

Judas Dentistry

How dentists scorn science, break the Hippocratic oath, and wreck their patients' minds and bodies

Robert Yoho, MD

Inverness Press

Contents

Praise and reader comments	v
Also by Dr. Yoho	xv
Judas Dentistry	xvii
"Legal" disclaimer	xxi
How to Read This Book	xxiii
Preface	xxvii

Part One

Dentists are healthcare apostates

1. I thought dentists were inferior animals before I learned about doctors	3
2. Scott Schroeder, DPM: dental and orthopedic metals can make you sick	16
3. Terri Franklin, Ph.D. replaced her amalgams with metal-free composites	22
4. Dr. Robert Gammal's brutal view of dentistry, especially root canals	33
5. Dr. Lagos, DDS, operates in a hazmat suit to save patient lives	57
6. Four opinions about fluoridation	67
7. Mark Kennard is the canary in the coal mine	81
8. Rebecca Dutton: the protector-goddess of people damaged by metals	90

Part Two

Dentistry in context

9. "Almost everything scares me these days."	105
10. Iodine has been taken from us and toxic bromide substituted	122
11. Just like Covid, Lyme disease is a bioweapon	135
12. NASA called chlorine dioxide a universal antidote	147

Please Stay In Touch	163
Other Publications	165
Meet The Author	167

Praise and reader comments

So many academics have quietly thumbed their noses at medical doctors for years, hence why none of my PhD friends call themselves doctors.

I had part of a dentist-damaged tooth break off two days ago. I haven't gone to dentists in years because of the damage they do and the cost. A sealer or resin filling would take care of the tooth, but I can't find a dentist who will simply do that. It is a crime that Weston Price's work has not been the rule for dentistry from his time. He discovered that proper eating yields healthy, solid bones and teeth. Thanks for getting the word out.

I used to get so many fillings—it's a miracle my teeth are still in my mouth. About ten years ago, I realized I was eating horribly and causing myself chronic disease. I learned about the microbiome and how important good bacteria are to the human body, and I completely changed my diet. My tooth decay stopped after cutting out refined grains, sugar, processed meat, food additives, and other processed foods

like vegetable oils. I no longer have receding gums. I also increased my veggies, legumes, and other nutrient-packed foods. I now use clay-based toothpaste that tastes terrible but helps mineralize the teeth. I floss at least once a day. I have decent gaps that food gets stuck in. I doubt I even need the toothpaste now. I eat a diet that supports healthy bacteria living in my mouth, and my body no longer has to rob calcium from my teeth and bones to buffer itself from being overly acidic.

I also no longer have bad breath. But if I eat refined carbohydrates (like after going to a wedding or a party with friends), I wake up with horrible breath.

My body odor has slowly been decreased as well. I smell bad after a day or two of hard work and not showering, but it's nothing like before. I rarely use deodorant; if I do, it's a natural homemade version with few ingredients. All the toothpaste, mouthwashes, and most other scented toiletries are usually just masking microbiome problems, which are indicators of risk of chronic disease.

With everything going on, it sure seems like they have been trying to poison us for many decades. Your body will eliminate some of this, but we cannot know what might remain. Thanks for another "health" area I can no longer trust.

Fantastic post, Dr. Yoho. I'm 100% with you on dental and body care. The baking soda can sting for the first few days as your body acclimates. One suggestion: I've not done the in-depth research, but finding another brand than Arm & Hammer, such as Bob's Red Mill, might be a better practice. It is not cheap and doesn't come in 13-pound bags, but I'm guessing it's processed with fewer impurities.

In a similar vein, showering every day in chlorinated

water is another habit that should be stopped. Getting a filter on the shower head is a simple solution.

I changed to a biological dentist about ten years ago. I removed all amalgams and root canals. I'm so thankful I have this resource where I live. I buy all personal care products at the local health food store and get a couple of prescriptions from a local compounding pharmacy. When I see pharmacies like CVS and Walgreens, I see McDonald's medicine. Junk!

Yup. I had all the amalgam removed from my mouth about 14 years ago by my ex, the holistic dentist. I immediately felt better, slept better, had less anxiety, and I could drink hot or cold liquids without pain. You're spot on!

Thank you, Dr Yoho, for another critical article on staying healthy. Such great advice!

A few months ago, I had the best dental cleaning in my life. The hygienist had already recommended a hydroflosser and Dental Herb oil for gum inflammation, so I started using a waterpik. Instead of using a lot of the oil (\$40 per bottle), I started brushing with baking soda and then using hydrogen peroxide in the Waterpik water. I had the least amount of plaque ever, especially in my lower front teeth, which was always torture to remove.

Good on you, Dr. Yoho. I was going to say "good luck" but realized that luck would have very little to do with it. I'm your age. I had quite a few amalgams and used to suffer from migraines. Funnily enough, not being a celeb follower and a rebel all my life, when I heard that Prince Diana had hers removed, I decided to have

mine removed as well. It was done with the proper protection, too. It took some 6-7 months for the migraines to vanish. Never look back, so after all, Good Luck!

Thank you, Robert, for this great summary.

The door to our health opens with our mouth. Bugs, bugs everywhere... I just wonder how to start with a good colonization:

<https://www.dentaly.org/us/oral-health/oral-probiotics/>

Gums need L. acidophilus so much; I wonder why Covid is connected with the same type of missing bacteria. The same one we get at birth, which is now gone?

SMART is a global health initiative to protect dental patients, dental employees, and the global environment from the harmful effects of mercury that is generated during the removal of dental amalgam fillings, which contain roughly 50% elemental mercury.

<https://thesmartchoice.com/>

Dentistry is the subject that started my questioning of medicine and drugs 12 years ago. Covid was the nail in the coffin of my trust. I'm not even sure my functional medicine doctor is correct on much now, either. I've dropped mucho money on him. I'm backing off now as I'm learning to treat myself. I've always thought dentists were highly paid butchers.

I vacuum up every word, phrase, and sentence from every post of yours, Dr. Yoho, and am about to pull the trigger on buying all of your books.

I've never seen such a thorough warning list of all the dangers of "modern healthcare."

Thank you, kind sir, for this thoughtful and well-researched essay #275, "Almost Everything Scares Me These Days."

Caveat Emptor! - Let the buyer beware!

I am 81 and a retired Special Forces officer. I run a small shooting school with unarmed defensive tactics near Durango, CO.

I was recently attracted to the carnivore world, and an awful lot has come my way through your site. As soon as the government came out against hydroxychloroquine, I knew something was off. I and my peers had been issued Chloroquine primaquine for our time in the tropics, and the only problem was a few involuntary bowel movements. We took it once a week and safely. I remain unvaxxed!

My research led me to Quercetin as a substitute/ for hydroxychloroquine as an ionophore, Dr. Z, and so on.

God bless you, and keep on pushing.

I got a sunlight lamp in 1996 after struggling through every winter. It was a big box that cost \$400, but it worked within a week, and hubby wondered who this new woman was.

My seasonal affective disorder has dissipated now, mostly because I'm outdoors often in the winter. My vitamin D is high, and I'm leading a happier, more fulfilled life. These lights can be very effective for many.

Wow. Excellent article & info. I worked 15 years in healthcare, and none of it ever sat right with me.... It always felt more like slow death care. I just couldn't put it all together and was busy raising two boys while working—a

shameful situation. I'll never go back. Thank you! I am ordering your books now!!!!

Dr. Yoho, thank you!! This is one of the most essential postings to date on Substack.. a comprehensive examination of our Predatory Sick Care System... Hats off! Kudos! You have done your homework. Though I have been aware of most contained here, there are some new critical additions to my knowledge base. It is powerful.

I have been fortunate and understood Big Pharma to be little more than a cynical, for-profit enterprise for 40 years. I have never taken the poison jab nor any of the big Pharma trash since the Marine Corps vaccinations 50 years ago.. today I am still a health nut and very fit, and I continue to climb big rocks [I have climbed El Cap in every season in every condition] and still ski the Sierra Backcountry at 74.. I have a little arthritis but no biggy.. the body is fragile, but I can still rock and roll...

Thank you again for your masterpiece! Keep cranking!

Great job on that speed ascent on El Cap, too.. Strong, brother!!

Dr. Yoho always offers a Substack filled with helpful information I'm not coming across elsewhere, at least not in breadth.

First of all, I LOVE the climbing shot!! Tim and I were mere novices compared to you.

I'm sure margarine and Crisco killed my grandparents- they had a steady diet of that plus smoking... BOOM!

Drill, fill, and bill—I'm sure my teenage mouth was used for this racketeering nonsense. Still on the fence about widening and drilling out healthy remaining tooth structure

and weakening what is left to change out the filling—
thinking on this..

Your books have taught me so much this last year. Thank
you 🙏

Brother. Thank you. We have become an increasingly
paranoid world where we think science and chemicals can
save us. They cannot. We are told day after day how and
where to live.

We are earth's creatures. I am not afraid of the sun. At
66, I still dig in the earth with my hands, walk on the beach,
and feel the grass on my bare feet. And yes. I step in dog
poo. It washes off. I don't like snow, but I will endure it.

I will die in my own bed.

I restacked this post, Dr Yoho- thank you. We need the
unvarnished truth. You should consider attending the
Florida Covid Summit next year- it was outstanding this
weekend, and here's the link- all the best to you.

Dr. Y, thank you for your honesty and excellent writing
skills.

I recently attended a reunion lunch with several ER
nurse friends. It's sad to report most took the Covid jab.
DFL and DFR.

Thank you! Fantastic information, as usual! I will speculate
that any amelioration of allergies would come from cleaning
up the gut and helping immune functioning. We will try it
at some point. We have spent tens of thousands of dollars in
functional medicine trying to get my son to be less allergic
(he has Eosinophilic Esophagitis.). He is very disciplined, in

his early twenties, and manages without pharmaceuticals via an elimination diet and many supplements. This means he can safely eat only about 25 to 30 foods. Never eats at restaurants. He has environmental and chemical allergies as well. EoE was unheard of 40 years ago. It has exploded along the timeline of the increase in childhood vaccine uptake. LDA and LDI (low dose allergen) therapy are suppressed treatments for allergies but, unfortunately, did not work for my son. They are available through independent practicing integrative medicine MDs.

You are posting a wealth of knowledge, Robert. I have learned so much. Thank you.

Thank you, thank you, Dr. Yoho. I will try for high mercury and encourage friends with Lyme to try too.....and many other things.

Actually, when assembling my supplies, I will do multiples for Christmas gifts along with your excellent article.

Great article!!!!!!! 10 Stars.

It was so complete, and you made it so easy.

Great article, Robert! You often put out valuable and helpful stuff.

This is a great dental information article. Welcome to the club of doctors who help patients obtain and maintain health and vitality. I would second all the information in this newsletter. Dentist are deadly to most of their patients. They are one of the only medical professionals who leave dead body parts in their patients' bodies. I, too, was trained by Dr. Huggins on cavitation surgeries and tried to practice holistically. I wrote a dental health care book in 2018 that

attempted to give people a summary of what to do to take care of themselves without a lot of dental intrusions. It was called Holistic Dental Care. I will check out the websites you listed. I have started a Substack newsletter for like-minded health practitioners and would love your input. Blessings, Rev. Dr. Stephen A. Lawrence

Thank you for this profoundly impactful information, Dr. Yoho. I will be sure to read your other articles regarding criminal conventional dentistry and share this far and wide.

Horrible is putting it mildly. Although, given all the fraudulent theories we're encouraged to subscribe to by allopathic medicine, I guess it's hardly surprising. Thanks again for your tireless efforts, Dr. Yoho. And double thanks for keeping your Substack free from the bottom of a single mother's heart.

I did not realize bad teeth could be so harmful to health.

Incidentally, I have never been to a dentist in 40 years, not since my last compulsory primary school visit. I have never had any real health issues since that time.

I am now more resolved to continue my dentist-free life.

On the fluoride: I think its use in drinking water may be a cause for older women's fragile bones; lifelong consumption of fluoride water could result in the bone destruction that is drilled (haha) into us.

Also by Dr. Yoho

A New Body in One Day (2004)

Butchered by "Healthcare" (2020)

Hormone Secrets (2021).

Cassandra's Memo (2023)

Twenty articles in medical journals

Cosmetic surgery website: I retired in 2019 but DrYoho.com is
still live

Author website: RobertYohoAuthor.com

**Please subscribe to RobertYoho.substack.com to stay
up to date.**

Judas Dentistry

**How dentists scorn science, break the
Hippocratic oath, and wreck their patients'
minds and bodies**

By Robert Yoho, MD (ret)

Inverness Press

Copyright © 2023 by Robert Yoho. Cover copyright © 2023 by Robert Yoho.

All rights reserved, including the right to reproduce this book or portions thereof in any form.

For information, contact RobertYohowriter@gmail.com

Robert Yoho

PO Box 50007

Pasadena, California, 91115

Library of Congress Control Number:

BISAC Subject Codes:

MED035000 MEDICAL / Health Care Delivery

HEA028000 HEALTH & FITNESS / Health Care Issues

BUS070170 BUSINESS & ECONOMICS / Industries / Healthcare

The stories here came from actual patients or doctors, who all gave permission. I changed some of their names and a few details to preserve their privacy.

*To my friends who turned disasters into lifetimes of service.
Here is an Aurelius quote for each of you.*

Becky Dutton, *Metals Goddess.*
Bad luck borne nobly is good luck.

Robert Gammal, *the dentist who stepped out of the
Matrix.*
Nothing hinders you from doing what must be done.

J, my anonymous colleague, *who walks with
equanimity among psychopaths. You gave me a gift I can
never repay.*
*With the god's wind beating on our backs, we pull harder on
the oars and make no complaint.*

"Legal" disclaimer

I have no conflicts of interest that I can identify. I am not soliciting business for myself—I retired from practice when I was 66 and resigned my medical license. I had a fantastic career as a cosmetic surgeon, and I was initially sad to end it. But I am happy that a small part of my life is left to write, research, and contribute.

I have no financial relationship with any doctor or institution nor received funding from anyone. I own no substantial healthcare stock. If there are any net profits from this book, I will donate them to a worthy cause.

These are my opinions based on decades of medical training, practice, and reading the literature. I make no guarantees about them; none of this book should be construed as specific medical advice. Your licensed providers are the only ones who should advise you, but you must learn as much as possible and take your own counsel. I cannot recommend any specific provider in this age of frivolous lawsuits. Remember that each has an individual license, and they, not I, are responsible for your treatment.

How to Read This Book

This was written about events in my life during the last half of 2023. As you scan each chapter, you will learn how my thinking evolved.

I have a quirky habit of inserting amusing but unrelated stories into my writing. Trust me—you need occasional breaks because my themes are brutal.

I am not a nonprofit; I am a *no-profit*. I give anything I make here to our movement's leaders and send all net Amazon funds to my Amazon Ads contractor. Please buy my books to help him, but if you cannot afford it, download the ebooks for free. In any case, please write reviews. The direct review link for *Judas Dentistry* is [HERE](#).

The references are available as links in the ebook, which you can access [HERE](#). To find the original unedited posts and their audio on [RobertYoho.Substack.com](https://robertyoho.substack.com), focus your cellphone camera on the QR code at the start of each chapter. Or, from the ebook, click the “LINK” below this.

Since Substack is not censored, it is worth more dead than alive. Some predator may buy it and pull the plug, but if this happens, I will make the content available elsewhere.

To stay with me, be sure I have your email by subscribing to RobertYoho.Substack.com.

If you buy my books—thank you!—Amazon will prioritize your reviews. If you are tight financially, download the ebooks as my gifts. The only favor I ask in return is that you pass the download links to at least five people.

HERE is how to download *Butchered by “Healthcare.”* This is a minor viral hit. For *Hormone Secrets*, the link is HERE. *Cassandra’s Memo* is HERE, and a podcast about it is HERE.

On Amazon: *Hormone Secrets* is HERE, and *Butchered by “Healthcare”* is HERE. THIS is the secret link on Amazon for *Cassandra’s Memo*, and it is also available at Barnes and Noble HERE.

The audio version for the first half of *Butchered by “Healthcare”* is published as a free podcast HERE and on YouTube. You can also listen to the first half of *Hormone Secrets* on YouTube HERE.

I have been a guest on hundreds of podcasts. THIS one is about hormone supplementation. A hormone testimonial video is HERE. A podcast about healthcare corruption is HERE, and THIS is an introduction to *Butchered by “Healthcare.”*

Subscribe to RobertYoho.substack.com, and I will send you updates. RobertYohoAuthor.com has more.

All my best,

Robert Yoho, MD (ret)

Yoho.robert@gmail.com

December 2023

For power readers: These will help you decipher anything.

✪ The updated Golden Rule is that those with the gold make the rules, so learning the funding source explains a lot. I used to think it explained everything until I understood psychopaths. Read Chapter 2 of *Cassandra's Memo* to learn about them.

✪ If you do not follow the reasoning, it is a clue that someone may be lying to sell you something. Remember that you are just as bright as lawyers, doctors, Ph.D.s, and financial advisors. Even if they are honest, these eggheads are at a disadvantage—they are so lost in the weeds that they seldom see the entire picture.

✪ Confusion, controversy, and contradictory evidence about small numbers prove that a study is worthless. Never conclude that “reasonable people disagree,” “the science is developing,” or that tiny percentage differences mean anything. Your default should be to disbelieve whatever you are told, for as Theodore Sturgeon’s law states, “90 percent of everything is crap.”

✪ This garbage percentage is highest for medical studies—and more recently, for “climate change” research. Why? Researchers must produce the results that funding sources command. Roughly 75 percent of worldwide health research financing is corrupt money from the Gates Foundation, the Wellcome Trust, and Fauci’s NIAID agency. Want more proof? Richard Smith, editor of the *British Medical Journal* until 2004, titled his 2021 editorial, “Time to Assume That Health Research is Fraudulent Until Proven Otherwise.” RFK, Jr.’s book *The Real Anthony Fauci* presents staggering evidence that Smith is correct.

✪ Although “link rot” destroys up to ten percent of the

Internet's content each year, virtually everything ever posted is still alive and well on the Wayback Machine Internet archive. Not even the Chinese or the global psychopaths have so far been able to hide from it. To find a hidden link, copy the bad URL (the original web address) and enter it at archive.org. Then, look for the backed-up copies and select the date you want to view. You can save any page for free indefinitely on another of their pages. Unfortunately, the Wayback may soon be vandalized or even destroyed. See Mercola's Fake Fact Checking chapter in Part 2 of *Cassandra's Memo* to learn more.

★ Blasting through certain paywalls is easy. Sci-hub is a “piracy” website in Russia that can get you many academic articles at no charge. Just copy the link into their browser. This is against US law, but some academics publicly thank them. Whether you pay for articles is private between you, the journal, Sci-hub, and your maker. I believe that all information—of any kind—should be shared freely. Rumors of Sci-hub's demise may be premature, but they have to repeatedly change domain endings as they keep being seized. Try sci-hub.ru.

Preface

It is of no consequence to you what other people think of you. What matters is what you think of them.

— Gore Vidal

I always thought dentists were somewhat stupid colleagues who still deserved respect. But when I began studying them in May 2023, I realized their treachery surpassed even that of psychiatrists and pediatricians. Make no mistake, I am furious with these other specialties, for what they do is a monstrous net harm.

But the dentists... Self-reflection, objective analysis, and “patient first” ethics seem outside their considerations:

- ✦ They are co-conspirators in the fluoride debacle.
- ✦ They use mercury, the most toxic non-radioactive metal, in possibly half of US fillings.
- ✦ They never met a wisdom tooth they did not want to pull.
- ✦ Most of them place toxic titanium implants any time they can.

Preface

★ Their worst atrocity is root canals, which are universally infected and seed bacteria throughout the body..

Thoughtless for-profit and paid-off dentistry is related to about 40 percent of human diseases in developed countries. I will prove this is not hyperbole.

As for the medical specialties, I am unsure which kills and maims the most. Gutless pediatricians have danced for decades in an industry-sponsored conga line ratifying vaccines. No study has compared these with placebo—ever. The result is that our kiddie specialty mindlessly traffics poisons. Over the past 40 years, this raised the autism rate from 1/10,000 to 1/30. Unless we deploy a cure soon (see the last chapter for that), it will tear our society apart.

Psychiatrists are drug pushers proffering elixirs they claim cure a thousand ills. Sorry, I exaggerated. Only 450 “diagnoses” are found in their “billing bible,” the Diagnostic and Statistical Manual of Mental Disorders. To concoct these, American Psychiatric Association members cast votes. Most are paid handsomely by Pharma one way or the other. Doctors cover up this bribery by calling it a “financial conflict of interests.”

These “diseases” are purpose-built to be “treated” using pricey medications that are already FDA-approved. Pharma pays half of the FDA’s budget just as they pay the doctors, so it is a rubber stamp. Finally, corporate “disease-mongering” fear campaigns convince us we must take the drugs.

This “mental health” industry has convinced over a quarter of Americans (and 80 percent of Danes) to use psych drugs. Monthly shots are forced on others. None of these medications has been proven effective. They numb us, addict us, and cause violence, suicide, and social dysfunction.

We know this because—as with (all) vaccines—the crim-

Preface

inals running big Pharma never do trials of these pricey nostrums against placebo controls. The absence of this vital testing renders their study results meaningless. Without the other evidence, this convicts the authors of managing a scam and everyone else of fraud. The FDA has been paid off, so they never raise a finger.

Dentists and physicians swear the Hippocratic oath, “Put your patients’ welfare above your own.” Most dentists and many doctors abandon this promise. They are health-care apostates.

I knew nothing about dentists until recently

I was forced to study them when I discovered they had crippled my health.

Physicians built a Chinese wall between the mouth and the rest of the body. When we made dentists responsible for the “oral cavity,” we abandoned our responsibility and left this vital structure to careless, incompetent fools.

I met my first “tooth doctor” during the “drill, fill, and bill” era when I was nine. In those days, they were jamming mercury amalgams into every natural tooth pit and crevice they could find. Although I never had pain, our dentist always managed to convince my obsessive mother that my mouth was packed with cavities. By adulthood, I had 17 “silver fillings.”

In mid-2023, after a decade of a left-handed tremor that seemed almost cosmetic, a neurologist diagnosed me with Parkinson’s disease. Mercury is the most common cause, and lab testing showed mercury, aluminum, and glyphosate. Neurologists are good at naming, diagnosing, and treating symptoms, but few seem to have a clue that toxins such as these, paraquat, and Agent Orange cause brain damage.

Preface

Related syndromes also caused by these poisons include autism, Alzheimer's, and amyotrophic lateral sclerosis.

I studied aggressively to learn what to do. First, in mid-2023, I had my amalgams removed. More recently, I have been getting intravenous phosphatidylcholine followed by glutathione, then colonics* to remove the mercury and other toxic reservoirs from my body. I hasten the process by sweating during workouts and in saunas. I also take supplements such as selenium. To rid myself of aluminum, I drink silica water. I swallow a teaspoon of glycine twice daily to speed urinary glyphosate excretion. I am starting chlorine dioxide and using a red light from Sauna Space. I am not better yet, but it has only been a few months.

*Yes, I was also skeptical. I spent two weeks in Germany getting intravenous medications daily and colon therapy three times a week. This was a liter of water run in and out of my colon once every minute for an hour. This eliminates some of the toxins that the IVs mobilize. Decades of experience detoxing patients with and without colonics prove these make the process work better.

My readers are kind to me.

A chain of their referrals introduced me to Becky Dutton, whom I call the Metals Goddess. Her concern about mercury began with personal and family exposures. After a specialist in London helped her eliminate her mercury, Becky set up a support group.

Ms. Dutton eventually connected with a man who studied scoliotic fish living in mercury-contaminated water. Clues like this led her to bring together and study 66 people with mercury toxicity and severe scoliosis. Many of them were damaged further by back operations. Here is an

Preface

example of the type of patient she has devoted her life to helping: Download

Mercury is a neurological toxin. Hat makers' use of mercury in past centuries stamped them as "mad as a hatter." I am bright and functional professionally but have always been a bit quirky, slightly hyper, and prone to anxiety. A psychiatrist friend once informally skewered me with a diagnosis and, as is their custom, recommended medication. I ignored him.

Fortunately, my wife—most of the time—accepts me as I am.

In Europe, mercury fillings are slowly being phased out. However, many US dentists still use them promiscuously for children and patients on public insurance programs. Amalgams are cheap, easy to place, and profitable.

See Chapters 7 and 8 and Becky's comprehensive mercury websites: mercurymadness.org and understandingscoliosis.org.

Further dental felonies

Many dentists sell wisdom teeth extraction to everyone. Their pitch is that "it prevents the possibility of needing removal later if they become impacted." Their websites make the improbable claim that this happens to over two-thirds of people with mouths. Some say that premolars, the teeth in front of the molars, should also be pulled out "to make more room in your mouth." See the end of Chapter 1 for more.

This is the same retarded reasoning that gynecologists use to push ovarian removal during hysterectomies "to prevent ovarian cancer." These tumors are rare, and cutting ovaries out leaves women vulnerable to osteoporosis and

Preface

other diseases of aging, so the procedure is a net loss. But like pulling normal teeth, it is easy surgery and easy money. Butchered by “Healthcare” tells the story (word search the PDF for “hysterectomy.”)

Dental “professional” groups also advocate polluting tap water with fluoride. Most of it is sourced from China and contaminated with lead. To dispose of their waste product conveniently, the producers pay the American Dental Association millions each year to promote its supposed benefits.

Fluoride is a neurotoxin that, among other hazards, decreases children’s IQs. Ninety percent of US, Canadian, and Australian water supplies are “fluoridated,” but the rest of the world has mostly banned it. See Chapter 6.

The worst dental crime by far is that almost all of them perform root canals. This consists of killing teeth, mummifying them, and leaving them in place to rot and spread disease. This profoundly health-damaging procedure was disowned by its inventors. However, both general dentists and endodontists, their ethically challenged subspecialty, continue this profitable practice. Sixty percent of Europeans and somewhat fewer people residing elsewhere have at least one root canal. THIS video is the most accessible complete reference.

I interviewed two senior dentists, Dr. Gammal from Australia (Chapter 4) and another from Europe, who requested anonymity. They separately confirmed their opinion that dentists cause forty percent of human diseases in the developed world. In Africa and other underdeveloped areas, dentistry is less “advanced,” so it is less hazardous.

My anonymous expert told me hair-raising tooth tales

He said dentists do not bother checking blood pressure or using monitoring devices during procedures requiring sedation. This is dangerous because those getting intravenous drugs can stop breathing. Monitors beep loudly if this happens, and the doctor can breathe for the patient until he recovers. But if there is no monitor, the patient can die.

