



Proper dentistry and healthy teeth!

# Still Carrying Around This Potent Neurotoxin Next to Your Brain?<sup>1</sup>

This eye-opening video from the International Academy of Oral Medicine and Toxicology ([IAOMT.org](http://IAOMT.org)) is worth more than a thousand words when it comes to illustrating the very real danger of mercury fillings.

It contains a powerful visual demonstration of how mercury vapors are released into your oral cavity every time you chew, visit the dentist, or drink hot tea or coffee, for example.

And these mercury vapors continue to be released for *at least 1.5 hours* after each stimulation.

The poisonous vapors are odorless, colorless and tasteless, so you can't tell when it's happening. But you can be sure that if you have so-called "silver fillings" in your mouth, you're continuously exposed to mercury, which passes readily through cell membranes, across the blood-brain barrier, and into your central nervous system, where it can cause psychological, neurological, and immunological problems.



## **Amalgams = The Number One Source of Mercury Exposure**

Dental amalgams are the primary source of mercury exposure in Americans. A single dental amalgam filling releases as much as 15 micrograms of mercury per day. The average individual has eight amalgam fillings and could absorb up to 120 micrograms of mercury per day. For comparison, eating mercury-tainted seafood will expose you to about 2.3 micrograms per day -- and that is enough for scientists to call for a [worldwide warning!](#)

Unfortunately, while many have become well aware of the dangers of environmental mercury contamination, few are as well-informed when it comes to the dangers posed by dental amalgams.

Sadly, [only one in four people is aware that silver amalgams contain mercury](#), and the dental industry is capitalizing on that ignorance. Part of the problem is that the very name "silver fillings" seems to imply they are made of silver, a misdirection that has kept a good majority of consumers in the dark for a long time.

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<sup>1</sup> Articles taken from <http://www.mercola.com/>

Alas, amalgams consist of *more than 50 percent mercury*. When confronted about this, the industry response is that the term "silver" is meant to denote *the color*, not the constitution...

However, dentists have also been actively persuaded to keep this information under tight wraps, and they are under no obligation whatsoever to inform their patients about the mercury content of amalgam fillings. As recently as 2009, the [FDA ruled that no warning shall be issued to patients](#)—not even to young women and parents of young children—that the mercury from the amalgam fillings is a reproductive toxin and a neurotoxin, despite the fact that pregnant women and young children are at greatest risk from mercury toxicity.

## An Antiquated and Hazardous Dental Tool

In the [words of Charlie Brown](#), president of the World Alliance for Mercury-Free Dentistry, "*Amalgam is a primitive, polluting, 19th century product that began when physicians were sawing off legs. Medicine has since moved forward.*"

Unfortunately, this aspect of dentistry has not. The [American Dental Association](#) (ADA) continues to give amalgam (mercury) fillings their seal of approval, stating:

*"Used by dentists for more than a century, dental amalgam is the most thoroughly researched and tested restorative material among all those in use. It is durable, easy to use, highly resistant to wear and relatively inexpensive in comparison to other materials. For those reasons, it remains a valued treatment option for dentists and their patients."*

The height of irony is that dental amalgam is shipped as a hazardous material to the dental office, and any amalgam leftover is also treated as hazardous and requires special precautions to dispose of. Yet, most dentists will readily implant this hazardous material directly into your mouth, with assurances that it's perfectly safe and harmless!

## The Health Hazards of Mercury Fillings

Mercury is a potent neurotoxin that can damage your brain, central nervous system and kidneys, and mixing it with other alloys and placing it in your mouth does NOT all of a sudden render it harmless... Children and fetuses whose brains are still developing are at greatest risk, but anyone can be affected. Naturally, the more amalgams you have, the greater your risk of experiencing health problems as a result. In the featured video, they show that:

- When amalgam was placed in sheep, substantial quantities of mercury spread from the filling and accumulated in the animal's jaw, liver, kidney and stomach after just 30 days.
- The sheep's kidneys also dropped the ability to clear inulin by 60 percent—an indication of kidney malfunction.
- [Antibiotic-resistant dystrophic bacteria was discovered](#) in the primates' intestinal flora, within just two weeks of receiving mercury fillings.
- Mercury fillings damage the ADP-ribosylation of brain neuronal proteins.

- When amalgam fillings were placed in pregnant sheep, mercury was immediately transferred to the placenta and every part of the fetus. After birth, the offspring's mercury levels continued to rise as a result of ingesting the mother's milk.

Mercury is especially damaging to your central nervous system (CNS), and studies show that mercury in the CNS causes psychological, neurological, and immunological problems including:

Arrhythmias and cardiomyopathies	Personality changes and irritability	Blurred vision
Tremors	Headaches	Slowed mental response
Insomnia	Weakness	Unsteady gait

To make matters worse, mercury bonds very firmly to structures in your central nervous system. Unless actively removed, mercury has an extremely long half-life of somewhere between 15 and 30 years!

## **BEWARE! Amalgams Must Be Removed PROPERLY**

It should be clear that there's simply no such thing as a safe mercury filling. However, please do NOT make the mistake of having your amalgam fillings removed by a dentist who is not properly trained in safe amalgam removal. Doing so could expose you to tremendous health risks, due to the large amounts of mercury vapor being released during the removal process.

Research has shown that if you do not take proper safety precautions during the removal process, mercury levels in your blood can rise three to four-fold, which may result in acute toxicity. SO PLEASE ...

Make sure to use a so-called biological dentist that is trained in properly removing mercury fillings. Some things that need to be done to keep you (and your dentist) safe during the procedure include:

- Providing you with an alternative air source and instructing you not to breathe through your mouth,
- Using a cold-water spray to minimize mercury vapors,
- Putting a rubber dam in your mouth so you don't swallow or inhale any toxins,
- Using a high-volume evacuator near the tooth at all times to evacuate the mercury vapor,

- Washing your mouth out immediately after the fillings have been removed (the dentist should also change gloves after the removal),
- Immediately cleaning your protective wear and face once the fillings are removed,
- Using room air purifiers.

For a complete description of how to safely remove mercury amalgam, see this [PDF created by the International Academy of Oral Medicine and Toxicology](#) (IAOMT). The proper procedure is also explained in the featured video. Here are several sources to help you locate a dentist trained in biological dentistry:

- [Consumers for Dental Choice's Campaign for Mercury-Free Dentistry](#)
- [IAOMT's database](#)
- [International Academy of Biological Dentistry and Medicine](#)
- [The Holistic Dental Association](#)

Avoid making the same mistake I did 20 years ago when I had all my amalgams removed by a competent dentist who was an elder at the church I attended. Unfortunately, he was clueless about mercury toxicity and used no precautions and as result I got kidney damage. Additionally, I had to remove all the crowns he put in because they were metal. It was a very expensive and health damaging mistake.

I also suggest you [get healthy BEFORE having your fillings removed](#), as you want your detoxification mechanisms optimized prior to removal. To remove mercury that has already accumulated in your body, I highly recommend reviewing my [Mercury Detoxification Protocol](#), which details the things you can do right now to help rid your body of this toxin. If your mercury levels are seriously elevated, you should work with a knowledgeable health care practitioner to help you through the detoxification process.

## **Join the Fight to End the Use of Mercury in Dentistry!**

During this Mercury-Free Dentistry Awareness Week, I urge you to help spread the word and help educate others by sharing this article with your social networks. Together, we can END the use of toxic mercury in dentistry.

To their credit, half of the dentists in the US, the UK, Australia, and Canada no longer place mercury fillings; they always use mercury-free alternatives; they never use amalgam. Since they have made the transition to mercury-free dentistry, so could the other half. And Consumers for Dental Choice is here to make sure that they do.

Charlie Brown, who runs Consumers for Dental Choice, is headed to Nairobi in October to lead a worldwide delegation participating in the world mercury treaty negotiations. With him will be a team of dentists, consumers, attorneys, and scientists fighting to get amalgam into that treaty. With the world deciding whether we continue allowing mercury in children's mouths, much is at stake. Here's what you can do in your nation or state:

## Americans:

Our #1 problem is the Food and Drug Administration, which has partnered with the American Dental Association to cover up the mercury, to make you think you are getting silver instead of mercury in your mouth. The FDA intentionally conceals the warnings about amalgam deep in its regulation -- so parents will never see them. On its website, the FDA gives dentists the green light to continue to deceive consumers with the term "silver fillings".

"Americans are ready for the end of amalgam." This was the theme of the testimony to the U.S. Department of State on August 18 by former West Virginia state Senator Charlotte Pritt. Yes, Americans are ready. But FDA is not. So let's send them a message.

Nine months ago, FDA scientists advised the agency to disclose the mercury to all patients and parents, and to stop amalgam for children and pregnant women. Yet FDA sits – sits actually in the pocket of the American Dental Association – ignoring its own scientists.

