

# Dental Dilemmas

<https://articles.mercola.com/sites/articles/archive/2023/08/18/wisdom-teeth-extraction.aspx>

## Is It Wise to Get Your Wisdom Teeth Pulled?

### Story at-a-glance

- 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 a risk-free procedure, even if you're young. Risks 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 shows a combination of ibuprofen and acetaminophen works better than opioids for pain following wisdom tooth extraction, so avoid opioids at all costs
- Root canals is another risky procedure that is largely driven by profit motives. Root canal-treated teeth often end up harboring harmful microbes, the toxic waste products of which can have systemic health impacts and contribute to a variety of chronic diseases, from chronic fatigue and chronic pain syndromes to heart disease and cancer

The preemptive extraction of wisdom teeth before they become problematic has been a routine practice for decades. Surgical tooth removal began after the introduction of the local anesthetic Novocaine in 1902.

Before that, these third molars were rarely, if ever, removed as a preventive measure due to the pain involved.<sup>1</sup> The removal of wisdom teeth started becoming more common after the 1950s with the advent of antibiotics to treat related infections.<sup>2</sup>

Oral health experts typically recommend extracting wisdom teeth 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.

Many parents, however, opt to have their teenagers' wisdom teeth removed even when there's no sign of trouble. Estimates suggest 5 million people have their wisdom teeth removed each year, and more than half may be completely unnecessary.<sup>3</sup>

According to a 2005 Cochrane Review,<sup>4</sup> "Prudent decision-making, with adherence to specified indicators for removal, may reduce the number of surgical procedures by 60% or more." The authors also note that "watchful monitoring of asymptomatic wisdom teeth may be an appropriate strategy."

## Controversy Continues: To Pull or Not to Pull?

That said, the controversy over what to do with asymptomatic wisdom teeth continues. The most recent Cochrane Review<sup>5</sup> published in 2020 concluded that "The available evidence is insufficient to tell us whether or not asymptomatic disease-free impacted wisdom teeth should be removed." As reported by The Washington Post:<sup>6</sup>

*"Those who favor early extraction say it is generally easier, safer and results in quicker recovery when patients are young, between 15 and 25, although, as with all surgery ... there can be risks. When patients are young, the roots of the teeth are small and simpler to remove, they say ...*

*Opponents — including the American Public Health Association — regard such prophylactic extractions as unnecessary surgery. At least one paper<sup>7</sup> says there are no scientifically proven health benefits to removing wisdom teeth that don't cause problems.*

*A National Institutes of Health consensus conference urged against the practice as far back as 1980,<sup>8</sup> and several recent studies<sup>9,10</sup> suggest there is no compelling reason to do so ...*

*The ADA agreed in a 2014 paper<sup>11</sup> that asymptomatic wisdom teeth weren't necessarily disease- or problem-free, but added there was insufficient evidence to conclude that prophylactic removal was better than continued monitoring."*

## **Wisdom Tooth Extraction Is a Money-Maker**

Absent clear evidence of benefit, why are so many oral surgeons recommending this procedure? In a word: Money. A significant portion of oral surgeons' paychecks come from the removal of wisdom teeth, so they have a financial incentive to maintain this new status quo.

It's important to realize that this procedure is not risk-free, even if you're young. Risks 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.

The prudent approach, I think, would be to have the state of your wisdom teeth evaluated on a regular basis, and if one or more is found to be damaged or causing a problem, to have the problematic wisdom teeth removed. If they're not causing a problem, you may be better off leaving well enough alone.

## **Avoid Post-Surgical Opioids**

If your teen does need to have one or more wisdom teeth pulled, please do not allow them to take opioids for pain relief. Opioid overdoses are now the leading cause of death for Americans under the age of 50,<sup>12</sup> and wisdom tooth extraction is one of the most common reasons for receiving an opioid prescription in the first place.