He also reported that dentists do not bother to ask their patients about their medical histories. For “real” doctors, the standard of care is to have a specialist, or at least a physician who knows the patient, examine those with medical problems before surgery. This can prevent operating room disasters.

He added, “Dentists do not use sterile technique, so their patients sometimes get massive infections. When dentists attend operating room training, their carelessness is an embarrassment. The nurses frequently ask them to re-glove when they touch the chair or table.”

He concluded, “After I understood the health hazards of mercury to the patients and me, I quit. Many of my DDS friends from the old days were poisoned by it and are dead.”

For physicians, dereliction of basic standards like these could result in license revocation. I was a trained surgical center inspector in my past life, so I know.

I have a friend who was diagnosed with a fatal disease, and I wondered what had ruined her health. Since I was studying dentistry, I thought about her mouth. I learned that her “tooth doctor” had carved down four of her normal teeth, installed root canals—some with mercury—and placed bridges containing other metals. However, her local DDS told her that her x-ray was normal.

Preface

So, she consulted a specialist. He said the x-ray was horrendous and that general dentists are too incompetent to read their films. When he removed the bridges and root canals, he found osteoporosis, infected “cavitations,” and large “anaerobic” abscesses smelling like excrement. It took him six hours to clean it out. He told her later that the infections would have killed her. My friend’s chronic illness gradually disappeared over several months.

Dentists shamelessly advertise their worst crimes, but some repent

The following is from one of their websites:

Are Root Canals Safe? We’re here to reassure you that modern root canals are not what you may imagine them to be. In fact, 97% of root canals are successful procedures, according to the National Center for Biotechnology Information (NCBI). Plus, 85% of teeth fixed by a root canal last a lifetime.

Dentists who understand what their specialty is doing seldom speak up for fear of retaliation. It can cost them their licenses in the UK and parts of the USA. But a few confess what they have done. Becky Dutton received this letter from one:

I am reading your website with great interest and, if I am completely honest, a feeling of deep guilt and unease having inflicted patients, friends, and family with dental amalgams over a period of 30 years.

As dentists, we really were brainwashed into

Preface

believing that mercury, in the form of amalgam fillings, was completely safe.

My own chronic ill health led me to early retirement in 2015 and to the start of my research into the microbiome, my previously undiagnosed parasitic infection, bad bugs and, of course, heavy metals.

Five years ago I had a course of FMT [fecal transfer to repopulate gut bacteria] and I just completed another course. Two years ago I had all my amalgam fillings removed by a holistic dentist who followed the correct guidelines.

I was very interested to read your journey and would be most grateful for further information regarding safe mercury detox.

Many thanks for creating your website. It has been a mine of eye-opening information.

Robert Gammal is a dentist who gave up traditional practice and wrote about the corruption in *The Garbage Collector* (2023). His website is [HERE](#). See Chapter 4.

A few MDs also step into the light.

Paul Thomas and Ken Stoller are pediatricians who disavowed vaccines. Paul interviewed Ken in *THIS* fantastic podcast.

I have never seen psychiatrists admit to insights about their specialty. Their drugs are highly addictive, universally destructive, and divorced from even the ruined science of the rest of healthcare. Flipping their minds to rationality is nearly impossible.

Scott Schroeder is a podiatrist who learned that the metals he had been casually implanting his whole career

Preface

were toxic. He has spent the last decade spreading the word about the damage they cause. See Chapter 2.

Plastic and cosmetic surgeons who confess that breast implants are a net harm are practically unheard of. I know only three: Dr. Khan, Dr. Feng, and me. The first two specialize in the complicated surgery of removing implants and the surrounding scar intact. This en bloc excision offers the best chance of curing breast implant illness, a syndrome of symptomatic silicone toxicity and various accompanying infections. These surgeons have Facebook pages that allow you to communicate with their patients and hear their stories.

Parting shot 1 by the anonymous whistleblower

A DDS colleague I will call Charles called to tell me that his patient had just died in the chair. I asked him, “What was his medical history?” He replied that he did not know. I learned later that the patient had heart disease.

I asked Charles what the heart monitor showed. He replied he did not use cardiac monitors. These cost \$1000, but this guy charges more than that for each crappy titanium implant he places.

I also asked how many shots of anesthetic with adrenaline he gave the man. He told me that he “lost track.” Those of us who remember our most basic training know that excess adrenaline can be fatal, especially for heart patients. We also know that too much local anesthetic is poisonous.

I told the dentist he was lost and that he should pray. But the family never filed a lawsuit, so no one ever found out that Charles had carelessly killed his patient.

Preface

Parting shot 2

Thirty years ago, I spent three continuous days underground in Lechuguilla Cave. I saw most of the spots in THIS VIDEO and swam across the underground lake.



The friend who invited me on the expedition died last year of a vaccine-induced stroke. He DFL to my advice and paid the price.

To my surviving friends: please let me know by text that you looked at this video. If you do not, you DFR.



I saw this inside Lechuguilla. (Credit: video above.)

Part One
Dentists are healthcare
apostates

Chapter 1

I thought dentists were inferior animals before I learned about doctors

I know now that we are all different species of bought-and-paid-for industry skills. For the dentists, exhibit A is dental products, B is fluoridation, and C is mercury amalgams and root canals.



LINK

Before I start bashing dentists, I confess that I was once an acolyte of Jay Geier, one of their marketing gurus (schedulinginstitute.com). I attended conferences with hundreds of dentists and a few cosmetic surgeons to learn about corporate sales. Part of what he did was to teach geeky professionals basics, such as how to dress, make eye contact,

and even keep their offices clean. I learned a lot and spent tens of thousands of dollars. My wife, who wrote the checks, informed me repeatedly that Jay was a fraud.

Exhibit A: Never trust commercial toothpaste or oral care products

In an age when we are hearing rumors about Big Agriculture putting genocidal mRNA bioweapons in our food, worrying about toothpaste, mouthwash, and dentists might seem trivial. We might soon be in a scene like the escape from the gulag in the movie *Mad Max Beyond Thunderdome*. Max asks the train conductor, “What’s the plan?” He replies, “There ain’t no plan... the track ends in four miles.”

But even if the apocalypse is nigh, you should learn that holding chemicals in your mouth puts them into your bloodstream nearly as fast as giving them intravenously. For example, nitroglycerine placed next to your gums immediately relieves the chest pain from heart disease. And even though Proctor and Gamble says their products are “Iconic brands you can trust,” thoughtlessly scrubbing them into your mouth pushes whatever corporate marketers cook up directly into your body. You cannot spit it out.

In 1997, the FDA put a warning on every toothpaste tube, “If more than used for brushing is accidentally swallowed, get medical help or contact a poison control center right away.” They also said that children under six should only use a pea-sized amount.

Studies implicate mouthwash in head and neck cancers. One common ingredient, chlorhexidine, raises blood pressure. Triclosan, widely used in dentistry, is a pesticide that has been shown to harm kidney function (see Swartz’s book below).

Judas Dentistry

I now view every corporate concoction as potentially harmful. We know the people selling them prioritize only profits, have little regard for health, and will claim anything to increase sales. Likewise, the endorsement of multiple toothpastes by the American Dental Association solely proves that the companies paid for it.

All conventional toothpastes and most fluoride-free “natural” ones have artificial sweeteners. Cyclamate, the first of these fake sugars, was invented in 1937. In 1969, when the annual sales were a billion dollars, studies proved that it caused bladder cancer in rats. The US banned it for foods, then took it completely off the market in 1970. Abbott Laboratories, the owner, petitioned to have it reinstated in the US several times but failed. It is still approved in 130 foreign countries. Saccharin was banned in 1981 because of similar issues.

Six artificial sugars are now approved in the US. Xylitol is found in many toothpastes, including some from health food stores. It is a non-nutritive, antiviral, and antibacterial plant sweetener. My friend and mentor Martha Rosenberg wrote an article about its positive attributes that you may download [here](#).

But like other chemical sweeteners, there are internet claims that xylitol causes blood sugar disturbances that might contribute to diabetes. A search reveals reports of irritable bowel syndrome, diarrhea, kidney stones, and cancer. Higher doses are said to produce liver failure. The European Union forbids the use of this sugar in soft drinks, and a single piece of xylitol chewing gum can kill small dogs. Whether this is true or simply bad press generated by competitors is unknown.

I do not need to review the other non-nutritive sweeteners to convince you they deserve no place in your body.

Robert Yoho, MD

Most have been implicated in health hazards. These fakes are everywhere—sodas, candies, sports drinks, and “energy” drinks. Most of us thoughtlessly pound this stuff down every day. I did until recently.

My readers understand you cannot trust any Pharma or food company “research.” For example, saccharine’s follow-up studies suggested it did not cause cancer: “Most studies of the other five approved artificial sweeteners have provided no evidence that they cause cancer or other adverse health effects in lab animals.”

Do you think real studies will ever be performed on these products by the corporations making the money? Do we need to waste time looking at other ingredients in commercial oral hygiene products before trashing them?

HERE is an article describing seven nontoxic alternatives to commercial toothpaste. These are charcoal, Bentonite clay, baking soda, neem (from the evergreen tree), Miswak (twigs of the *Salvadora persica* tree), and sea salt (there is concern that large particles of this damages tooth enamel). A reader recommends Takesumi Supreme charcoal powder.

Here is what I do. After using a Waterpik, I brush my teeth with coconut oil using my Sonicare. I then do “coconut oil pulling,” swishing it around my mouth and through my teeth for twenty minutes. Since I am often working, this is not socially awkward or time-consuming. It removes residual food particles and inhibits plaque formation. Spit it out, but not down the drain, as it can clog it up. A gallon of coconut oil is \$20. At least one review concludes that brushing your teeth and even plaque removal has little effect on cavities.

I am also starting chlorine dioxide mouthwash. You can get commercial products from frontierpharm.com or

Judas Dentistry

dioxirinse.com. but I recommend you learn how to make your own from my post [HERE](#).

What about deodorants? Almost all have aluminum, the vaccine additive used after the dangerous mercury was removed from (most) of them. You can find some that contain none, such as the “Life Doesn’t Stink” roll-on.

Baking soda works better and costs about two cents daily (thanks to Arnie at Liar’s World substack). Use a volume equivalent to about three or four American quarters. Moisten it with water, rub it between your palms, and apply. Caveat: using too much causes skin irritation. Some only need it every other day.

Mercola recommends using hydrogen peroxide in your Waterpic reservoir and your mouthwash. To try this, pour some 3% hydrogen peroxide into the water pic tank, then fill it with water. You do not need to measure the exact quantity because most people tolerate it even at 50 percent strength (1.5 %). I use a teaspoon of the 50:50 mix for mouthwash, and it foams satisfyingly. Caveat: if your mouth is sensitive or easily irritated, try it using quarter strength.

I use the cheap Costco brand, but [HERE](#) is one that is food-grade. Dentists say this process can make infected gums pink and healthy in a few weeks. This is more than a cosmetic issue; the same bacteria in dental plaque and diseased gums can spread to coronary artery blockages. [THIS](#) excellent podcast explains.

It is hard to get too much magnesium, so I use a magnesium roll-on deodorant. I poured my Colgate mouthwash into the toilet and filled the bottle with the 50 % hydrogen peroxide-water mouthwash mix (1.5 percent). Tom’s toothpaste contains xylose, but I sometimes use it anyway. My dog is safe because he stays out of the bathroom. When I

checked the Sonicare toothbrush with my EMF meter, I was relieved to find nothing.

Exhibit B: fluoridation

In America, phosphate fertilizer companies dispose of their industrial waste fluoride by putting it into our drinking water. These companies subsidize the American Dental Association with millions every year, and they, in return, rabidly promote fluoridation.

Swartz (cited below) writes, “The more [fluoride] is used, the greater the damage to the central nervous system [brain].[145] It should never be used in dentistry or any product. Putting it in drinking water is criminal... It does not prevent tooth decay. It causes dental problems over time.” Fluoride has been conclusively proven to significantly lower children’s IQs.

The best way to understand these issues is through the Fluoride Action Network. They are pursuing fluoridators through the US federal courts. In a recent victory, the judge on the case released a comprehensive summary of expert science indicting fluoride. It cited irrefutable studies relating pregnant mothers’ high urine fluoride levels to profoundly depressed children’s IQs. Biden officials, including Rachel Levine, transgender admiral and later Secretary of Health, are managing the litigation on the wrong side.

(Update [HERE](#).)

Seventy percent of US communities are victimized by fluoride, but most of the rest of the world has banned it. In Europe, for example, 97% of the countries choose not to fluoridate drinking water. If you live in the USA, and you do not want stupid children, you must rid your water of

Judas Dentistry

fluoride using filters or reverse osmosis systems such as Culligan's.



Water fluoridation by country (Wiki).

Postscript: About a quarter of prescription drugs have toxic fluoride structures, including:

- ✪ Statins (Lipitor, Crestor, etc.)
- ✪ Anti-inflammatories (some steroids and NSAIDs)
- ✪ Antacids (Prevacid)
- ✪ Antidepressants and antipsychotics (including nearly all SSRIs)
- ✪ Some antibiotics (Levaquin/Cipro)
- ✪ Some antifungals (Fluconazole)

Avoid them if you can.

Exhibit C: Amalgam "silver" dental fillings and mercury root canals

Amalgams are a pre-Civil War technology that should have been outlawed long ago. Half of US dentists acknowledge this and never use them because of the well-known hazards of mercury. Amalgams are inexpensive and more profitable for dentists than newer technologies. Ignorant or unscrupulous practitioners often place them in poor patients with

Medicaid federal insurance. Many dental schools and the American Dental Association still refuse to acknowledge mercury's dangers and continue to promote amalgam fillings against a mountain of established science.

The following is from *Toxic Teeth: How a Biological (Holistic) Dentist Can Help You Cure Cancer, Facial Pain, Autoimmune, Heart, and Other Disease Caused By Infected Gums, Root Canals, Jawbone Cavitations, and Toxic Metals* (2019) Swartz M.D., J.M.; Wright M.A., Y.L.

Amalgam (“silver”) fillings are a mixture of several metals, one of which is mercury. Nickel, lead, aluminum, and cadmium are also used in the alloys. These all tend to leech out of the fillings and are absorbed into the body's tissues. [Other sources say that, in addition to mercury, these may contain tin, zinc, and sometimes copper, the most toxic of the last three.]

[These] “silver” fillings are made up of 50% mercury, which [causes] health problems.[79] ... Mercury fillings represent the largest mercury exposure to people all over the world. Dr. Friberg, the chief advisor of the World Health Organization, insists that there is no safe level of exposure to mercury.[80] [81] Mercury is one of the most toxic naturally-occurring substances in the world.[82]

Medical professionals realize this. If a mercury thermometer was still being used in a hospital and it broke, the whole floor would be closed down, and the hazmat team would come in to clean it up. The dental filling has about fifty times as much mercury as a thermometer. Mercury exposure is deadly, affecting the way you think and feel.[83] [84]

If you have a mouth that contains one or more fillings made with mercury (amalgam or silver) fillings, you are

Judas Dentistry

constantly exposed to toxicity.[85] When you chew or brush your teeth, mercury is released from the fillings and goes into your body's tissues. This happens from the very first day the mercury filling is placed into your mouth by a dentist, until it is removed.

There is no safe way to place an amalgam filling. Mercury amalgam is the absolute worst material being used to fill cavities. Careful barrier techniques are crucial when removing mercury to protect patient, doctor, and staff from mercury exposure during the procedure. Because the fillings do not last, they must be replaced repeatedly. However, safety in removing mercury amalgams is usually not a priority in most dental offices. This causes toxic exposure to the patient, the dentist, dental personnel, and anyone in the office. The media is unaware of this problem.

Mercury vapor is released from amalgams[86] when you chew[87] and crosses right through the blood-brain barrier. The more mercury you have in your mouth, the more mercury you have in your brain[88] and kidneys. [89] [90] It may take some time for symptoms to present themselves as the mercury slowly builds up in the body. Early symptoms like fatigue, difficulty sleeping, anxiety, and depression may not be easily recognized as being associated with the amalgam fillings. Mercury from fillings can create many common symptoms, including depression, anxiety, chronic fatigue,[91] chronic headaches, digestive upsets, depression, and memory problems.[92]

Mercury toxicity in a pregnant woman and also in the father[93] can cause problems in the unborn child.[94] [95] Mercury causes destruction of your cells[96] and leaky membranes.[97] Mercury vapor causes damage to

Robert Yoho, MD

both sciatic and optic nerves,[98] and nasal sinuses.

Breathing in the mercury vapor takes the mercury straight into the brain,[99] damaging the lungs.[100] [101]

Amalgams are a huge source of environmental pollution.[102] The dental industry dumps about 4.4 tons of mercury into the planet annually. Mercury doesn't just come from coal-fired energy plants. It comes from dentists who keep putting it into people's mouths. Imagine the huge amount of mercury that is released into the environment when someone who has mercury fillings dies and is cremated.[103]

More:

★ Swartz had dental care every six months during his entire life. No cavities were seen except during a brief period at college when a dentist mysteriously discovered a dozen and filled them with mercury amalgams. I had the same experience when I was about ten—I had 17 amalgams placed over two years. No one discovered other problems in my mouth besides him. Swartz and my mother trusted these people. Behind closed doors, dentists call this “drill and bill.”

★ Dr. Mercola had two dozen mercury fillings installed during his youth. The circumstances were likely similar to mine. He had them removed later, but he had the work done by a conventional dentist rather than one who used barrier methods and a vapor evacuation system to prevent mercury exposure. This damaged Mercola's kidneys.

★ “Biological” dentists specialize in removing and replacing the outdated, hazardous metals in patients' mouths. These include root canals, which frequently contain mercury and are also sources of chronic, often asymptomatic, infection. “Cavitations” adjacent to dental

Judas Dentistry

appliances are also often infected and need to be drilled out. This work produces symptom relief in about eighty percent and usually dramatically improves health.

★ Swartz advises choosing a dentist who has been certified by Hal Huggins, one of the innovators. To learn more about this and to find a dentist who uses the Huggins methodology. They know that if the mouth is unhealthy, the rest of the body cannot be healthy.

★ *Chew On This... But Don't Swallow* by Grube and Vazquez-Tibau (2022) is a similar reference that has other stunning stories. One of the authors, a dentist with decades of occupational mercury exposure, had her blood work checked during a holistic dentist seminar and was diagnosed with lymphoma. She was cured when her root canals and amalgams were removed. Her fatigue and lifelong concentration problems disappeared as well. She notes:

★ Amalgams that start with 54% mercury contain 28% twenty-five years later.

★ Norway, Denmark, and Sweden have banned the use of dental mercury.

★ In 2018, the European Union banned mercury for pregnancy, breastfeeding, and kids under 15.

★ Huggins' training is the standard for biological dentists.

Yoho comment: I am 69 years old, have a blood mercury level of zero, and my amalgams seem stable. Replacing them with the newer mercury-free materials might be riskier than leaving them alone. However, I have a worsening undiagnosed neurological condition, so I decided to get all seventeen removed.

References

Mercola's dental podcasts are the best part of this post:

- ★ "Mercury Awareness Week" is [HERE](#).
- ★ "It's all in your mouth" is [HERE](#).
- ★ "Mercury free dentistry week" is [HERE](#).
- ★ [HERE](#) is an interview with Dr. Thomas Levy about

how tooth disease causes inflammatory diseases like heart disease and cancer.

Parting shot #1: Mercola's view of wisdom tooth extraction

[HERE](#) is the article. His summary:

- ★ Estimates suggest 5 million people have their wisdom teeth removed each year, and more than half may be completely unnecessary. According to a 2005 Cochrane Review, "Prudent decision-making, with adherence to specified indicators for removal, may reduce the number of surgical procedures by 60% or more"

- ★ There are no scientifically proven health benefits to removing wisdom teeth that don't cause problems

- ★ Many oral health experts recommend extracting wisdom teeth only if they're growing in at an odd angle, causing pain, are affected by tooth decay, or if they're impacting other teeth or causing inflammation

- ★ Extracting wisdom teeth is not risk-free, even if you're young. Complications associated with the surgery include poor wound healing, infection, dry socket, pain, uncontrolled bleeding and nerve injury resulting in numbness around the mouth and face

- ★ Opioid addiction is another hidden risk, as most oral surgeons prescribe opioids for post-surgical pain. Research

Judas Dentistry

shows a combination of ibuprofen and acetaminophen* works better than opioids for pain following wisdom tooth extraction, so avoid opioids at all costs

Yoho comment: Tylenol depletes glutathione, and according to Paul Thomas, MD, it should be disposed of in a biohazard container.

Parting shot #2

A commentator told me, “I think the d**n dentists are worse than doctors.”

I replied, “Fluoride reduces children’s IQ by about 7 points—half a standard deviation—for the seventy percent of us who are force-fed it in our water. Dentists have also caused untold inflammatory and neurological diseases in the 100 million Americans whom they convinced to get mercury amalgams. But doctors are worse because they are accessories to the Covid vax genocide. Ed Dowd’s numbers prove that the “vaccine” has killed, disabled or rendered chronically ill ten percent of us, which is 30% of the labor force.”

Chapter 2

Scott Schroeder, DPM: dental and orthopedic metals can make you sick

These create an electrical battery effect with dental amalgams that causes the release of toxic mercury.



LINK

Dr. Schroeder's interview includes patient audio testimonials. He wrote:

I have placed thousands of metallic implants in my patients over my 30-year foot and ankle surgeon career. I didn't ask many questions about metal allergies or reactions earlier in my practice. It wasn't until my partner placed tita-

Judas Dentistry

nium alloy screws in my wife during bunion surgery that I started paying attention.

After the surgery, she had burning, shooting pains every night for about four months and could not put her foot under the covers. She would go to bed with an ice pack to get her foot calmed down to try to sleep. When the hardware was removed, the pain went away. This was 16 years ago, and it opened my eyes. We subsequently learned that my wife was allergic to aluminum and nickel. The titanium screws also contained vanadium, aluminum, and a trace amount of nickel.

In 2019, I presented "Systemic Effects of Metal Allergies" to the FDA. My cases included an engineer in his forties who became paralyzed for 10-12 hours per day shortly after I placed eight 2.0 mm screws in his feet. When he returned for another issue about four years later, I operated on one of his feet and noticed swelling where the screws were. So I removed them because of a possible nickel allergy.

When the patient returned for his second post-op visit, he finally told me his paralysis story. He said he had been immobilized for over ten hours a day, but immediately after the screws were removed, the pattern decreased to three hours a day. He had been seen at Mayo Clinic several times, and they told him, "Sorry, you are just going to be in a wheelchair the rest of your life, and eventually, your wife will have to put you in a nursing home." I sent his blood to Germany to test for metal allergies with the "MELISA-optimized lymphocyte transformation assay." I was already working with Dr. Vera Stejskal, the Swedish immuno-toxicologist who invented the test.

This showed that the engineer was allergic to nickel and palladium. We learned that the gold crowns in his mouth were 26% palladium and that he also had a titanium screw

Robert Yoho, MD

in his knee. When we removed the screw from his knee, he had a minor improvement, but the day his last gold crown was taken out of his mouth, his paralysis disappeared and has not recurred. That was several years ago.

I have many other stories about patients who have had stunning health improvements after I removed metal from their bodies. And I had placed most of it!

I have been presenting about this around the world since 2015. I have lectured in Australia, New Zealand, London, Turkey, and the US. I have learned from many top researchers and physicians. When I presented in London, the Queen's Orthopedist who lectured after me bought my wife and me drinks that night.

Before Dr. Stejskal passed on from breast cancer, she had been working with European surgeons and dentists. They had many cases where chronic pain associated with a total hip or knee would go away after the removal of dental metals. I was intrigued but skeptical, so I started paying more attention to my cases and asking more questions about patients with multiple metals in their bodies. I began seeing patterns.

To learn more, I am working with engineers who specialize in "body galvanic corrosion." Yesterday, the ethics committee approved our study on explanted materials associated with the various symptoms. It is a combined effort of the University of Victoria and the University of British Columbia. I am an adjunct faculty member working with a professor at the University of Victoria.

Scott describes two different problems:

- ✪ metal allergy to orthopedic devices
- ✪ metal orthopedic implants causing dental amalgams to release toxic mercury through a battery effect.

Metal implants are ubiquitous. The most commonly

Judas Dentistry

recognized allergies to their components involve nickel, cobalt, chromium, and bone cement. Practicing orthopedists like my co-interviewer Jeff Martin and MR, another senior orthopedist, have vast experience and say these are rare. MR adds:

I do see metal allergies occasionally, but we don't know how common these are. We occasionally get an allergist involved before or after surgery as required. I have not seen severe symptoms like paralysis or any dramatic cures effected by metal removal. The patient usually thinks about it or asks about that possibility.

Checking for allergies. Sending blood to Germany for the MELISA test may not be necessary. Allergists can place skin patches that have these substances on them. If a rash is seen when they take these off a few days later, the patient is allergic to whatever is on the patch. Nickel allergy is the most common; five to twelve percent of the population has it. Taping a nickel coin to the inner thigh and checking for a rash in a day or two is a simple test for this.

Some practitioners use blood, urine, breath, hair, saliva, and even stool analysis to evaluate mercury toxicity. For chronic exposures—which are the majority—these are usually negative and an unneeded expense. Instead, most authorities remove any amalgams and possibly orthopedic devices. If the patient improves, that is all anyone cares about.

Treatment:

★ After the amalgams are out, the exposure declines and the body can clear some of the toxins. Symptomatic improvement may occur, but this can take many months.

★ Traditional chelating agents such as intravenous

dimercaprol (BAL) or dimercapto succinic acid (DMSA) bind metals and are reputed to facilitate their urinary elimination. These are hazardous, however.

★ The top experts now recommend phosphatidylcholine (PC) followed by folinic acid, then glutathione, all given intravenously. An oral form of PC is available from BodyBio.com, and Becky Dutton says this works well. However, according to Becky Dutton's functional medicine physician, oral glutathione is poorly absorbed.

* * *

References

As you work through these, you will realize that dentists work in a profoundly toxic environment. I do not envy them.

