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## MERCURY AND DENTISTRY

Our personal thanks to Alfred V. Zamm, M.D., F.A.C.A., F.A.C.P. of Kingston, New York for giving us permission to utilize copyrighted information contained in a pamphlet prepared for his patients.

"Recently I had the mercury fillings ("silver amalgam" fillings) removed from my teeth. I am happy to say that the results are beneficial. In an effort to answer some of the questions that have been raised on this subject, the following was prepared with the help of Bruce Sorrin, D.D.S.

QUESTION: How can I know in advance whether removal of my mercury fillings will help me?

ANSWER: You can't. There is no way to predict because:

1. Allergy to mercury is not the problem in question; hence, doing skin tests to prove someone is or is not allergic to mercury is irrelevant in terms of the patient with multiple food, chemical, and inhalant hypersensitivities;

2. The patients most likely to obtain benefit are those who are most sensitive. Any lessening of any sort of metabolic load, however small, may be significant to these ultrasensitive patients.

QUESTION: How can I obtain some factual data on the subject?

ANSWER: I have placed a collection of photocopies of articles at the reference desk of the Kingston Library. The title is "mercury and Dentistry I, II, III, and IV". This is a duplicate of the literature that I gave to Hudson Valley H.E.A.L. some time ago. This second and identical collection is now the property of the Kingston Library and will be permanently available at the library reference desk for use within the library, it cannot circulate.

QUESTION: What has been the experience of other patients who have removed their mercury fillings?

ANSWER: The national data on this is limited. It is being collected via a variety of studies in the hope of determining whether a pattern exists. The following is some data I have collected that may shed some light on this new subject:

Example #1. A patient I saw from Lake George, New York, an intelligent, high-level engineer who had been investigated by some of the outstanding clinical ecologists. This patient was a severe universal reactor. He had been unable to work, and he had been unable to eat almost all foods. He had been unable to tolerate low levels of petrochemicals. He now tolerates all of these things fairly well. Physicians were unable to help him beyond advice regarding avoidance, rotation, etc. I asked him how was he able to improve the status of his health. He told me that one physician in the Midwest told him he would not get better unless his mercury fillings (silver amalgam) were

removed. He did this, and gradually his illness reversed itself (not completely).

Example #2. About six months ago one of our local H.E.A.L. members decided to have the mercury fillings removed from her teeth. She was a severe universal reactor. Subsequently she sent a letter to many of us describing the reversal of her illness.

Example #3. In my own case, I felt the initiation of a benefit within two weeks after the last mercury fillings were removed (three months after the removal procedure was initiated).

Example#4. I spoke with Dr. Theron Randolph, who, as many of you know, is probably the leading authority in the country in Clinical Ecology. He told me he had suggested to about 20 patients to have the mercury fillings removed from their teeth, and that the results were mixed, i.e., there was benefit in many patients but not in everyone.

Example #5. The removal of mercury fillings is not a panacea. A patient of mine who is a universal reactor with severe ecological illness has no teeth: he wears full dentures (no fillings). His illness, therefore, must have some mechanism unrelated to mercury poisoning.

#### SOME FACTORS THAT MAY HELP PREDICT WHETHER A PERSON WOULD BENEFIT FROM THE REMOVAL OF THEIR MERCURY FILLINGS:

To repeat, this subject is so new that this can only be taken as a supposition and conjecture:

##### 1) Dissimilar metals and the electrogalvanic effect:

The patient who has dissimilar metals in the mouth, i.e., one gold inlay and some mercury fillings, will have an electrogalvanic effect (a flow of electricity between these two different metals, as in a battery). The flow of electricity induces degradation of the mercury filling (silver amalgam), inducing a more rapid release of mercury than if only mercury fillings were present. This relationship will help you judge the degree to which you are at risk.

##### 2) Selenium

Selenium binds with mercury to render it biologically inactive in some respects (this is why tuna is not poisoned by the mercury in its system. Tuna have two molecules of selenium for every molecule of mercury). (NOTE: Selenium is also protective against arsenic and cadmium.) One might conjecture that, if one receives some benefit from taking selenium, then the benefit may be in part due to the protective effect of selenium against mercury; hence, there might be some benefit from having the mercury fillings removed. This is NOT a PROOF, but merely conjecture.

It is interesting that in a study of the drinking water of about 50 cities in the United States, the cities were listed in the order