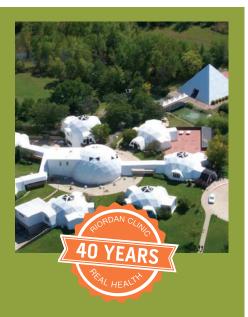


Health Hunters

Newsletter

A service of Riordan Clinic, cofounded in 1975 by Olive W. Garvey and Hugh D. Riordan. The Riordan Clinic is a not-for-profit 501(c)(3) corporation. Go to www.riordanclinic.org to make your tax deductible donation today or visit us at 3100 N. Hillside, Wichita, KS 67219.



Inside This Issue

The Mouth-Body Connection	1–4
Reflecting on 40 Years	3, 5
Nutrient Store	5
How Do I Know if I am Toxic?	6–8
Toxins, Heavy Metals, and Chelation	7–8



The Mouth-Body Connection

by Thomas E. Levy, MD, JD

While nobody would deny that the mouth is a part of the body, it is nevertheless most notable how few physicians and dentists routinely consider their connections to each other's domain in the practice of their professions. Not only are they connected, they are connected at the hip. A mouth-disease connection of significance is a common situation, not a rare one. Rather than virtually never being considered as affecting one another, the interplay between the mouth and the rest of the body should mandate that the evaluation of such a connection be at the top of the list of considerations when either the physician or the dentist sees a patient for the first time.

Specifically, chronic dental infections cause more substantial disease and early death than any other singular condition. By definition, dental infections occur in confined, oxygenstarved microenvironments, a situation that makes many otherwise harmless bacteria and assorted pathogens become exceptionally toxic. The work of Dr. Hal Huggins and Dr. Boyd Haley nearly



20 years ago confirmed the exceptional work that Dr. Weston Price performed almost a century ago. Their results established that deep-seated dental infections produce enormously potent toxins, some of which are many-fold more toxic than even botulinum toxin when tested on their ability to inhibit critical human enzymes involved in energy production. Mind you, botulinum toxin is still considered by mainstream medicine to be the most toxic substance ever identified. And as impressive as the work of Huggins, Haley, and Price is, it has yet to be completely accepted and properly assimilated into the practices of medicine and dentistry to the great degree that is warranted.

The dental and medical literature has already established that periodontal (gum) disease, which basically translates to a chronic anaerobic (oxygen-starved) infection in the gums, is strongly correlated to heart disease and myocardial infarction. And

Contact the Editor

Please send any comments or suggestions to newseditor@riordanclinic.org.

Thank you for reading,

Sean Osler

Like us on Facebook facebook.com/riordanclinic

Follow us on

Twitter twitter.com/riordan_clinic

Instagram instagram.com/riordanclinic

LinkedIn
linkedin.com/company/riordanclinic

Pinterest pinterest.com/riordanclinic/

Health Hunters Newsletter

Join our mailing list to receive this monthly newsletter FREE. To sign up, go to www.riordanclinic.org or email us at information@riordanclinic.org



The Mouth-Body Connection continued from page 1...

even though it seems to be pretty straightforward that such chronic infection should now be considered a cause of heart attacks, that conclusion somehow remains to be reached. The importance of maintaining healthy gums is rarely addressed by any physician treating his heart patient; the dentist rarely tells his gum disease patients to see their heart doctors.



The king of chronic dental infections, however, is the root canal-treated tooth. Such a tooth is always infected, and it is always producing highly potent toxins due to the effects of the anaerobic environment on the trapped pathogens inside the tooth.

Infection is assured inside each and every root canal-treated tooth because the degree to which the procedure is deemed a success depends on how

completely the vital pulp inside the tooth is removed. When one realizes that the immune system must have a network of blood vessels, nerves, and connective tissue to reach infecting pathogens, it becomes readily apparent that a "successful" root canal treatment evacuating the pulp assures that such access can never again occur after the procedure. The bacteria inside the tooth and its very tiny dentinal tubules remain "safe" from the immune system, free to multiply and produce their toxins.