★ *Mercury-Free: A clear path that guides you and our planet back to good health* by Teresa Franklin, PhD and James Hardy, DMD (2021)

★ The Heavily Metalled Podcast EP06 Miraculous Surgical Cases, Metal Allergies and Galvanism with Dr. Scott Schroeder, DPM, FACFAS

★ MELISA Diagnostics Dr Scott Schroeder - FDA Immunology Devices Panel Meeting Day 1

★ Dental amalgam restorations are over fifty percent mercury. See the International Academy of Oral Medicine and Toxicology (IAOMT) website [HERE](#) to learn how dentists can remove them safely:

Reports and research are consistent that these fillings emit mercury vapors.²⁻¹⁶ Research demonstrates that dental mercury amalgams expose dental professionals, dental

Judas Dentistry

staff, dental patients, and/or fetuses to releases of mercury vapor, mercury-containing particulate, and/or other forms of mercury contamination.⁴⁻⁴⁸ Mercury vapor is released from dental mercury amalgam fillings at higher rates during brushing, cleaning, clenching of teeth, chewing, etc.,^{5, 14, 15, 24, 30, 49-54} and mercury is also known to be released during the placement, replacement, and removal of dental mercury amalgam fillings.^{2, 25, 28, 29, 32, 36, 41, 45, 46, 55-60}

IAOMT recommendations include the following:

- ★ Systems to dispose of toxic waste
- ★ Elaborate gowns, drapes, and oral barriers during the removal
- ★ Oxygen and positive pressure air systems for patient and dental personnel
- ★ Face shields/hats/special gloves/properly-sealed, respiratory-grade masks
- ★ Suction and irrigation

Chapter 3

Terri Franklin, Ph.D. replaced her amalgams with metal-free composites

She is the co-author of *Mercury Free*, a book about horrific health problems associated with implanted metals and how biological and holistic dentistry is trying to clean them up.



LINK

From *Mercury-Free* by Teresa Franklin, PhD and James Hardy, DMD (2021):

What makes [mercury} amalgam scrap? If it is not in the tooth, it is called scrap. Environmental agencies must be contacted for proper disposal methods of that little piece

Judas Dentistry

of amalgam that didn't go in the tooth. If amalgam is unsafe to put in the trash can, how can it be safe in the mouths and bodies of an estimated 100 million Americans, which translates to 1/3 of the population? It is not safe, and in fact, based on a conservative estimate in a population-based trial, over 67 million Americans exceed the safety exposure level set by the EPA.⁸⁹

The World Health Organization (WHO) studied mercury exposure to humans from air, water, food, and amalgam fillings and concluded that the largest source of exposure was dental amalgams. The WHO also concluded that there was no safe minimum dose of mercury. "Symptoms are known to occur, at least among some of the population, at every level of exposure 97,281."

Mercury has been banned from interior and exterior latex paint in the US. Mercury has also been banned in many pesticides. Mercury has been banned from eyedrops, batteries, smoke detectors, children's toys, from most vaccines, and its use in thermometers and thermostats is being drastically reduced and will soon be nonexistent. Other mercury products, such as mercurochrome and calomel, have been banned altogether. Mercury use has been prohibited for a reason - because it is highly toxic. But....explain why mercury has still not been banned in the most personal environment, the mouth. It makes one wonder who has the most powerful lobby in Washington DC: the paint industry, the pesticide industry, or the ADA?

Dr. Franklin had all four health problems that people can get with dental appliances:

✪ metal allergies

- ★ mercury toxicity

- ★ a battery effect between the metals implanted in the body that likely causes amalgams to release mercury more rapidly

- ★ chronic infection

As she gradually figured out what was happening, she started insisting on proper treatments despite denial and foot-dragging by her dentists and doctors. Orthopedists are paid poorly for screw removal, and dentists are brainwashed by the American Dental Association (ADA) to ignore amalgams.

As Dr. Teri had her dental appliances removed and replaced with modern “composite” materials over several years, her health progressively improved. One of her experiences was the draining of a chronic, nearly asymptomatic abscess that was invisible on the “cone beam” dental X-ray. It was shockingly stinky, and a globule of mercury was found inside. Another time, patch testing of her skin proved that she had specific allergies to her metal orthopedic implants. Her local orthopedists told her she was crazy, so she flew across the country to get these taken out by Scott Schroeder (see Chapter 2). She improved dramatically.

Dr. Franklin emphasizes that testing is only helpful for metal *allergies*. For suspected mercury *toxicity*, none of the available assays help make the diagnosis unless they are highly positive. If they show nothing, mercury might still be hidden in your body. In that case, you can only be sure you have a problem after you get rid of your amalgams and then feel better.

X-rays of abscesses, such as her smelly one, typically show signs of the problem but are often read as normal by ordinary dentists. After they are drained and cleaned out, most people get better.

Judas Dentistry

If you have more than one type of metal implanted your body, an electrical flow is created between them. These cause amalgams to vaporize mercury, which is immediately absorbed into the rest of the body. During surgery, Dr. Schroeder checks for these currents using an electrical meter.

A few excerpts from Drs. Franklin's book and her comments:

The Food and Drug Administration (FDA) took tuna fish off our grocery shelves when it had only 1 ppm of mercury in the fish. I remembered the Minamata Bay disaster in Japan. The people there ate fish containing mercury and they suffered high numbers of birth defects, mental retardations, cerebral palsies and premature deaths directly related to ingesting fish contaminated with mercury.⁷ So I asked the professor, "If our government removes tuna fish from stores with only 1 ppm mercury, how is it even remotely safe to put 700,000 times that much in our patients' teeth and allow them to chew on it for years?"

The mouth is the harshest environment for any material, and no material there is considered permanent.

It is nearly impossible to determine how one might feel without a toxic substance without removing it if it has been part of one's life for so long.

Since 1984, numerous scientific articles have been published providing evidence that dentists and their staff have greater neurological, neurobehavioral, kidney and other disorders and deficits than nondental workers.⁶⁵⁻⁶⁷ As we would expect from the insidious nature of

Robert Yoho, MD

mercury, symptoms continue for years and manifest themselves in such a way that one might not even suspect a link. For example, psychosomatic symptoms, problems with memory, concentration, fatigue and sleep disturbance, were all shown to be significantly greater in a study comparing dental assistants with other medical assistants. This video, "Is there poison in your mouth," summarizes some of the mercury problems.

The ADA's response to the above, which it still stands by today, was to issue a "Special Report" stating that it is improper and unethical for a dentist to remove amalgams from the non-allergic patient based on the dentist's imperative to remove toxic substances from the patient's body.

Many of my patients have requested amalgam removal for cosmetic reasons or as a hedge against future mercury-related problems. They did not sense any ill effects from having amalgams in their mouths for 25 or more years. But, when the amalgams were replaced, many of these folks noticed unexpected health improvements. Some say their memory improved. Some noticed that they could think more clearly. Others report more energy. Still others report feeling calmer. In more rigorous studies, my general observations have been replicated.

If amalgams have been in your mouth for 10 years or longer, be prepared for some issues to be exposed upon removal. There is a 50% failure rate on amalgams that are 10 years or older. That means that after around 10 years, 50% of them break, fall apart and/or have decay underneath. In some cases, the decay could be significant. Some patients' decay may have progressed to the point that a root canal surgery may be needed.

A study that followed close to 400 people for nearly three years showed a strong link between the presence of

Judas Dentistry

amalgam and extra workdays missed. The number of days missed from work was compared the year before amalgam removal and one and two years afterward. The results indicate a 30% drop in sick days two years after amalgam removal.¹²⁷ What would be the savings in the U.S. of a 30% drop in sick leave among workers? Not to mention, improved morale and productivity while at work and ...improved smiles.

Mercury exposure has been related to: MS, cancer, infant death, high blood pressure, low fertility, arrhythmias, thyroid disorders, rheumatoid arthritis, inflammatory bowel disease, chronic fatigue, fibromyalgia, and neurological and psychological disease.

100 million amalgam fillings are still placed in the mouths of Americans each year, and this is the greatest source of environmental and human exposure to mercury. US dentists use 16 tons of mercury a year and half is disposed of improperly.

To prepare to get your amalgams out, see Chapter 12. You'll want to be sure your dentist has what Dr. James and I call the 'internal mercury shield' before you start the removal process.

Dr. Franklin says, "I prefer to call the ADA the Amalgam Dental Association."

Teri favors zeolite mercury detoxification.

These are synthetic microporous structures that are available on Amazon. She, her co-author, some IAOMT dentists, and many other sources recommend detox protocols using it.

However, Becky Dutton, who has observed hundreds of patients in mercury detox over many years, says using zeolite is a mistake and cites THIS reference. It was likely

Robert Yoho, MD

suppressed, for I could only find it on the Wayback Machine. It quotes recognized expert Boyd Haley, professor of chemistry from the University of Kentucky. He writes that zeolite redistributes rather than removes mercury:

[Zeolyte] does not significantly remove mercury from an aqueous solution. ... it seems very unlikely that [this] water insoluble material would have any direct effect on removing mercury from cells, mitochondria, or the brain. How would it cross the intestinal wall, enter cells and mitochondria and do this? ...How exactly will a non-water soluble material like zeolite cause urinary mercury excretion as shown in previous studies? If the negative charges on the insoluble zeolite really did bind mercury, it should take it out via the fecal route. ... this looks very much like many previous “miracle mercury cures” that just takes a lot of money from the unsuspecting parents who are looking for any help for their child... but this data was never published in a decent journal.

In a personal communication with Becky, he added:

Zeolites contain high levels of aluminum, a heavy metal. Although the zeolite salespeople talk about how the aluminum in their product is “caged”, hair tests done by parents found that aluminum levels spiked.

There is not a single piece of evidence that zeolites help with the excretion of mercury, and in fact, it defies the laws of science to say otherwise.

Mike Adams also reported:

Judas Dentistry

The claim by zeolite manufacturers and marketers has long been that zeolites absorb these metals and remove them from the body. Thus, we were all told, even if zeolites contained some lead, that wouldn't be a problem because zeolites remove lead, we were promised.

After months of testing zeolites in the laboratory using a high-end Agilent 7700x ICP-MS instrument, I can now publicly state that zeolites are NOT effective at capturing or eliminating most heavy metals, including lead, uranium, mercury and cadmium. Zeolites are also NOT effective at binding with aluminum.

Debbie Butler's dentist ruined her health

In February 2014, I had my right knee replaced. Then, when I was walking with a cane on the third day following surgery, my tibia split from the knee down. The surgeons operated again and inserted a metal rod. From then on, I needed a walker everywhere I went.

In June 2021, our vehicle was hit by another car, and my right femur broke just above the knee. The surgeons placed a second rod in my leg and replaced the first total knee with a new one. The next day, I could walk up and down steps for the first time in seven years. For 2 1/2 months, I had a spectacular recovery, but I developed an abscess in the anchor tooth of a three-tooth permanent bridge and had a root canal placed.

I have been going downhill ever since. I have felt pins and needles and have had loss of feeling in both legs. Walking has been difficult. I have lost most of the feeling

inside my mouth. I have joint pain, and 90% of my hair has fallen out. I have spent tens of thousands of dollars on functional doctors, naturopaths, and holistic physicians without improvement.

In April 2023, I read Dr. Yoho's Substack post about the metals contained in vaccines. Mark Kennard from New Zealand wrote a comment about his experience with his metal implants, and the story sounded similar to mine. When I spoke to him, he referred me to Dr. Scott Schroeder, who kindly chatted with me for over an hour. I realized that I had likely been suffering from metal reactions since 2014.

I plan to remove as much metal as possible from my body, starting with my mouth. I will report what happens to Dr. Yoho as I go through the process.

Read the end of the last chapter to learn what happened to Deb.

My reactions as I wrote this chapter:

I started looking at this topic when my friend Debbie pushed me into the pool. I read three books, listened to podcasts, looked at references, and interviewed guests.

Teri believes that since the ADA controls dentists, they are almost blameless. I do not think so. Learning about these people shocked me at least as much as finding out about my wretched colleagues. I am (almost) at a loss for words.

My “panorex” X-ray is below. My dentist—or rather, my former dentist—counted seventeen amalgams last week, and these were initially 54 percent mercury. About half of this dissolves and passes into the rest of the body over about twenty-five years. Mine are much older.

Judas Dentistry



I wonder if my recent tremor and lifelong low-grade anxiety are due to mercury toxicity from my childhood amalgams. Also, my recent shoulder replacements may have caused conduction effects that mobilized mercury. So I am getting all seventeen fillings removed and replaced with white “composite.” This material is more expensive, more difficult to use, and less profitable for dentists. Once the source of mercury is gone, part of the rest may gradually clear from the body, but chronic cases like mine may not improve. Wish me luck.

Reference

Although there are only 1400 International Academy of Oral Medicine and Toxicology (IAOMT) members worldwide, there are about 202,000 dentists in the US alone. From the IAOMT HERE:

[We are] a global network of dentists, health professionals, and scientists who research the biocompatibility of dental products, including the risks of mercury fillings, fluoride, root canals, and jawbone osteonecrosis. We are a non-profit organization and have been dedicated to our mission of protecting public health and the environment since we were founded in 1984.

Robert Yoho, MD

We accomplish our mission by funding and promoting relevant research, accumulating and disseminating scientific information, investigating and promoting non-invasive scientifically valid therapies, and educating medical and dental professionals, policy makers, and the general public. The IAOMT has a federal tax exempt status as a non-profit organization under section 501(c)(3) of the Internal Revenue Code, with Public Charity Status 509(a)(2).

Our work is crucial because there is an alarming lack of professional, policy maker, and public awareness about dangerous dental products that are harming humans and the environment on a massive scale. To help change this dire situation, IAOMT members have been expert witnesses about dental products and practices before the US Congress, the US Food and Drug Administration (FDA), Health Canada, the Philippines Department of Health, the European Commission Scientific Committee on Emerging and Newly Identified Health Risks, and other government bodies around the globe. Additionally, the IAOMT is an accredited member of the United Nations Environment Programme (UNEP)'s Global Mercury Partnership and was involved in the negotiations leading to UNEP's Minamata Convention on Mercury.

Chapter 4
Dr. Robert Gammal's brutal
view of dentistry, especially
root canals

I would rather have questions that can't be answered than answers that can't be questioned.

— Richard P. Feynman



LINK. Also on Rumble [HERE](#).

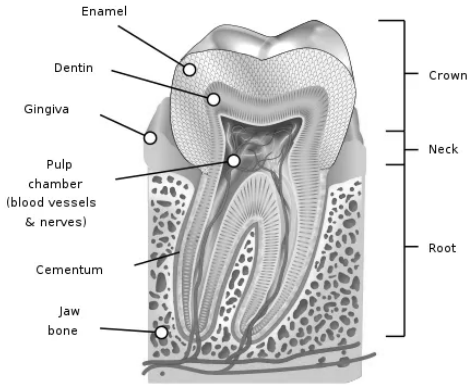


Dr. Robert Gammal, an Australian dentist, coauthored this chapter. It summarizes his book *The Garbage Collector: Root Canals, Disease, and What the Dental Profession Refuses to Acknowledge* (2022). With over 700 references and based on Gammal’s lifetime of research, it is required reading for serious students of dentistry.

If you have root canals in your mouth, you must study *The Garbage Collector* until you are convinced they must all be removed. (Note: root canals, apicectomies and retrograde root fillings are nearly the same thing.)

Teeth consist of the hard “enamel” on the outside. On the inside, there is the soft nerve and “pulp,” which conducts the circulation that keeps a tooth alive. A “dentin” layer lies between these:

Judas Dentistry



The hard exterior contains three miles of “micro-tubules” per single rooted tooth. These pass from the inside layers to the outside of the enamel. Bacteria and anything else in the pulp or mouth passes freely back and forth.

During the procedure, the dentist drills out the tooth’s center. He then applies carcinogenic antiseptics such as phenol and formaldehyde in a futile attempt to sterilize it. Next, he fills it with a range of toxic materials (HERE) that are incompatible with human tissues. These are all deemed safe and effective by the dental fraternity, the FDA, and the Therapeutic Goods Association of Australia. They can freely pass into the brain, which is only a few inches away.

Human hands cannot precisely fill the hole remaining where nerves went into a tooth’s roots. Dentists either leave it open to the rest of the body or overfill it. In the past, mercury alloys were often used. This is mostly out of style, so other hazardous materials are used. Biological dentists still spend a lot of time removing these mummified root-canal teeth with their mercury and other toxins.

Dr. Gammal writes, “All root fillings leak, and this

worsens over time. The other danger is that if the root canal is overfilled with toxic filling materials, it inevitably kills the bone around the end of the root. Mercury is sometimes still placed at the end of the root following the apicectomy procedure, and this is a total disaster.”

Teeth are living human tissues, not stones. Following a root canal, the tooth dies and becomes a “foreign body.” All surgeons know what happens if they leave dead biological material inside a surgical wound—It becomes infected and spreads bacteria to other locations. Support for this from dentistry is that nearly all heart attack artery blockages have with the same type of bacteria that is present in the patient’s mouth. Inflammatory diseases such as arthritis and other autoimmune conditions often disappear when dead teeth are removed.

Gammal editorializes:

Nothing works. The whole procedure is based on illusion from beginning to end. If it were possible to sterilize the tooth, then this problem would not exist. There is a blanket denial that bacteria and toxins escape from the tooth the whole way down the length of the root, and not just through the apex. It would therefore make more sense to take the whole root out and not just the end of it. Fantasy and illusion reign in the minds of endodontists.

Yoho note: This introduction understates the harms of root canals. My goal is to explain why they should never be performed and must always be extracted.

From 1975 until 1987, he placed amalgams, did root therapies, and poured fluoride over children’s teeth. After this, Dr. Gammal took three years off to study natural treatments. During this period, because he avoided mercury, his

Judas Dentistry

health improved dramatically. After he returned to dentistry, he studied with Dr. Hal Huggins in Colorado. He learned that reducing his patients' total body mercury by removing amalgams often produced spectacular health improvements.

Gammal says that most oral and many medical problems are caused by ill-conceived dental procedures such as tooth implants and root canals. In *The Garbage Collector*, he describes what happened when he removed dead teeth and dental appliances from his patients: "When we take [this] garbage out, the body has a chance to heal. This can happen so quickly it can make your head spin."

This is what Dr. Gammal writes about his hero's journey:

My professors, peers and dental association taught me to poison myself, my family, my friends, and all patients. I do not thank these people... I regard [them] at best as criminally negligent and possibly pathologically insane. The mad hatters [a reference to mercury-intoxicated hat manufacturers of yesteryear] are the teachers, judges, and jurors of our great profession! These people pretend to be the guardians of dental ethics and education, and are responsible for some of the greatest suffering that mankind experiences.

Yes, I sound scathing because I am. The criminals who taught me made me responsible for creating an unknown quantity of disease. I have no idea how many people I have poisoned and killed. This is one of the greatest burdens for any dentist who takes on this new paradigm. There is no exaggeration in what I am saying. As a good, conscientious dentist, I looked after my family and friends. I did what I was told, going by what the great

Robert Yoho, MD

professors and deans taught at university. I had a chance with some of these people to undo the damage I had caused. Others died of all sorts of medical conditions caused by my “treatments”. Did I really cause these deaths? Do I feel differently about the patients who are not my inner circle? No! I became a very good “sick-making” machine. I was the perfect dentist because I did everything that I was taught to do at university. Everyone suffered.

I spent the rest of my forty years in dentistry doing the opposite. In this latter period, I saw multiple sclerosis disappear after extracting one dead tooth. I saw suicide notes torn up after extracting one dead tooth. I’ve witnessed brain tumors disappear after extracting one dead tooth. And it goes on and on. All these dead teeth had had root canals which were done by dentists who I am sure had the best interests of their patients at heart, just as I did. The end results of their state-of-the-art treatments became glaringly obvious. The body can often heal itself very quickly if given the opportunity.

Gammal retired in 2014.

He emphasizes that to obtain predictable results, the entire area around extracted teeth must be thoroughly cleaned out. Contrary to customary practice in dentistry, no part of the tooth ligament or any surrounding area that may be infected should be left. Moreover, if the underlying bony area has “cavitations,” soft regions visible on the x-ray, they must be drilled out or infections persist. (Clues to these issues are sometimes more apparent on specialized three-dimensional imaging than on ordinary dental films.)

Work like this is routine for surgeons; they call it

Judas Dentistry

“debridement.” However, the dental establishment claims it is “over-servicing.”

Many chronic degenerative diseases can be linked directly to dental treatments. Doctors, not knowing or understanding this, can only treat symptoms without ever finding a cure. They, like the dentists, have been misled for far too long. They do not know that dead teeth can create cancer or that mercury may be responsible for infertility. They all believe that fluoride in the drinking water stops tooth decay and that it cannot calcify your pineal gland or cause hypothyroidism, osteosarcoma, or heart disease.

Dentistry is not the only cause of chronic degenerative diseases, but it is one of the most overlooked and ignored causes. You will see later the relationships to cancers, multiple sclerosis, cardiac disease, and a vast range of other conditions.

He writes about his mentors:

In 1991 I went to Colorado to study with Dr Hall Huggins. If you can get a hold of his book, *It's All In Your Head*, you will read the firsthand account of what follows and learn lots in the process. Dr Huggins was the man who started the third amalgam war in the 1970's, with his research into amalgam. He was the person who brought the teachings of Dr Weston Price into our current consciousness. He was a genius with a heart bigger than his enormous intellect. When I went to his clinic to register for the course, I was delighted by a young 8 year old girl, who was having a great time playing in the waiting room. I made comment to the receptionist about

Robert Yoho, MD

what a gorgeous happy kid she was. The receptionist said, “take a good look as she is part of your course.” At the time she had come to see Dr Huggins a year earlier, she had been sent home to die, because her leukemia was untreatable.

Dr Huggins was very thorough. He had blood tests and biomarkers from the time he saw her, throughout her treatment and follow ups a month, 6 months and a year later. What was the treatment? Dr Huggins removed a tooth that had been ‘treated’ with a pulpotomy and covered with a stainless steel crown. The pulpotomy was performed about a year earlier and she was diagnosed with leukemia a month after the dental treatment. Within a week of this tooth being removed, her white cell count returned to normal. A month later she was told that the leukemia had disappeared. One year later there was still no trace of cancer.

In the latter half of my dental career, I was exposed to the teachings of people like Dr Hal Huggins, Dr Horst Poehlman, Prof Boyd Haley, Prof Murray Vimy, Prof Vera Stejskal, Dr Jerry Bouquot and in the written word, Dr Weston Price, to name but a few of the great thinkers with the courage to talk about their knowledge. They patiently taught me as I violently rejected their claims.

This is when I learnt about the true cost of leaving dead teeth in the mouth. This is when I started to learn that the forced medication, called water fluoridation, had no beneficial effects at all. This is when I learnt that the mercury I was implanting into patient’s bodies was causing mercury poisoning, with all the horrifying ramifications that this entails. I learnt that by using mercury amalgam as a filling material, I was also poisoning myself and my staff. There was at last a reason for the uncontrol-

Judas Dentistry

lable trembling hands, muscle twitches and splitting headaches, as well an explanation of the acute optic neuritis and rapid mood swings.

Dr Huggins was once asked if all root-canaled teeth should be removed. He replied that it was only “for those people who had an interest in their health.”

Gammal discusses why root canal procedures fail:

Not one of the god-endodontists has a way of measuring the sterility of the tooth. In fact, there is no measure of sterility at all. It is impossible to sterilize the canal, so there is not really any standard by which we can judge whether the tooth is ready to be filled. Because they had to admit failure regarding their ability to sterilize teeth, they created a new term. They now claim to be able to take the teeth to a state of “physiologic balance”. There is no such thing as physiologic balance!

When the tooth is ready to be filled is a guess based on a lack of pain and ‘no stinky smell’. The decision to fill the canal and finish the treatment is based only on the dentist’s appraisal of how much he or she can get away with. Spending too much time on such a tooth erodes the profit margin. It is neither a scientific nor a logical decision. All root-canalled teeth are infected. The bone around all of these teeth is infected.

All materials used in the root canal procedure are toxic. Some will affect the nervous system. Some will affect a developing foetus. Some will cause cancer. There is not one which is biocompatible. All these materials will escape from the tooth and spread around the whole of your body. They can cause all sorts of diseases in any part of your body.

Robert Yoho, MD

German physician and cancer specialist, Professor Max Dauderer, is contemptuous of dental care. Gammal writes that in an interview in 1998, he stated:

The dental work we get from dentists is not something biological or medical. I'd say it is a technical thing, and the techniques give the dentists a number of very strong poisons to be implanted in the mouth. If you kill the tooth and then fill its root canal with mercury, formaldehyde, cortisodontistry is just a sin against the biology of the body and a sin against the 'real' medicine.

Gammal says titanium implants do not work:

These good looking X-rays of dead teeth do not show the infection around or in the roots. No matter how good the tooth looks on an X-ray, it will still be infected.

For the bone surrounding the implant to become infected from this source, the bacteria have to have "escaped" from the dead tooth and penetrated the bone. If they are in the bone, then they will be carried everywhere else in the body. If these bugs decide that your heart is a good home, then you might just have a heart attack. They might decide to inhabit your brain instead and create neurological cancers or MS. They might localize in your ears and cause deafness.

All bacteria and the toxins they produce can and do travel out of the tooth to the rest of your body. It is not just the implant that might fail in this case. In any language, this is a focal infection arising from the source.

Titanium implants are blends of alloys. Each of these metals can potentially cause allergy or toxicity. Some manu-

Judas Dentistry

facturers consider their products' contents trade secrets, which impedes precise diagnosis of metal allergies. Also, electrical currents between implants, tooth fillings, and orthopedic appliances can create issues such as toxic metal shedding.

To avoid these problems, ceramic (zirconia) has recently been used for implant manufacture. Since these are not metal, they are nearly biologically inert. Surgeons implanting them must be skillful and trained in new techniques. As of late 2023, the pricing for these seems predatory. For example, one patient in California was charged \$200,000 for four implants. Costs are more reasonable in Spain.

Gammal about mercury:

Dentistry also does not consider mercury from amalgam to be a problem. Mercury is the third most toxic element known to science. Arsenic is the "first" most toxic. Lead is somewhere in between. There is no amount of mercury that is safe. None. The manufacturer states that this material causes cancer. Why in the name of sanity does a health care profession want to implant it into living bodies? Why do the TGA and FDA give approval for its use, especially in children?