Please write the Director of FDA's Center for Devices, Jeff Shuren, [jeff.shuren@fda.hhs.gov](mailto:jeff.shuren@fda.hhs.gov) Ask Dr Shuren why FDA continues to ignore the scientists and covers up the mercury from American parents and consumers. Ask when FDA is going to get in step with the world on mercury.

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## Californians:

Dr. Shuren is coming to San Francisco for a "town meeting" on September 22. We urge Northern Californians to attend. It will go from 8 am to 12 noon, at the Embassy Suites Hotel, San Francisco Airport (telephone 650.589.3400).

In Southern California, Consumers for Dental Choice is organizing a city-by-city attack on amalgam --- and needs volunteers. If you wish to help with the grassroots work of organizing for city council hearings, gathering petitions, and telephoning, volunteer by writing [announcements@toxicteeth.org](mailto:announcements@toxicteeth.org)

## Australians:

Your government, Aussies, is now in last place on the mercury treaty, asking the world to throw in the towel instead of working to phase out dental mercury. A great new group has started, Australians for Mercury-Free Dentistry, led by dentist Lisa Matriste and consumer activist Anna Priest.

We urge you to go to its website and join: <http://www.mercuryfreedentistry.com.au/>

 *Folks worldwide:*

If you aren't on that list, there's plenty to do – for example, Dominique Bally, an outstanding young advocate from the Ivory Coast, runs the Amalgam-Free Africa Campaign. If you want to help somewhere, anywhere, and there's nothing on the list above for you, write Charlie Brown, [charlie@toxicateeth.org](mailto:charlie@toxicateeth.org)

Consumers for Dental Choice is working to protect your health – and the health of your children – all around the world. Charged with this important mission at state and local, national, and international levels, Consumers for Dental Choice would appreciate your help! Please consider a donation to Consumers for Dental Choice, a 501(c)(3) non-profit organization dedicated to advocating mercury-free dentistry.

*Thank you for supporting mercury-free dentistry!*

# **Banned for pets and farm animals ... But okay for YOU and your CHILDREN?<sup>2</sup>**

Dental amalgams have been in use since the American Civil War. They are an anachronism that has been perpetuated by dental industry patents, and there's a conspiracy of silence that seeks to keep the 75 percent of Americans who are ignorant about that fact that amalgam fillings are actually 50 percent mercury.

As stated by Charlie Brown, who founded the Consumers for Dental Choice in 1996:

*"The only way amalgam could be marketed was to hide the mercury. The only way you could hide the mercury is to have a coordinated effort to make sure that nobody blew the whistle. At the start of our movement, we confronted an iron triangle; three major forces: The American Dental Association that profit from a system of consumer ignorance; The Food and Drug Administration that sits in the hip pocket of the American Dental Association... and the state dental boards, who were the enforcers who told dentists, "You have to be silent."*

*The American Dental Association had a gag rule and said, "Don't say the M word. Don't tell people about the mercury; don't say that it's toxin, or there will be consequences." The consequences were the state dental boards pulling licenses of dentists all through the 1990s and threatening to pull the licenses of many more.*

Fortunately in the last 10 years nearly half of all US dentists have recognized the dangers of amalgams and have stopped using them in their practice. But the remaining 50 percent of dentists still use them, and that currently accounts for between 240-300 tons of mercury entering the market every year. In the United States, dental offices are the second largest user of mercury – and this mercury eventually ends up in our environment by one pathway or another.

## **Did You Know ... ?**

Dental amalgam can cause far-reaching problems, such as:

- Exposure to mercury, the most toxic and more vaporous of the heavy metals, can harm your kidneys, and permanently damage your child's developing neurological system, and even kill your unborn child in the womb.
- To implant amalgam, a dentist drills out healthy tooth matter in order to carve the crater necessary for amalgam placement – a primitive process that irreversibly weakens tooth structure. With a damaged tooth structure and with a metal-based filling that expands and contracts with temperature changes, teeth with amalgam are much more likely to crack years later, necessitating additional dental work.

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<sup>2</sup> Articles taken from <http://www.mercola.com/>

- Amalgam is a workplace hazard, especially for young female dental workers who experience an elevated rate of reproductive failures.
- Dental mercury is the number one source of mercury in our wastewater, so dentists are handing the clean-up bill for their pollution to taxpayers and water ratepayers.

***Why would a primitive, pre-Civil War polluting product that is 50 percent mercury and cracks teeth still be going into your mouth?***

Amalgam was introduced in the Civil War era by the new American Dental Association, which won a political battle with the physicians of the mouth, who said using mercury in oral health care is malpractice. Florida dentist James Hardy, in his book *Mercury Free*, refers to the creation of amalgam and the creation of the American Dental Association as the "twin-birth."

## **Why Do Half of All Dentists Still Use Mercury Amalgam?**

We now know the risks, so why do half of dentists continue to use the filling material used by their great-grandfathers? Is it the price? No. The alternatives to amalgam are comparably priced – or even less expensive. Amalgams cost more than glass ionomers, which can be applied via a mercury-free technique called Atraumatic Restorative Treatment (ART). ART does not require drilling; only hand instruments, and is virtually painless.

Amalgam also cost the same as composite fillings (also called resin) for smaller cavities, although composite can cost a few bucks more for large cavities. But when you add the horrid environmental and health catastrophe caused by amalgam, of course, amalgam's cost to society is much higher ...

### **The answer is: Profits!**

Amalgams are quick and easy. Dentists make more money per chair per day implanting mercury. For factory-style dentistry, where the teeth represent dollar signs instead of part of a human being, dentists drill, fill, and bill. The term "drill, fill, and bill" is a joke aspiring dentists learn in dental school. Only the joke is on us and our children: they count their money, and we have a vaporous neurotoxin implanted an inch from our brains or our children's brains.

And of course, since amalgam damages tooth structure and cracks teeth, pro-mercury dentists will continue to profit from amalgam long after its initial placement. Teeth with amalgam require more dental work in the long term. So for the pro-mercury half of dentists, *amalgam is the gift that keeps on giving.*

# How **Can** Pro-Mercury **Dentists** Compete with **Toxic-Free** Dentists?

The pro-mercury dentists' trade group, the American Dental Association, has pulled every lever with Congress, the Food and Drug Administration, the state dental boards and the corporate media to cover up amalgam's mercury.

1. First, the ADA popularized the deceptive term "silver fillings," so consumers would think amalgam is made mainly of silver (actually, it has twice as much mercury as silver).
2. Second, it mounted a no-holds-barred campaign to silence competitors and critics of 19th century dentistry, especially the courageous dentists who realized their leadership was so fundamentally in error.

According to its own self-description, the American Dental Association appears focused more on promoting products – and getting paid handsomely to do so – than in promoting its dentist members. At the bottom of its news releases, the ADA has frequently written:

*"The not-for-profit ADA is the nation's largest dental association, representing more than 155,000 dentist members. The premier source of oral health information, the ADA has advocated for the public's health and promoted the art and science of dentistry since 1859. The ADA's state-of-the-art research facilities develop and test dental products and materials that have advanced the practice of dentistry and made the patient experience more positive. The ADA Seal of Acceptance long has been a valuable and respected guide to consumer and professional products. For more information about the ADA, visit the Association's Web site at [www.ada.org](http://www.ada.org)."*

Of the five sentences, one is about members, and three about the ADA's product endorsement system. The "ADA Seal of Acceptance" is a pay-to-play system in which companies pay the ADA to secure their endorsement. By contrast, the American Medical Association will not do pay-to-play endorsements of products; it is considered unethical.

The ADA owns two patents on amalgam, patent numbers 4,018,600 and 4,078,921. They have expired, but while they were in effect the ADA went to incredible lengths to wipe out mercury-free dentistry and quash dissent from the emerging critics of mercury-based dentistry.

## The Role of the **American Dental Association**

How does the ADA keep pro-mercury dentists in business – and keep profits rolling in for the amalgam makers? Here's how:

### The "silver fillings" deception

Gold fillings are called gold because they are made of gold. Seizing on the comparison, the ADA brochures promoting mercury fillings called them "silver fillings."

The ADA claims the term means "silver-colored," but who are they fooling? In my dictionary, the first definition of "silver" is the element. The color is the fourth definition, behind the element, medium of exchange, coins, and eating utensils.

Consumers for Dental Choice, with its Campaign for Mercury-Free Dentistry, fought back against the "silver fillings" deception. In California these advocates launched the term "say the M word," which led to fact sheets on amalgam in that state and several other states and cities. These fact sheets, which dentists are required to hand their patients, inform the public that amalgam is mercury.

## The gag rule

When its amalgam patents were in effect, the ADA used its power to block the emergence of mercury-free dentistry by adopting a rule of conduct prohibiting dentists from discussing mercury with their patients:

*"Based on available scientific data, the ADA has determined that the removal of amalgam restorations from the non-allergic patient for the alleged purpose of removing toxic substances from the body, when such treatment is performed solely at the recommendation or suggestion of the dentist, is improper and unethical."*

Yes, the ADA said it is *unethical* for a dentist to tell the truth to his patients!

