

GLOBAL JOURNAL OF MEDICAL RESEARCH: J DENTISTRY & OTOLARYNGOLOGY Volume 24 Issue 1 Version 1.0 Year 2024 Type: Double Blind Peer Reviewed International Research Journal Publisher: Global Journals Online ISSN: 2249-4618 & Print ISSN: 0975-5888

High Voltage Mercury Amalgam Dental Fillings, Medical Considerations

By Stephen Bourne MB, MRCGP

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Electrical currents caused by mercury amalgam dental fillings are liable to be associated with chronic illness, and replacing them with non-metallic, non-toxic dental material can be therapeutic.

An earthing mat (9) that removes static electricity from patients with high-voltage mercury amalgam dental fillings can cause symptomatic relief.

Two clinical cases are presented as evidence of the concept.

GJMR-J Classification: FOR Code: 1105



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I. INTRODUCTION

he toxic properties of dental mercury are wellknown(1, 2, 3), and dental mercury is banned in the Scandinavian countries (4). There are no published UK studies in this field.

Dental assistants must wear protective clothing when handling dental amalgam. After dentists have removed mercury amalgam dental fillings from their patients' mouths, they must dispose of them in sealed containers so that mercury vapour from the amalgam dental fillings cannot contaminate the ecosystem. The British Dental Association (BDA) has not explained why it considers dental mercury amalgam toxic when handled by dental technicians and when disposed of, but not harmful inside people's mouths.

The BDA advises that although dental mercury is toxic for pregnant women and children, it is not for adults. It has yet to explain how it has reached this conclusion.

The BDA's recommendation does not take into account environmental research (2,4), clinical research (1,4,5,6) and animal research (12),all of which indicate that dental mercury is toxic.

The BDA should consider dental research, which has become possible with the Jerome J431-X and the new J4045.0 mercury vapour analysers. This technology measures levels of oral mercury and has shown that heavy chewing (e.g. chewing gum) and drinking hot drinks cause significant release of mercury vapour from amalgam dental fillings into subjects' mouths. Dr Hesham El-Essawy, a London Harley Street dentist, has demonstrated this technology to the author. Such release of mercury vapour from amalgam dental fillings into subjects' mouths is inconsistent with the BDA's assertion that amalgam dental fillings are stable and not a source of mercury poisoning.

A meta-analysis of patients treated for dental mercury toxicity has shown that 89% of 1569 patients treated experienced 'that their symptoms had improved or were eliminated after the safe replacement of their mercury amalgam dental fillings (5).'

Mercury from dental amalgam fillings is a systemic toxin that can contribute to the pathogenesis of many chronic medical conditions, particularly anxiety, phobias, Parkinson's syndrome, multiple sclerosis, allergies, chronic fatigue syndrome, irritable bowel syndrome, arthritis and stroke (6).

II. CASE REPORTS

a) Case 1

During 1981, a fifty-one-year-old patient with malignant hypertension and severe chronic migraine joined my NHS general practice. His symptoms had not responded to conventional medical treatment for hypertension from his previous GP, from me and subsequently from several private consultant physicians. He was eventually treated successfully by George Le with MRCP (deceased), who identified high-voltage mercury amalgam dental fillings as the cause of his migraine and hypertension. Dr Le with referred my patient to a mercury-free dentist who was a member of the British Society for Mercury-free Dentistry (7).

For replacement of his pathogenic high-voltage mercury amalgam dental fillings. The patient's migraine and hypertension cleared up immediately after the dentist had replaced his high-voltage metallic mercury amalgam dental fillings.

At the time, the patient was incapacitated by chronic poor health. Since replacing his high-voltage amalgam dental fillings, he led a full and active life.

Here is the patient's account.

"In 1981, I was aged fifty-one and seriously ill with malignant hypertension and migraine. Conventional medical treatment had not helped. My GP, Dr Bourne, eventually suggested that I consult Dr George Le with at his clinic on Upper Harley Street. Dr Le with compared my amalgam dental fillings to 'having a battery in my

Author: e-mail: valstevb@hotmail.com

mouth'. He used a simple DC voltmeter to measure the voltages at my amalgam dental fillings.

As an electrical engineer, I did not find it surprising that Dr Le with identified my high-voltage amalgam dental fillings (> 1.5 Volts) as the causes of my migraine and high blood pressure.

The rest is history. Dr Le with referred me to a mercury-free dentist, who replaced my high-voltage amalgam dental fillings. The result was quick and astonishing: the migraines and malignant hypertension ceased straightaway, and there was also an improvement in my energy levels. Removing my high voltage amalgam dental fillings has been a lifeenhancing procedure."

Here is the account of another patient with high-voltage amalgam dental fillings.

b) Case 2

"I first consulted Dr Bourne in August 2020 because I had been feeling abnormally tired for years. He identified two high-voltage mercury amalgam dental fillings as the cause of my tiredness. He advised me to consult a mercury-free dentist to have my 'silver' mercury amalgam dental fillings replaced.

I visited a mercury-free dentist in September; the fillings were replaced in November.

Since they were replaced, I have no longer felt abnormally tired and have been able to concentrate better at work. My tiredness cleared up immediately the silver fillings were changed. Dr Bourne explained that this was due to removing the mercury amalgamassociated electric currents in my mouth.

I used to have a sore throat every winter, which returned in September this year. My sore throat cleared immediately after my high voltage dental fillings were replaced."

III. DISCUSSION

The two case histories correlate with an association between high-voltage mercury amalgam dental fillings and chronic poor health. Further clinical experience will indicate whether this association can be replicated in a cohort of suitable subjects.