Hundreds of studies prove that root canals destroy health:

Just one short list published in the International Endodontic Journal, titled "Root canal treatment and general health: a review of the literature," is testimony to this: "There has been an increase in the number of case reports published in the medical literature citing dental

Robert Yoho, MD

infection as an associated factor in several systemic illnesses including: • uveitis (Sela & Sharav 1979) (inflammation of the middle layer of tissue in the eye) • intracranial abscess (Holin et al. 1967, Henig et al. 1978, Ingham et al. 1978, Churton & Green 1980, Aldous et al. 1987, Marks et al. 1988, Saal et al. 1988) (brain abscess) • childhood hemiplegia (Hamlyn 1978), cerebral infarction (Syrjanen et al. 1989), arteriospermia and subfertility (Bieniek & Riedel 1993) (brain damage or spinal cord injury that leads to paralysis on one side of the body) necrotizing fasciitis (Gallia & Johnson 1981, Steel 1987, Stoykewych et al. 1978) (a bacterial infection that results in the death of parts of the body's soft tissue. It is a severe disease of sudden onset that spreads rapidly.) • mediastinitis (Hendler & Quinn 1978, Zachariades et al. 1988, Musgrove & Malden 1989) (inflammation or infection of the mediastinum) • fatal endocarditis (Kralovic et al. 1995) (infection of the lining of the heart) • toxic shock syndrome (Egbert et al. 1987, Navazesh et al. 1994) (acute septicaemia typically caused by bacterial infection) Septicaemia (Lee 1984) (Bacterial Blood Poisoning)

A small taste of the current literature shows that dead teeth can cause a wide range of diseases: 308 • immune system diseases 309 • infection of hip replacements 310 • abscess of eyes 311 • cervical cellulites and mediastinitis 312 • Necrotizing fasciitis 313 • coronary atherosclerosis 314 • sinusitis 315 • Multiple Sclerosis 316 • brain abscess 317,318 • brain cancer 319 • central nervous system damage 320, 321, 322,323 • Trigeminal Neuralgia 324,325,326,327,328,329

Infection spreading from teeth may cause the following: 331 • Osteomyelitis of the mandible • Maxillary sinusitis and orbital abscess • Wound botulism • Ludwig's

Judas Dentistry

angina (Heart) • Necrotizing fasciitis • Cavernous sinus thrombosis (brain) Persistent pyrexia of unknown origin (high temperature) • Septicaemia—*Streptococcus milleri* and *Pseudomonas* Septicaemia with disseminated intravascular coagulation • Pulmonary abscess (lung) • Pyogenic hepatic abscess (liver) • Brain abscess • Brain abscess and acute meningitis • Paraspinal abscess and paraplegia (spine) • Bacterial endocarditis (heart) • Splenic abscess (spleen) • Mediastinal abscess and pneumonia (chest)

The following diseases are listed in a paper entitled “Systemic Diseases Caused By Oral Infection”, published in 2000: “Cardiovascular disease, coronary heart disease: atherosclerosis and myocardial infarction, stroke, infective endocarditis, bacterial pneumonia, low birth weight & diabetes mellitus, cerebral infarction, acute myocardial infarction, abnormal pregnancy outcome, persistent pyrexia, idiopathic trigeminal neuralgia, toxic shock syndrome, systemic granulocytic cell defects, chronic meningitis.”³⁴⁸ (Published in *Microbiology Reviews* - This paper is referenced with 158 references) The bacteria in a tooth can and do travel throughout the body. There is now research which demonstrates the presence of oral bacteria in the uterus and amniotic fluid. These uterine infections can lead to preterm birth in pregnant women.^{349,350}

Dr. Gammal concludes:

Research about the dangers of mercury from amalgam fillings has been around since its inception in 1812. Research about the dangers of root canal procedures has been around since the early 1920's. Research about the

Robert Yoho, MD

dangers of fluoride has been around for over 80 years. There is no reason to suggest it does not exist, especially when the current research fully supports the older research.

The amount of mercury in the mouth of a person with fillings was on average 2.5 grams, enough to contaminate five ten-acre lakes to the extent there would be dangerous levels in fish. (Electric Power Research Institute, EPRI Technical Brief. "Mercury in the Environment", 1993; & EPRI Journal, April 1990.)

Dr. Gammal told dozens of stunning stories about patients who were cured after their metals and rotten teeth were removed.

[While] I was hopeful that taking out the dead teeth would help, I was shocked to see the speed at which the body can heal when the rubbish is removed. It was terrifying to see my patients come back a week later to have the stitches removed and report that the symptoms they had suffered with, sometimes for years, had disappeared within a matter of days.

One of the most common stories that I heard was that of breast lumps. I lost count of the number of women who told me their breast lumps had disappeared after a root-canalled tooth was removed. This often happened within a week of the tooth coming out. The psychological stress of living with lumps in the breast is one thing. The very real rise in the incidence of breast cancer is another.

Arthritis is [frequently] associated with dead teeth. A relevant case study appears in the 2002 literature. This report describes a remission of rheumatoid arthritis (RA)

Judas Dentistry

of 16 years duration, apparently caused by the extraction of endodontically well-treated, healthy looking teeth. The only clue that the teeth were contributing to the disease pathogenesis in this case of RA was that the patient was able to reproducibly induce severe attacks of arthritis after prolonged, heavy pressure on some of his teeth treated with root canal fillings. After extraction, a small pus layer was found to cover the apices of the clinically healthy-looking teeth. The rheumatoid factor (RF) became negative and the patient remained symptom free for the next 16 years.

Multiple Sclerosis (MS) cures:

Quoting Professor Dauderer, “if we take Multiple Sclerosis patients who removed amalgam but refused both extraction of root canals and treatment of infected maxillary bone, we observe a cure rate from MS of 16%. But when we consider multiple sclerosis patients that beside amalgam removal accepted our full treatment (root canal extraction and cleaning of alveolar bone), the percentage of cures increases to 86.”

In the 1970s and 1980s, Professor Patrick Stortebecker, who was then the Professor of Neural Surgery at the Karolinska Institute in Sweden, demonstrated that the primary lesion in Multiple Sclerosis is not demyelination but instead is an infected plaque around the venous side of the blood supply to the brain. Cerebral MS plaques showed the same organisms as found in dead teeth, periodontal disease, and other oral infections. Spinal MS lesions showed the same organisms that are found in the bowel and vagina.

Stortebecker described the pathway of transmission

Robert Yoho, MD

through the non-valved venous plexus for both areas. By injecting dyes into the angle of the mandible (therefore not a bony connection to the rest of the skull), he was able to fill the whole of the intra-cranial blood vessels. This demonstrated that the non-valved veinous plexus below the skull allows movement of blood in both directions. This is critical to the understanding of how the microorganisms from the mouth could enter the brain.

Causal comparison of the WHO map of dental caries incidences throughout the world reveals a striking parallel in general trend. Comparison of decayed, missing and filled teeth with the MS death rates results in a correlation coefficient of 0.97, and the probability of a chance occurrence is less than 0.002. This represents a nearly perfect linear relationship between dental disease rates and MS death rates.

From the work of Professor Vera Stejskal in Europe, it is clear that all metals must be avoided in Multiple Sclerosis patients. This includes the metals in composite resins that are used to colour the filling materials. Porcelains should be the filling material of choice and should be cemented into place with old-fashioned, but safer, zinc phosphate cement. For all those with an autoimmune disease, I strongly recommend you read the information at www.melisa.org.

MS patient stories:

Bill was another patient who came to see me in desperation because, at the age of thirty-two, he figured that he was too young for an MS diagnosis. The treatment he received was the removal of a single root-canalled tooth.

Judas Dentistry

Of course, our surgical procedure involved removing the periodontal ligament and unhealthy bone from the cavity. Bill stated the following: In September 2003, I went along to my dentist and had a root canal treatment performed. Months later in January 2004, I started to experience problems with my balance, tingling sensations and numbness in my hands and feet. Subsequently I was referred to a neurologist and after many tests – C.T. scans, lumbar puncture etc, – I was told that the probable cause of my problems was Multiple Sclerosis. The amazing thing for me was I had this root canal filled tooth pulled out in September 2004 and a week later, literally a week later, my balance started to improve, and the sensations that I had been experiencing for 9 months, started to abate. The numbness & tingling – and basically things have just improved from there. It is now December 2005!633

A lady in her forties—Helen, for want of a name—came to see me after being diagnosed with MS She had a few young children and a great relationship with her husband. She was very happy but felt that she was too young to be sent home with a death sentence and no hope of treatment. On examining her mouth, I found one root-canalled tooth on the upper left and a small metal-and-porcelain bridge to replace a missing front tooth. There wasn't any amalgam in her mouth.

Technically, the bridge was very well made, but we had no idea which metals were used. The root canal looked like a job that any endodontist would be proud of, and there was no abscess visible on the X-ray. No matter what the tooth looks like on an X-ray, all dead teeth remain infected, as it is impossible to sterilize them. She'd had great mechanical dentistry done. She also brought in

Robert Yoho, MD

her MRI scan, which showed two large lesions in her brain.

She had done her research and requested that I take out the bridge and the dead tooth. I told her there was no promise it would affect her health, as I always did, and she accepted this completely. I also agreed with her that there was a good likelihood the MS could be related to these. At this first appointment, she decided to remove both the tooth and the bridge immediately. She was not interested in proving which was a cause. She just wanted to eliminate all possible causes.

She was quite happy to go home with a “gappy” smile. Three months later, Helen came back in to see me with a new MRI. All of her symptoms had resolved, and the MRI scan was clear of any lesions. Her neurologist had declared her free of MS and did not want to know what she had done to make such a radical change.

The symptoms of mercury poisoning and those of multiple sclerosis are identical. The main source of mercury to the general population is, of course, dental amalgam. In fact, mercury exposure occurs at a rate ten times higher through this source than through all other sources combined, including seafood.⁶³⁴ Studies have found mercury-related mental effects to be indistinguishable from those of MS.

Many MS patients have been helped by reducing their mercury loads. This can be achieved only if the source of the mercury is removed. Thus, all amalgam fillings need to go, as well as all other sources of mercury, including amalgam tattoos. Several published studies have clearly demonstrated an improvement of symptoms after the amalgams are removed. Not all recover, but

Judas Dentistry

many do. Amalgam may be an important risk factor for patients with autoimmune diseases.

Dr Huggins noted that the incidence of both ALS and MS started going through the roof after 1976, with the introduction of high-copper amalgams, which release about fifty times more mercury than the older formulations of amalgam with less copper. Multiple Sclerosis was not known before 1830, when mercury amalgam became a worldwide phenomenon!

Dr. Gammal saw many tumors disappear three to four months after he took the root canal teeth out of his patients' mouths. Here are opinions from oncologists who learned about these treatments:

Dr Issels, Daunderer and many others have rated their treatments as only average, unless the dental work is done first. Then their success rates increased to about 80 per cent. This is a far cry from the miserable cure rates of chemotherapy and radiotherapy. According to a 2004 report by Morgan, Ward, and Barton, "The contribution of cytotoxic chemotherapy to 5-year survival in adult malignancies ... survival in adults was estimated to be 2.3% in Australia and 2.1% in the USA." 578

Dr Issels found that 98 per cent of his cancer patients had between two and ten dead teeth.

Try looking up the success rate of radiation therapy and you will find a never-ending array of articles claiming a 95 per cent success rate for Prostate Cancer ONLY. No other type of cancer is mentioned. Also, no mention is made that radiation is itself carcinogenic. The use of radiation started as a bad experiment in the 1920s but proved to be too profitable to discard.

Gammal writes,

Most of the degenerative diseases of our times are regarded as having “no known causes”. Potential causes are linked to genetic and environmental conditions when you ask the doctor the why, what, and how. Many of these diseases have “societies” attached to them for the support of patients and research. For as long as I can remember, the evening news has carried regular stories of trial treatments for cancer, which are always in their research stage. The level of depression in our society has gone through the roof. Behavioral problems in children are also increasing at alarming rates. There seems to be a potential vaccine for just about any disease, even including those that are not infectious like the human papillomaviruses that cause cervical cancer.

When there's no known cause, there can never be a cure. Gradually the “no known cause” becomes a part of the language and the thinking of both doctor and patient. There is an acceptance amongst most people that if there is ‘no known cause’, then it is just bad luck. Perhaps it is your genetic makeup? The genetic argument never states as much but strongly implies that if you have a particular genetic weakness in some area, then that's what's going to kill you. We all have a genetic weakness, as well as genetic strengths. To a point, this totally explains the variety of diseases found by both Price and Rosenow. Many of these conditions may not kill you but will certainly reduce your quality of life.⁵⁸¹ Perhaps it is time to look in other directions for a cause.

He concludes:

Judas Dentistry

There is now more than sufficient published research which demonstrates the role of oral infections as a cause of heart disease, diabetes, kidney disease, Multiple Sclerosis, and other neurological diseases, to call for an immediate ban on the practice of keeping dead teeth in the body. It is certainly time for the dental profession to take responsibility for the disasters they cause.

American dentists may be censored or even have their licenses revoked if they advertise or even mention to patients that removing amalgams or other dental work improves health.

References

Root Cause (2018) is a documentary about the taboo subjects of cancer and heart attacks and their relation to dead teeth. Interviews include one of America's leading cardiologists, Dr Thomas Levy, who made it clear that infection from root canals causes heart disease. Every single root canal is infected and stays infected.

Dr. Gammal's website realdentalinfo.com is [HERE](#). The most critical link describes the care that must be taken to avoid poisoning the patient when removing mercury.

Dr. Gammal tells how to understand dentists [HERE](#). If you can, find one trained by the International Academy of Oral Medicine and Toxicology (IOAMT).

Dr. Gammal's fluoride presentation. It is a free download for any of us to use.

Quecksilber is Gammal's 2004 documentary about the dangers of mercury from dental amalgam. More recently, he produced *Rooted*, a movie about the dangers of root canals.

Robert Yoho, MD

The Roots of Disease and The Toxic Tooth by Robert Kulacz and Thomas Levy

Curing the Incurable by Thomas Levy.

Solving The M.S. Mystery: Help, Hope and Recovery by Dr Hal Huggins. Order it [HERE](#).

Dr. David Minkoff's excellent interview on YouTube about root canals.

Cancer: A Second Opinion by Dr Issels. He devotes a chapter to dental causes.

Parting shots

From Dr. Gammal's book:

The hatters of old used to cure rabbit fur with mercuric nitrate. They had profound psychiatric manifestations—they went quite bonkers. They became as “mad as a hatter”, as clearly demonstrated in Alice's Adventures in Wonderland! Many patients who have amalgam implanted into their mouths also become mad, from the mercury they're exposed to. Any dentist who uses or drills out amalgam will also be mercury poisoned and often will also become as mad as a hatter. Should we wonder why dentists have the highest suicide rate of all professions?

Adolf Hitler... refused to listen to his generals' advice to quit whilst ahead. WW2 could have ended in 1943, but Hitler had numerous amalgams, along with two gold bridges and crowns, which would have guaranteed a continuous flood of mercury to his [brain.]

Fluoride in the drinking water also has profound psychological effects. Fluoride will lower IQs across a whole population. 646,647 It was put in drinking water in German concentration camps to keep the inmates more

Judas Dentistry

apathetic. It is used in our water supply for the same reason. Both mercury and fluoride act as inhibitors of brain growth and maturity when foetuses are exposed in utero. Neither is in any way beneficial...

A forty-six-year-old male restaurant owner... for many years suffered with chronic fungal infections in and around his fingernails. He had, like most of the patients I see, tried everything to get rid of this, as it had a profound effect on his ability to work with food. Within one month of removing a dead tooth and doing some periodontal cleaning, all of the troublesome infections had gone. In his words: "it is now time that I should say that I am breathing a lot easier. I can breathe in without opening my mouth all day long. The same at night – I can breathe in without breathing through my mouth. Whereas before was completely the opposite ..." He told me his story while showing me how he could use his fingers as drumsticks on the table. This was impossible before because of the excruciating pain.

From Kiss Your Dentist Goodbye: A Do-It-Yourself Mouth Care System for Healthy, Clean Gums and Teeth (2017) by Ellie Phillips, DDS:

Almost all American adults have damage from dental disease as they age, and almost a quarter of all adults between sixty-five and seventy-four have severe disease. In the United States today, around 30 percent of adults age sixty-five have no teeth at all. Many people, despite visits to their dentist, are never cured of their disease, but they continue to require treatments year after year, with repairs becoming constantly more extensive. Dental visits are often a maintenance system that does not stop the

Robert Yoho, MD

disease but, rather, simply keeps the symptoms within limits that you, the consumer, agree to accept. Patients have been conditioned to view fillings and repairs as normal, as problems that are part of the aging process, and their ongoing dental treatments as something they deserve.

Chapter 5
Dr. Lagos, DDS, operates in a
hazmat suit to save patient
lives

My excellent adventure in Tijuana





LINK

Until four months ago, I knew nothing about dentists, the toxic substances they use, or the chronic health-damaging infections they cause. But last week, I was in Dr. Lagos's dental chair, removing the trash from my mouth.

The start of my journey was reading *Toxic Teeth: How a Biological (Holistic) Dentist Can Help You Cure Cancer, Facial Pain, Autoimmune, Heart, and Other Disease Caused By Infected Gums, Root Canals, Jawbone Cavitations, and Toxic Metals* by J.M. Swartz M.D. et al. (2019).

I was horrified by Swartz's portrayal of dentistry, so when I visited my Los Angeles dentist for tooth cleaning a few weeks later, I asked him how many mercury amalgams I had. After clicking on my teeth, he replied, "Seventeen." I nearly fell out of the chair.

Dr. Swartz had been Dr. Lagos's patient and recommended him, so I sent Dr. Lagos my "panorex" mouth X-ray. He was so busy that he could not see me until mid-August.

I continued studying, and my paranoia meter was soon flashing red. I realized that just stepping into a dental office is hazardous. Even if I was there for tooth cleaning, I might inhale mercury and other poisons. The jackass in the next room might be drilling without the protections used by biological dentists.

Judas Dentistry

I learned that out-of-control dentistry operating for profit was responsible for a double-digit percentage of all US health problems.

During this period, I saw a neurologist about my tremor of the past decade. She immediately told me I had Parkinson's disease (PD). Since this is the second most common disease her specialty sees after Alzheimer's (AD), it was easy for her.

She asked me if I had started falling yet (no!). This reminded me of a time when I used an ammunition storage bag as an airplane carry-on and mistakenly left a couple of shotgun shells in a zippered pocket. The security asked me if I had been arrested yet (not yet!).

Neurologists diagnose conditions, but Pharma dictates their treatments. I asked her about the holistic remedies I discussed in a recent post, and she told me authoritatively, "None of it works." She must have felt bad about saying this, so she apologized for the delay in her appointment. I replied, "Absolutely, no worries." I knew that Rockefeller medicine only treated symptoms. They had no cures or anything that even slowed the progress of PD. I was on my own.

So, I increased the pace of my already manic research. I learned that pesticides, toxic metals, and electromagnetic fields (EMFs) are linked to several related brain degeneration syndromes. These include Parkinson's, Alzheimer's, autism, and amyotrophic lateral sclerosis (ALS). These are "idiopathic syndromes," which purports that their causes are mysterious and maybe unknowable. Since Pharma makes no money on cures or inexpensive treatments, they ignore or disparage them. Neurology was the same as oncology.

My functional doctor friends said I should get my amal-

Robert Yoho, MD

gams out first. So, I evaluated Dr. Lagos carefully, knowing I had little recourse if I had problems in Mexico. I was a seasoned observer of doctors and medical offices, for I had trained to be a surgical center inspector and had visited hundreds of facilities. Lagos's website, reviews, credentials, and office documents were top-notch. I had Swartz's strong referral, and my later experience confirmed these impressions.

Dr. Lagos was trained by Hal Huggins, DDS, the pioneer of biological dentistry, who spoke against using dental amalgam fillings and other unsafe procedures. He was the grandfather of the holistic dental movement.

Lagos is a member of the International Academy of Oral Medicine and Toxicology (IAOMT) and a Huggins Alliance Member. I found the following on his wall of diplomas:

The Multi-Disciplined Alliance "First Do No Harm"

The **Multi-Disciplined Alliance** was created by Dr. Hal A. Huggins to give patients desiring his **Protocol** a better opportunity to receive what they expect. The "Alliance" is composed of professionals that will commit to performing certain levels of competence in the effort to "FIRST DO NO HARM".

Dr. Huggins and his team train the "Alliance" dentists and their staff in the use of programs to practice the protocol of safety and recovery. The "Alliance" member provides a safe environment for patients desiring to rid themselves of amalgam fillings and dental materials. They can also assist their patients in obtaining the proper detoxification, chelating and recovery programs that are aligned with the protocol.

In 1979, Dr. Huggins found that improper amalgam removal can cause the onset of autoimmune diseases *that were not there previously*, so over the years he has developed a **Protocol** that potentially provides far more benefit than risk for the patient. A survey of patients who had called Dr. Huggins office over a two year period for a referral dentist provided the following statistical result: Of the patients who had dental treatment performed, the ones who went to an "Alliance" dentist reported no illness or ill effects after their revision. For those who went to a non-Alliance dentist, sixty-three percent (63%) reported that they had contracted or suffered from a disease or ailment, that they had not had previous to dental treatment, directly following their dental revision.

More recently, Dr. Huggins has found through clinical research and observation that root canals pose a serious threat to patient health. It took years to bring the amalgam issue to the forefront, but that will not be the case regarding the dangers of root canal toxins. Again, the "Alliance" dentist is well educated and prepared to safely provide the necessary alternatives and corrective actions involved in dealing with root canals, cavitations and other toxins.

Finally, the "Alliance" has provided the opportunity for these dedicated professionals to consult directly with Dr. Huggins in order to insure that the most demanding situations will be handled confidently. Another great benefit of the "Alliance" is the ability to network, confer and to exchange ideas with other members in order to further promote their commitment to provide the highest level of excellence in service to their patients.

Who Does The "Alliance" Benefit?

Patients and professionals who desire non-toxic dental materials and procedures as well as a proven potential for recovery.

Dr. Lagos recommended that I have Biocomp laboratories blood tests to see if I was sensitive to dental materials. It showed that I was reacting to several metals, including mercury and aluminum.

I was at his office for five days. For the first four, I had intravenous sedation for up to six hours a day. It was tolerable but not my idea of a great time. I had no pain during or

Robert Yoho, MD

after surgery except for a few days of aches after the dentist pulled a dead wisdom tooth on the last day.

Here is what the procedure looked like; that is me under there. It may be hard to see, but I am wearing nasal oxygen. A space blanket over me keeps me warm and provides full-body protection during amalgam removal. I received intravenous vitamin C (? 50 grams) each day.



The anesthesiologist is checking his stocks, but they do that everywhere.

Judas Dentistry



Samples of my before/after photos.

Los Angeles dentists may charge thousands to fix a single tooth. My total fees were less than \$7000. The five-star Quartz Hotel next door costs \$150 a night.

It is now three weeks later. My tremors and tinnitus seem better. I am salivating a lot, a new symptom of Parkinson's. A bit of extra mercury exposure during the removals is inevitable. As Dr. Legos suggested, I am avoiding detox for a month.

EDTA (Ethylenediaminetetraacetic acid) chelation is the traditional approach to heavy metal removal, but my research indicates it is a mistake. After initially binding the mercury, EDTA drops it, redistributing it to the rest of the body. This can damage the kidneys. The safer and more effective approach is intravenous phosphatidylcholine followed by folinic acid and glutathione.

Office documents from Dr. Lagos

- ★ My treatment schedule. Download
- ★ “Jonas’s Guide to Dr Lagos.” Download
- ★ Patient And Caregiver Information. Download



CENTER FOR BIOLOGICAL DENTISTRY

(619) 879-3131
www.biologicaldent.com

Ave. Paseo del Centenario 9580,
Suite 2102,
Zona Urbana Río, Tijuana, Mexico



References

★ Quicksilver Scientific is a detox program. They send you the supplements you need for detoxification and also offer good courses to health professionals. As his mentor Dr. Huggins did, Dr. Lagos recommends that patients wait a month after dental treatment before beginning detox.

★ Oasis of Hope Hospital offers alternative medicine. The late Dr. Ernesto Contreras was the founder, and he pioneered alternative medicine in Tijuana. His son, Dr. Francisco Contreras, is now in charge, and the administrator is Eduardo Ruiz. The Quartz Hotel will give you a free ride to and from this hospital.

★ Biocom Labs: We recommend them for biocompatibility testing of dental materials. You sent your sample there. The late Dr. Hal Huggins founded it. DNA Connections is their sister laboratory.

★ Books by Dr. Huggins:

Judas Dentistry

It's All In Your Head: The Link Between Mercury Amalgams and Illness

Uninformed Consent: The Hidden Dangers in Dental Care

It's All in Your Head: Diseases Caused by Silver-Mercury Fillings

Who Makes Your Hormones Hum???

Solving the MS Mystery: Help, Hope and Recovery

Notes

✪ Crossing the border is a hassle, but Dr. Lagos's drivers can pick you up at the San Diego airport or train station. They charge \$80.



* * *

Robert Yoho, MD

✪ I knew I should ask for nonmetallic materials, and my advisers recommended Saremco ceramic composite fillings. Lagos said, “I use Admira, which is highly biocompatible and on your list of least-reactive materials.”

✪ Dr. Lagos recommends oil pulling for oral care.

✪ I saw post-operative hair transplant patients at my hotel. Since I performed this procedure while practicing, I could tell their surgeon was skilled. They said they paid 50 cents per graft.

Chapter 6

Four opinions about fluoridation

Study hard what interests you the most in the most undisciplined, irreverent and original manner possible.

— Richard P. Feynman



LINK

Yoho note: No quoted author is responsible for the following because I abridged their work and may have changed their emphasis.

Steve Kirsch:

At the AB 2098 event in Sacramento today, Jay Sanders of fluoridealert.org walked up to me and asked me, “Can I give you a book?” It was the sort of life-changing question that got Robert F. Kennedy Jr. to realize that vaccines aren’t safe.

After a 10 second hesitation to overcome my cognitive dissonance (<sarcasm on>since as we all know fluoridation must be safe since it is mandated everywhere <sarcasm off>), he gave me a copy of *The Case against Fluoride: How Hazardous Waste Ended Up in Our Drinking Water and the Bad Science and Powerful Politics That Keep It There* (2010) by Paul Connett, James Beck, and H. Spedding Micklem.

Summary:

Studies began in 1945, and fluoridation was approved in 1950, before any trials were completed and any comprehensive studies were published. Proponents claim a tiny benefit for fluoride if it is kept in your mouth and not swallowed. Once you swallow, the risks strongly outweigh the benefits. Along with other negative effects, children’s IQs drop significantly if their mothers are exposed during pregnancy.

All large towns in California are required to fluoridate (CA Law AB733). Although there is no federal fluoridation law, almost all large U.S. cities are fluoridated. The ADA is an extremely powerful lobby.

Yoho comment: This is what the mainstream press says. When you finish this book, you will have another opinion about who the culprits are.