Not only does the root canal-treated tooth continually harbor pathogens and produce toxins, it also affords a nearly-perfect mechanism for the unabated deliverance of these agents throughout the body, 24/7. Even though the pulp and blood supply have been removed from the inside of the tooth, the interface of the root tips into the jawbone remains intact. As such, whenever any tooth clenching or chewing takes place, the very high pressures generated by this tooth-to-tooth contact assures the release of these pathogens and toxins directly into the venous system and the draining lymphatics of the jawbone. Literally, the natural design of the root canal-treated tooth is very analogous to a container of toxins and infectious agents being injected into the jawbone, as with a syringe, every time chewing takes place. Furthermore, these small molecule toxins can also easily diffuse through the root surface without the need to chew.

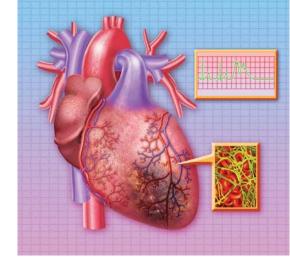
It was the work of Drs. Huggins and Haley that proved definitively that 100% of root canal-treated teeth are infected and toxic. That is to say, greater than 5,000 consecutively extracted root canal-treated teeth from individuals across the country were all found to have the highly potent toxins mentioned above. A few normal, non root canal-treated teeth extracted for orthodontic purposes did not have these toxins. The toxin presence was only found inside root canal-treated teeth.

Only recently has the medical and dental literature produced the "smoking gun" evidence to clearly demonstrate a cause-and-effect relationship between root canals and infected gums with disease, specifically heart disease. At first, it was just demonstrated that there was a statistical correlation between individuals with

The Mouth-Body Connection continues on page 3...

one or more root canal-treated teeth and heart disease. More root canals, more heart disease. However, in 2013 a group of exceptionally insightful researchers in Finland decided to analyze the blood clots that were aspirated out of the acutely blocked coronary arteries in individuals presenting the myocardial infarctions (heart attacks). Using quantitative polymerase chain reaction (PCR) testing, they were able to detect the DNA found in typical root canal and periodontal disease pathogens in a very high concentration inside these blood clots. When compared to control arterial blood specimens in those same patients, a 16-fold higher concentration of this DNA was found in the blood clots causing the heart attacks. To a scientific and logical mind, there is no other reasonable conclusion than that the release of the

pathogens and toxins from the root canal-treated teeth and/or infected gums directly caused the blood clots to form. Similar DNA profiles of oral pathogens had already been found to be commonly present in the atherosclerotic lesions, or narrowings, in the coronary arteries that are the sites of the acute blood clots causing sudden occlusions resulting in heart attacks.



Do all root canal-treated teeth lead to heart attacks? Of course not. Biological diversity, variations in

body toxin load, immune system capacity and strength, and antioxidant/nutrient status all play important roles in determining whether an individual is overwhelmed by a pathogen and its related toxins. But do most heart attack patients have root canals and/or chronic gum disease? Absolutely, overwhelmingly so.

The same researchers examining the heart attack blood clots also found elevated levels of the same root canal/periodontal pathogen DNA in the ruptured intracranial aneurysms of patients with subarachnoid hemorrhages, strongly indicting such dental infections as being at least one primary cause of such major events. They further extended their analyses to looking at the small amounts of pericardial fluid normally surrounding the hearts from a series of autopsies, finding the same oral infection-related DNA in patients who had coronary artery disease when they died. Furthermore, they find that the more advanced the coronary heart disease, the



higher the concentrations of the pathogen DNA.

Heart disease remains the number one cause of death in the United States and in most other developed countries around the world. Even today, when a patient presents to a cardiologist, internist, or family practitioner with a heart attack only rarely does the physician even question whether root canals, gum disease, or both are present.

The Mouth-Body Connection continues on page 4...

REFLECTING ON 40 YEARS



"Hope sees the invisible, feels the intangible and achieves the impossible." -Anonymous

"The sixties and early seventies were a time for questioning the established ways of doing things. Not just questioning, but energy seemed to be there to bring about changes. This was generally started by the young people but before we moved on to the eighties, change was brought about by a diverse population including one senior citizen. She was disturbed about the state of medical care in the United States and was questioning what could be done about it. On this day she was to be lead in a direction that would take her on a journey that would change the concept of health care. This senior citizen was Olive White Garvey, a deceptive grandmotherly looking woman. Although Olive was a grandmother she was also an astute businesswoman and the leader of the Garvey family."