Dentists wrote a staggering 18.1 million prescriptions for opioids in 2017,<sup>13</sup> and dentists and oral surgeons are by far the major prescribers of opioids to children and teens.<sup>14</sup>

According to a JAMA report<sup>15</sup> published August 2018, opioids are "routinely" prescribed for wisdom tooth extractions, and a 2004 survey found 85% of oral surgeons prescribed opioids after the removal of wisdom teeth.<sup>16</sup>

This is extremely risky, as even short-term use is associated with future opioid misuse and addiction among teens and young adults. In fact, children who receive an opioid have a 1 in 3 chance of "lifetime illicit use."

Research<sup>17</sup> has shown that of the people who received a mere 12-day supply of an opioid, 1 in 4 were still taking the drug one year later, and that includes all age groups. Children and teens are at higher risk for continued use once they're exposed.<sup>18</sup>

Research has shown a combination of ibuprofen and acetaminophen actually works better than opioids for the treatment of pain following wisdom tooth extractions.

In a 2018 article<sup>19</sup> in The Philadelphia Inquirer, Dr. Rima Himelstein, an adolescent medicine specialist, urged parents whose children are undergoing oral surgery to:

*"Be the gatekeeper for medications, including those prescribed after wisdom teeth extraction. Don't just hand your teen the bottle of pills after surgery. And be sure to properly dispose of leftover prescription drugs ..."*

Wisdom tooth extraction can indeed leave you sore and in pain for a few days, but there are far safer ways to address that discomfort. Research<sup>20,21</sup> has shown a combination of ibuprofen and acetaminophen actually works better than opioids for the treatment of pain following wisdom tooth extractions. So, skip the opioid prescription, and just use over-the-counter pain killers as needed instead.

## The Challenges of Root Canals



video link: <https://www.bitchute.com/video/o4OEzUEMkkHe/>

Root canals, also known as a pulpotomy, is another risky dental procedure that is largely driven by profit motives. Root canal-treated teeth often end up harboring harmful microbes, the toxic metabolic waste products of which can have systemic health impacts and contribute to a variety of chronic diseases, from chronic fatigue and chronic pain syndromes to heart disease and cancer.

In fact, most biological and holistic dentists agree that many chronic health problems can be traced back to these hidden dental infections. The key problem when you have a root canal performed is that the tooth has died but remains in the body. It's well-known you cannot leave a dead organ in your body, or it will cause severe infection.

Even if the root of the tooth is thoroughly cleaned out, it's physically impossible to get all the pathogens out of the microtubules, and the waste material from these bacteria is extremely toxic. As with wisdom tooth extraction, a primary driver of the root canal industry is the cash incentive.

## All Root Canaled Teeth Are a Source of Infection

According to experts on this topic, all root canals are a source of infection. It's only a matter of degree. The reason why not everyone with a root canal suffers in noticeable ways has to do with the fact that the response to toxins varies from person to person.

Some are constitutionally "hardier" than others to begin with. Your overall toxic load from other environmental exposures also comes into play. The bacteria produced are known to affect cardiovascular health. Cancer may also be triggered by infected teeth.

According to Dr. Dawn Ewing, a naturopathic practitioner and executive director of the International Academy of Biological Dentistry and Medicine, 98% of the breast cancer patients have a root canaled tooth on the same side as their affected breast.<sup>22</sup>

Similarly, Dr. Jerry Tennant once claimed 96% of the last 60 cancer patients seen in his practice were found to have an infected tooth. Ewing and Tennant were both featured in the Netflix documentary "Root Cause," in which these statements were made.

The pulp of your tooth is also closely interconnected with your lymph system and autonomic system — more so than any other organ. Your teeth are also energetically connected to and will affect your meridians, used in Traditional Chinese Medicine.

## Carefully Consider and Weigh Your Options

Now, should you happen to have one or more root canaled teeth, this does not mean you have to rush to extract them. It does mean, however, that it would be wise to remember this fact should you start to experience a chronic health problem, and to take it into consideration when deciding on a treatment plan for a chronic health issue.

Also, if your dentist is recommending you get a root canal, evaluate the data and your personal situation, such as your health risks, before making your decision. I would also suggest trying ozone therapy before getting a root canal or tooth extraction done.

Ozone therapy is typically administered through a syringe, right into or around the base of the tooth. Multiple visits are usually needed to address the infection.