Thanks to an extraordinary campaign by Consumers for Dental Choice, the gag rule is now just about defunct. Working with state lawmakers, with civil liberties organizations, with state Attorneys General (Charlie Brown, head of the consumer group, used to be one), and with an outraged citizenry, the movement for Mercury-Free Dentistry succeeded in the legislatures, in the courts, and in the courts of public opinions to restore free speech rights to dentists.

## Rent-a-Congressman

How about the political process? We do have friends in Congress, Republicans like Congressman Dan Burton and Senator Mike Enzi, and Democrats like Congressman Dennis Kucinich and Congressman Gregory Meeks. But they are few and far between.

The ADA has been particularly devious in the halls of Congress. It doesn't instruct its minions in Congress – members from both political parties – to write bills, conduct hearings, nor even make speeches. Instead, *the ADA buys silence and inaction from Members of Congress*. Sound familiar? It was the same tactic used by Big Tobacco for several decades.

At the state level, it's the same; in some state capitals, the ADA has had the single largest political action committee. The tactic is the same: Do nothing, say nothing, and cash the PAC money.

## Strong-arming the children of America

In the Maine legislature, money is not king. The state has fair practices that limit outside money and create a level-playing field for unfunded candidates. Unable to buy their way into power, the ADA resorted to outright strong-arming. A bill was gaining momentum in the Maine Legislature to phase out amalgam. The ADA struck back, threatening to deny treatment for Maine children if their dentists could not use their favorite filling material. If amalgam were banned, the ADA threatened:

*"The result will be treatment delayed, **treatment denied**, and treatment never being sought. That is not a situation the dentists of Maine, the United States, or our policymakers can be willing to accept."*

Several years later, the ADA's Pennsylvania chapter pulled the same power play against children with disabilities. A fact sheet law in the City of Philadelphia meant parents are now made aware of amalgam's horrid health risks to their children. In inner-city clinics, parents were insisting on mercury-free dentistry – the same as parents do in the affluent areas. But to the Pennsylvania Dental Association, inner-city parents were supposed to take the crumbs their dentists offered: mercury fillings or no fillings.

A dental association leader was demanding that parents of children with disabilities sign a release allowing him to put mercury fillings in their children; when they refused, he denied all treatment. No tooth cleanings. Nothing... Suburban parents might go to a dentist down the street, but for inner-city minority parents of children with disabilities, finding a dentist is not easy – and this dentist knew it. Incredibly, the Pennsylvania Dental Association – which claims to support choice for children in the suburbs – endorsed the position of this dentist.

Fortunately, the story did not end there. This callous power play endorsed by the Pennsylvania Dental Association – denying dental care for children with disabilities unless they agreed to mercury fillings – caught the attention of the disability rights community. The Pennsylvania Governor's Advisory Commission on Disabilities enacted a resolution condemning this ADA chapter.

# The **surprising 32-year scandal** that's kept this **toxic substance** in your head!<sup>3</sup>

The United States Food and Drug Administration (FDA), once the world's "gold standard" for food, drug, and device regulation, has evolved from industry regulator to industry captive.

Political scientists are not surprised. The evolution from tough regulator to passive regulator to *industry captive* is a pattern in Washington. Unless an agency engages in a major system of reinvigoration, the spiral continues. But the FDA seems comfortable being the hand-maiden for industry; it has brought big bucks to the agency and lucrative jobs after time at the FDA.

The big bucks are in the FDA's pay-to-play approval system. Drug companies pay seven-figure amounts into FDA coffers to gain approval of their drugs. FDA staff knows that the cash means higher salaries and more perks in the agency budget.

The drug companies know the high fees prevent small competitors with good ideas from getting their products to market. The coziness between the FDA and major drug and device companies gets tighter, while innovative entrepreneurs are shut out and the public loses twice: good drugs aren't being considered, and controversial drugs are rubber-stamped.

## **FDA: Captive of Corporate America**

Another bitter legacy of federal regulation is the "revolving door," where insiders bounce between well-paid positions in industry, to high-ranking FDA positions that regulate that industry.

Those in the political party out of power hold cushy jobs awaiting their return to power, at which point – in the game of Washington musical chairs – those in the party leaving power in turn take the high-paying jobs in industry. The current FDA Commissioner, Margaret Hamburg, coming to FDA from Henry Schein, Inc., the largest seller of dental products and a major seller of medical products too, is a perfect example.

Hamburg was a high official in the Clinton Administration, so Schein's CEO Stanley Bergman, an active Democrat, tapped Hamburg for the light work of being a board member during the Bush II years, paying her millions of dollars to likely sit in meetings and file occasional reports.

When Bergman's party returned to power in 2009, he escorted Hamburg back through the revolving door – as Commissioner of the world's most powerful food and drug regulator, the FDA.

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<sup>3</sup> Articles taken from <http://www.mercola.com/>

## **FDA Covers Up Amalgam's Mercury from Consumers, for 32 Years**

The dirty secret of conventional dentistry is this: those "silver fillings" aren't silver. They are mainly mercury – and mercury, of course, is a virulent neurotoxin that can kill babies in the womb, can cause permanent brain damage to children, and can cause irreversible kidney damage in adults (among many other things).

When industry is engaged in a cover-up of a health problem, the solution for the past century in America has been to turn to the U.S. FDA. But on amalgam, like on many health issues affecting our lives in recent years, FDA has been AWOL – focusing on blocking Americans' access to products Americans want and need and which are not harmful, instead of doing its legal duties.

In the case of amalgam, the violation of law was flagrant and continuing – and ultimately resulted in sharp language and a direct order from a United States federal judge. In 1976, Congress directed the FDA to classify (determine the risk of) every medical device. Dental fillings are a medical device. The FDA proceeded to classify all filling materials except the most common one – and the most controversial one – mercury amalgam. Despite letters, petitions, Congressional hearings, and a lawsuit, the FDA refused to budge. The FDA had no intention of doing what, by law, it was required to do. Why?

Because by classifying amalgam, the FDA would have to address the dirty little secret of dentistry --they FDA would have to tell the American people that amalgam is mainly mercury. So instead of letting parents know that their child is getting a dose of the most toxic and the most volatile of the heavy metals, the FDA stood as the silent partner of the pro-mercury American Dental Association. For 32 years, from 1976 to 2008, the FDA defied the law. And they would still be doing so had not Charlie Brown and Consumers for Dental Choice sued them.

In 2008 Charlie Brown sued the FDA. United States District Judge Ellen Huvelle convened a hearing, and demanded to know why the FDA was refusing to classify amalgam. When the FDA's lawyer said the agency was working on it, the Judge was incredulous -- and ordered the parties into mediation to set a date to classify.

Since the FDA had not really started its work, and since its rule was still in the public comment phase, requiring clearance of all legal hurdles would require over a year. Hence, the FDA agreed to re-write its website in addition to classifying by August 2009. FDA Associate Commissioner Randall Lutter and Charlie Brown negotiated the website line by line, and, for the first time, the FDA issued this frank and serious warning about amalgam: *Dental amalgams contain mercury, which may have neurotoxic effects on the nervous systems of developing children and fetuses."*

## **FDA's New Commissioner Enters from Boardroom of Nation's #1 Seller of Dental Amalgam**

During the time between the court settlement and final action, enter Margaret Hamburg as Commissioner – coming straight from the boardroom of America's largest seller of amalgam. To get appointed, Hamburg was required to sign an agreement promising:

1. To sell her Schein stock and stock options,
2. Not to participate in regulator matters affecting Schein while owning these options,

Sign she did, but she apparently had her fingers crossed. Selling her stock, Hamburg retained her stock options, which in a few weeks gained from being "under water" (no value) to having market value. Promising to cut her ties with Schein, she allegedly continued regular correspondence with Schein's general counsel on her private e-mail. Charlie Brown wrote her June 1, 2009, to inquire whether she had recused (disqualified) herself from working on the amalgam rule.

Not even answering, she convened a meeting with the American Dental Association's best friend at the FDA, dentist Susan Runner. On July 1, in a meeting whose notes are heavily expunged from public records requests, Henry Schein alumna Hamburg and pro-amalgam dentist Runner put together a disgraceful rule on amalgam, one that allowed continued concealment of the mercury, buried the warnings for children and unborn children so deep in the rule no one would find them, and allowed Runner to be the FDA's spokesperson to proclaim amalgam safe.

At the end of July, Runner unveiled this monstrosity of a rule, along with a website that concealed all the language that Brown and Lutter had agreed to (Lutter by then having been shipped to another agency by Hamburg). Immediately after Runner's announcement, Schein's general counsel wrote Hamburg that Schein is "indebted" to her for her work as Commissioner.

