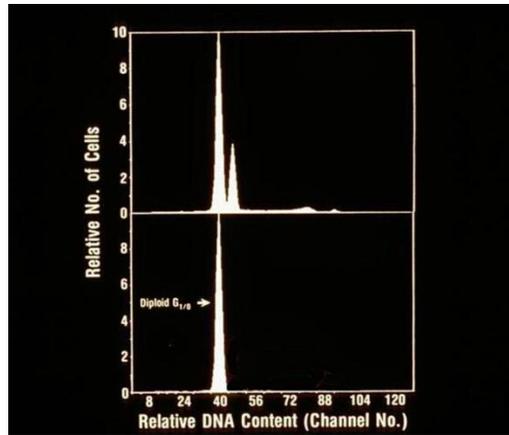
What happened to the T-lymphocytes on the right hand side? This indicates immune system shutdown. A day or two, perhaps hours until death from immune-failure.

Seeing the two side by side is more impressive.

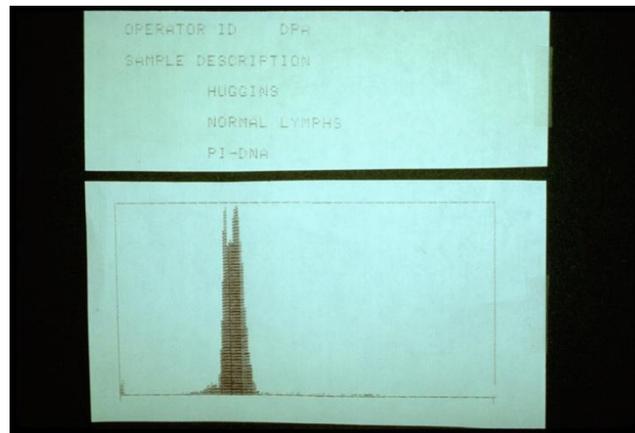


What was not realized until a few days later was that another student had used the same blood sample to test DNA.

This is what DNA is supposed to look like on flow cytometry. One single peak as shown on the bottom picture is normal.



Humans have one chromosome number, which equates to a single peak on this test. When there is a second peak as shown on the top half, then one of the 2 peaks is malignant by definition. If the two are matched, as these are, the smaller peak is diagnostic of malignant.



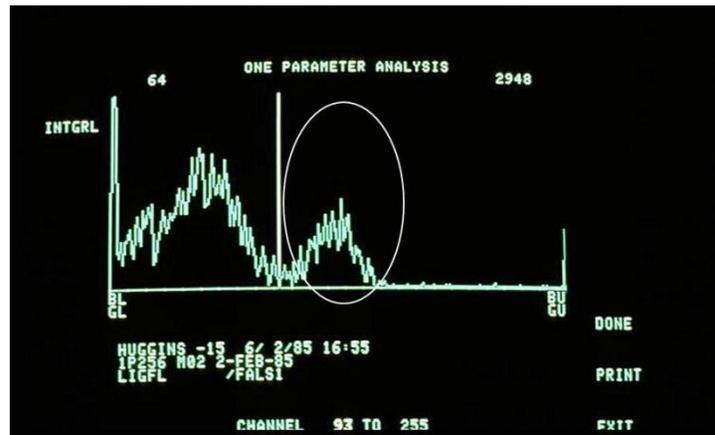
This is what the student found, asked the professor to reconfirm, and, it was true. There was a malignancy in the immune system caused by the braces. Two separate peaks were visible.

## THE PROBLEM

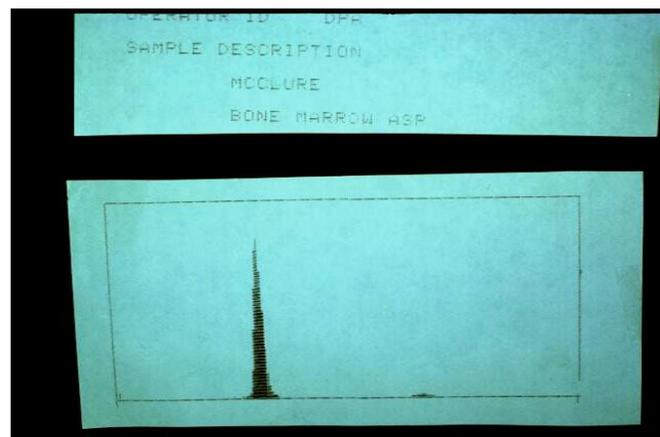
Is this a routine test run by orthodontists to see if the nickel is creating a malignancy? No. Do those treating children test to see if the chrome crowns have created malignancies or blood shifts in the wrong direction? Is any testing done to determine whether any known toxic materials used in dentistry are safe? The

dental association forbids any type of testing, saying this is for medical doctors to do. Ask medical doctors if they know anything about toxicity of dental materials, or how to test for toxicity. TERF has. Primarily there are nothing but quizzical looks, or as one forensic pathologist said, "If dentistry has created a problem, it is up to dentistry to investigate and correct it."

Fortunately for this patient, the malignancy was found and the braces were immediately removed. This paved the way for immune recovery.



It took several months for the malignancy to disappear, but it did happen. The upper picture shows the T-lymphocytes of the immune system recovering. The lower picture shows that the patient was back to single peak DNA.



This was the third exposure to nickel for this patient. It appears that it takes a third exposure in people for something this serious to occur. How do we

accomplish three exposures? If a child has chrome crowns, then as a teen has braces, followed by a retainer made of nickel, and then breaks a cusp off of a tooth a few years later, and has a porcelain crown fired over a nickel base, this can be the final insult. That is three exposures. If it requires a bit more, just add in a root canal on the fractured tooth before the nickel – ceramic crown is placed.

Dr. Mike Godfrey (a medical doctor in New Zealand) and Hal A Huggins, DDS and spokesperson for TERF, examined a 23 year old lass in New Zealand for a 60 Minutes television program. She was very weak, could not attend school, work, or adequately take care for herself. She had a nickel retainer cemented behind the 6 lower front teeth that had been there for years. Many people have retainers cemented, and, years later think nothing of it. There is no orthodontic recall to remove them. They had to canvass four dentists before one was found willing to remove the nickel retainer. Within a few days, it was evident she was recovering. Within a month she was a normal young adult full of energy.

## CONCLUSION

This shows that although nickel may be cheap in the beginning, the subsequent problems created by nickel in the mouth far outweigh the few dollars saved. Millions of these are placed every year. TERF believes that dentistry should begin to show some respect for the developing, trusting minds of children, and their parents as well. The profession needs to find something non-carcinogenic and non-toxic to replace nickel.

It is in the best interests of society as a whole to leave the children alone to develop into happy, healthy young adults.

### 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.

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