While in NHS general practice, I noticed that some patients with chronic fatigue syndrome (CFS) who had not responded to conventional medical treatment had high-voltage' silver' dental amalgam fillings. Although one such patient made a remarkable recovery from CFS after a private dentist replaced his highvoltage mercury fillings, most NHS patients could not afford such private dental treatment, and my attempts to have their high-voltage fillings replaced within the NHS were unsuccessful.

During retirement from general practice, while specialising in integrative medicine, I found that several chronically ill patients who had not responded to conventional medical treatment had high-voltage metallic mercury amalgam dental fillings. Their symptoms improved immediately after their high-voltage mercury amalgam fillings were replaced.

Autopsy research on cadavers has shown that mercury from dental amalgam is deposited in body organs proportionately to the number of amalgam dental fillings and to the number of years that they have been in place (10). At autopsy, the highest mercury concentrations were found in the brain, thyroid gland and kidneys. Given this finding, it is improbable that replacing patients' mercury amalgam dental fillings would cause a sufficient reduction in systemic mercury poisoning to account for the immediate clinical improvements reported in the above two case histories. The immediate clinical improvements were associated with an immediate cessation of dental amalgamgenerated electric currents.

Dental mercury molecules are liable to be deposited in the brain (10), becoming micro aerials that attract harmful electromagnetic radiation so that people with mercury amalgam dental fillings can feel abnormally tired when visiting electrically charged places such as airports and underground railways (11).

Mercury deposited in sheep kidneys has been shown to significantly impair their renal function (12). This finding is consistent with a higher incidence of dialysis-dependent renal failure patients in countries whose residents can afford only mercury amalgam dental fillings rather than more expensive, less toxic alternatives. (13).

Given these considerations, further clinical research is indicated to investigate the anticipated correlation between high-voltage mercury amalgam dental fillings and health deterioration. Such research would entail doctors routinely using voltmeters to measure the voltages associated with metallic dental fillings in chronically ill patients' mouths. When dental fillings with voltages above 100 mV are found in patients' mouths (14,15), they should be referred to dentists with post-graduate expertise in mercury-free dentistry (7) to have their pathogenic high-voltage mercury amalgam dental fillings safely replaced.

IV. CONCLUSION

Mercury amalgam dental fillings can cause pathogenic oral electric currents. They can also cause pathogenic mercury deposits in the body's vital organs and health deterioration (1, 2, 3, 4, 5, 6, 10, 11, 12, 13). Given these considerations, the use of mercury amalgam in dentistry should be discontinued.

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 A snapshot of dentistry in Europe AIOB. Raymondo Pische MD, DDS. (replace mercurymercury2017. Rio.pdf). Mercury, in all forms, poisons cellular function by altering proteins' tertiary and quaternary structure and binding with sulfhydryl Suppose the BDA accepts that high-voltage mercury-containing dental fillings are pathogenic in that case.Mercury toxicity can also impair the function of any organ or subcellular structure. The chief target area of mercury is the brain, but peripheral nerve function, renal function, endocrine and muscle function, and several types of dermatitis have been described. Dental mercury interferes with DNA transcription and protein synthesis in the developing brain, destroying the endoplasmic reticulum and causingthe disappearance of ribosomes. Mercury poisoning also causes kidney toxicity, autoimmune conditions, immune system dysfunction and hypersensitivity reactions such as asthmaand dermatitis.

- The environmental impact of dental amalgam and resin-based composite materials. S. Mulligan,1, G. Kakonyi,2 K. Moharamzadeh,1 S. F. Thornton2 and N. Martin BRITISH DENTAL JOURNAL | VOLUME 224 NO. 7 | APRIL 13, 201
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Journal. In the letter, it was pointed out that only about 20% of techniques employed by conventional doctors have been properly evaluated. The survey found that most clinic patients had long-term health problems, and 60-70% experienced significant health improvements after attending the clinic for only eight weeks. Such improvements were impressive the patients as had been treatedunsuccessfully with conventional medicine for up to ten years.

- 9. Earthing mats are available from Groundology.
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Abstract

Eighteen cadavers from routine autopsy casework were subject to a study of tissue levels of total mercury in the brain, thyroid, and kidney samples by atomic absorption. On these same cadavers, all dental amalgam fillings, the most essential source of organic mercury exposure in the general population, according to the World Health Organization (WHO), were charted. Total mercury levels were significantly higher in subjects with a more significant number of occlusal amalgam surfaces (>12) compared with those with fewer occlusal amalgams (0-3) in all types of tissue (all P \leq 0.04). Mercury levels were significantly higher in brain tissues compared with thyroid and kidney tissues in subjects with more than 12 occlusal amalgam fillings (all $P \le 0.01$) but not in subjects with three or fewer occlusal amalgams (all P \geq 0.07).

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Abstract

Within thirty days after placing twelve occlusal amalgam fillings in six adult sheep, there was a 50% kidney function impairment. After sixty days, there was 60%. impairment in renal function.

13. During a lecture at the Royal London Hospital about twenty-five years ago, Prof Blandy (professor of nephrology) pointed out that renal failure is statistically much higher in wealthy than poor, undeveloped countries. He subsequently agreed with me that this is likely to be due to the extensive use of dental mercury in wealthy countries, and he agreed with my suggestion of research to measure the voltages associated with the amalgam fillings of teeth in renal failure patients and to compare them with those of age-matched controls. This suggested research was not allowed because it was unfunded.

- 14. Set an electrician's voltmeter to measure up to 2 volts (2000 millivolts). Place one probe gently on the inside of the patient's cheek (buccal mucosa) and the other gently on the 'silver' dental filling being investigated. Record the positions and voltages of all the teeth with voltages above 100 millivolts because the amalgam fillings in these teeth will be replaced first. Ideally, all the mercury amalgam dental fillings should eventually be replaced.
- 15. This recommendation is based on over forty years of clinical experience.