### **"Unprecedented" Public Outcry Against the FDA's Amalgam Rule**

Consumers worldwide reacted harshly to the FDA's decision to continue the amalgam cover-up. Such a massive number of letters, e-mails, telephone calls, and faxes were generated that a leading journalist in the trade press, Jim Dickinson of *FDA Webview*, wrote: *"No final rule in FDA's modern history, or perhaps ever, has attracted this kind of organized opposition."*

The American Dental Association sought help from the FDA to overturn state and local fact sheets that plainly warn of amalgam's risks, but Consumers for Dental Choice turned back a second assault on our right to know. In early 2010, in a dramatic confrontation in Philadelphia, the FDA backed off any suggestion it sought to weaken that city's fact sheet – and in fact asked the city to hold off acting because the FDA was considering its options.

The FDA threatened to retaliate against the leader of this grassroots opposition; its chief press officer wrote Commissioner Hamburg and Deputy Commissioner Joshua Sharfstein that the FDA needed to mount an "end game re: [Charlie] Brown."

## Enter **Negotiations** for a **Worldwide Treaty** Addressing **Mercury**

Things turned our way in 2010. The nations of the world began a series of meetings to hammer out a treaty addressing all mercury. To its great credit, the United States not only was an active participant, but a leader as these negotiations began – negotiations to address all major uses of mercury, including amalgam. With the Department of State, the Environmental Protection Agency, and the White House Council on Environmental Quality all seeking ways to phase out or at least reduce mercury in our society, the FDA became odd man out.

A noted attorney, Ellen Brown, called the breach between the FDA's protection of amalgam and the Obama Administration's stand the "Mercury Mischief." Her article in the *Huffington Post* was headlined: "[As Obama Warns of Hazards, The FDA Approves Mercury Dental Filling.](#)"

In June 2010 the FDA retreated, announcing it would reconsider the amalgam rule it had issued only 10 months earlier. The FDA announced it would convene a scientific panel in December to determine what changes need to be made.

## December 2010 Hearings

Two days of testimony that were alternatively scientific and emotional were utterly convincing, even to scientists handpicked by the FDA. With no dissent, they recommended that the FDA promptly:

1. Make sure that all consumers and all parents know that amalgam is mainly mercury,
2. Stop amalgam use for children and pregnant women,

As panelist Dr. Suresh Kotagal – a pediatric neurologist at the Mayo Clinic – summed it up, there is "no place for mercury in children." Unprecedented press coverage accompanied these hearings, with every network and most major newspapers writing stories that the FDA is determining the health risk of amalgam.

## FDA Town Meetings

But the FDA still did not act. Instead, Jeff Shuren, director of its Center for Devices (amalgam is a device), organized three "town meetings" in 2011 to hear concerns about FDA policies. At both Dallas and Orlando, the turnout was overwhelmingly about amalgam, and about the FDA's cover-up. Again, major press coverage about FDA inaction accompanied these meetings.

The third "town meeting" will be in San Francisco on September 22; if you live in northern California and would consider going, write Charlie Brown, [charlie@toxiceeth.org](mailto:charlie@toxiceeth.org)

On July 29 Director Shuren signaled he may act soon. In a letter to those who had petitioned FDA to act, Shuren wrote:

*"We agree that the Panel [of scientists in December] raised issues concerning uncertainties with previous risk assessments on mercury vapor and sensitivities in certain populations to mercury released from dental amalgam. Note that we are currently considering our regulatory options for determining what steps the agency will take to address these concerns."*

# Are you being **tricked** into having this **neurotoxin** placed next to **your brain**?<sup>4</sup>

Mercury is an incredibly potent neurotoxin; it doesn't take much to cause serious damage because it's an absolute poison. If you were to take the amount of mercury in a typical thermometer and put it in a small lake, that lake would be closed down due to environmental hazards. Yet, amounts much higher than that are readily put into your mouth if you receive a "silver" amalgam dental filling, as the majority of material in the filling is actually mercury.

## **Amalgam or "Silver" Fillings are Actually Mercury Fillings**

It's estimated that 75 percent of Americans are ignorant about that fact that amalgam fillings are actually 50 percent mercury, and this is no accident. The American Dental Association (ADA) popularized the deceptive term "silver fillings" so consumers would think amalgam is made mainly of silver when actually it has twice as much mercury as silver. As Charlie Brown, who founded the Consumers for Dental Choice in 1996, stated:

*"The American Dental Association is basically a gigantic fraud agent when it comes to amalgam because for years they promoted amalgam as silver fillings and they're not. It's a gigantic consumer fraud perpetuated by thousands of dentists in the United States who use the word silver fillings when by far the most prevalent material is mercury.*

*The FDA defends amalgam and says the word silver is because they are silver colored. The FDA knows better. They know they are perpetuating a lie. The Food and Drug Administration has basically been the agent of the American Dental Association in protecting the use of mercury fillings.*

*That protection continues even though two scientific panels in a row – these are scientists handpicked by FDA itself – the scientists have come in and to the surprise of the FDA staff have told the FDA staff, you're wrong. You've got to stop amalgam use for pregnant women. You've got to stop amalgam use for children. You've got to do both of them now and you've got to make sure that every consumer knows and every parent knows that amalgam is not silver, that it's mercury."*

Not only are most Americans unaware that silver fillings contain mercury, but many are also unaware of what risks that poses to your health. Once you get a mercury filling, your risk continues because every time you chew, the [mercury releases a vapor into your mouth](#) that deposits slowly in your tissues over time and does not disappear.

## **What are the Health Risks of Mercury Fillings?**

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<sup>4</sup> Articles taken from <http://www.mercola.com/>

The metallic mercury used by dentists to manufacture dental amalgam is shipped as a hazardous material to the dental office. Any amalgam leftover is also treated as hazardous and requires special precautions to dispose of, as it should because it can cause wide-ranging damage to your health. Charlie Brown states:

*" ... mercury is a reproductive toxin. Meaning, of course, it can harm your unborn baby. It's a neurotoxin meaning it can harm your brain. It's a nephrotoxin meaning it will harm your kidneys. There is no safe level of mercury. This dentist is playing Russian roulette with your child or you if he or she is giving you a mercury filling."*

Virtually any kind of stimulation can cause these fillings to release mercury. Eating, drinking, brushing your teeth, grinding your teeth, chewing gum, anything. If you want to see the vapors released for yourself, [watch this shocking video](#).

Mercury vapor from the amalgams passes readily through cell membranes, across the blood-brain barrier, and into your central nervous system, where it causes psychological, neurological, and immunological problems. Children and fetuses, whose brains are still developing, are most at risk, but really anyone can be impacted.

Further, dental mercury is the number one source of mercury in our wastewater, so dentists are handing the clean-up bill for their pollution to taxpayers and water ratepayers. And this mercury ends up in your food supply, where it can cause continued damage to your health if you eat fish and other contaminated seafood.

## **Does the American Dental Association Want You to Eat Candy?**

You may be aware that poor diet, including eating sugar, is the primary reason why people develop cavities in their teeth. The ADA puts out propaganda that they want you to eat less sugar, and hence get fewer cavities, but in reality they have maintained ties with makers of some of the most detrimental products to your teeth, namely soda! Brown states:

*"The American Dental Association wants you to get more cavities. They were taking a million bucks a year from Coca Cola until they were discovered. They tell you they want to reduce cavities. They want more cavities. The World Dental Federation takes money from the Mars Candy colossus which is the Wrigley, the Mars candy bar, the Snickers and all that. They take money from them.*

*Their propaganda is we want you to eat less sugar. But the candy companies and Coca Cola would not be shoveling money to the American Dental Association and the World Dental Federation if they really thought the ADA believed them. You never see the ADA doing public service out saying, "eat less, don't eat candy, don't eat sugar" because it's good for business. The more sugar, the more money and that's why amalgam is used."*

Amalgam was introduced in the Civil War era by the new American Dental Association, which won a political battle with the physicians of the mouth, who said using mercury in oral health care is malpractice. Florida dentist James Hardy, in his book Mercury Free, refers to the creation of amalgam and the creation of the American Dental Association as the "twin-birth."

The truth is, amalgam is a primary money-maker for conventional dentists; amalgams are quick and easy, and dentists make more money per chair per day implanting mercury.

## **50 Percent of Dentists are Now Mercury-Free**

We are on the brink of prompting real change in the fight for mercury-free dentistry, and this is largely because of readers like you who have taken the time to write to the FDA to let your voice be heard on this issue. Consumers for Dental Choice and World Alliance for Mercury-Free Dentistry, of which Charlie Brown is president, have also been major catalysts for change. They played an integral role in allowing dentists the freedom to tell the truth that there is mercury in the fillings.

Prior to that the American Dental Association actually had a gag order of sorts that threatened to pull the licenses of dentists who mentioned the "M" word (mercury) to their patients! At that time, in the 1990s, only 3 percent of dentists were mercury-free.