Short-term ways to avoid fluoride

Judas Dentistry

- Drink spring water (fresh or bottled)
- Drink distilled water (or purified with reverse osmosis)
- Use a reverse osmosis filter for drinking water.
Example: Culligan

Other less recommended methods

- Use a Berkey filter with the special fluoride filter. You have to frequently replace it. You must also keep it from drying out, which makes them maintenance intensive.
- Use a 3 stage Clearly Filtered system. Clearly Filtered filters rapidly lose their ability to filter fluoride after the first few fills. They don't say this.

Change fluoridation policies

- Donate to fluoridealert.org.
- Get your town to stop fluoridating the water. It's poison.
- Change your state law to outlaw fluoridation. Like vaccines, the science is established, but nobody wants to look at it.

Comment by the anonymous “A Midwestern Doctor”

I have been studying this issue for a long time, and I have only drunk reverse osmosis water since I was a teenager and first learned about it. A few main points follow:

- Fluoride is immensely difficult to filter from water; RO

is one of the only reliable approaches--however if you do that, you must supplement your diet with magnesium (and if you go the spring water route, you need to make sure you do not pick a brand that has high amounts of fluoride).

- Many industries, particularly aluminum and phosphate refiners, produce fluoride as a byproduct of their process. These industries ran into repeated issues with poisoning or killing workers and the surrounding communities from fluoride gas leaks, so the industry concocted the idea of saying fluoride was good for teeth to get them out of lawsuit liability (it could be argued in court that fluoride can't be toxic if it is good for teeth). Despite heavy pressure, the FDA was unwilling to grant them this due to the evidence of harm and absence of benefit from fluoride.

- When the Manhattan Project was being conducted, uranium centrifuges did not yet exist, so the only possible way to enrich uranium for nuclear weapons was to dissolve it in fluoride and separate the resulting gas by density. The Manhattan Project ran into the same issues, but based on national security, it was decided that fluoride needed to go into the water so that we could make atomic weapons and win the war. Bill Clinton declassified documents showing this (as described in *The Fluoride Deception*).

- The best book I have seen that explains the pathologic effects of fluoride is *Fluoride the Aging Factor* (1993) by John Yiamouyiannis. It makes the case that fluoride at a very low dose disrupts the structures of many proteins in the body due to its high electronegativity interfering with the hydrogen bonds they depend on for their three-dimensional stability. The most common side effect observed is the weakening of collagen in the body. In areas where individuals have high amounts of fluoride in their water (a few villages in India best showed this

Judas Dentistry

pathological process), they age quickly and have a weakened or deformed bone structure. Having looked at this for a while, I believe that fluoride does long-term damage to bones (this may also come from fluoride chemically altering the bones, which, in theory, is how it "helps" your teeth).

- A decent amount of data shows water fluoridation significantly increases cancer rates (Fluoride the Aging Factor).

- A variety of adverse endocrine effects are caused by fluoride. The primary one is that fluoride weakens the thyroid gland. Hypothyroidism is now extremely common, and it's one of the most frequent issues that integrative medicine practitioners treat and sometimes achieve miraculous results with. One, but not the only, potential cause that has been put forward is fluoride exposure. This is likely due to the thyroid gland substituting the iodine it needs with fluoride from water sources. A related issue is bromide. Until about twenty years ago, flour and bread were fortified with the critical nutrient iodine. Bromide has been substituted. (Strangest of all, baths in fluoridated water were previously used to treat hyperthyroidism.)

- The most concerning effects of fluoride are neuropsychiatric. The magnitude is difficult to quantify; some think that the amounts we are exposed to in the water are sufficient to cause brain effects, and others believe higher doses, such as those received from fluorinated pharmaceuticals, are necessary. One story that has gone around for a long time is that the Nazis fluorinated the water of the Jewish ghettos to make them more submissive and compliant. I tried to find a primary source for this claim, and I could go as far back as someone in the US military saying it was done, but I never found any direct verification. I have seen

those effects in individuals who have taken fluorinated pharmaceuticals, particularly antidepressants.

- Many of the drugs that have the highest rates of adverse events have fluoride structures. I always look at the chemical structure of a pharmaceutical before I consider using it. This comes up with antifungals (some people with mold issues need them) because the cheapest antifungal on the market (fluconazole) is fluorinated and causes reactions in some patients. In contrast, the other antifungals that do not have this issue are much more expensive and typically not covered by insurance. The most common fluorinated medicines that cause significant problems for people are the fluoroquinolone antibiotics and the fluorinated SSRI antidepressants. The dose you get from taking a fluorinated medication over the long term is much higher than what you might be exposed to in water.

Yoho:

About 25 percent of prescription drugs contain fluoride. These include statins (Lipitor, Crestor, Vytorin, Zetia/Ezetimibe, fluticasone propionate, Celebrex), some antacids (Prevacid), many antidepressants (Lexapro, Prozac), and neuroleptics (Risperdal). Fluoroquinolone antibiotics such as Cipro and Levaquin do, too, and should be avoided unless there are no alternatives. They carry a black box warning about some of the toxicities.

Worse yet, fluoride allows these drugs to cross the vascular barrier, penetrate the brain, and cause harmful mental effects. Toby Rogers wrote a poetic article [HERE](#) about how the toxicity of Prozac is related to fluoride.

Even traditional sources such as the *Merck Manual* acknowledge problems. It states:

Judas Dentistry

Many newer fluoroquinolones have been withdrawn from the US market because of toxicity when given systemically; they include trovafloxacin (because of severe hepatic toxicity), gatifloxacin (because of hypoglycemia and hyperglycemia; it is still available in the US as an ophthalmic preparation), grepafloxacin (because of cardiac toxicity), temafloxacin (because of acute renal failure, hepatotoxicity, hemolytic anemia, coagulopathy, and hypoglycemia), and lomefloxacin, sparfloxacin, and enoxacin.

Fluorinated steroid creams are regarded as having little systemic (body-wide) toxicity. These include dexamethasone, triamcinolone acetonide, betamethasone, and beclomethasone.

A Midwestern Doctor:

- There is no evidence that fluoride has any benefits, and many have been fighting for decades to get it out of the water supply (with a few successes in recent years!). Some forms of fluoride are much more toxic than others, and typically, the more toxic industrial fluoride waste products are what end up in the water supply rather than sodium fluoride, which is still dangerous enough that it can hospitalize children who swallow too much toothpaste.

- Many believe fluoride disrupts mitochondrial function. When I last looked into this, there was a case for it, but there was no solid proof.

- Various relatively simple measures dramatically help dental health but are rarely considered. However, since dentists believe fluoridation is the solution to everything, they prescribe high-fluoride toothpaste instead.

Robert Yoho, MD

- Studies have shown that drinking fluoridated water lowers IQ. This could either be due to hypothyroidism or a direct effect on the brain. Sadly, many infant formulas are advertised as being fluorinated.

- I am immensely frustrated by public health. Their efforts are directed at giving as many vaccinations as possible or fluorinating as many water supplies as possible. They are not as enthusiastic about any other policies.

- Public health “professionals” never consider that people have individual reactions to different drugs and doses. Some tolerate medications poorly, even at tiny doses. This is one reason among many that no medical intervention should ever be indiscriminately administered through the water supply. (Emphasis by Yoho.)

“Citizen Zeus,” who writes a Substack:

On May 1, 1999, Environment Protection Agency scientists’ National Treasury Employees Union published a devastating scientific article debunking fluoride use. They said it had no proven effectiveness and malignant, extreme harms. Their prostituted administrators disagreed and must have taken down the original link, for I had to go to the Wayback Machine [HERE](#) to find it. Excerpts follow:

Why EPA’s headquarters union of scientists opposes fluoridation

by William Hirzy, PhD, [Union of Scientists] Senior Vice-President, Chapter 280

...Our opposition to drinking water fluoridation has grown, based on the scientific literature documenting the increasingly out-of-control exposures to fluoride, the lack of benefit to dental health from ingestion of fluoride and

Judas Dentistry

the hazards to human health. These include acute toxic hazard, such as to people with impaired kidney function, as well as chronic toxic hazards of gene mutations, cancer, reproductive effects, neurotoxicity, bone pathology and dental fluorosis.

In support of this concern are results from two epidemiology studies from China that show decreases in I.Q. in children who get more fluoride than the control groups of children in each study. These decreases are about 5 to 10 I.Q. points in children aged 8 to 13 years.

Another troubling brain effect has recently surfaced: fluoride's interference with the function of the pineal gland. This produces melatonin which, among other roles, mediates the body's internal clock, doing such things as governing the onset of puberty. Jennifer Luke has shown that fluoride accumulates in the pineal gland and inhibits its production of melatonin. She showed in test animals that this inhibition causes an earlier onset of sexual maturity, an effect reported in humans as well in 1956...

EPA fired the Office of Drinking Water's chief toxicologist, Dr. William Marcus for refusing to remain silent on the cancer risk issue. [Marcus] brought a lawsuit against EPA, claiming that they fired him because of his fluoride work. Dr. Marcus won his lawsuit and is now back at EPA.

...[There is] data showing increases in osteosarcomas in young men in New Jersey, Washington, and Iowa based on their drinking fluoridated water. It was his [Dr. Marcus's] analysis, repeated statements about all these and other incriminating cancer data, and his requests for an independent, unbiased evaluation of them that got Dr. Marcus fired.

Robert Yoho, MD

Regarding the effectiveness of fluoride in reducing dental cavities, there has not been any double-blind study of fluoride's effectiveness as a caries preventative. There have been many, many small scale, selective publications on this issue that proponents cite to justify fluoridation, but the largest and most comprehensive study, one done by dentists trained by the National Institute of Dental Research, on over 39,000 school children aged 5-17 years, shows no significant differences (in terms of decayed, missing and filled teeth) among caries [cavities] incidences in fluoridated, non-fluoridated and partially fluoridated communities. The latest publication on the fifty-year fluoridation experiment in two New York cities, Newburgh and Kingston, shows the same thing. The only significant difference in dental health between the two communities as a whole is that fluoridated Newburgh, N.Y., shows about twice the incidence of dental fluorosis (the first, visible sign of fluoride chronic toxicity) than seen in non-fluoridated Kingston.

John Colquhoun's publication on this point of efficacy is especially important. He was Principal Dental Officer for Auckland, the largest city in New Zealand, and a staunch supporter of fluoridation—until he was given the task of looking at the world-wide data on fluoridation's effectiveness in preventing cavities. The paper is titled, 'Why I changed My Mind About Water Fluoridation.' In it Colquhoun provides details on how data were manipulated to support fluoridation in English-speaking countries, especially the U.S. and New Zealand. This paper explains why an ethical public health professional was compelled to do a 180 degree turn on fluoridation.

...Mutation studies...show that fluoride can cause gene mutations in mammalian and lower order tissues at

Judas Dentistry

fluoride concentrations estimated to be present in the mouth from fluoridated tooth paste. Further, there were tumors of the oral cavity seen in the NTP cancer study... further strengthening concern over the toxicity of topically applied fluoride.

So, in addition to our concern over the toxicity of fluoride, we note the uncontrolled – and apparently uncontrollable – exposures to fluoride that are occurring nationwide via drinking water, processed foods, fluoride pesticide residues and dental care products... For governmental and other organizations to continue to push for more exposure in the face of current levels of over-exposure coupled with an increasing crescendo of adverse toxicity findings is irrational and irresponsible at best.

We have also taken a direct step to protect the [EPA] employees we represent from the risks of drinking fluoridated water...the union filed a grievance, asking that EPA provide un-fluoridated drinking water to its employees (Yoho emphasis).

The implication for the general public of these calculations is clear. Recent, peer-reviewed toxicity data, when applied to EPA's standard method for controlling risks from toxic chemicals, require an immediate halt to the use of the nation's drinking water reservoirs as disposal sites for the toxic waste of the phosphate fertilizer industry.

Yoho:

Rachel Levine, the first openly transgender four-star officer in the armed forces and now Assistant Secretary for Health, recently delayed the release of a detailed report about fluoride's toxicity. For more about the associated lawsuit and all

Robert Yoho, MD

the red tape wound around the truth, see THIS reference (January 2023).



Levine.

My epilogue explains why fluoride is being used. It is not an accident or incompetence.

References

- ★ *The Fluoride Deception* movie (28 minutes)
 - ★ fluoridealert.org (Fluoride Action Network)
 - ★ *The Case Against Fluoride* (2010). Since it was published, stronger studies on neurotoxicity have come out. These include two NIH-funded long-term prospective cohort studies.
 - ★ FluorideAction@FluorideAction
 - ★ Here is some of the published science linking fluoridation to harm
 - ★ Fluoride exposure and thyroid function among adults living in Canada: Effect modification by iodine status
 - ★ Podcast where Christskis and Rivera, JAMA Pediatrics editors, discover that fluoride is harming our children's brains

Judas Dentistry

- ★ FAN v EPA lawsuit
- ★ THIS is a fluoride toxicity Substack.
- ★ HERE is “Fluoride Free Australia.”

★ “The Dangers of Fluoride” was the topic of Dr. Mercola’s 2020 interview with Dr. Bill Osmunson. They discussed the studies showing that children who were exposed in utero to fluoride had lower IQs. Control groups from cities with no fluoridation were about a standard deviation (15 points) higher. He described how the litigation to ban fluoride was being stalled.

★ If you want to geek out about fluoride “controversies,” THIS is a recording of the NTP BSC Fluoride Neurotoxicity Meeting from May 4, 2023. You can listen to how both the truth and the lies are presented.

★ Since the 1940s, when community water fluoridation was first initiated, fluoride and fluorine compounds were added to an array of consumer products... These include pharmaceutical drugs, carpets, cleaners, clothing, cookware, food packaging, paints, paper, and 16 other products. Here is an academic article, “Fluoride Consumer Products” that you can download.

★ Truthaboutfluoride.com is a commercial site that sells products but is a source of independent testing and evaluation. I like it.

Fluoride is *already* in our food and beverages.

Intended goal of fluoridation: Delivery of 1 milligram (mg) fluoride per day

Intended range of concentration in fluoridated water: 0.7 to 1.2 ppm

(Note: 1 mg (milligram)/Liter = 1ppm (parts per million))

Fluoride Concentration, by specific independent analysis:

(Individual samples will vary)

Coca Cola Classic.....	0.98 ppm
Diet Coke	1.12 ppm
Sprite.....	0.72 ppm
Lucerne 2% Milk	0.72 ppm
Minute Maid orange juice	0.98 ppm
Gerber Graduate Berry Juice	3.0 ppm
Gerber White Grape Juice	6.8 ppm
Welch's White Grape Juice (concentrate).....	1.8 ppm
Hawaiian Punch.....	0.85 ppm
Fruit Loops	2.1 ppm
General Mill's Wheaties.....	10.1 ppm
Kellogg's Shredded Wheat	9.4 ppm
Post's GrapeNuts cereal	6.4 ppm

Maximum allowable pesticide residue levels:

Cryolite (sodium aluminum fluoride)

Cabbage.....	45.00 ppm
Citrus fruits	95.00 ppm
Collards.....	35.00 ppm
Eggplant.....	30.00 ppm
Lettuce, head.....	180.00 ppm
Lettuce, leaf.....	40.00 ppm
Peaches.....	10.00 ppm
Potatoes, internal	2.00 ppm
Potatoes, wastes and skin	22.00 ppm
Raisins.....	55.00 ppm
Tomatoes.....	30.00 ppm
Tomato paste.....	45.00 ppm



**A bowl of Wheaties, a glass of milk,
and a Coke or orange juice delivers
twice the fluoride salesman's
daily goal of fluoridation.**

ITEM	FLUORIDE PPM	DOSE (MG)
12 oz. Coke	.98	.353
8 oz. 2% Milk	.72	.173
Wheaties	10	1.80
TOTAL DOSE		2.326

**Exceeds
1.0 mg. 1.0 233%**
Fluoridation Goal

There is no deficiency of exposure to fluoride for any segment of our population.

Citizens for Safe Drinking Water • Jeff Green, Director • 1.800.728.3833

Chapter 7

Mark Kennard is the canary in the coal mine

If you don't know, the thing to do is not to get scared, but to learn.

— Ayn Rand



LINK. Rumble link [HERE](#).



Robert Yoho, MD

* * *

Mark is a brilliant person whose health problems have whipped him into spending a decade investigating this subject. He has a familial sensitivity to metals, and his body violently rejected vaccines, dental work, and orthopedic implants.

Mark has much in common with the prescription drug-damaged people on Tim Alexander's "Legal Death" Facebook site. He was propelled into action by his family connection to the San Bernadino killer, who turned violent because of psychiatric drugs. Tim's story is [HERE](#).

Metal exposures ruined Mark's life. These are before and after photographs:



Mark in 2018.

Judas Dentistry



Four months after orthopedic metals and bone cement implantation in 2019.

Mark: "That droopy face photo was taken four months after the surgery. The implant had titanium screws and carbon fibre rods. I ended up being allergic to it all."

To improve his health, Mr. Kennard studied metal toxicity by networking with international experts. Although he is far more affected than others, he has lessons for the rest of us.

Podiatrist Dr. Schroeder became an authority when he saw patients with issues like Mark's. He tells the orthopedists that they are careless with implanted metals. Since few doctors of medicine or dentistry are interested in these issues, these ideas are hard to find.

Veterinarians look into their patients' mouths first, and this is the best first step for humans as well. Oral bacteria have been seen in the majority of coronary artery blockages and have also been found inside Alzheimer's disease brain structures. Mercury dental amalgams are another huge problem.

Mr. Kennard says that any surgeon or dentist putting metal implants inside the human body must test their patients before they operate. None of them do this now, and many do not even ask about metal allergies. Many patients (17 percent for nickel) would admit, “Yes, I get a rash on my wrist where my watch touches,” or “Cheap jewelry and I do not get along.”

Even titanium, generally regarded as inert, has a reported allergy rate between .6 and 2.3 percent. But orthopedic and dental titanium implants are alloyed with other metals. These include aluminum, the second most toxic metal after mercury, so the actual allergy rate for titanium implants is higher.

Implants made with nitride coating or ceramics are commercially available.

Mark also tells us how to detox safely and what the pitfalls are. Vitamin C is a wonder for health if you have no metals in your body, but it can speed up metal disintegration and toxicity if you are highly sensitive. Another medical marvel, chelation, must be used cautiously and only by experienced practitioners. The top experts no longer use EDTA chelation for mercury because it damages kidneys.

I have 17 amalgams that are scheduled for removal in August. My dentist drew blood to see if I would have problems with various composite fillings. I sent the report to Mark. His comment made me wonder if I jumped too soon with my shoulder replacements:

Your report shows you have breached your mercury and aluminum antigen tolerance levels and that they will cause symptoms.

After you get your amalgams and other known sources of aluminum removed, your biggest problem will

Judas Dentistry

be your orthopedic implants. Their aluminum is your most significant threat to life and health. Finding more biocompatible implants is challenging [although custom implants can be made].

Everyone implanted with metals will eventually become symptomatic and die. People with certain gene mutations are hypersensitive, so it happens sooner. Metals are the most challenging toxin for the body to deal with because they are solids that cannot be completely disposed of. Everyone chronically exposed to aluminum will eventually get Alzheimer's-type symptoms.

You are considering chelation or detoxification. Any process that speeds up the corrosion of your titanium alloy implants will release aluminum into your body. Slowing down its release buys you more time to be healthy and alive.

If your implants had no aluminum, you could go ahead and use products that speed up your detox processes. But because there is aluminum in the shoulder implants, I recommend avoiding this unless you plan on replacing all your implants with new ones without aluminum. If the implants are left in, it's all about buying time.

Hopefully, your worst symptoms are caused by mercury. If so, all your health symptoms will vanish after your amalgams are removed. But this is unlikely. Symptoms from aluminum will not disappear unless you remove all of it.

After you remove your fillings, we will reassess.

I have a colleague who is an orthopedic implant surgeon. He and his partners have done thousands of knee and hip implants and have seen only a few issues like

Robert Yoho, MD

Mark's. In the early phases of my friend's career, implants had less biocompatible metals, so the long-term results were less consistent. He says that today's titanium alloys with aluminum, titanium, and vanadium have superior strength, biological compatibility, and wear characteristics. He reminded me that hip implants are recognized as the most successful surgery of the 20th Century. He writes:

Chromium cobalt (CrCo) implants have been used since the 1940s and were (and still are in some places) bonded to the bone using methyl methacrylate acrylic cement. CrCo alloys contain a small amount of nickel and are a source of what is thought to be true implant hypersensitivity reactions, yet they rarely require revisions. I've seen two severe allergy cases in my career. Failed implants requiring surgery have many factors in play, so surgeons have difficulty being sure about the causes.

Implants are structurally durable and resist breakage and surface wear. Loosening at the bone interface after 10-20 years is the most common cause of failure.

Biologically bonding (bone ingrowth technology) is used for most modern implants to eliminate cement and reduce loosening over time as the "grout" fatigues and breaks down. It does not work well for the glenoid [the cup part of the shoulder joint]; cement performs better. Biological bonding involves texturing surfaces so the implant attaches to the bone. Once ingrown, these self-repair by remodeling over time. CrCo is strong and inflexible (resisting breakage) but is affected by the implant material and bone elasticity mismatch. This may lead to atrophy and resorption of adjacent bone, which can produce bone loss, fatigue fractures, and loosening over time.

Judas Dentistry

Commercially pure titanium and aluminum, and V alloys of titanium or Niobium, have similar qualities as bone, so remodeling is more favorable and physiologically compatible. Like aircraft wings, they are fatigue-resistant under repetitive mechanical stress. Unfortunately, pure titanium alone is not as strong, and even its alloys, though stronger, have poor bearing surface wear characteristics. They must be altered with nitriding, ceramic coating, and other methods to improve wear. These add expense, potentially alter biocompatibility, and likely have other long-term issues.

Metal-on-metal (MOM) hip implants were used between about 2004 to 2012. These created metal ion shedding and debris. For some people, this was directly toxic. The design of the implants seemed to be as important as the materials used.

About 70% of MOM hips are still doing fine and seem to last indefinitely, whereas most conventional metal or ceramic on polyethylene bearings will eventually fail in active patients within 20 years. The most modern polyethylene is inert and durable, but we only have about 20 years of data. It is the most common material used in hip, knee, shoulder, and other implants now.

Particulates related to wear, loosening, or implant breakage are generated in implants by polyethylene, cement, or even implant texture fragmentation. This shedding causes tissue reactions to some degree in every patient. It may be direct toxicity from metal ions (chromium, cobalt, and aluminum), foreign body reaction (anything of a certain particle size and amount, including cement and ceramic debris), or allergic (typically nickel).

Distinguishing between occult loosening and infection can be difficult in mild cases.

Robert Yoho, MD

Infection and bearing surface failure are the most common causes requiring hip and knee revisions. After ten years, two to four percent of patients in primary cases need revision, and twice that many occur for revision cases.

As a practicing surgeon, the usual problem is deciding when to re-operate on previously implanted people who develop pain. If it happens quickly—within three to four years after hip replacement—we have a diagnostic dilemma without definitive tests to guide us. Even if we know an allergy is involved, whether to operate may be unclear. Hip revisions are big surgeries with significant risks, and many people do well long-term and tolerate low-grade pain with the help of ibuprofen or Tylenol.

We do bloodwork, serum ions, joint aspiration, and imaging, but these are often inconclusive. X-rays might eventually show changes, but this could take six to eighteen months. The surgeon could be liable for a missed diagnosis but hates to subject the patient to a procedure that may not improve his status.

Vast numbers of implants are placed, so allergic and sensitivity problems are significant and certainly under-appreciated. I doubt if one orthopedist in a thousand knows about the electrical currents between metals inside the body. I understand their viewpoint—they manage a spectrum of clinical problems and have trouble sorting out the importance of each one.

Allergy testing before surgery would improve informed consent and is a cheap price for better outcomes.

I have been asked whether I would have had my titanium alloy and chrome shoulder implants done if I had known then what I know now. I am not sure. My pain was

Judas Dentistry

tolerable before the procedure, but I have no pain now and am more functional.

Mark has given me doubts about the impact of metals on my long-term health. If a patient asked me whether he should have implant surgery, I would tell him he has to make his own decision after he does his research. I would also say, “Minor surgery is surgery someone else is having.”

References

HERE is an academic paper by Prof Vera Stejskal about the MELISA metals allergy assay. Widespread testing would reveal the people who are likely to have the most problems.

For metals geeks: Download “A comprehensive summary of disease variants implicated in metal allergy.”

You can also follow the same metal allergy-related Facebook groups as Mark:

- Implant Allergy Support Group
- Hip Replacement and Recovery
- Breast Implants Can Kill
- Mercury Poisoning & Heavy Metal Detox
- Total Hip Replacement News

Chapter 8
**Rebecca Dutton: the protector-
goddess of people damaged by
metals**

Judas Dentistry



Here is Ms. Dutton at her recent 35th birthday party.
Like her cousin Benjamin Button, she is aging
backwards.



LINK

She has witnessed MS and other diseases healed when metals, particularly mercury amalgams, were removed from peoples' bodies. I am hoping this helps with my newly diagnosed Parkinson's disease.

Mark Kennard wrote: "I'm happy you've contacted Becky. She's one of the most knowledgeable and experienced people on the planet about mercury and diagnosing and managing type 4 metal allergy. She's the volunteer scoliosis researcher for MELISA.org allergies testing company."

Ms. Dutton lives in Stratford-upon-Avon, UK. She has spent 16 years working with people damaged by metals and leads support and counseling groups. The average patient in Becky's practice has 12 to 16 amalgams. She makes no money from her efforts.

Becky tells her story:

I worked in dentistry during the 1970's and was occupationally exposed to mercury. My daughter was exposed to mercury in utero and developed a neural tube defect and scoliosis.

I was diagnosed with chronic mercury toxicity in 2004 and received IV therapy to remove mercury from my intracellular pathways and DNA.

In 2007, I set up my first website, www.mercurymadness.org, and a support group.

In 2008, I set up a second website with Madeleine Holt, former Culture Correspondent of BBC Newsnight: www.understandingscoliosis.org

Professor Vera Stejskal invited me to join the Melisa Diagnostics team (www.melisa.org) in 2011.

In 2014, I was appointed the lead UK activist for the Global Minamata Treaty to ban mercury pollution.

Judas Dentistry

One of the successful outcomes of this was the new EU regulation to ban dental amalgam use in children under 15 and pregnant and nursing women. This came into force in July 2018 in 28 EU countries, including the UK.

I developed powerful evidence of the link between mercury exposure and scoliosis.