-Marilyn Lake Landreth (about Olive Garvey)

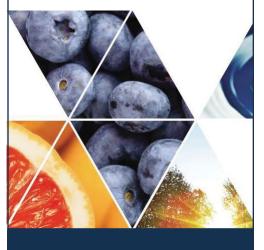
Read more, here:

https://riordanclinic.org/staff/olive-w-garvey/

SAVE THE DATE

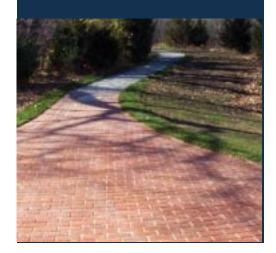
"Real Health" Reception

Thursday,
September 17th
from 6–8pm



Staff Reunion Party

Saturday, September 19th



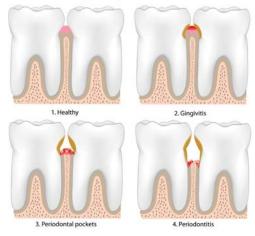
In fact, heart disease is now recognized by mainstream cardiology to always begin with an inflammation of the inner lining of the coronary arteries. For some reason, however, there has been little questioning or research into why this inflammation ever develops in the first place. The answer is simple: it comes from pathogens seeded from remote sites, typically from the mouth. Bacteria have long been identified in the coronary arteries of patients with atherosclerosis, but no researcher has peeled off another layer of the proverbial onion to seriously ask where these bacteria have been coming from all along.

The studies cited above not only show the direct cause-and-effect relationship between these dental infections and heart attack, they also showed that such dental infections are the cause of heart attacks greater than 90% of the time. Sometimes chronically infected tonsils or constipated, infected GI tracts can be the culprit. But much too often, after the usual suspects (risk factors) have been evaluated and found not to be present (or not very prominent) in a given cardiac patient, the physician just concludes the patient had "bad luck." And while that physician might never utter such words, that is exactly what is going on inside his/her head. The standard cardiac risk factors are certainly important, but they are of primary concern in growing the blockages, not in being the reason that they are initiated in the first place. The arterial wall pathogens precede everything else in the evolution of atherosclerosis.

Just as the physician needs to always evaluate the mouth before considering the workup and treatment plan to be complete, the dentist needs to play a prominent role in preventive medicine as well. The research cited is solid science. All medical

procedures, which include highly invasive procedures such as root canals, must include a complete informed consent to the patient. A patient being "offered" a root canal procedure needs to know all the options, and that patient needs to know that having a root canal has been shown to be associated with an increased incidence of heart disease. No physician or dentist can ethically do any type of surgery on a patient and not inform that patient of all potential complications, along with their likelihood of occurring.

The stages of periodontal disease



While the link between dental infections and heart disease has long been known, it is only relatively recently that the cause-and-effect nature of the link has been identified. As such, all physicians taking care of coronary heart disease patients should become very familiar with this information. Leaving root canals and chronic gum disease unaddressed while letting a 55 year-old breadwinner for a large family drop dead or become incapacitated by a large heart attack is simply no longer acceptable. The mouth and the body are strongly connected, and one should never be evaluated or treated in any fashion without an appropriate evaluation of the other.

www.peakenergy.com televymd@yahoo.com

NUTRIENT STORE

D3/K2 Liquid

Vitamin D3/K2 \$30.95

This liquid D3/K2 supplement combines the amazing healing capacity and safety of Vitamin D and Vitamin K into the convenience of liquid drops to support optimal bone health. Each drop contains 1,000 IU of D3 and 10 mcg of K2 (as MK7).



Vitamin D3/K2 \$54.95

This privately formulated Riordan Clinic D3/K2 supplement combines the amazing healing capacity and safety of Vitamin D and Vitamin K into the convenience of one capsule

to support optimal health.



Lypo-Spheric Vitamin C \$35.95

- Helps protect cells from the damage caused by free radicals.
- Supports a healthy immune system.
- Supports collagen production for healthier skin, muscles and joints.
- Promotes muscle repair.
- Supports healthy gums.
- Supports optimal overall health.
- Supports Paleo, Zone and Vegan Diets.