Brown and his organizations took the matter to the courts and said dentists have a right under the United States constitution to talk to their patients, to advertise, and to tell the truth – and they won. Now dentists can say the "M" word, and as an extension of that 50% of dentists are mercury-free! This is one of the ways you can vote with your pocketbook and have enormous economic and environmental influence. [Find a mercury-free dentist!](#) As Brown states:

*"It's just time for dentistry to realize the amalgam era is over. If they don't realize it, the world needs to say, we need to get rid of it but the starting point is with your dentist and your office to say, I know that amalgam is mercury. Do not give it to my child. Do not give it to me. We will not tolerate it. Frankly, you shouldn't go to a dentist that still uses mercury fillings. You should go to a mercury-free dentist.*

*Amalgam is a primitive polluting pre-Civil War product. It had no business in 20th century dentistry and for goodness sake's we're in the 21st century now. I call on the dentists of America to wakeup. But if they won't wake up, if they insist on continuing to put mercury into children's mouths please don't give that dentist any money. Don't go to that dentist anymore."*

# Good news dentistry for reversing dental decay<sup>5</sup> ...

Most people regard a cavity, or even a [root canal](#), as a minor inconvenience. But if your tooth has begun to decay to the point that a cavity is evident, this is a major sign that disease-causing bacteria has begun to overpower your immune system and your body.

In fact, your teeth are constantly under attack from the foods you eat, the beverages you drink and bacteria, so much so that your body constantly works at repairing small amounts of damage to the enamel of your teeth. If you're healthy, this should be enough to prevent cavities from forming, but if the bacteria overwhelm your system, dental decay can result.

Specifically, cavities form on your teeth when the acid-producing bacteria in plaque dissolve the mineral in your teeth. While microscopic at first, the cavities can increase in size and number until the decay must be drilled out and repaired with a filling or crown, a [root canal performed](#), or the tooth removed. But now researchers have developed a paste that may actually stop and even *reverse* this dental decay process, helping your body to rebuild your teeth from the inside out.

## Is This the **End of the Dentist's Drill?**

Researchers at the University of Leeds have developed a peptide-based fluid known as P 11-4. When applied to a decayed tooth, P 11-4 forms a gel-like scaffold that attracts calcium to help rebuild your tooth. As the [University of Leeds reported in a press release](#):

*"In practice, this means that when applied to the tooth, the fluid seeps into the micro-pores caused by acid attack and then spontaneously forms a gel. This gel then provides a 'scaffold' or framework that attracts calcium and regenerates the tooth's mineral from within, providing a natural and pain-free repair."*

When the fluid was tested on a small group of adults with early tooth decay, results showed P 11-4 successfully reversed the damage and regenerated tooth tissue. This is the latest data from what appears to be a promising new dental strategy. Similarly, in 2008 scientists were also able to [rebuild dentin and remineralize some parts of the teeth](#) with the help of a calcium-containing solution of ions.

Regenerating your tooth from within is a far superior option to the "drill-and-fill" model currently used today, and it appears to be a technique that may soon be widely available in dentists' offices. Aside from the obvious benefit of tooth regeneration while sparing people the pain and fear of having a tooth drilled, this new procedure could virtually obliterate the use of toxic mercury fillings ([if our efforts don't get them banned first!](#)) ...

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<sup>5</sup> Articles taken from <http://www.mercola.com/>

## If You Have a Cavity, **Resist This Archaic Dental Procedure**

The very process of "filling and drilling" a cavity is a rather outdated practice, but so far there has been no other practical solution to remove the damaged areas of a tooth and "repair" it. But, adding insult to injury, about 50 percent of U.S. dentists are [still using mercury to fill cavity-ridden teeth](#) -- even though exposure to mercury, the most toxic and more vaporous of the heavy metals, can harm your kidneys, permanently damage your child's developing neurological system, and even kill your unborn child in the womb!

To implant amalgam, a dentist drills out healthy tooth matter in order to carve the crater necessary for amalgam placement -- a primitive process that irreversibly weakens tooth structure. With a damaged tooth structure and with a metal-based filling that expands and contracts with temperature changes, teeth with amalgam are much more likely to crack years later, necessitating additional dental work.

Amalgams are quick and easy. Dentists make more money per chair per day implanting mercury. For factory-style dentistry, where teeth represent dollar signs instead of part of a human being, dentists drill, fill, and bill. The term "drill, fill, and bill" is a joke aspiring dentists learn in dental school. But when it comes to mercury - it's no joke. Please realize that mercury vapor from amalgams passes readily through your cell membranes, across the blood-brain barrier, and into your central nervous system, where it can cause psychological, neurological, and immunological problems.

Yet, even though it may be a few years before P 11-4 and other tooth-regenerating fluids are widely available, there are solid alternatives to mercury fillings available right now. One of the most popular is resin composite, which is made of a type of plastic reinforced with powdered glass. Unlike amalgam, resin composite does not require the removal of significant amounts of healthy tooth matter. Over the long term, composite preserves healthy tooth structure and actually strengthens teeth, leading to better oral health and less extensive dental work over the long-term.

A lesser-known alternative is atraumatic restorative treatment (also called alternative restorative treatment or ART), which relies on adhesive materials for the filling (instead of mercury) and uses only hand instruments to place the filling, making it particularly well-suited for rural areas of developing countries.

## **Preventing Cavities 101: The Secret to Healthy Teeth**

Tooth regeneration is certainly a step up from using toxic substances like mercury to fill your teeth. But do you know what's even *better* than tooth regeneration? Protecting your teeth and preventing cavities in the first place. When it comes to oral hygiene and preventing cavities, there's a virtual war going on. If you listen to conventional health agencies' and your dentist's advice, you may still believe that fluoride is the answer. Think again!

The only way you can believe this [misguided advice is if you completely ignore the science](#). Good oral health and strong, healthy teeth are NOT the result of drinking fluoridated water and brushing your teeth with fluoridated toothpaste. Rather it's all about your diet.

Dr. Weston A. Price, who was one of the [major nutritional pioneers of all time](#), completed some of the most incredible research on this topic back in the 1900s, and it is still very much relevant today. What he found, and documented in his classic book [Nutrition and Physical Degeneration](#), is that native tribes who were eating their traditional diet had nearly perfect teeth, and were almost 100 percent free of tooth decay -- and they did not have toothbrushes, floss, toothpaste, or root canals and fillings.

But when these tribal populations were introduced to sugar and white flour, guess what happened ... their health, and their perfect teeth, rapidly deteriorated. By [avoiding sugars and processed foods](#), you prevent the proliferation of the bacteria that cause decay in the first place.

Most people whose diet includes very little sugar and few processed foods have very low rates of tooth decay. So the simple act of limiting, or eliminating sugar, and avoiding processed foods -- along with regular cleanings with your [natural mercury-free dentist](#) -- will ensure that your teeth and gums stay healthy and cavity-free naturally.

# Just 1 Single Drop of This Would Poison a Lake Enough to Ban Fishing on It<sup>6</sup> ...

See YouTube video:

[http://www.youtube.com/watch?feature=player\\_embedded&list=PL4889B8B3827EA934&v=s9RXDWoMnmc](http://www.youtube.com/watch?feature=player_embedded&list=PL4889B8B3827EA934&v=s9RXDWoMnmc)

I am excited to have the opportunity to interview Charlie Brown, one of my legal heroes in the battle against mercury. [Charlie has been a major force in the ground roots movement against mercury amalgams.](#)

Although the battle with the FDA rumbles on, we are whittling away at the barriers to progress, "hitting them upside the head" repeatedly with facts they can't deny. And we have no plans of letting up!

This issue is just too important, too critical to your health and the long-term health of your children. Mercury is a potent heavy metal toxin that can poison your brain, central nervous system and kidneys.

It is one serious toxin and it personally severely damaged my kidneys when I had my amalgam fillings improperly removed 17 years ago. Children and fetuses, whose brains are still developing, are most at risk, but really anyone can be impacted.

In fact, just one drop of mercury in a lake would poison the lake to the extent that the Environmental Protection Agency (EPA) would ban it from fishing. Yet, unbelievably, they let you carry around a mouthful of this toxic metal and would have you believe it somehow loses its capacity to do harm if installed in your teeth. The average person in the U.S. has eight amalgam fillings. Clearly, this is no small problem and calls for urgent action.

## **U.S. Lags Behind, While the World Moves Forward on Banning Mercury**

The FDA has long been the world's number one protector of mercury fillings, and the U.S. is lagging behind the rest of the world, and even behind some third world countries, in protecting its citizens from this toxic product:

- Denmark, Norway and Sweden have essentially banned amalgams.
- There are 5,636 hospitals in developing countries that are committed to or already mercury-free. The majority of these are in the Philippines, India and Argentina.
- Canada advised dentists to stop placing amalgam in children and pregnant women in 1996 (although [Canada appears to be regressing on this issue now](#), thanks to the recent position taken by its Chief Dental Officer Peter Cooney).

