The role of dental amalgam

The presence of dental amalgam fillings (according to a growing number of specialists) makes the Candida overgrowth in patients very resistant to any type of drugs, supplements or healthy lifestyle.

Dr Klinghardt [1996] writes:

“My clinical experience and other medical colleagues show that patients with chronic mycosis (Candidiasis), patients with chronic viral conditions (Epstein Barr virus, cytomegalovirus, HIV, herpes zoster and genital herpes, CFIDS, etc.) or recurrent episodes of bacterial infections (chronic sinusitis, tonsillitis, bronchitis, infections of the bladder / prostate, etc.) often show spectacular healings following an aggressive detoxification program from dental amalgam / mercury.”

About Candida

Candida Albicans is a yeast normally present in the gut, but it can change to a virulent form and extend to other tissues when the circumstances are favorable. A state of chronic intestinal candidiasis leads to inflammation of the intestinal mucosa and increased porosity (a leaky gut).

The appearance of allergies in adulthood is a distinctive character of Candidiasis, together with the onset of numerous and obvious food intolerances.

Frequently, a person affected by Candidiasis has craving for bread, potatoes, pizza, pasta and sugar. This particular craving towards simple sugars is mediated and motivated by 79 toxins that the Candida parasite can enter into the bloodstream, which affects the central nervous system and alter the neuro emotional balance of the person involved. Thus Candida infection may be responsible for depression, anxiety, bulimia, anorexia and panic attacks.

Particularly characteristic of systemic Candidiasis is a state of abnormal fatigue and increased irritability. Other common symptoms are: swelling of the ligaments, itchy skin, acne, burning eyes and watery, nasal congestion, recurrent infections, painful urination, cracks in the corners of mouth, abnormal growth of the papillae of the tongue, intestinal gas and bloatedness.

Dental mercury amalgam (“silver”) fillings and Chronic Candida

Three main reasons have been implicated for these observations.

1. The first reason is that yeasts such as Candida thrive on heavy metals, particularly mercury.

For this, yeasts are used both at the industrial level in the mines, in order to use its excellent ability to bind mercury, silver and other metals, facilitating a good extraction yield (Quote from a manual extractive mining industry, “Biosorption of Heavy Metals”). Of all the microorganisms that exist in the human intestinal tract, both symbiotic and pathogens, Candida is one of those typically resistant to mercury, indeed, with a remarkable affinity for metals toxic [Yannai 1991].

2. The second reason for the correlation between amalgam and intestinal Candida is the immunosuppressive effect of mercury.

Of all the heavy metals, mercury is perhaps the most fearsome at immunosuppression of the immune system, as documented by the medical literature.

In this regard, Dr. Thomas Rau [1996] points out, “Mercury blocks the function of lymphocytes and macrophages and thus blocks the defensive systems of the body. This can be monitored with extraordinary clarity from survey of microscopy in the dark field on the blood,”

3. The third reason, known as “Klinghardt Axiom”, concerns the fact that the body is able to use the yeasts to combine heavy metals and make them inactive.

[Klinghardt 1996]: “The majority of fungal conditions or chronic infections should be considered a conscious adaptation of the immune system to an otherwise lethal environment by heavy metals. Mercury suffocates the mechanism and can cause respiratory intracellular cell death. So the immune system reaches a compromise:

Grow bacteria and yeasts that can bind large amounts of toxic metals. The advantage? The cells can breathe. The price to pay? The system has to provide nourishment for microorganisms and their products produce metabolitic toxins.

References:


In my personal experience over the past 25 years, my patients have experienced exceptional and significant improvements to their health when both heavy metals and Candida are chelated and removed on a cellular level using homotoxicology procedures.

According to the observations of Zamm, Candidiasis generally undergoes a spontaneous scaling approximately one month after the completion of the amalgam removal.

At the same time in the pre-and post-removal it is useful to:

1. Limit the fermentation of Candida Albicans, by prohibiting the consumption of all sugars and refined flours and all fermented products (wine, beer and other alcoholic beverages). The yeast converts sugar into alcohol, giving the same negative effects that you would get if you consumed alcohol. Also avoid brewer’s yeast, and any other form of nutritional yeast.

2. Identify and avoid any other food intolerances, such as gluten and casein, otherwise their consumption would produce badly dismantled fragments of such foods that increase the permeability of the intestinal mucosa. This does not help to reconstruct a healthy intestinal environment that blocks the proliferation of Candida.

3. Restore proper intestinal flora using good probiotics that can antagonize Candida Albicans.