For more information about these and other similar products please go to http://store.riordanclinic.org/category/sup.html or call 1-800-447-7276.

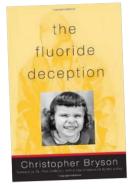
"The information in Health Hunters is for educational purposes only and should not be construed as medical advice. Readers are advised to consult a qualified professional about any issue regarding their health and well-being."



Vitamin B Complex \$25.95

Riordan Clinic's Vitamin B Complex provides a full complement of essential B-complex vitamins and related nutrients in high potency amounts. Inclusion of Metafolin®

L-5-methyltetrahydrofolate (L-5-MTHF, a bioactive form of folate), ensures more immediate effects on metabolism than folic acid, the form of folate commonly used in fortified foods and supplements.



The Flouride
Deception by
Christopher Bryson
\$22.95

The Fluoride Deception reads like a thriller, but one supported by two hundred pages of source notes, years of

investigative reporting, scores of scientist interviews, and archival research in places such as the newly opened files of the Manhattan Project and the Atomic Energy Commission.

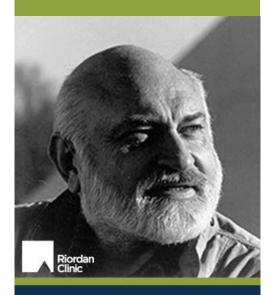


The Toxic Tooth: by Robert Kulacz, DDS and Thomas E. Levy, MD, JD \$29.95

How a root canal could be making you sick' delivers exactly what the title promises: A surprising, powerful

exposé of one of dentistry's most common procedures. Using scientific evidence that will be easily understood by both laymen and professionals, Kulacz and Levy explain why the root canal procedure is fundamentally flawed and how root canaltreated teeth introduce a steady stream of disease-promoting toxins into your body.

REFLECTING ON 40 YEARS



"Once you know, it is impossible to not know. And you are forever changed." - Hugh Riordan

"We were pioneers in our field of medicine and Vitamin C research and it has been exciting seeing the rest of the world embrace this movement. Our mission is to educate the world about the healing possibilities of Vitamin C and for Vitamin C to become the first approach to prevention and treatment."

-Dr. Riordan

To read more, please visit: riordanclinic.org/staff/dr-hugh-d-riordan/"

SHARE your STORY

As Riordan Clinic celebrates its 40th year we would love to hear stories of your experiences! Do you have a story about a particular staff member that touched your life? A service or therapy that impacted you in a positive and lasting way? Maybe a story of an event that you attended or a note about the campus?

To share your story with us, please visit: riordanclinic.org/shareyourstory



HOW DO I KNOW IF I AM TOXIC?

By Mike Bauerschmidt, MD, CCT, December 2013 Health Hunters

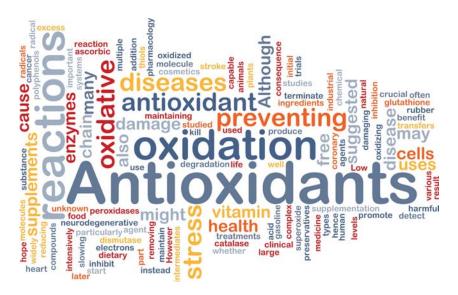
I have had many people ask me, "How do I know if I am toxic?" The correct question, however, is, "How toxic am I?" We are surrounded by, quite literally, tens of thousands of chemicals that are in everyday use (80,000 in this country alone by last count). Of the 3,000 "high production" chemicals, less than half have been tested for their effects on human beings. Furthermore, a study done on the cord blood of infants demonstrates that our children are being born with over 200 separate toxic chemicals already in their bloodstream! Many of these chemical **were out of production** before the mother was born! So, I think it's safe to say that we are literally awash in a sea of chemicals. We can't tread water, or in this instance, toxic soup, indefinitely so why do we care and what can we do about it?

WHY DO WE CARE?