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<sup>6</sup> Articles taken from <http://www.mercola.com/>

In the United States, four out of five dental specialists still use amalgams, and the material continues to be endorsed by the American Dental Association. The FDA's determination to protect mercury fillings has no doubt had something to do with its commissioner. [FDA Commissioner Margaret Hamburg has an egregious conflict of interest on amalgam](#), yet participated in the rulemaking that led to FDA's disappointing ruling in 2009.

Hamburg entered the FDA through the revolving government/private industry door after allegedly making millions as the director of Henry Schein Inc., the largest seller of dental amalgam (mercury fillings). [The FDA has a history of stacking the deck](#) of its advisory panels so that the pro-industry, pro-mercury position is upheld. Yet, most recently, the U.S. State Department has called for a "phase down" of mercury fillings, followed by an "eventual" phase out. The State Department's submission to the Mercury International Negotiation Committee also called for:

- Educating patients and parents (about amalgam) in order to protect children and fetuses.
- Training of dental professionals on the environmental impacts of mercury in dental amalgams.

This is a very encouraging turn of events that brings us one step closer to mercury-free dentistry for all. Even though the FDA signed on to this statement internationally, they have yet to change the rule at home, *so your support IS still needed*.

## **Amalgams Frequently Used as They Generate More Profit**

According to a [Zogby poll](#), 77 percent of consumers would willingly pay more to opt out of dental amalgam in favor of safer dental fillings. If this opt-out occurred, it would effectively reduce the number of patients your dentist could funnel through his office on any given day.

Mercury fillings are quick and easy to put in. It isn't that composite materials cost more—they just take longer to make. Not only can dentists buzz through a lot of mercury amalgam fillings each day, but these amalgams also require the destruction of quite a lot of good tooth matter, which sets you up for more dental problems down the road... meaning, more dental work, including root canals. It's the gift that keeps on giving, from a dentist's perspective.

So, the perceived profitability of mercury fillings has led to what Charlie Brown calls a "drill, fill and bill" mentality. Fewer patients coming through the door each day isn't the only issue striking fear in the heart of your mercury-loving dentist. Many dentists are also wary of the possibility that thousands, if not millions, of lawsuits could arise if they—or the FDA—admitted to the damage mercury amalgams have done to public health. Litigation and class action lawsuits could deliver an incapacitating blow to the dental industry.

If we are to gain the support of government regulators and the American Dental Association (ADA), then some protection from liability must be part of the package. This is why the environmental approach is ideal, because it offers some insulation from liability on the part of the dental industry, hopefully making new regulations a bit more palatable and easier to get passed.

## Mercury Fillings and the Environment

The ADA and other pro-mercury proponents have always claimed that mercury fillings are a very cost effective way to treat dental decay. But is this true? NOT when you examine the true cost to human health and the environment.

Mercury from dental offices is actually the largest source of mercury found in wastewater. According to an article by Michael Bender (co-founder of the Mercury Policy Project), at least 40 percent of mercury flowing into municipal water treatment plants comes from dentist offices! And urban water treatment plants are not set up to remove it, so eventually this [dental mercury will end up in the fish on your dinner plate](#). The risk doesn't end there, however.

Mercury fillings in the teeth of someone who dies actually pose a risk to the living. Emissions from the combustion of mercury fillings during cremation are a significant contaminator of air, waterways, soil, wildlife and food. Seven to nine metric tons of mercury per year escapes into the atmosphere during cremations, and it is estimated that, left unchecked, crematoria will be the largest single cause of mercury pollution by 2020. Sweden now mandates that all mercury fillings be removed prior to cremation for this very reason.

When you factor in **environmental** costs and **cleanup** costs, **amalgam** is actually the **MOST EXPENSIVE** dental material in the world!

It makes perfect sense to approach legislative change regarding amalgams from the environmental perspective, which is why the mercury treaty has made environmental cleanup its central focus.

### A Great Alternative for Fixing Minor Cavities: **Atraumatic Restorative Treatment (ART)**

"Drilling and filling" is not the only option for treatment of dental caries. For minor cavities, a less invasive and less painful technique called Atraumatic Restorative Treatment (ART) has proven quite effective, especially in underserved populations in both developing and industrialized countries. ART involves manual excavation of the decayed area with hand tools, eliminating the need for expensive drills and anesthesia.

Since ART is noninvasive, it is tolerated very well by patients, who [experience less pain than with traditional fillings](#). And the technique has earned the endorsement of the World Health Organization (WHO) who has called it an "[acceptable and effective treatment to control and prevent decay in socioeconomically deprived communities](#)." ART is currently used in at least 25 countries and is a regular part of dental training programs in at least three countries. One major advantage to this less-invasive treatment is that you don't have to be a dentist to do it. Dental hygienists, dental assistants and other properly trained individuals can perform ART.

The dental industry has been less than eager to hop on board, afraid this would cut into their exclusive cavity-busting monopoly. However, I agree with Charlie Brown that dentists would still make plenty of money from more complicated dental work. In fact, they would probably earn even MORE because the work that only they can perform is more complicated—therefore more expensive to the consumer.

## How You Can Keep the Wheels of Progress Turning

We now have two sessions down and three to go for the international mercury treaty. If all goes well, the treaty will be signed in 2013. Once any treaty is signed, it is up to Congress to implement it, and that could take another several years. In the meantime, we must keep pressure on the FDA, and there are some steps you can take to help with this:

1. Tell your family, friends, and neighbors the truth about dental amalgams. Don't let your dentist talk you into one for yourself or for your child. It's not your dentist's mouth—it's YOUR mouth. And YOUR pocket book—which holds a great deal of buying power. If your dentist insists mercury is safe, you may want to seek a [mercury-free dentist](#).
2. Consider writing to the FDA Director of the Division of Dental Devices, Anthony Watson, at: [anthony.watson@fda.hhs.gov](mailto:anthony.watson@fda.hhs.gov).

Ask Mr. Watson:

- Since the FDA's own panel of scientists advises that amalgam should "definitely not" be implanted in children, pregnant women, and hypersensitive people, how soon will you take action to protect these vulnerable populations from this toxin?
  - Since **the FDA has a duty to tell consumers** that amalgam contains mercury that can damage the neurological systems of unborn babies, children, and hypersensitive populations, when does FDA intend to clearly state this warning on its consumer website and in **consumer labeling**?
  - Since Commissioner Hamburg claims FDA is committed to transparency, how does FDA plan to keep the public updated on its progress with regard to the amalgam issue?
3. Consider joining/donating to the [Consumers for Dental Choice](#), the organization founded by Charlie Brown. It's a great source for information and a way to stay updated on mercury policy issues.

I encourage you to get involved.

# The Vitamin that is Better than Fluoride in Reducing Cavities<sup>7</sup> ...

Studies have linked geographical variations in dental health and tooth loss to sun exposure. Dental caries has been shown to be inversely related to mean hours of sunlight per year, with people living in the sunny west having half as many cavities as those in the much less sunny northeast. As [reported by the Vitamin D Council](#):

*"There were also several studies reported on vitamin D and dental caries in the 1920s and 1930s. May Mellanby and coworkers in Sheffield, England, did studies on the role of vitamin D on teeth in the 1920s.*

*The first experiments were with dogs, where it was found that vitamin D stimulated the calcification of teeth. Subsequently, they studied the effect of vitamin D on dental caries in children, finding a beneficial effect.*

*Additional studies were conducted on children in New York regarding dental caries with respect to season, artificial ultraviolet-B (UVB) irradiance, and oral intake of vitamin D with the finding that **it took 800 IU/day to prevent caries effectively.**"*

Two proposed mechanisms causing this beneficial effect include:

- Vitamin D beneficially affects calcium metabolism, and,
- Vitamin D, which is produced in your body in response to sunlight exposure, induces cathelicidin, an antimicrobial peptide, which attacks oral bacteria linked to dental caries.

[According to the Vitamin D Council](#):

*"Use of vitamin D appears to be a better option for reducing dental caries than fluoridation of community water supplies, as there are many additional health benefits of vitamin D and a number of adverse effects of water fluoridation such as fluorosis (mottling) of teeth and bones. ... **Serum 25-hydroxyvitamin D concentrations around 30-40 ng/ml (75-100 nmol/L) should significantly reduce the formation of dental caries.** (The average white American has a level near 25 ng/ml, while the average black American has a level near 16 ng/ml.)"*

## Oral Health, Heart Disease, and Vitamin D

As you probably know, many public water supplies around the US are fluoridated, allegedly to help prevent dental caries. However, there's overwhelming evidence showing that ingesting fluoride is NOT the way to protect your teeth.

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<sup>7</sup> Articles taken from <http://www.mercola.com/>

On the contrary, fluoride is a potent toxin, and over 40 percent of American children and teens are showing signs of fluoride overexposure in the form of [dental fluorosis](#)—unsightly yellow or brown spots or mottling on their teeth.