In 2018, I was asked to speak at "Systemic Effects of Metal Exposure in Clinical Practice: Protecting Patients and Optimising Outcomes," a conference in London. My presentation was on 'Scoliosis, Spinal Surgery and Metal Allergy' and included my research study on the link between mercury and scoliosis.

Dutton describes the treatments used to remove mercury from her body:

I had IV vitamin C infusions, followed by glutathione, prior to and during removal of my amalgams. Considering my huge occupational exposure and not having a gallbladder (the gallbladder is one of the major organs of detoxification), I was probably lucky not to have adverse effects.

I started IV therapy with large doses of vitamin C in February 2005. My doctor also prescribed vitamin and mineral supplements, a special diet, etc. I was advised to have all my amalgam fillings removed in order to complete the detoxification.

My treatment was carried out by a mercury-free dentist in the UK. It involved the removal of twelve amalgam fillings and a piece of amalgam from my jawbone. During this ten day period, I continued intense chelation with intravenous vitamin C and glutathione.

Robert Yoho, MD

When I passed urine, I could smell metal!

My treatment in 2010 with intravenous phosphatidylcholine, folinic acid, and glutathione removed mercury, aluminium, and organophosphates from my DNA and intracellular pathways.

Back to my story: After eight to ten years with a mild hand tremor, six weeks ago, a neurologist diagnosed me with Parkinson's disease (PD). As yet, it is only a cosmetic problem, but these things progress.

PD is the second most common neurological problem after Alzheimer's. It is a syndrome or constellation of signs and symptoms rather than a disease with definitive lab tests. The cause(s) are not acknowledged by mainstream medicine.

Ken Stoller's book *Incurable Me* (2016) and my interviews with him convinced me that PD is closely related to autism, Alzheimer's, and Amyotrophic Lateral Sclerosis (ALS). I learned these are all due to or worsened by toxic exposures. A senior biological dentist told me, "In my opinion, Parkinson's is caused by mercury or paraquat."

Likewise, overwhelming evidence links autism with vaccines that contain mercury. So my working self-diagnosis is mercury toxicity. I am hoping to improve following the removal of my 17 amalgams.

Ken's book describes his experience treating patients with Lyme and other diseases: "As has been frequently pointed out, 'it' is never just one thing, but mercury is a toxic linchpin when it comes to many neurodegenerative disorders and is certainly synergistic with other toxins, such as glyphosate."

Like 70 percent of US citizens, a urine test showed glyphosate in my urine.

Judas Dentistry

As RFK says, “glyphosate is everywhere.” Until recently, it was used to suppress weeds during the growing season, but it is now sprayed directly on wheat and corn immediately before harvest to dry it rapidly. This practice has multiplied our exposure. See the end of the post for more reasons why you should eliminate American wheat from your diet.

Dr. Dietrich Klinghardt successfully treats autistic children by decreasing their toxic exposures. He refuses to see kids from families that do not first remediate their home’s EMF. To treat glyphosate exposure, he suggests taking a teaspoon of glycine powder twice daily for three to six months. This causes urinary excretion of the pesticide. [HERE](#) is one of his Mercola interviews about this.

I decreased my “electrosmog” or EMF exposure by ethernet-wiring my house and doing some electrical work. I am sleeping better, and the Wizard of EMF is returning soon for another home visit to exorcise more ghosts. (See the post [HERE](#) if you have not heard about him.)

Aluminum has been convincingly proven to be the cause of Alzheimer’s, and this is closely related to Parkinson’s. So, I am pushing my body to excrete this by consuming silica water. This is another complex story that I addressed [HERE](#).

Here is what the Goddess thought about my case:

You’ve had quite a considerable amount of metal exposure during your life.

First, your mouth: Seventeen amalgam fillings are a considerable amount of mercury. Children of the post-war years were exposed to an inordinate amount of amalgam. It was the ‘drill, fill, bill’ era— dentists were paid for each tooth they filled.

Robert Yoho, MD

Your dentist says you have a metal crown, and there's an amalgam under it? Are there any metal posts? This alone could be causing many of your problems.

Metal crowns are usually bonded with nickel, so you have nickel against an amalgam (mercury, silver alloy, tin, possibly zinc/copper). A post would also be stainless steel. The metal crown is next to amalgams, so there is a good chance of galvanic corrosion in your mouth.

Do you have any cavitations? [bony cavities that are covered by teeth or root canals]. (Not that I know of.)

You need to strengthen/treat your gut before your dental treatment. An anti-fungal diet and prebiotics/probiotics would help.

If you have clips in your knee, they are likely to be stainless steel, which has several alloyed metals. [I investigated and learned they were titanium alloy.]

Please find out the type of mesh used for your hernia op. [There are hundreds of them, and they are plastic or polypropylene, not metal. There is only one exception, which has titanium.]

Do you have more details about the shoulder implants? [Titanium alloy and chromium, another alloy.]

You've smoked in the past; cigarettes contain several metals, including cadmium and mercury. [I caught this disease from my climbing buddy Herb. Thanks, dude!]

You've had the flu vaccine. Depending on the manufacturer, Thimerosal, a mercury preservative, is still used in single and multi-dose vials. When you have the flu vaccine next time, please ask your doctor to check for Thimerosal. If it does, please refuse the vaccine as it's ethyl mercury!! [I would rather jump off a bridge than have any vaccine ever again.]

Judas Dentistry

Thimerosal was also in the contact lens solution you used many years ago.

Mercury is an endocrine disruptor that could have affected your levels of testosterone. [I had low levels and started testosterone replacement in my 40s.]

Removing amalgams and other dental metals should reduce your metal exposure and any possible galvanic reaction between the different metals in your body.

When a man knows he is to be hanged in a fortnight, it concentrates his mind wonderfully. —Samuel Johnson

When your life is on the line, the best strategy might be to throw all your hand grenades out at once (I remember your lessons, BCC). I am studying with a new sense of urgency and taking what actions I can. I first had my amalgams removed by an International Academy of Oral Medicine and Toxicology (IAOMT) dentist.

References

★ Dutton's websites are mercurymadness.org and understandingscoliosis.org. Her email is beckydutton@understandingscoliosis.org. The excellent MELISA testing website is Melisa.org. Her summary sheet, Symptoms of Mercury Toxicity, can be downloaded [here](#).

★ A summary video of a 2018 conference about metal toxicity is [HERE](#). You can view the whole conference for about \$30. I did and recommend it.

★ [HERE](#) is Ms. Dutton's presentation about animal and human studies that show mercury causes scoliosis. In the UK, scoliosis rates rose as amalgams were more commonly used. Surgery has never been proven to reduce pain, improve lung function, eliminate spinal curvature, or

correct rib and torso deformities. Plus, surgically implanted metals are toxic. And few patients are tested for metal sensitivity before these procedures.

★ “Metaanalysis Of Metal Allergies” by KA Roach & JR Roberts (2022) is everything we know about metal sensitivities. Download

★ Mercury Toxicity: How It Hides In Your Food & Poisons Your Health by Dr. Mark Hyman is a video summary of the clinical problems with mercury. He had mercury toxicity that he says was treated successfully with dimercapto succinic acid (DMSA) chelation.

According to Boyd Haley, professor of chemistry from University of Kentucky, DMSA and 2,3-Dimercapto-1-propanesulfonic acid (DMPS), another substance used to treat heavy metals, are not true chelators. Rather they form a “sandwich complex,” where each molecule of mercury will have two DMSA molecules attached to it rather than just one.

DMSA moves mercury from the blood and other organs and concentrates it in the kidneys, which can cause renal failure. Most mercury is not in blood but inside cells. According to Dr. Haley, neither DMPS nor DMSA can enter the cell, so these only remove mercury from blood. Intravenous phosphatidylcholine (PC), folinic acid, and glutathione, used in that order, remove mercury safely and effectively. An oral form of PC is available from Body-Bio.com.

Appendix: Protocols for dental amalgam removal

From a DDS senior IAOMT member:

Judas Dentistry

IV C is good for everything. It cancels local anaesthetic so do it after the removal or during. I recommend the SMART protocol IAOMT method to minimize exposure.

Glutathione is depleted in almost everyone who has amalgams because mercury releases iron inside the mitochondria, leading to oxidative stress, cancers, and aging. Glutathione is made inside the mitochondria to protect you from the oxidative used to create energy. That process is called the electron transport system. Mercury releases iron inside the mitochondria, which shortcircuits the ETS and exponentially produces free radicals of oxidative stress OH-

This quickly uses up your innate glutathione, and aging, fatigue, and ill health results. There is 1000 times more glutathione inside the mitochondria than in blood. Once in the bloodstream, it is rapidly excreted.

Therefore, oral glutathione is digested before absorption. IV gets to circulate and potentially clean toxins from blood but will never get through the blood-brain barrier due to charge and cannot get to or into any mitochondria, so until exposure to mercury stops, healing cannot begin.

So yes to IV C and ok IV glutathione when doing removal, but first and foremost, minimize exposure.

Airway protection with separate air sources for patients and doctors is vital.

From another DDS IAOMT member:

It is amazing and frightening at the same time in which organs and parts of the body mercury is causing havoc.

Is there any part it doesn't cause harm??? I doubt it.

We ALWAYS give Vitamin C i.v.. The amount depends on the patient's weight and underlying health

issues. Normally, in 0.75 gram per kg bodyweight. Once the Vitamin C has finished, we add 600mg Glutathione IV.

I found Vitamin C IV very beneficial to help the detox process. With seventeen amalgam fillings, I would use all gear available to support the removal and detoxing process. Vitamin C and glutathione are essential.

We also suggest a pre-removal supplementation protocol that uses vitamin C liposomal, glutathione,* selenium, and multiple daily mouthwashes with activated charcoal to gather the released mercury.

*Other physician sources say this is poorly absorbed orally.

Ken Stoller's protocol:

1. Eat a diet high in proteins and vegetables for two weeks before your procedure.
2. Ensure that you have one to two bowel movements per day. Magnesium citrate suspension can be added to water, tea, or juice, one or two tablespoons daily, to induce the two bowel movements. Be sure to drink lots of water, about half of your weight in ounces per day, divided over your waking hours daily, such as four ounces or a cup of drinking water each hour you are awake. You can add ground or powdered flaxseed to your drinks or foods like sauces, cereals, or salads (one or two heaping tablespoons daily) to induce two bowel movements daily.
3. For three days before the amalgams are removed, take • Chlorella, 1 gram three times a day • Vitamin C, 1 gram three times a day • Cilantro, 1 gram three times a day •

Judas Dentistry

Glutathione 3,000 mg* (bonus to take garlic with this as well) *see above

4. Right before going to the dentist, take 3,000 mg (3 g) of chlorella and 3,000 mg (3 g) of vitamin C.
5. The dentist should provide oxygen by mask or nasal cannula so that you do not breathe in the toxic gas that comes out of your mouth as he or she drills out the amalgam filling. The dentist should also use a coarse bit that breaks up the amalgam into chunks rather than a fine bit that pulverizes the amalgam, which can spread and penetrate more easily. She should use a high-volume suction apparatus and a rubber dam to reduce your exposure to the toxic particulates.
6. Chlorella dissolved in the rinse water and sprayed in the mouth helps further reduce exposure during the procedure. Eye protection is also provided to the patient to avoid exposure through the conjunctiva. The dentist and her assistant should use a gas mask and eye protection to protect themselves from the toxic fumes, and the procedure should be performed in a room that does not have air circulated into the office. The air in the room should be vented separately, with appropriate filtration to trap the mercury released from the drilling. An anionic air-purifying device in the room may also be helpful. The dentist should use a lot of water, chlorella rinse, and spray to bind the mercury to reduce exposure.
7. Only one quadrant or less should be removed at a time unless the fillings are small, based on the

Robert Yoho, MD

dentist's preference and experience. After the procedure, do the methods listed in number 4 for an additional three days.

8. Once your amalgams are out, we can consider chelation and supplements that boost your detox.
9. Use oral NAC and glutathione until your amalgams are out.

Part Two
Dentistry in context

Chapter 9

“Almost everything scares me these days.”

We are fast approaching the stage of the ultimate inversion: the stage where the government is free to do anything it pleases while the citizens may act only by permission; which is the stage of the darkest periods of human history, the stage of rule by brute force.

— Ayn Rand



LINK

A panoply of health risks are being forced on us. These are used to make money, injure us, and make us die sooner. Most can be avoided. This is a synthesis of brutal information, so here is lighter fare to start.

Dick Cilley, my “dirtbag” climber friend, always chanted this post’s title while scaling hazardous rock. We would gleefully repeat his words as we ascended, laughing at the situations we put ourselves in.

A quote often attributed to Julius Caesar explains more, “As a rule, what is out of sight disturbs men’s minds more seriously than what they see.” The dangers I describe here are mostly invisible, so our anxiety about them may be higher than they merit.

Judas Dentistry



We were once young and heedless. (Needles photo credit: Kris Solem)

The worst risks are self-imposed

Climbing is hazardous, but smoking is responsible for one in five US deaths. I spent a magic decade of my life doing these simultaneously.

A “conventional” source lists the most common causes of US deaths in 2021:

1. Heart disease 695 k
2. Cancer 605 k
3. Covid 416 k
4. Accidents 225 k
5. Stroke 162 k
6. Alzheimer’s 119 k
7. Diabetes 103 k

You can avoid most of these

Strokes and heart attacks increase if you eat “unsaturated” vegetable fats like Crisco or margarine. These oxidize and cause diabetes, atherosclerosis, and other damage. But industrial food producers and a paid-off American Dietary Association promoted these cheap synthetics as healthy since early in the 20th century. “Saturated” animal fats, on the other hand, oxidize much less, so they are far safer (Hormone Secrets).

Eating seed oils instead of animal fats is being recognized as another cardiovascular health catastrophe. Big agriculture, fast food restaurants, fake fat makers, and corrupt regulatory groups are co-conspirators in bringing us these.

Avoiding exercise creates similar risks as smoking.

Accidents: Auto accidents kill 43,000 Americans annually. Not wearing a seatbelt doubles this risk.

Judas Dentistry

Suicide: 50,000 in the US yearly. The psych drugs cause much of it and should be outlawed because of this and other reasons.

"Covid deaths" is code for *people slaughtered by the Covid bioweapon, those killed by withholding standard therapies, those killed by the vax, and those murdered by doctors using treatments such as Remdesivir and ventilators*. It was all facilitated by CDC and FDA lies and implemented by the Department of Defense. If you understand this, you can save yourself and your family.

How to escape modern health calamities

Studying increases your chances of survival. Never be accused of DFR or DFL.

Some of the following disasters are forced on us; others are caused by suppression or concealment of effective treatments. For example, iodine restriction is obviously purposeful. For the rest, ask yourself, "Could this have been solely caused by chance, greed, or incompetence?" The answer is mostly "No."

The following hazards are in rough order of death and disability rates.

Medical abuses

These are using therapies that do not work, cause active harm, or for which simpler, safer, or more effective alternatives are available. These is at least half of modern medicine and the biggest risk on this list. *Butchered by "Health-care"* tells the story. For clarity, I put some in separate categories.

Why did it all happen? Early in the 20th century, Rock-

efeller began controlling doctors and medicine and destroying their integrity. These medical abuses are the cause of most modern diseases.

Medical “errors.” These are deviations from the “standards of care” that cause harm. A credible study estimates that this causes 250,000 US deaths a year.

Prescription drugs kill 250,000 yearly in the US and Europe, according to Peter C. Gøtzsche.

The psych drugs. These cause violence, suicide, and early death. Twenty-five percent of Americans and 80 percent of Danes have been convinced to use them. They destroy our health, empathy, and humanity and are phenomenally addictive. RFK, Jr., forced Fauci to admit in writing that they had never been studied against placebos, so the “science” behind them is a tissue of fraud.

Cancer cures. Dozens of safe, cheap, and effective cures have been suppressed. For example, double-blind, placebo-controlled studies have proven that solid tumors respond to mistletoe. Fenbendazole, a drug related to ivermectin and sometimes used in combination with it, is cheap, nontoxic, and avidly suppresses lymphomas.

Chemotherapy. Reviewing decades of published studies, oncologists report that their poisons improve patient survival by an average of less than two months. This is an admission of utter failure for treatments that cost \$100,000 or more a year. (Some lymphomas, testicular cancers, and a few other tumors can be successfully treated.) Radiation therapy is less successful than chemo, for it does not even produce this statistically invisible outcome.

The oncos are paid well to fail; they get 25 percent kick-backs on chemo charges. This is described in *Butchered by “Healthcare.”*

Root canals (medical subcategory)

These spread infection through the body and must be removed if you value your health. Its inventors repudiated the procedure, but it is still universally performed by general dentists and endodontists. Root canals cause a double-digit percentage, possibly 40 percent, of all human disease.

Vaccines (medical subcategory)

Without exception, each is a net harm that creates illness, shortens lifespan, and decreases fertility. These cause more damage than other drugs because “medical standards” allege they are safe, effective, and should be forced on all of us many times starting at birth. Their mercury, aluminum, and other toxins destroy health.

Notes:

★ Except for the (totally ineffective) influenza vaccine, none has contained mercury for two decades. But since mercury takes years to leave the body—if it ever does—vaccinations are still the second largest human exposure after dental fillings.

★ Before the Covid jab, most immunizations were injected by bribed pediatricians. Over the last few decades, childhood vaccines caused the autism rate to rise from 1/10,000 to 1/30.

★ No vaccine has ever been studied using a placebo comparison. This would have been published if they were any good.

★ The Covid jab has no medical utility. Worldwide death rates soared within months after its rollout, and live births plummeted. This proves it is a bioweapon developed

to weaken and kill us.

Dental amalgam poisoning (medical subcategory)

These are a bigger source of mercury than vaccines. They initially contain 54 percent, and they dissolve and release it into the victim's body over many years. Amalgams are marketed as "silver fillings" by ignorant, unscrupulous dentists. They are a pre-Civil War technology that put a volatile, malignant toxin into the most reactive part of the human body.

Comments

Dentists have no pretense of following even the ruined science of mainstream medicine. They regard themselves as mouth carpenters rather than physicians responsible for a sensitive biological system.

When they "drilled, filled, and billed" my 17 amalgams, I was too young to say no. The mercury likely caused Parkinson's, gave me scoliosis, and affected my personality. Dentists have damaged most of you as well.

Watch Dustin Hoffman in *Marathon Man* here (three minutes) to witness dental sadism. Robert Gammal says this type of cruelty is real. You will only think this is gratuitous if you are new to the study of dentistry.

Opioid abuse (medical subcategory)

It is being thrust on us from the outside and causes more than 100,000 US fatalities yearly. Altering the "physician standards" and predatory, opportunistic doctor prescribing contributed as well.

Bioidentical hormone suppression (medical subcategory)

Doctors seldom prescribe these because medical “standards” discourage it. Conventional “medical science” about hormones is a pack of FDA lies and defamations.

Few seniors take them, and most of those who do receive inadequate doses. Bioidentical hormones, the only ones worth considering, prevent premature aging and extend healthy lifespans. Their use preserves muscles, intellect, and emotional stability.

Testosterone was placed in the scheduled drug category despite its negligible toxicity and profound benefits. Contrary to censored sources like Wikipedia, it benefits the heart. It can also cure advanced breast cancer. See *Hormone Secrets* for more.

Aluminium

This is the second most toxic metal to which humans are commonly exposed. Fortunately, you can mostly avoid it and force its elimination from your body if you read and listen [HERE](#) and [HERE](#).

Electromagnetic fields (EMFs)

These come from sources such as WiFi and unshielded wiring. These dangers are better recognized in Russia and Europe than in the US. Our knowledge is limited because the telecom juggernaut suppresses research and information flow.

Some people cannot tolerate EMF. To mitigate it, WiFi can be replaced with ethernet wiring, which is safer and

faster. But solutions like these are ignored in the quest for sales and convenience. The result? We now bathe in electrical fields. But with care and study, we can decrease our exposures.

EMF may deserve a higher place on this list. See my posts [HERE](#), [HERE](#), and [HERE](#).

Fluoride poisoning

This is deliberately placed into US, Australian, Canadian, and other water supplies. It is a neurotoxin. For example, studies prove, that babies born to mothers who consume it have lower IQs. Industrial fluoride producers give the American Dental Association millions yearly to claim that this poison improves teeth. Agents of the Biden cartel are blocking ongoing lawsuits against its use.

The vegan cult promotion

Until recently, this could have been mistaken for a grass-roots effort, but Gates, the World Health Organization, and the captured media now support it. Those who are fooled blindly damage their health. See *Hormone Secrets*.

Lyme disease (medical subcategory)

This tick-borne spirochete (syphilis is another) infection is a bioweapon developed by our government and released upon our children and us. The evidence for this includes the deathbed confession of Willy Burgdorfer, Lyme's most prominent researcher.

Lyme has chronic, insidious symptoms. It is hard for

Judas Dentistry

“mainstream” doctors to diagnose and treat because knowledge of the natural history and therapies is suppressed. But there are many promising “alternative” treatments, including hyperbaric oxygen, chlorine dioxide, and Alinia, an anti-parasite drug that can be used off-label.

Infected ticks are now ubiquitous in wooded areas of the US and parts of Europe. Ken Stoller estimates that a mid-double-digit percentage of American citizens have been exposed. Most of the symptomatic ones have no idea what is wrong with them. If not recognized and properly addressed, Lyme can cause profound disability.

Sun exposure suppression and sunscreen promotion (medical subcategory)

This has been a bizarre dermatology psych-op that lined their pockets and damaged anyone who believed them. It started when a Madison Avenue marketing company told the Derm leaders to change their image from foolish pimple poppers to fierce cancer fighters.

Skin docs were soon charging millions more a year for office cancer checks and pricey “skin surgeries” that could sometimes be performed with nail clippers. They developed the “standard” that every bit of skin removed must be inspected under the microscope and billed. And they began using the same type of codes that surgical pathologists employ when examining systemic cancers. Question: Which specialty makes the most money? See * below.

The truth about the sun was sacrificed to marketing lies. Contrary to what the dermooids** claim, sun exposure is profoundly healthy—if you have the minimal level of judgment required to avoid roasting yourself. Consider:

Robert Yoho, MD

★ Women who are outside regularly have a far lower risk of breast cancer than those who avoid the sun.

★ Safe, regular sun exposure can eliminate or reduce depression.

★ We are told that melanoma incidence has multiplied even in this era of sunscreen and sun avoidance. But this is dishonest reporting; the true measure, melanoma deaths have remained the same.

★ The dermatologists use this lie to whip us into fear of walking outside. They recommend instead that we scurry into their offices clutching our hats and have "suspicious lesions" clipped off at great expense.

★ Cancers, heart disease, autoimmune diseases, the flu, Parkinson's, multiple sclerosis, and infertility are reduced by sun exposure (my emphasis).

★ Sun exposure increases the likelihood of a healthy pregnancy and baby.

★ Women who get sun have only one-eleventh the risk of a hip fracture as those who do not.

★ Sun avoidance and sunscreen might be as hazardous as smoking.

See The Sunlight Institute website for references and more.

*Answer: Some dermatologic pathologists have billed \$40 million in a year.

** A dermoid is a cyst filled with stinky dead skin; it is also my pet name for dermatologists. I know about dermoids because I was in one of their training programs for a year. To my credit, they fired me, and you can read about it in *Butchered by "Healthcare."*

Ivermectin suppression (medical subcategory)

If used correctly, ivermectin would have—by itself, even without other treatments such as vitamin D—saved millions of lives from Covid. But during the initial “pandemic,” a massive publicity campaign claimed it was “horse medication.” It was used to discredit this safe, effective, Nobel Prize-winning medication.

Hydroxychloroquine (Plaquenil) suppression (medical subcategory)

This nontoxic drug has been used since 1955 to treat inflammatory autoimmune diseases. Although patients typically take it safely for decades with little monitoring except for eye exams every six months, sources such as the CIA-run Wikipedia claim its side effects are severe. A study in the *Lancet* “proved” it did not help Covid, but it was withdrawn after the fraud was immediately recognized.

Suppression of Vitamin D and other supplements (medical subcategory)

D is the most crucial nutrient for good health, but the doses available have been a flim-flam designed to decrease consumption. The units used to measure it were changed from (the tiny-sounding) micrograms to “International Units (IUs),” which are measured by the (perceptually huge) ten-thousands. The commonly available doses are 1,000 to 5,000 IUs, but we now have 50,000 IU capsules, which can be taken once or twice a week. These are the same size as the ones containing insufficient D.

The National Institute of Health claims that vitamin D

levels of 20 ng/ml are “adequate for most people.” However, for people with levels over 60, Covid and other viral illnesses are rare to nonexistent.

Zinc, quercetin, and vitamin K2 can successfully treat and prevent deaths from viral illnesses such as Covid. This has been suppressed.

Iodine has been recognized to promote health for more than a century. A program to discredit it and substitute toxic alternatives such as bromide has been ongoing for about 20 years.

The US RDA (Recommended Daily Allowance) and other sources claim we need little or no vitamin C, magnesium, zinc, selenium, thiamine, and boron. And the wonderfully therapeutic effects of large doses of Vitamins D, C, and magnesium are suppressed or ignored. These three and others, such as thiamine, should be given intravenously to nearly every sick hospitalized patient, but they are not.

Aspartame (NutraSweet, Equal) promotion

This artificial sweetener is available everywhere. A review says, “Dozens of studies have linked aspartame—the world’s most widely used artificial sweetener—to serious health problems, including cancer, cardiovascular disease, Alzheimer’s disease, seizures, stroke, and dementia, as well as negative effects such as intestinal dysbiosis, mood disorders, headaches, and migraines... [plus] weight gain, increased appetite, and obesity-related diseases.”

Chlorine dioxin suppression

This story may be the most important on this list. Read about it [HERE](#) in his archives on [RobertYoho.substack.com](#).

Heedless use of industrial toxins

These include DDT, glyphosate, paraquat, Agent Orange, and trichloroethylene. Due to these and others, neurological diseases such as ALS, autism, Alzheimer's, and Parkinson's redoubled over the past few decades.

Glyphosate herbicide is universally used in the US even though it causes cancer and creates dependence on psychopathic agricultural corporations. It is mostly banned in Europe. Taking chlorine dioxide dissolves it (see the last chapter). Dr. Klinghardt says you can make your body excrete it by taking powdered glycine daily. He describes how to reduce other hazards as well.

Cut your risks

Your health is not a casino. It is your body's precious natural immunity minus all its toxic exposures. Mark Kennard explains how it works in a five-minute video here. He says stresses are additive and describes how you will get sick if you cross your resistance threshold. Healing yourself might be as easy as adding one supplement or decreasing a single toxin, but functioning at your best may require many changes. Words to this effect should be in the preface of every functional medicine book.