We are basically a giant, walking, talking biochemistry set. The basic equation that provides us with the energy to walk and talk is the Reduction-Oxidation Equation, ReDox for short. On the Reduction side we have things that can donate an electron: these are commonly called nutrients or anti-oxidants. On the Oxidative side are things that need an electron, also called free radicals or toxins. Under normal conditions for our body, when the electron is exchanged, we generate our energy molecules like ATP, cAMP and the like. So, the good news is that we are perpetual energy machines as long as we keep a balance of Reducing agents to Oxidizing agents. But what happens when we artificially introduce Persistent Organic Pollutants (POPs), like chemicals, into the mix?

We have now raised the number of things that need an electron. In short, our oxidative stress has now been artificially increased. This requires us to utilize our nutrients or antioxidants without increasing our energy production. So, we are now using up valuable resources without any benefit. Anybody have a hundred dollar bill they want to just throw on the fire? Increased oxidative stress has been linked to all the disease of modern man: heart disease, cancer, hypertension, Alzheimers, arthritis, COPD, asthma, allergies, ADHD, the list can go on and on.

I don't know about you, but I hate wasting energy! Especially when it is going to



How Do I Know if I am Toxic continues on page 7...

cause me (notice I did NOT say "might cause me") problems down the road by shortening my life or, God Forbid, putting me in a nursing facility for the last 10 years or so of my life.

WHAT CAN WE DO?

There are things you can do for yourself and there are things that [we]can do to help you. The most important thing you can do is practice the **Principle of Avoidance.**

Avoid pesticide and herbicide laden foods by buying organic as much as possible. If you cannot afford organic, remember that peeling a fruit or vegetable eliminates 100% of pesticides and herbicides. What, you don't want to peel your strawberries? Well then, rinse them in this easily made solution of:

1TBSP white vinegar 1TBSP lemon juice 8 oz of filtered water

With this mixture you will be removing about 85% of those pesky chemicals. And, by the way, you should equate GMO (genetically modified organisms) with poison.



Avoid the chemicals in your water supply (here I include pharmaceuticals that people flush down the toilet) by investing in a good water filtration system. There are many on the market that can range from a counter top model for around \$240 to a whole house system for several thousand dollars. Just remember, while the pitcher size charcoal filters or the in-line refrigerator systems are better than nothing, they are not

going to filter the vast majority of what you are trying to get rid of. Pure spring water delivered to your door in glass bottles is the best way to insure a pure drinking and cooking water supply.

Avoid indoor air pollution. This is actually harder to do than avoiding outdoor air pollution! We have surrounded ourselves with chemicals in the home: plug-in air fresheners, fire retardant laden bedding and furniture, VOC paints,

carpeting, carpeting pads, recovered cushions, pressboard in our furniture, stain resistant carpeting, permanent press clothes, dry cleaning, Teflon pans, deodorants, shampoos, antiperspirants, perfumes. The list can continue here as well. Bottom line —get rid of known POPs (persistent organic pollutants) where you can and invest in high quality charcoal plus HEPA filter air cleaner. Be sure that



How Do I Know if I am Toxic continues on page 8...

TOXINS, HEAVY METALS & CHELATION

by: Annette Chlumsky, RN

You can tell a lot about a person's health by the condition of their mouth. It's almost impossible to have a sick body and a healthy mouth or to have a healthy body and a sick mouth. You can, however, have a sick mouth and not know it. Your mercury filling can be leeching mercury particles or mercury vapor that is poisoning your tissues. Your root canal or your jawbone can be oozing potent toxins (as mentioned in lead article), even though you feel no pain.

Few people are aware that auto-immune disease, chronic illnesses, and acute illnesses may be related to mercury poisoning from dental fillings or unresolved infection involving a root canal or extraction. Few doctors realize the synergistic relationship between each tooth and vital organs or the mouth's ability to create systemic illness.

There are many documented cases where removal of amalgam fillings, when combined with mercury detoxification and nutritional support, have cured or significantly improved serious health problems.

The Riordan Clinic offers several different methods of chelation and detoxification.

Liberal use of Vitamin C is critical in minimizing the systemic impact on the body from the acute release of bacterial toxins and in lessening the likelihood of bacterial spread to remote sites. Vitamin C intravenously helps neutralize and eliminate a wide range of toxins and helps the body's immune system neutralize bacterial infections. It is a major antioxidant that helps protect our bodies from free radicals which cause oxidative stress. It tends to mobilize mercury from intracellular stores. The advantage of receiving Vitamin C intravenously is that it bypasses the gastrointestinal system and is placed directly into circulation where the Vitamin C can reach much higher concentrations, greatly increasing the benefits, with very few side effects.