Fluoride consumption has also been linked to a [long list of other health problems](#). The idea that vitamin D may help protect against cavities is very interesting, and actually makes loads of sense since we already know it is necessary for bone health. Vitamin D also upregulates a specific gene that produces over 200 anti-microbial peptides, some of which work like broad-spectrum antibiotics, including cathelicidin that attacks oral bacteria. It's also interesting to note the [connections between oral health, heart health](#), and vitamin D status.

For example, gum disease increases your risk of several other serious diseases, including, pneumonia, lung disease, diabetes and stroke—and vitamin D deficiency has also been linked to an increased risk of all of these conditions! This is a beautiful illustration of the interdependency between seemingly disparate systems within your body.

## **Sun Exposure May Be Essential for Heart Health**

The link between gum disease and heart disease may not be obvious, but *chronic inflammation* is a hallmark of both conditions and inflammation in your body plays a major role in the build-up of plaque in your arteries, which can lead to a heart attack. And vitamin D helps combat inflammation, as just mentioned.

Furthermore, according to [research by Dr. Stephanie Seneff](#), the vitamin D produced in your skin in response to sun exposure will impact your *sulfur status*, which may also play a crucial role in heart disease, so there are many interrelated factors affecting each other, thereby raising or lowering your risk of a number of health problems. So what does sun exposure have to do with heart health?

Your heart requires *cholesterol sulfate* for optimal function. When you are deficient in cholesterol sulfate (due to a lack of cholesterol in your body), your body tries to protect your heart by creating arterial plaque, because the platelets *produce cholesterol sulfate in the plaque*. Dr. Seneff believes that the mechanism we call "cardiovascular disease," of which arterial plaque is a hallmark, is actually your body's way to compensate for not having enough cholesterol sulfate.

Now, when you expose your skin to sunshine, your skin synthesizes vitamin D3 *sulfate*, which is a water soluble form of sulfur that can travel freely in your blood stream, making it readily available. Oral vitamin D3, on the other hand, is unsulfated, and this form needs LDL (the so-called "bad" cholesterol) as a vehicle of transport. Her suspicion is that the simple oral non-sulfated form of vitamin D may not provide as much of the same heart-healthy benefits as the vitamin D created in your skin from sun exposure, because it cannot be converted to vitamin D sulfate, and therefore will not improve your sulfur status. This is yet another reason to really make a concerted effort to get ALL your vitamin D requirements from exposure to sunshine!

## Your **Vitamin D Level** is Directly **Related** to Your Risk of **Heart Disease**

But that's not all. Dr. Carlos Camargo of Harvard University recently [wrote an editorial](#) about the growing number of studies that link low vitamin D levels to heart attack, heart failure, stroke, hypertension and diabetes. One recent study found that every 10 ng/ml lower blood vitamin D concentration resulted in a nine percent greater risk of death, and a 25 percent greater risk of heart attack.

As noted in [Dr. Camargo's editorial](#), credit is due to the first man to discover the connection, an epidemiologist in New Zealand by the name of Professor Robert Scragg, who first noticed the association in 1981. His population-based case-control study found a strong inverse association between 25-hydroxyvitamin D level in the blood and risk for heart attack.

[As reported by the Vitamin D Council](#), there are currently two large, population-based, randomized, double-blind, placebo controlled trials on the health effects of vitamin D supplements underway. One is at Harvard, which is looking at cancer and heart disease. The other is being done in New Zealand, and is focused on heart disease, infection and fractures. Unfortunately, the results from these studies are not expected to be available until 2017. Six years is a long time to sit around and wait for the results from these studies. I strongly encourage you NOT to wait and see. The evidence that optimal vitamin D levels are necessary for general health and disease prevention is overwhelming.

## **Vitamin D and Cancer**

Two grassroots organizations are now focusing on vitamin D as a preventive measure for cancer. There are already [over 800 studies](#) supporting the theory that vitamin D may prevent a large percentage of several types of cancer, and I'm very pleased to see that this information is starting to gain foothold. Vitamin D has a protective effect against cancer in several ways, including:

- Increasing the self-destruction of mutated cells (which, if allowed to replicate, could lead to cancer).
- Reducing the spread and reproduction of cancer cells.
- Causing cells to become differentiated (cancer cells often lack differentiation).
- Reducing the growth of new blood vessels from pre-existing ones, which is a step in the transition of dormant tumors turning cancerous.

The Vitamin D Council, a nonprofit educational corporation based in California, recently launched their "Vitamin D and Cancer" campaign, presenting 20 detailed summaries of the evidence. The summaries were prepared by epidemiologist Dr. William Grant, founder of the nonprofit organization, Sunlight, Nutrition and Health Research Center (SUNARC). He also serves as the Science Director for the Vitamin D Council. I highly recommend reviewing these summaries, which [can be found here](#). (Just select the type of cancer you want to review from the listing on the left.) According to the Vitamin D Council:

*"Some researchers believe the link between vitamin D sufficiency and a decreased risk in cancer is promising. A randomized controlled trial found a 77 percent reduction in all-cancer incidence when the study group supplemented with 1,100 IU/day of vitamin D plus 1,450 mg/day calcium. Says Dr. Grant, "Based on various studies of UVB, vitamin D and cancer to date, it appears that **global cancer burden can be reduced by 15-25 percent if everyone had vitamin D blood levels above 40 ng/ml.**" Some of the facts presented in these summaries include:*

1. Geographical studies have found reduced risk in mortality rates for 20 types of cancer in regions of higher solar UVB doses.
2. Observational studies have found that the risk of breast, colon, and rectal cancer fall as vitamin D blood levels rise at least up to 40 ng/mL (100 nmol/L).
3. Those with higher vitamin D blood levels at time of cancer diagnosis have nearly twice the survival rate of those with the lowest levels.
4. Higher UVB exposure early in life is associated with reduced risk of breast and prostate cancer.

## **World's First Breast Cancer Prevention Study Underway!**

In addition to the Vitamin D Council's educational campaign, [Grassroots Health](#) is now in the process of initiating the world's first breast cancer prevention project and study, to investigate and evaluate vitamin D as a preventive strategy for breast cancer. "We are looking now for some really serious funding to support that as a major research project," says Carole Baggerly, director and founder of [Grassroots Health](#). If you would like to [sign up as a participant in this groundbreaking study](#), or make a donation to support this project, you can [do so here](#). This project is only for women who are:

1. 60 years of age and older.
2. have no current cancer.
3. are not currently being treated for cancer.

## **Help Promote Public Health By Participating in the D\*Action Study**

You can also become a participant in the still ongoing [Grassroots Health D\\*Action study](#), which is evaluating vitamin D's impact on your *overall* health status. When you join D\*action, you agree to test your vitamin D levels twice a year during a five year program, and share your health status to demonstrate the public health impact of this nutrient. There is a \$60 fee each 6 months (\$120/year) for your sponsorship of the project, which includes a complete new test kit to be used at home, and electronic reports on your ongoing progress. You will get a follow up email every six months reminding you "it's time for your next test and health survey." To join now, please follow this [link to the sign up form](#).

## Make Sure You're **NEVER Deficient** in **Vitamin D** if You are Critically Ill

Dr. Paul Lee of the University of Queensland in Australia believes that people all over the world are needlessly dying because they have vitamin D deficiency. He believes severe immune dysfunction, bone hyper-resorption, blood poisoning, and hyper-inflammation in critically ill patients could all be resolved with sufficient vitamin D. He notes that the stress of surgery uses up tremendous amounts of vitamin D, and cites studies showing that death in the ICU and the CCU is two to three times higher for the vitamin D deficient. [According to Dr. Lee:](#)

*"Vitamin D deficiency is highly prevalent and has been associated with a diverse range of chronic medical conditions in the general population. In contrast, the prevalence, pathogenesis and significance of vitamin D deficiency have received little attention in acute medicine. Vitamin D deficiency is seldom considered and rarely corrected adequately, if at all, in critically ill patients.*

*Recent recognition of the extra-skeletal, pleiotropic actions of vitamin D in immunity, epithelial function and metabolic regulation may underlie the previously under-recognized contribution of vitamin D deficiency to typical co-morbidities in critically ill patients, including sepsis, systemic inflammatory response syndrome and metabolic dysfunction. Improved understanding of vitamin D metabolism and regulation in critical illness may allow therapeutic exploitation of vitamin D to improve outcome in critically ill patients."*

This echoes [previous findings that your vitamin D status is critical for overall health](#), prevention of disease, and for successful recuperation—whether you're recuperating from a case of the flu, from surgery, or even cancer treatment.

### The **Best Source** of **Vitamin D**

Exposing your skin to sunlight is the best way to get vitamin D as this will also produce vitamin D3 sulfate, which I discussed earlier. As a general guideline, getting about 15 to 20 minutes of sun exposure a day, with at least 40 percent of your skin exposed, will boost the vitamin levels above 40 ng/ml in many.