Almost everything still scares me these days, but I know how to avoid dangers. If you listen and read, you will, too.

No one is coming to save you

Although some of this has to be greed or incompetence, we have overwhelming proof that malign hands directed the rest. Joe Plummer's *Tragedy and Hope 101* is a history of

Robert Yoho, MD

how the globalists created disasters to weaken and destroy us. They are covert, for they fear exposure.

As I tabulated these calamities, I was repeatedly stunned by physicians' central role in the crimes and systematic collusion with the criminals. I was also shocked by the conspiracy's scope and organization and by the many weapons deployed against us.

As I uncovered story after story of physicians' ethical perversions, I recalled Cicero's maxim: "Nothing is so strongly fortified that it cannot be taken with money." Business people understand this, but physicians, trained more like academics, pretend their behavior is kosher.

Litigation is beating back some of it, but this is sluggish and unreliable, so you must take matters into your own hands. The first step is to realize that nearly every public story we hear is a lie. Learn as much as possible, change your thinking, and correct what you can.

Reservoirs of strength remain to us, and we have hope. Our bodies are so resilient that our death rate never increased until we allowed poisonous needles to be thrust into us. John Dryden's words about his battle apply to ours: I am sore wounded but not slain. I will lay me down and bleed a while, and then rise up to fight again.

History teaches us that leaders appear when times are the most desperate. Dire need and the press of events forge these people. We are witnessing this now.

The rest of us must use the time we have to spread truth and expose the criminals. As long as we are living and breathing, we can do more. We just have to be strong enough.

Aurelius again

Work steadily at that which is before you, following right reason seriously, vigorously, calmly, allowing nothing to distract you, but keeping your divine part pure, as if thou shouldst be bound to give it up immediately. If thou holdest to this, expecting nothing, fearing nothing, but with the heroic truth in every word and sound you utter, then you will live happy. And there is no man who is able to prevent this.

Parting shot



It was one of the best days of my life. I was 53 and climbing Yosemite's El Capitan in 10 hours with Hans Florine. This is halfway up, under the Great Roof.

Chapter 10

Iodine has been taken from us and toxic bromide substituted

When heroes are needed, courageous journalists
and doctors answer the call.



LINK



Hero #1: Lynne Farrow

She tells how the vital iodine supplement in bread is being systematically replaced with a toxin, bromide. It is a dark story, but the good news is that if you educate yourself about it, you can easily take enough iodine to improve your health. HERE is one of Lynne's presentations.

Lynne's book, *The Iodine Crisis: What You Don't Know About Iodine Can Wreck Your Life*, was published in 2014 and recently revised. David Brownstein wrote the forward.

Farrow was never very healthy, but when she was diagnosed with breast cancer, she started researching wholesome living. She writes:

Fear can make you jump onto the first available treatment conveyor belt and plod through the steps assigned to you, no questions asked. Worse, fear can make you believe in the six most dangerous words in the English language: They must know what they're doing. Those six words sustained me for about a month. Got cancer? Step one. Find a well-known doctor at a major Metropolitan hospital. Done. Dr. B. was smart, kind, personable, detail-oriented, and open to my endless questions. You would think this partnership between patient and doctor would work out great, right? Well, no, and yes. My relationship with the famous surgeon worked out fine right up to the point when she lied to me ...

Lynne soon became more knowledgeable than her traditional physicians. For example:

Robert Yoho, MD

At a local cancer conference, I asked a question of the doctor who served as Director of Breast Cancer Services at one of the country's foremost cancer hospitals. "Does radiation therapy increase overall survival in breast cancer patients?" I asked this question because I had researched the medical literature and already knew the answer: No. I was testing him to see if his information was reliable. His response: "Radiation must increase survival because we do it at our hospital."

In her quest to understand and get rid of her breast cancer, Ms. Farrow eventually stumbled onto iodine, a critical trace element. She began studying its history and uses. It had a venerable history spanning thousands of years, and until the antibiotic era, it was regarded as one of the critical disease treatments and preventives. It was put on the skin as a disinfectant, used to treat breast diseases, and placed on wounds to counter infections. Taken internally, it was known to produce healthy teeth, nails, and hair. It was essential for proper energy, sexuality, thyroid health, and much more.

Since the body cannot produce iodine, it must be consumed. Lynne learned that since the 1970s, iodine use had been systematically curtailed. Although iodized salt is still available, once a package is opened, up to 90 percent of the supplement evaporates quickly. Also, it is more difficult to absorb in the salt form than when supplemented in foods. Iodized salt is just enough to prevent goiter but insufficient for optimal health. It contains aluminum, which promotes Alzheimer's and Parkinson's Disease.

Until recently, bread had been fortified with iodine, but this was stopped around 1970. Lynne describes how it happened, "A 1970 conference report from the Food and

Judas Dentistry

Nutrition Board, National Academy of Sciences [NAS], titled 'Iodine Nutriture in the United States,' strongly hinted that iodine in bread may not be safe and that iodized salt is superior... The function of the report appears to be to raise insidious questions disguised as public concern—'Is iodate in bread dangerous?'

In *Hormone Secrets*, I wrote about how the Academy was contracted to discredit bio-identical hormones made by compounding pharmacies a few years ago. The purpose seemed to have been to eliminate one of big Pharma's (tiny) competitors. It was a pay-for-play hatchet job. I concluded that the prestigious NAS was as full of whores as the rest of medical academics. Before I read Lynne's book, I had no idea they were so corrupt in 1970.

Lynne continues, "By 1980, wild claims were published. The USDA [United States Department of Agriculture] reported in "The Fortification of Foods: A Review" that iodine as a disinfectant 'has long been known to be lethal...' and that Americans get more than enough iodine from non-bread sources, so [iodine] 'should be replaced whenever possible by compounds containing less or no iodine.'"

Next, in 1973, potassium bromate, a toxic anti-iodine, was substituted for the iodine formerly used in bread. This purged the critical nutrient from our bodies. The UK banned this practice in 1990, and Canada did the same in 1994, but petitions to the FDA to eliminate bromate have been unsuccessful.

Within a few years, additional bromines from fire retardants increased our bromine exposures. Lynne wrote, "Fire retardant dust is the most grievous source of bromine; countless other sources flow into our bodies from brominated vegetable oil in certain sodas, sports drinks, and foods.

We are surrounded with bromine and bromides, an insidious element known to sedate, suppress the thyroid, disrupt reproduction, and even cause mental illness. Bromine fire retardants are even found in breast milk. Bromide is banned in many countries but not in the US."

Breast cancer rates have risen since the 1970s. During the same period, as iodine consumption decreased, exposure to bromine increased. IQs are dropping, and thyroid and other diseases continue to worsen. Obesity is another effect that is partly due to the iodine metabolic pathways being poisoned with bromine.

Fluoridated drinking water, ubiquitous in the US but banned in most of the world, also decreases iodine absorption.

Large Chinese population studies have shown that iodine deficiency causes dwarfism, poor thyroid function, and mental retardation. This has been corrected with supplementation and, in some cases, using irrigation methods.

Women have more problems with low iodine consumption than men; pregnancy and nursing require increased iodine consumption. The following stories from Ms. Farrow's book describe how deficient women respond to supplementation. They suddenly feel great—sometimes on the first day. These stories are from LynneFarrow.net.

Patient story, Alice: breast calcifications, coldness, hair loss, Raynaud's Disease, all improving or resolved.

I started using iodine about 18 months ago when I decided not to get a stereotactic biopsy for suspicious calcifications. I took an iodine loading test. I was only slightly deficient, about 15 percent, but the doctor advised me to take 100 mg daily of Iodoral along with

Judas Dentistry

ATP cofactors in case of an early stage of cancer. About six months ago, I had an ultrasound of the area, and, after careful examination, there were no visible calcifications. I did not get a mammogram as I do not want to have one anymore, but I knew that the calcifications picked up on my last mammogram had also been seen on the ultrasound. Also, thermographs showed improvement and less inflammation in the area.

Iodine has done wonders for me. Fibrocystic disease is clearing up. I also may have had a sluggish thyroid that was not picked up on blood tests, as now my feet are no longer cold, my Raynaud's Disease has gone away, and my alopecia (hair loss) is almost resolved. I am taking 50 mg of Iodoral a day, and my fibrocystic disease may take another few years to resolve completely. I took other measures I researched, but I think the Iodoral was the main player in my success. I hope my story helps others.

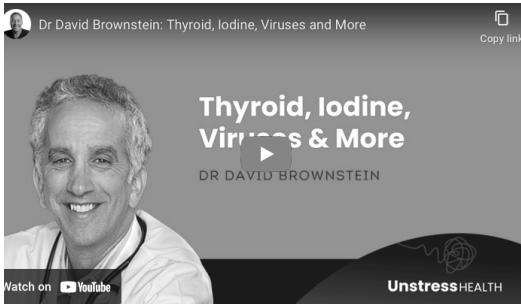
Patient story, Marla: Lumpy, sore, fibrocystic breasts resolve. Energy improves.

I want to tell you about my experiences with Iodoral. It has been the most beneficial product I have ever used. I have fibrocystic breasts, which my gyno simply described as "lumpy, sore breasts." He said it really doesn't hurt you; it just hurts. Well, I think that is bull. I started doing some research on my own and ended up going to a chiro for a back problem. She had me lie on my stomach to adjust me, and, wow, did my breasts hurt! Well, that was the best day of my "health" life! My husband was the first to link a difference to the Iodoral. In about three weeks, I just felt good. Really good. I had energy; I felt like going places and doing things. It was not a jittery caffeine energy; it

Robert Yoho, MD

was just what a normal 30-year-old should feel like. And my libido was back. That is what my husband noticed! Before the Iodoral, I didn't want to be with my husband. But suddenly, I wanted to! And finally, on to my breast. My breast pain would start exactly 10 days before my period. And be very severe. In the second month, no pain. None at all. And it doesn't come back as long as I am on my Iodoral. If I am not on it, it comes back immediately. My mother had breast cancer at 38. I am now 35, I have taken control of my health, and I will not be a silent victim!

Hero #2: David Brownstein, MD.



Dr David Brownstein: Thyroid, Iodine, Viruses and More

This 2022 podcast is an interview with David Brownstein, MD., author of *Iodine: Why You Need It, Why You Can't Live Without It* (2014). Listen to it at faster speeds. [HERE](#) is another of the doctor's podcasts.

He describes how he quit conventional medicine and became an expert in nutrition, bio-identical hormones, and other holistic therapies. He has lectured internationally and has written 16 books.

Judas Dentistry

Dr. Brownstein says his midwest area is known as the "goiter belt" because the soil is iodine deficient. So he tests everyone, and seventy percent of his patients have low iodine levels. When given iodine, a third can stop their thyroid medication, a third can reduce it, and only a third must continue at the same dose.

He says that if he had to leave functional medicine and use only one of his therapies, he would keep iodine because it helps more people than anything else. In the video above, he also addresses fluoride, thyroid, and hormones. He also describes why most people need more salt. Brownstein wrote a book about iodine, *Iodine: Why You Need It and Why You Can't Live Without It*.

He says, "The best-educated patients get the best results."

What we can learn from censored sources.

Although mistakes are often made in science and medicine, the following sources lend credibility to the idea that globalists are guiding the "mainstream" iodine narrative to weaken and damage us purposefully. For example, Wikipedia's article "Iodine (medical use)" contains none of the information here. Another heavily censored source, WebMD, has a write-up with none of it, either. A third, Healthline, has the biased title, "10 Uses for Iodine: Do Benefits Outweigh the Risks?" It says:

Given the wide availability of iodine in Western diets, thyroid health isn't typically impacted by low iodine levels in the United States... Despite the role iodine can play in disinfecting drinking water, there are also some concerns that it can increase the total iodine intake in

Robert Yoho, MD

humans and lead to adverse health effects (*Yoho note: this is unreferenced*). Total iodine intake shouldn't exceed 2 mg per day (citing NIH sources, which have certainly been captured).

According to the iodine truthers community, twelve-and-a-half to fifty mg is the daily dose of Iodoral brand iodine. Sometimes more is needed. Dr. Brownstein recommends starting with 25 mg every morning. See the references and the dosing equivalencies below for more.

Should you simply buy some iodine and start taking it? On a hazard-to-benefit ratio, it seems like an excellent idea. If you take too little, it works poorly, and if you take too much, usually the only problem is getting "hyper" or "revved up." Many patients adjust their own doses, but be cautious.

Feeling better can be nearly instantaneous, or it may take weeks. If you have thyroid issues, get supervision by an experienced practitioner.

I had a formal consultation about my health with Dr. Ken Stoller. Among other things, he recommended a drop of "nascent" iodine every morning. That set me on the path to reading all I could and writing this post. I am taking six drops a day now.

It is disgraceful that this knowledge is not a part of standard medical training and practice.

Several types of iodine are available.

The bioavailability of each medication that follows is different, so the ideal milligram doses are not precisely equivalent. Also, people have different needs for iodine because some may be deficient, and some may not be.

★ Lugol's solution was developed in 1829. Two drops

Judas Dentistry

of Lugol's 5% Solution contain the equivalent of one tablet of Iodoral 12.5 mg.

★ Lugol's as a 12.5 mg pill: Iodoral brand from Optimex contains 5 mg iodine and 7.5 mg potassium iodide. The doses recommended by some holistic doctors are 25 to 50 mg each morning.

★ Nascent (Magnascent brand and others). It was developed in the 1920s. This is more expensive and has a reputation for greater purity and reliability. There are 400 micrograms or .4 mg per drop. Lynne Farrow says it may be harder to get an adequate dose using this, but a few drops dramatically affect me.

★ SSKI (saturated solution potassium iodide) was developed in the 1800s—0.07 grams (70 mg) per drop.

I'll give Lynne the concluding comment: "I don't think you can overdo iodine unless you're feeling bad and then 'that's the bromide talking'" (via email). She has learned this over her 15 years of study and interacting with online groups. Getting your dose right is an adjustment process that you should not rush. Start low, read a lot, and get knowledgeable help if you can find it. If you are hopped up, you may be taking too much.

References

★ I recommend Lynne's book at the top of this post because of its readability and fascinating story. It sold over a million copies and has been translated into eight languages. Her websites are www.BreastCancerChoices.org, and Lynne-Farrow.net. Her think tank, the Breast Cancer Think Tank, is HERE. Iodine is one of their recommended strategies. She is also the editor of Iodineresearch.com.

★ At the Yahoo iodine group HERE, you can learn

from beginners, long-time iodine takers, and several practitioners.

★ The Curezone Iodine Forum HERE is managed by its founders, Laura and Steve. They have had over 10 million hits.

★ Iodineresearch.com

★ Iodine: Why You Need It, Why You Can't Live Without It (2014) by David Brownstein, MD. He has other YouTube videos, a website, and many books on Amazon. (I would have read his book, but Dr. B. does not publish ebooks and my eyes are going).

★ THIS reference is about the epidemic of iodine deficiency in US women of reproductive age.

Experts to consult (there are many others)

★ David Brownstein, MD (rumored not to be taking new patients, but you can try)

★ Ken Stoller, MD

★ Margaret Aranda, MD

★ Lynn Farrow recommends Dr. Buist, an expert holistic doctor in Wyoming, Michigan. Her websites are NaturalThyroidChoices.com and SteppingStonesLiving.com.

Appendix: more Dr. Brownstein

One of Dr. Brownstein's most interesting insights was that the original studies (INTERSALT 1997 WHO study HERE) recommending against salt for high blood pressure were unscientific, and their conclusions were wrong. His patients, including the hypertensives, are advised to use several teaspoons daily of yellowish, unre-

Judas Dentistry

fined salt. This has critical trace minerals. Unfortunately, the reverse-osmosis process commonly used to eliminate fluoride from household drinking water takes these out, too.

If salt is refined from today's oceans, it contains mercury and other pollutants. Thankfully, we can mine the salt laid down by the seas thousands of years ago. Pink Himalayan salt is one of these, and Redmond is another respected brand.

Brownstein says salt improves patients' health and does not raise their blood pressure. Here is the link to his book, and [HERE](#) is an interview.

During the first Covid wave, Dr. Brownstein prescribed the same treatment protocol he used during the prior flu seasons

- ★ Vitamin A, 100,000 U a day
- ★ Vitamin D, 50,000 IU a day
- ★ Vitamin C. 1000 mg an hour at first
- ★ Iodine 25 to 50 mg a day

★ Inhalant nebulizers with .03 percent hydrogen peroxide (diluted from 3 percent) and one drop of Lugol's iodine in the solution. It is used every two hours at first.

- ★ IV vitamin C is given to sicker patients.

In this podcast, he spoke about his therapies, *Redefining Medicine* with special guest Dr. David Brownstein.

His practice treated thousands of Covid patients, and only one died. Brownstein's partner sent the man to a hospital, and he was murdered with Remdesivir. If you think this statement is over-the-top, listen to any of Scott Schara's interviews in my archives. **THIS** is the most recent one.

My buddy George commented, "I'm just getting over the worst summer flu/COVID I've ever had. I've been gargling and nebulizing povidine iodine for several days,

and it made a difference immediately. I'm mega-dosing on vitamin C powder as well."

To listen to Brownstein some more, HERE is a podcast he did with Dr. Mercola. It was primarily about his viral treatment protocol above.

Parting Shots

#1: Jorge Flechas, MD, MPH, wrote, "We know from world studies that if you give iodine during pregnancy, the babies that come out are usually 20-30 points higher in IQ than their parents." HERE is his speech explaining how iodine is critically important for women and the elderly to avoid cancer and other health issues.

#2. For accidental or wartime radiation exposure, adults of 18 and older should take 130 mg of iodine a few hours before or as soon as possible after the event, then daily. This is two ccs of KI (potassium iodide) solution.

Chapter 11

Just like Covid, Lyme disease is a bioweapon

It was deployed against us in 1975 from a research lab on Plum Island, Connecticut. Lyme has infected a double-digit percent of the world's people, and effective treatments are being hidden.

* * *

Imitation is the sincerest form of flattery.

— Oscar Wilde

I take my admiration to extremes. For critical posts like this, I simply copy, narrate, and abridge like a respectful editor. Whoever Unbekoming is, I cannot keep up with him. The original essay is [HERE](#).

When I first heard about Lyme, I was 26 and working in a Dartmouth dermatology residency. We were all fascinated by this new disease and its “target” skin rash. In a typical attempt to baffle other doctors and claim a stylish new condition for themselves, the dermatologists dubbed it “ery-

Robert Yoho, MD

thema chronicum migrans.” I saw a few cases that looked like this:



* * *

Most of what I was supposed to learn in my training was endless, picayune academics. All I wanted to do was to get into the New Hampshire mountains to rock climb and hike the Appalachian Trail. My attitude was evident to the dermoids, so they kicked me out of the program at the end of the year.

Here is the CDC’s description of Lyme

[It] is the most common vector-borne disease in the United States. Lyme disease is caused by the bacterium *Borrelia burgdorferi* and, rarely, *Borrelia mayonii*. It is transmitted to humans through the bite of infected blacklegged ticks. Typical symptoms include fever, headache, fatigue, and a characteristic skin rash called erythema migrans. Infection can spread to joints, the heart, and the nervous system if left untreated. Lyme disease is diagnosed based on symptoms, physical findings (e.g., rash), and the possibility of exposure to infected

Judas Dentistry

ticks. Laboratory testing is helpful if used correctly and performed with validated methods. Most cases of Lyme disease can be treated successfully with a few weeks of antibiotics. Preventing Lyme disease includes using insect repellent, removing ticks promptly, applying pesticides, and reducing tick habitat. The ticks that transmit Lyme disease can occasionally transmit other tickborne diseases.

Spoiler: Chlorine dioxide (last chapter) can often cure Lyme. You can make it in your kitchen from inexpensive supplies. However, the government claims that consuming it is like drinking bleach. Concealing effective treatments is the same strategy they are using with Covid.

Unbekoming's post

Toby Rogers wrote this in Sept 2022.

Learned helplessness

Having Lyme, ME/CFS, or an autoimmune disorder is like wearing an electric dog shock collar that you cannot take off. Every time you try to engage with the world the thing shocks you and you're worse off than if you had not tried at all. Over years and years it creates learned helplessness. What's troubling to me, especially given the history of Lyme (it's likely an American made bioweapon), is that the ability to create learned helplessness in a population is highly desired by governments. The peasants cannot overthrow the feudal system if they are wearing biological shock collars that constrain their ability to dream, think, and act. We have got to find ways to cure these conditions. Healing is a revolutionary act.

This put Lyme as a bioweapon on my radar.

So, I read Newby's book, *Bitten: the Secret History of Lyme Disease and Biological Weapons* (2019). It has 891 Amazon reviews.

This passage from Denis Rancourt's recent essay jolted me into writing this article:

I do not mean that the Department of Defense (DoD) does not fund gain-of-function and bioweapon research (abroad, in particular); I do not mean that there are not many US patents for genetically modified microbial organisms having potential military applications. I do not mean that there have not previously been impactful escapes or releases of bioweapon vectors and pathogens. For example, the Lyme disease controversy in the USA may be an example of a bioweapon leak (see Kris Newby's 2019 book *Bitten: The Secret History of Lyme Disease and Biological Weapons*).

Outline:

- ★ The US military weaponized ticks.
 - ★ They used those weaponized ticks on foreign soil against both military personnel and civilians.
 - ★ The US engaged in uncontrolled releases on US soil.
 - ★ A “mysterious” new disease emerged.
 - ★ Willy Burgdorfer, a scientist, purportedly discovered its connection to ticks. He was hailed as a hero.
 - ★ Turns out Willy was one of the lead scientists who, years earlier, had weaponized the ticks (you can't make this stuff up).
 - ★ The US medical establishment denied the existence

Judas Dentistry

of a new disease and attacked doctors who diagnosed or tried to treat it.

★ The medical industry now profits from Lyme.

After learning about several other of the US government's "theatrical productions," including Covid, Covid vaccines, AIDS, smallpox, DDT, polio, childhood vaccines, fluoride, and glyphosate, it was easy to understand ticks and Lyme.

Ticks have a special place in my heart.

We live in St Ives, one of the tick capitals of Sydney, Australia. When we bought the house, I remember the real estate agent telling us all the amazing features of the suburb (and they were all true), but he left out the ticks...

So, for the last 20 years, we have accumulated many tick stories. Our kids and cats were regularly bitten and treated. Our most serious story happened when my wife was bitten by a small army of ticks and was unwell for several months. She "luckily" came down with a kidney stone, so the hospital flushed her with IV antibiotics and inadvertently killed whatever infection she had picked up from the ticks. Thank God for the kidney stone, I guess.

The daughter of a friend of ours contracted Lyme disease but couldn't get a doctor in Australia to diagnose it. She was forced to travel to the US to work with a doctor who helped her treat it over a long period.

It never crossed my mind, not even for a second, that anyone would have spent decades trying to figure out how to weaponize ticks with all manner of bacteria and viruses. But that's precisely what they did.

I remember telling my wife that the tick design was simply perfect. They would crawl up your leg without you knowing and burrow into your skin to secrete their toxins

and drink your blood. By the time you felt them, it was too late.

The US military decided in the 1940s that tics were perfectly designed for what they needed to do.

One of the reasons I think the tick and Lyme story is so important is because it, via Newby's book, supplies a window straight into who "they" are—the book names names.

The following will help you learn the story in one sitting.

Bitten summary

The following includes quotes with my commentary.

★ Reported cases of Lyme disease have quadrupled in the United States since the 1990s.³ In 2017, there were 42,743 cases of Lyme disease reported to the Centers for Disease Control and Prevention (CDC).⁴ The scientists at the CDC who study the spread of diseases now say that the actual cases may be ten times higher than reported, or 427,430 cases.⁵ On average, this means there are about 1,000 new Lyme cases in the United States per day.

★ While all the pieces of this public-facing story are true, they are not the whole truth. Shortly before his death, Willy was videotaped saying that he believed that the outbreak of tick-borne diseases that started around Lyme, Connecticut, had been caused by a bioweapons release.⁹ It was a stunning admission, but it could explain why the condition we call Lyme disease is so hard to diagnose and treat—and why the epidemic is spreading so far and so fast.

If anyone else had said this, I might have walked away, but Willy was the person with the most to lose. When this information came to light, his legacy would be destroyed.

Judas Dentistry

Because of this horrible secret, the foundational science behind Lyme disease was compromised, and patients were being harmed.

★ Willy soon learned that this lab full of researchers who loved bugs was being funded primarily because of the government's need for disease vaccines. The US Public Health Service, which would later be renamed the National Institutes of Health, paid for the lab by developing, manufacturing, and distributing vaccines for spotted fever, encephalomyelitis, relapsing fever, yellow fever, and other diseases transmitted from animal or arthropod vectors to man.

★ On the lab tour, Kohls told Willy the history of how the lab mass-produced ticks and *Rickettsia rickettsii* organisms to produce vaccines. In the 1920s, researchers there injected thousands of guinea pigs and rabbits with these live organisms, then placed ticks on the infected animals and allowed them to feed for a couple of days. They would douse bacteria-laden ticks with formalin, grind them up, and use the filtered, diluted "tick juice" as a vaccine. The vaccine fluid included tiny fragments of proteins that, when injected under a person's skin, would stimulate a protective immune response.

★ In her 2005 book, *Biological Weapons: From the Invention of State-Sponsored Programs to Contemporary Bioterrorism*, medical anthropologist Jeanne Guillemin, now a senior fellow in the Security Studies Program at the Massachusetts Institute of Technology, describes the political situation as Willy became one of the 13,538 civilian employees of the US chemical and biological weapons program: "The atomic bomb and the Cold War signaled a momentous change in the US biological weapons program. The vision of the scale of intentionally spreading disease

expanded to strategic attacks on a par with the destruction of Hiroshima and Nagasaki and with the Soviet Union and its allies as potential targets.”

★ To staff this massive scientific effort, the army recruited young scientists such as Willy, often funding them through the US Public Health Service (later the National Institutes of Health) and the National Academy of Sciences. The secrecy of these projects was modeled upon the strict guidelines developed for the Manhattan Project, whose scientists had had to sign confidentiality agreements and had not even been informed about the ultimate purpose behind their experiments: weapons development.

★ There was a method behind this madness. In most cases, bacteria from one region wouldn't thrive inside ticks from another region because it takes many generations for a microbe and a tick species to develop a mutually beneficial relationship so one species doesn't kill the other. When Willy found a compatible pair, Fort Detrick would add that agent/tick combination to its list of potential biological weapons. The weapons designers were looking for a tick that wouldn't arouse the suspicion of an enemy country, filled with an agent for which the target enemy population wouldn't have natural immunity.