Ozone is directly toxic to infectious material, and it also stimulates your immune system. I was able to prevent a root canal by using ozone therapy. It took about five treatments. It's safe, nontoxic, and relatively inexpensive, so it may be worth considering before taking more drastic measures.

That said, if the pulp tissue has completely died due to infection, nothing, including ozone, will bring the tooth back to life, at which point a root canal or extraction are your only options.

## Removing a Root-Canaled Tooth Must Be Done Properly

If you decide to have a root-canaled tooth removed, you need to make sure your dentist understands the implications and is familiar with holistic dental procedures. The following resources can help you locate a biological (holistic) dentist in your area:

- [Consumers for Dental Choice](#)
- [The International Academy of Biological Dentistry and Medicine](#) (IABDM)
- [The International Academy of Oral Medicine & Toxicology](#) (IAOMT)

Extracting the tooth is just the first step. Next, the area must be drained and cleaned of bacteria. Ozone gas is by many holistic dentists considered indispensable during this step, as the gas is able to permeate the bone and gum tissue, killing the infection.

The periodontal ligament also needs to be removed in order to allow for the jawbone to properly regrow and completely seal the hole where the tooth was.

If the extraction site is not meticulously cleaned and disinfected (and this goes for any tooth extraction, not just root canaled teeth), a cavitation — a pocket in the jawbone filled with bacteria — may form. Failure to remove the periodontal ligament also contributes to cavitations by preventing the bone from properly regrowing.

After the root canaled tooth has been extracted, you'll want to allow your jawbone to heal completely. In most cases, this will take at least three months. Once your dentist has confirmed that there's no cavitation, you can proceed with dental replacement.

# Dental Replacement Options

There are several options for how to replace the missing tooth at this point, including the following:

Not replacing the tooth.

Inserting a removable bridge.

Inserting a traditional bridge, which requires creating crowns for the teeth on each side of the missing tooth. A significant drawback to this is that you're sacrificing two (in many cases) healthy teeth, and increasing the risk of those teeth needing a root canal later on. What's more, the average bridge lasts only eight years, with a range of five to 15 years.

Using a resin-bonded bridge, also known as a Maryland bridge, which holds the pontic (false tooth) in place by bonding a frame to the backside of the adjoining teeth.

This is the preferred option by many holistic dentists as it does not involve damaging the adjacent teeth. A drawback is that the bridge is only as strong as the adhesive, so it may detach and need to be rebonded from time to time. It's also not suitable for missing molars due to the forces placed on the bridge during chewing.

Putting in an implant-supported bridge, which can be a good option in cases where two or more adjacent teeth are missing.

A ceramic implant — Traditional implants have used titanium, but today there are also zirconia (a type of ceramic) implants. Titanium can in some cases trigger autoimmune problems. There is a blood test<sup>23</sup> to help determine this sensitivity.

Being a metal, titanium can also contribute to galvanic currents in your mouth, and will distort the energy flow in the meridian flowing through that tooth. While most people do not notice galvanic currents, others experience unexplained nerve shocks, ulcerations, a salty or metallic taste or a burning sensation in their mouth.

Galvanic currents may also contribute to insomnia, brain fog, ear-ringing, epilepsy and dizziness. What's more, if you drink fluoridated water or use fluoridated toothpaste, it is important to know that fluoride severely accelerates the corrosion of titanium. Low pH in your mouth due to acidity or dry mouth further accelerates this effect.<sup>24</sup>

Your best option for an implant is to use a zirconia implant. Zirconia is considered far more biocompatible and is typically recommended by holistic dentists.

## Resources to Help You Find a Biological Dentist

Don't settle for amalgam — you have a choice! The following organizations can help you find a mercury-free, biological dentist:

[Consumers for Dental Choice](#)

[Dental Amalgam Mercury Solutions \(DAMS\)](#). Email them [here](#) or call 651-644-4572 for an information packet

[Huggins Applied Healing](#)

[International Academy of Biological Dentistry & Medicine \(IABDM\)](#)

[International Association of Mercury Safe Dentists](#)

[Talk International](#)

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