Toxins, Heavy Metals, and Chelation continues on page 8...

Toxins, Heavy Metals, and Chelation continued from page 7...

Intravenous chelation therapy is a nonsurgical treatment that improves metabolic and circulatory function by rebalancing and removing heavy metal ions from the body. The main chelating ingredient is calcium EDTA, an amino acid that latches on to heavy metals and carries them out of the body, primarily through the kidneys. Vitamin C is also part of the IV. The EDTA dosage is based on age, weight and kidney function. A series of treatments is usually recommended to reduce the heavy metal load.

Glutathione intravenously is another powerful antioxidant that helps the liver remove chemicals from the body. People with high oxidative stress in the bodies due to serious illnesses are almost always depleted of glutathione. Glutathione can be especially useful in neurological conditions.

DMSA (meso-2, 3-dimercaptosuccinic acid) is an oral mercury chelating agent. DMSA removes mercury both via the kidneys and via the bile. Dosage is based on body weight. It is a prescription product and the capsules are taken cyclic, several days on, then several days off.

There are also several oral chelating and detoxifying agents available in the Riordan Clinic Nutrient Store that may be used alone or in conjunction with the intravenous therapy: Liposomal Vitamin C and Liposomal Glutathione or N-acetyl Cysteine, (a precursor of glutathione), MSM (methylsulfonylmethane) a sulfur compound, Pecta Clear (modified citrus pectin and alginates), and Heavy Metal Support which helps to protect the body when detoxifying and replenish the trace minerals that may be depleted.

Many people achieve a new level of health after dental revision to remove amalgams or root canals, but they do not feel they have all the health and energy they would like. To determine your need for chelation, detoxification and/or nutritional support after the dental procedures, we suggest you schedule an appointment to discuss a plan. Laboratory testing will also be recommended to determine your level of inflammation, detox capabilities and your actual heavy metal load.

Call 1.800.447.7276 for more information

How Do I Know if I am Toxic continued from page 7...

when you invest you get one large enough to handle the total cubic feet of the room 3 times an hour. So, if you have a 10x10x10 room you want a 3,000 cf/hour or 50 cf/minute unit.



WHAT YOU MAY NEED HELP WITH

Of course there may be instances when it is useful to know how you will respond to any depuration (cleansing). When I try to help anyone figure out what their total body burden of toxins may be or how they might respond to cleansing, I find a few questions helpful. These questions are designed to get a sense of how your body responds to toxic loads.

The first is your reaction to coffee or caffeine. Do you get jumpy or irritable or if you have a cup in the afternoon do you have trouble sleeping that night?

The second deals with alcohol. In your past or present experience, do you find that 1 or 2 drinks leaves you feeling unusually giddy or hung over the next morning?

Third is a bonus question for women. What has your experience been, if any, on "The Pill"? Did you gain weight, feel nauseated or have headaches?

Any answers to these first few questions that indicate a poor tolerance suggests a problem with how your liver handles the POPs. We all have certain mutations in our genes that may make it difficult for us to adequately "Dump the Toxins." These mutations can often be bypassed with the appropriate use of nutritional supplements. Finally, the \$64,000 question: How do you respond to smells? If you answer this particularly with, "I can't stand them"... "they give me a headache"... "I get nauseated"...or simply "I have to leave the room immediately", you have a serious total body burden of POPs that needs further investigation by a qualified Environmental Physician.

A qualified Environmental Practitioner can offer you a comprehensive program of evaluating your toxic load as well as designing a personal program to help you eliminate the toxins you have accumulated over your lifetime. This may include Lymphatic drainage, IV nutrient support, chelation, saunas, colonics, as well as nutritional advice on how you can help your body cleanse itself.

Do you want a life lived to its full potential free from disease or debilitating illness for as long as possible, or are you willing to take a shot at being a member of the "I got real lucky" club? (You have a better chance at winning Powerball.) The choice is yours.