★ From Brigadier General Lansdale's Top Secret Memorandum, January 19, 1962: “On a most discreet (strictly need-to-know) basis, defense is to submit a plan by 2 February on what it can do to put a majority of workers out of action, unable to work in the cane fields and sugar mills, for a significant period for the remainder of this harvest. It is suggested that such planning consider non-lethal [bioweapon], insect-borne.”

★ From the Biological Subcommittee Munitions Advisory Group, October 27–28, 1966: “Dr. A. N. Gorelick

Judas Dentistry

reviewed the characteristics of viral and rickettsial agents currently in the program . . . the use of multiple agents to achieve prolonged incapacitation was also being investigated.”

★ The perfect incapacitating agent was one that made a large percentage of a population moderately ill for weeks to months. The illness it caused would have to be hard to diagnose and treat, and under the best circumstances, the target population shouldn't even be aware they'd been dosed with a bioweapon. This would make it easier for invading, vaccinated soldiers to take over cities and industrial infrastructure without much of a fight or the destruction of property.

★ In the Infectious Diseases Society of America (IDSA) guidelines, chronic Lyme isn't classified as an ongoing, persistent infection; it's considered either an autoimmune syndrome (in which a body's immune system attacks itself) or a psychological condition caused by “the aches and pains of daily living” or “prior traumatic psychological events.” Medical insurers often use these guidelines to deny treatment, and many of its authors are paid consulting fees to testify as expert witnesses in these insurance cases. In some states, the guideline recommendations take on the force of law so that Lyme physicians who practice outside them are at risk of losing their medical licenses.

★ The guidelines authors regularly convened in government-funded, closed-door meetings with hidden agendas that lined the pockets of academic researchers who had significant commercial interests in Lyme disease tests and vaccines. Many government grants were awarded to the guideline authors and researchers in their labs.

★ Over the years, the US military conducted “Large Area Coverage” vulnerability tests on an unsuspecting

public. For example, in the 1950s, the US Navy sprayed a two-mile-long line of aerosolized “simulant” off the coast of San Francisco. Newby described the effectiveness of such an attack if the weather conditions were right.

✪ I pondered why Lyme disease researchers were so much more paranoid than their rickettsial counterparts. Thinking back on my research for the Lyme documentary *Under Our Skin*, I concluded that much more money was at stake with Lyme disease. It was the first major new disease discovered after the Bayh-Dole Act, and the *Diamond v. Chakrabarty* Supreme Court decision made it possible for the NIH, the CDC, and universities to patent and profit from “ownership” of live organisms.

When the causative organism behind Lyme disease was announced, something akin to the Oklahoma Land Rush of 1889 began. Scientists within these institutions began furiously filing patents on the surface proteins and DNA of the Lyme spirochete, hoping to profit from future vaccines and diagnostic tests that used these markers. For example, an NIH employee who patents a bacterial surface protein used in a commercial test kit or a vaccine could receive up to \$150,000 in royalty payments a year, an amount that might double his annual salary.

All of a sudden, the institutions that were supposed to be protectors of public health became business partners with Big Pharma. The university researchers who had previously shared information on dangerous emerging diseases were now delaying publishing their findings so they could become entrepreneurs and profit from patents through their university technology transfer groups. We lost our system of scientific checks and balances.

This undermined patients’ trust in the institutions that are supposed to do no harm. With Lyme disease, there’s no

Judas Dentistry

profit incentive for proactively treating someone with a few weeks of inexpensive, off-patent antibiotics. The patentable vaccines and mandatory tests-before-treatment bring in steady revenues year after year.

★ More than a decade after the tick bite that changed my life, I had a deeper understanding of the Lyme problem from a scientific, political, and policy point of view. I knew that infectious disease departments at most major medical centers, including Stanford, were following the iron-fisted IDSA Lyme guidelines stating that chronic Lyme isn't an infectious disease, and it can't be successfully treated with long-term antibiotics.

When my family contracted Lyme, our doctor discharged us. He might have been reprimanded or even fired if he had kept us on as patients. To his credit, he was the first to test us for Lyme, putting us on the path to wellness.

Yoho again: Therapy

If you think you have Lyme, you probably do. If you think Pfizer will save you with a vaccine, you also believe in the Easter Bunny. For the current fictions about Lyme's diagnosis and treatment, see Wikipedia.

For better advice, contact Ken Stoller, MD. His interviews with me and his website are [HERE](#) and [HERE](#). He says that a double-digit percentage of US citizens are infected. He makes it sound like this number is nearly on the order of root canal illness. How many are symptomatic is unknown. To treat the disease, Dr. Stoller uses hyperbaric oxygen and Alinia, a benign anti-parasite drug that you can buy from Indian pharmacies.

Chlorine dioxide (CDS) is likely a cure. It is cheap, safe,

Robert Yoho, MD

and easy to make. It is also heavily suppressed, which is evidence that it works. See the next chapter.

When you kill Lyme spirochetes, toxins are released that can make you sick. This is a Herxheimer reaction; both Alinia and CDS potentially provoke it. So, you should get treatment help from Ken or another experienced doctor. Kalcker says to use low starting doses and proceed with caution if you do not.

I never give medical advice; use your best judgment and practicing doctors for that.

Chapter 12

NASA called chlorine dioxide a universal antidote

Any sufficiently advanced technology is indistinguishable from magic.

— Arthur C. Clarke



LINK

To focus, I brush off 95 percent of the torrent passing before me. Chlorine dioxide (CD) was like that for me at first. A friend breathlessly recommended a video featuring an annoying German,* Andreas Kalcker. He claimed CD cured everything from AIDS to cancer to every infectious disease. I loathe exagger-

ations, he spoke with ridiculous certainty, and—this is still a reflex for me!—he was only a PhD. It was three strikes against him.

*I can say this because I am as well.

I can pry something understandable out of almost anything. But since I had cut most of my schoolboy chemistry classes and never studied electrical engineering, I had trouble with Kalcker. As I watched him at my usual double speed, I found nothing easily verifiable. So I shelved the project and months passed.

Then Christian Elliot sent me his interview with a dozen links. As usual, I found myself racing to catch up with him. Christian was able to more easily approach the subject because he lacks my biases. He also thinks better than me.

I learned that CD was a cheap, nontoxic, reliable disinfectant that had been widely used since the 1970s. Hundreds of studies were published about its safety and efficacy. It had been used to treat species from humans to honey bees, which are profoundly sensitive. In humans, chlorine dioxide is proven to cure many illnesses. For some animals, it improves longevity.

By 2006, information about CD began going viral. The buzz was that it was easy and cheap to make, it cured many conditions, and that no doctor was needed. In response, a massive government smear campaign was launched in 2010 that equated using chlorine dioxide with drinking bleach.

Judas Dentistry



Above: Idiot newscaster reading from a script about the supposed horrors of chlorine dioxide.

When I learned about this, my interest sharpened, for it resembled the ivermectin “horse medicine” lies. The psychopaths wanted us to see CDS as a conspiracy.

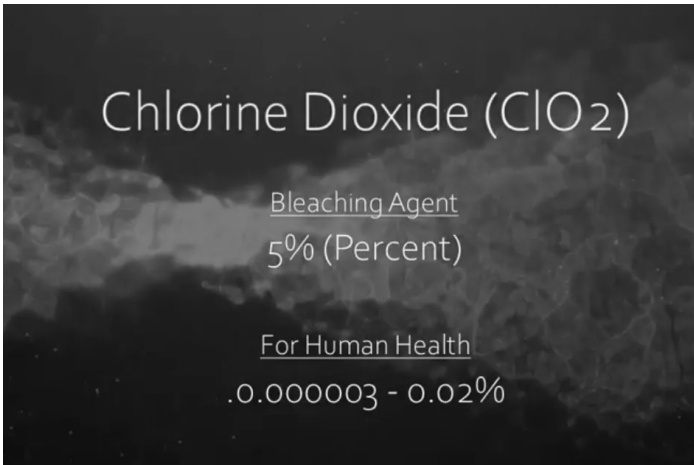
As I explored further, I found “Chlorine Dioxide as an Alternative Treatment for COVID-19” other similar sources. I also heard reports of CDS curing Lyme disease and autism.

Lyme and Covid were developed by US government “gain of function” research labs to injure and kill us. Autism is caused by childhood vaccines, which are proven killers and likely bioweapons as well. The coverup stories about bleach discrediting CD and horse medicine discrediting ivermectin are lies that could have been invented by the same advertising agency.

All this reflects years of planning. The criminals obviously realized that their plans were threatened if the word got out that chlorine dioxide cured these diseases or ivermectin healed Covid. To see how their fear mongering continued through today, search YouTube for “Church of Bleach.”

Chlorine dioxide is a nontoxic sanitizer with thousands of established uses

It was first produced in 1811. Since then, myriad applications have been devised including use in over 500 US water treatment facilities. It is not carcinogenic, and it is even used in fishtanks without harmful effects on the fish. In conventional dilutions, CD has no proven human or animal toxicity, even for people on the edge of death.



* * *

Chlorine dioxide is used for paper bleaching, but in extreme concentrations and amounts that have nothing to do with human use.

CD may be the best-known disinfectant. It can eliminate bacteria, fungi, viruses, and small parasites. Since it has so many important uses, it cannot be banned.

Extremely low doses are effective medical treatments, and there are no toxic metabolites. Since it cannot be

Judas Dentistry

patented, making enough to last a lifetime costs under \$100. It is easy to manufacture at home using sodium chlorite (not sodium chloride, salt) and an acid “activator.” Hydrochloric acid 4 percent is best, but others work too.

At concentrations of 10-100 parts per million, CD has been proven safe for humans, even when used daily for months. Chlorine dioxide is pH neutral and does not typically cause irritation or other side effects.

Its safety trials are extensive and remain unchallenged. When studied outside the body, viruses and bacteria are killed by tiny concentrations that host cells would survive unharmed. We also have animal trials. In one, when mice were experimentally infected with influenza, all those exposed to low dose chlorine dioxide lived and 70 percent of the rest died.

Formal studies about treating and curing human disease are less common. The ones that managed to be accepted for publication claim near-universal clinical success within a day to a few days. But the media has discredited and defamed this work and the authors. They even did this to Kalcker despite his impressive background.

How does CD work? Human cells easily handle the oxidation produced by chlorine dioxide, but viruses and bacteria cannot, so they die. Kalcker says, “[CD] is oxidizing, which is precisely the body’s... plan B to convert an acidic toxin into a nontoxic alkaline.” From the video below: “The term ‘chlorine dioxide’ is misleading because chlorine is not the active element. Chlorine dioxide is an oxidizing, not a chlorinating agent. ClO_2 penetrates the cell wall and reacts with the amino acids in the cytoplasm within the cell, killing the microorganism. The byproduct of this reaction is chlorite, which is harmless to humans.”

Yoho note: I do not understand this either, but there it is.

Cures for AIDS, cancer, Lyme disease, viruses, bacteria, and more have been reported.

- ✪ In mice and human studies, CD kills certain cancer tumors in less than 48 hours
 - ✪ It kills bacteria, fungus, Giardia, and parasites in humans and animals
 - ✪ Kills viruses including influenza, Covid, and others
 - ✪ Prevents viral illnesses
 - ✪ Treats infected wounds and improves wound healing time
 - ✪ CD is used as a sanitizing agent and for producing sterile water
 - ✪ Treats HIV, but most countries do not allow this
 - ✪ Treats HPV—genital warts
 - ✪ Kills multi-drug resistant bacteria
 - ✪ Treats pseudomonas, e coli, staph aureus
 - ✪ CD can be used to decontaminate deep surgical wounds and cure surgical infections
 - ✪ Cures toenail fungus and candida. I ordered some from Frontier Pharmaceuticals
 - ✪ Cures fungal skin infections. When sprayed on the entire body, all funguses are cured
 - ✪ Treats viral hepatitis
 - ✪ Cures inflammatory diseases such as rheumatoid arthritis
 - ✪ Cures malaria within three hours to three days in 154 out of 154 people in one study. The International Red Cross covered this up. The video documentary about it has been banned from YouTube but the links to the Bitchute and Brighteon versions can be found below. One provider describes treating 500 people in a day.

Judas Dentistry

- ★ Missionaries in Africa report curing 70,000 to 100,000 cases of typhoid fever and malaria
- ★ Curing chronic, debilitating Lyme disease, a manufactured bioweapon (see my last post)
- ★ Treating diabetes
- ★ Curing inflammatory arthritis
- ★ Curing or or nearly curing herpes (Alcide corporation)
- ★ For seriously ill Covid patients, CD rapidly cured 100/100 patients in Ecuador and thousands more without a failure. This was documented in a study.
- ★ CD has been reported to restore bladder control in women who have stress incontinence
- ★ Curing chronic fatigue
- ★ Kalcker says it prevents some of the potential harms from the graphene oxide in the Covid vax

By now, you think I am crazy.

But before you cry BS on my story, watch THIS video from TheUniversalAntidote.com (at double speed, of course). It is the easiest way to understand the backing for chlorine dioxide and its 40 year history. CDS works faster and is safer against bacteria and viruses than antibiotics. It has cured Covid for tens of thousands of patients and healed hundreds of thousands with other conditions.

This video shows dozens of testimonials from people who were cured by CDS. Anyone who claims these are “simply anecdotes” has adopted the language of our oppressors. This is the same as calling what happened to over 10,000 US children after childhood vaccines “anecdotal.” They fell to the ground, started banging their heads, and never spoke again. First-hand evidence like this is far better

proof than a sack of clinical trials, for the two-thirds now federally or Pharma funded are all faked.

DOWNLOAD the Universal Antidote Interactive Reference Guidebook 2nd Ed (2022). It has links to censored sources.

Kalcker's mentor was Jim Humble, an engineer.

While prospecting for gold in the Guyana jungle, 400 miles from any hospital, two members of his team got malaria. They were delirious and had high fevers, but had no medications. Humble had only a drinking water disinfectant, sodium chlorite* (NaClO_2). He gave his crew a few drops each, and after four hours, they all recovered from one of the worst infectious diseases known. When Mr. Humble also fell ill, it worked for him as well.

He was so impressed that he spent years experimenting on himself and others. He discovered that many conditions and infectious diseases responded. Humble began promoting and selling his discovery as the "Miracle Mineral Solution (MMS)."

Mr. Humble wrote several books and arranged to remove their copyright upon his death. I bought them for you. Download them immediately.

MMS Health Recovery Guidebook (2016) Download
Master Mineral Solution 3rd Millennium (2011)

Download

If you want to pay for these, use [THIS LINK](#).

By 2019, as he revised his last book, Jim Humble had spent 20 years using, studying, and teaching about CD. When he understood the forces against effective and inex-

Judas Dentistry

pensive treatments, he started the “Genesis 2 Church of Health and Healing.” It was an attempt to shield his organization and ideas. He said MMS was a sacrament, but admitted publicly that his organization had nothing to do with religion.

Humble was a flamboyant character who could be mistaken for a televangelist, and his claims seemed exaggerated or even fraudulent. Federal prosecutors took his organization apart, extradited some of his people from South America, and threw them in prison.

As my readers know, sometimes the best path to the truth is reversing lies from censored sources. The CIA’s version of the story is in Wikipedia. The NYT’s article is, “Family Sentenced for Selling Bleach as a Miracle Covid-19 Cure.”

Mr. Humble died in 2023 at 91 after a lifetime of service.

Make Chlorine Dioxide in your kitchen

This is easy, but you must study the links to learn how to dose it.

Jim Humble called his CD “Miracle Mineral Solution (MMS).” It is a dilute sodium chlorite (NaClO_2) solution with some impurities. This has an unpleasant taste and can cause stomach upset, diarrhea, and, rarely, vomiting. It works fine, however, and most people tolerate it well.

Make it by mixing an equal volume of 25 percent sodium chlorite with an “acid activator.” Four percent hydrochloric acid is best, but alternatively, lemon or lime juice or vinegar (5% acetic acid) may be used. Citric acid 50% works but causes more side effects unless you are making CD *solution* as below. After the ingredients are

mixed, a minute later it is ready to dilute and consume. HERE is more than you need to know about it.

The modern version is chlorine dioxide *solution* (CDS). Kalcker popularized a process to produce water with the pure, active ingredient dissolved in it. Humble call the result “activated MMS.” It tastes better and has fewer side effects than MMS (CD).

Key links: Andreas Kalcker’s easy way to create the CD-water solution (CDS) using sodium chlorite and the acid activator is shown HERE and HERE. The first link is Christian Elliot from Truwholehuman.com.

The reaction occurs inside a shot-glass placed in a sealed container surrounded by water. CD gas is produced, and it saturates the water. If this is refrigerated in a brown glass bottle, it lasts many months.

Obtaining the CD components:

★ A simple manufacturing method using a tablet added to a base solution is HERE.

★ Frontier Pharma makes products for acne, mouth-wash, and fungal skin and nail infections, but they cannot promote it as medical treatments.

★ CDS is available as a “nasal cleaner” HERE.

★ Buy pre-made CDS solution for “water purification” here.

★ For \$200 or less, you can get enough sodium chlorite 22.5 % and hydrochloric acid 4% from chemical supply companies to treat your entire neighborhood for years.

★ Amazon sells small amounts in dropper bottles, but a lot of the links seem to have been censored. HERE is one that still works.

Malign forces stand against chlorine dioxide

Several companies developed uses for CDS. Alcide Corporation perfected, patented, and popularized many of them, but in 2004, Echolab, a multibillion dollar company, acquired it. They immediately shut down most of the human research and focused on agricultural and animal use. We cannot be sure the globalists were behind this, but in the context of the smear campaigns, it smells like it.

Chlorine dioxide has the potential to replace a lot of expensive doctors and “healthcare.” But Pharma companies and their lapdog US government agencies are covering it up. Obviously, patent drugs are more profitable, but there is more to the story:

★ This economical treatment could cure or limit the effects of Lyme disease and both the Covid disease and “vaccine.” These are all bioweapons.

★ Reports are emerging of autistic children speaking for the first time in years after their first dose of CDS. This makes CDS the only effective tool that I know of against childhood vaccines, other likely bioweapons.

★ Dr. Kalcker says CDS inactivates the graphene oxide component of the Covid “vaccine.” The only other treatment reported as successful for this is EDTA chelation, which is toxic, expensive, and a hassle.

★ Chlorine dioxide also inactivates glyphosate, another manmade atrocity.

If we beat the censorship, CDS will transform healthcare

This story is so distant from my usual thinking that I have trouble bending my mind around it. Chlorine dioxide has

been available my whole professional career, but I just discovered it. This makes me feel sick.

CDS has the potential to decimate Rockefeller/corporate healthcare. The following bears repeating. It reportedly cures Lyme and Covid. It may also unravel the autism wave and destroy glyphosate. If surgeons had it, they could prevent and treat infections more effectively. If I knew about chlorine dioxide when I was practicing, I would have been a better physician. I hope I would have considered quitting cosmetic surgery to spread the word.

Copy and paste this essay on your computer, then download the video, documents, and Humble's books. Ebay sells Kalcker's book. Put the knowledge in your head and the CDS ingredients in your kitchen. I am going to see what it does for my arthritis, Parkinson's, and glyphosate exposure.

As you start to understand CDS, bear in mind Pierre Kory's quote about a thousand "anecdotes." He says these have become data. I call them *proof*.

"Legal" disclaimer: This information is not medical advice—use it at your own risk and under provider supervision.

References

★ Kacper Postawsky's documentary is about how chlorine dioxide is being used around the world. This is the second easiest source after the video above.

★ Dr. Andreas Kalcker's websites have thousands of pages. He gives away a lot of information and also sells courses for doctors and others.

- Website

Judas Dentistry

- Foundation
- Order books in N. America, Order in Europe/Asia
- The Kalcker Institute - To take courses
- International network of doctors
- Odysee Channel with how to make CDS.*
- Clinical studies using CDS Most concern Covid.
- How CD was invented Dr. Kalcker's work with cows
- Dr. Kalcker's CDS protocols
- Mike Adams interview
- Podcast interview about CDS and covid
- Dr. Kalcker's patent for CDS to treat acute intoxication (i.e. venoms)
- Christian Elliot podcast
- *According to a Reddit post, Odysee just lost a lawsuit with the feds over allegedly illegally trading in securities. The platform is not shutting down, but "will most likely move into the hands of parties who do not support our best interests." Download any of their videos you want to preserve. It's easy.

★ Humble's main website and chlorine dioxide forum

★ PubMed has 1 326 references on chlorine dioxide.

Most of them are toxicity studies that conclude it is safe.

★ Stephanie Seneff (MIT)'s key interview: CDS destroys glyphosate and cures autism

Parting Shot: Debbie's story from Chapter 2, continued

I went to a biological dentist, and after an eight-hour struggle, he removed three root canals and a dead tooth that had a mercury filling.

I immediately felt better. All my numbness and other symptoms that began when I had my third root canal placed about two years earlier started to fade. My mummified teeth had been suppressing my immunity, and when the third one was placed, it must have crossed my resistance threshold and I became sick.

After my teeth were extracted, my nose stopped running and I stopped sneezing. Dr. Schroeder had a similar experience when he had his amalgams removed.

*The dentist sent the teeth for a DNA examination, which cost \$1000. (Yoho note: You can get similar tests from Europe for about \$300. See Arminlabs.com.) It returned positive for three (3) tick-borne species related to *Borrelia burgdorferi*, the Lyme spirochete. These were *Borrelia recurrentis*, *Babesia duncani*, and *Babesia microti*.*

Judging by my symptoms, I have been infected for at least 12 years. When I broke my leg in the auto accident in 2014, my toe tingling turned into severe neuropathy. I learned that trauma and even severe stress can activate tick disease. I must have crossed my resistance threshold again.

A few months after my 2021 accident and revision knee replacement, I was orthopedically improved but still had pain in my legs and numbness in most of my body including the inside of my mouth. I could hardly walk. Lyme creates neurological problems like this.

I have spent untold hours on Lyme Facebook pages. One group had 25,000 members. No one seemed to be responding

Judas Dentistry

to antibiotics or other Western treatments. Many were wheelchair- or bed-bound. I quit Facebook because they seemed hopeless, and I could no longer listen to them.

Then I stumbled on chlorine dioxide (CD). I saw no success reports on Google even though I went three pages deep into the search. CD seemed like a fraud. But I began reading Dr. Kalcker, who said CD cured Lyme disease. His protocols instructed me to drink it hourly most of the day for six weeks or more.

I was desperate, so I tried it. It did smell like bleach. I mixed the 4 percent hydrochloric acid activator and the 25 percent sodium chlorite and drank it all day. Most of my symptoms disappeared on the first day. I had no stomach upset or diarrhea, so I gradually increased my dose. I was kicked off Facebook when I returned and told my story.

I am at four weeks, and I feel 100 times better. The numbness is slow to improve, but I know nerves take a long time to heal. I am making chlorine dioxide solution (CDS) now using the Kalcker method, and I do not intend to quit.

Please Stay In Touch

I hope we now have a relationship. I am distributing this ebook free. If you are not yet using an e-reader, the support people at my service will help you get one. Ebooks are easy and help you find references.

Please write an Amazon review. I will read it, and I appreciate you for doing it. Reviewing a book before finishing is acceptable; you can update later.

Address: 99 West California Blvd #50007, Pasadena, CA 91115, yoho.robert@gmail.com. I will send you more if you subscribe at RobertYoho.substack.com.

Other Publications

- ★ *Butchered By “Healthcare”* (2020)
- ★ *A New Body in One Day* (2004)
- ★ Twenty articles in medical journals, including:

Modified Propofol-Ketamine Cosmetic Surgery: Anesthesia Technique for Surgeon-Administered Anesthesia With Particular Reference to Liposuction

Robert Yoho, MD; Kevin Mullen, PA

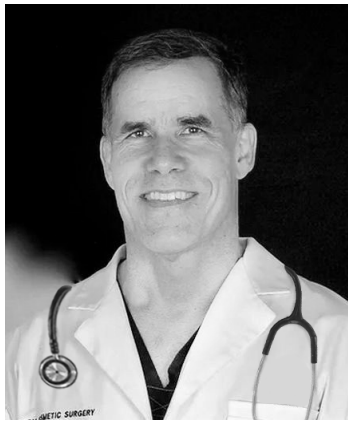
Review > *Dermatol Surg.* 2005 Jul;31(7 Pt 1):733-43; discussion 743.

doi: 10.1097/00042728-200507000-00001.

Review of the liposuction, abdominoplasty, and face-lift mortality and morbidity risk literature

Robert A Yoho ¹, Jeremy J Romaine, Deborah O'Neil

Meet The Author



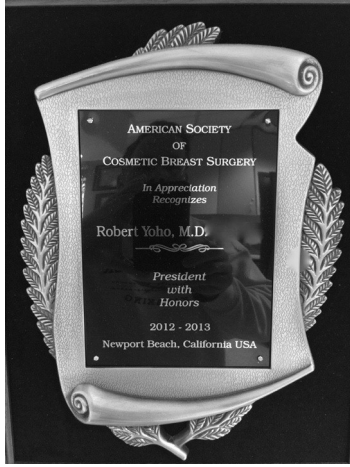
Dr. Yoho in 2010. I like this photo better than today's.

PROFESSIONAL CV:

- ★ 67 years old (2021). Current website: RobertYoho-Author.com.
- ★ Emergency medicine career out of medical school.
- ★ American Board of Emergency Medicine: passed board exams and twice re-certified.

Meet The Author

★ Practiced three decades as a cosmetic surgeon, now retired (see DrYoho.com).



American Society of Cosmetic Breast Surgery: fellow, trustee, officer, and past president.

★ American Board of Cosmetic Surgery: passed board exams and twice re-certified.

★ Fellow, American Academy of Cosmetic Surgery (inactive).

★ New Body Cosmetic Surgery Center: founder & director (inactive).

★ American Association Ambulatory Health Care (AAAHC) accredited surgical/medical practice for over 25 years.

★ Retired from medical practice in 2019.

CLIMBER CV:

★ El Capitan, Half Dome (Yosemite): 24-hour ascents

★ Free ascents of Astroman (11.c) and Crucifix (12.a)

Meet The Author

- ✦ First ascents in Yosemite, Joshua Tree, Devil's Tower
- ✦ Solo ascents to 5.10c



After climbing Yosemite's El Capitan in 26 hours.
We are two MDs and a Ph.D.