However, this is highly variable and dependent on a number of factors, including your skin color, location and altitude, for example. If you're able to get out in the sun for an adequate time period each day, your vitamin D levels should be naturally optimized.

If you can't get enough sun exposure during certain parts of the year, [I advise using a safe tanning bed](#) to allow your body to produce vitamin D naturally. Safe tanning beds have electronic ballasts and produce less UVA than sunshine.

A third option is taking a high-quality vitamin D supplement. The most important thing to keep in mind if you opt for oral supplementation is to use natural vitamin D3 (cholecalciferol) only.

Do not use the [synthetic and highly inferior vitamin D2](#). Unless you get a deep dark tan, it is wise to get your blood levels checked as that is the only way to know for certain you have reached therapeutic levels. To determine the appropriate dose, you need to [get your vitamin D levels tested](#). Ideally, you'll want to be between 50-70 ng/ml. Based on recent research published by Grassroots Health from the D\*Action study, the average adult needs to take 8,000 IU's of vitamin D per day in order to elevate their levels above 40 ng/ml, which they believe is the bare minimum for disease prevention.

Carole Baggerly Discusses Vitamin D Dosage  
[http://www.youtube.com/watch?feature=player\\_embedded&v=gaE\\_9yOb6dQ](http://www.youtube.com/watch?feature=player_embedded&v=gaE_9yOb6dQ)

# Dental Breakthrough, May Save Thousands of Lives<sup>8</sup> ...

[http://www.youtube.com/watch?feature=player\\_embedded&v=AGqpU1VXrJc](http://www.youtube.com/watch?feature=player_embedded&v=AGqpU1VXrJc)

A great deal of progress has been made this year toward ridding the dental industry of [dangerous mercury-containing amalgams](#). For example, Consumers for Dental Choice recently reported that:

*"On October 10, the [City Council of Malibu, California](#) passed a resolution supporting "national and worldwide efforts to reduce anthropogenic [man-made] sources of mercury to the environment."*

*Specifically, the city endorsed "efforts by UNEP [the United Nations Environmental Programme] to adopt an international treaty to phase out each of the above five major mercury pollutants": batteries, electric switches and relays, measuring devices, mercury-containing lamps...and dental amalgam.*

*Malibu is the third California city to call for the phase-out of dental amalgam, following the resolution of the city council of Costa Mesa and the proclamation by the Mayor of Santa Ana."*

According to Consumers for Dental Choice, the World Health Organization ("WHO") also just released its long-awaited updated and finalized report on dental amalgam. In *Future Use of Materials for Dental Restoration*, WHO urges "a switch in use of dental materials" away from amalgam, stating that: "[F]or many reasons, restorative materials alternative to dental amalgam are desirable."

But that's not all! As a result of enormous public pressure from dentists, health professionals and consumers, the FDA has also promised to make an announcement by year's end of its decision about whether or not to warn the public of the dangers of dental amalgam, and possibly even restrict its use.

A series of town meetings in three states this year, hosted by the FDA's Center for Devices, has resulted in the FDA's reconsideration of its [appalling 2009 amalgam rule](#).

Thanks to [Consumers for Dental Choice](#), town meetings previously attended mostly by industry representatives pleading with the FDA to "go easier on them" are now instead being dominated by consumer advocates demanding government accountability. Their greatest hope is to see mercury amalgams banned altogether, but short of that, the Consumers for Dental Choice hopes the FDA will at least make all consumers aware that amalgams are more than 50 percent mercury. The American Dental Association (ADA) has historically covered up that fact, while taking money from Coca-Cola and other companies whose products promote the formation of cavities.

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<sup>8</sup> Articles taken from <http://www.mercola.com/>

Fifty percent of dentists are now mercury-free; you can help abolish the use of mercury fillings by supporting one of them. We are on the brink of prompting real change in the fight for mercury-free dentistry, but your voice is needed in order to bring about permanent change.

## **First Base: Dallas, Texas on March 10**

The first of the town meetings occurred in a suburb of Dallas, Texas, in March 2011. According to Charlie Brown (former attorney general and president of the World Alliance for Mercury Free Dentistry), the Texas town meeting generated a surge of long-overdue press coverage about dental amalgam on major Dallas television stations and newspapers.

Dr. Jeffrey Shuren, the presiding FDA official in the dental amalgam issue, was presented with testimony from, among others, Dr. Bill Glaros, the former president of the [International Academy of Biological Dentistry and Medicine](#). In response, Dr. Shuren acknowledged the FDA scientific panel's conclusion that certain populations, such as pregnant women and young children, might be "more sensitive" than others to the adverse effects of dental amalgam. The following statement certainly indicates the door is open, but whether or not the FDA will actually walk through it remains to be seen Dr. Shuren stated:

*"We may decide to change our current regulation, and that could include changing the status of dental amalgam, which means it comes off the market or has other controls on it, or we may decide to leave things as they are."*

## **Second Base: Orlando, Florida on May 5**

Floridians continued the momentum by turning out en masse for the next town meeting, outraged over the FDA's failure to protect children from mercury fillings. The event generated front-page news from coast to coast, even prompting an article from the *Los Angeles Times*.

As in Texas, with the press in his face, Dr. Shuren was compelled to answer to the FDA's inaction on amalgam. After all, it is far easier to evade questions about the health hazards of amalgams when behind the protective walls of a government office than it is in front of television cameras. Dr. Shuren told the [Orlando Sentinel](#) that he would like the FDA to make a decision this year, but it (FDA) would have to reconsider the scientific and legal issues.

It was hardly the promise of regulatory overhaul, but it was more than the FDA had been willing to say in Washington. Consumers two... amalgams one. But consumers would soon advance their cause even further as dentists turned up in droves for the third town meeting, this time in San Francisco.

## Third Base: San Francisco, California on September 22

The highlight of the California meeting was testimony by [Anita Vasquez Tibau](#), grassroots director of Consumers for Dental Choice, who detailed amalgam's devastating impact on the Spanish-speaking community. Vasquez Tibau assailed Shuren with his own words. In an exchange with the European Union regarding device regulation last February, Shuren sparked [an international scrap](#) when he commented that European patients may be "guinea pigs" for medical devices due to inadequate government oversight, and added, "We don't use our people as guinea pigs in the U.S."

Oops ... except, we do—a point that Anita Vasquez Tibau was quick to bring up.

While holding up a photograph of a Latino kindergartner whose smile showed the tragedy of a mouthful of mercury fillings, Vasquez Tibau reminded Shuren that the FDA itself admits amalgam can cause neurological damage in young children as their immature systems are more sensitive to the neurotoxic effects of mercury vapor. She also reminded him of the FDA's statement about the lack of evidence of amalgam's safety for children under age six, and then asked him to stop treating Latino children like "guinea pigs." Dr. Shuren responded that he intended to make an announcement of the FDA's position by the end of the year. So the clock is ticking.

### Now it's Your Turn

We need to keep the momentum going between now and year's end. You must urge the FDA to heed the advice convened by its own scientists in December 2010. To voice your opinion, contact Dr. Shuren at:

Dr. Jeffrey Shuren, Director  
Center for Devices, U.S. Food & Drug Administration  
10903 New Hampshire Ave.  
WO66-5431, Room 5442  
Silver Spring, MD 20993-0002  
Phone: 301-796-5900 Fax: 301-847-8149 or 301-847-8109  
Email: [jeff.shuren@fda.hhs.gov](mailto:jeff.shuren@fda.hhs.gov)

The following are Charlie Brown's recommended talking points for this contact:

- **Thank Dr. Shuren for agreeing to act on amalgam fillings this year.**
- **Please end the use of amalgam immediately for children, pregnant women, and hypersensitive adults (as a *minimum*).**
- **Please make sure every parent knows amalgam is mercury, not silver, by making warnings mandatory.** Every consumer should be told the truth about what's going into their mouths, and their children's mouths.
- **Kicking the can down the road is not acceptable.** It is time for a decision now, NOT an announcement that the FDA's decision will be postponed. We have irrefutable scientific evidence about the dangers of mercury amalgams. Your children are being subjected to harm now—they can't wait another year.

I also urge you to contribute to Consumers for Dental Choice. I strongly believe in their mission and their commitment to the Campaign for Mercury-Free Dentistry. They rely on public donations to complete this important mission. (Consumers for Dental Choice is a 501(c)(3) non-profit organization dedicated to advocating mercury-free dentistry. Contributions are tax-deductible in the U.S.)

Donations can be made online or through the mail:

- Online donations: <http://www.toxicteeth.org/donate.cfm>
- Checks can be mailed to:

Consumers for Dental Choice  
316 F St., N.E., Suite 210  
Washington DC 20002

Also, for timely updates and information, please [join Consumers for Dental Choice on Facebook](#). Thank you for your help in keeping the ball rolling—help make 2011 a landmark year for your dental health!