

ROOT CANAL CONTROVERSY

ROOT CANAL TREATMENT IS UNSAFE VIEWPOINT:

Based on a 25 year extensive study by respected researcher, Dr. Westin Price, scientific data suggests that root canal therapy is the cause of many systemic diseases and illnesses. Although root canal therapy is usually successful in eliminating pain and swelling associated with dead teeth, and in allowing those dead teeth to remain in the mouth to function, the side effects may be hazardous to overall health. It is estimated that only about 30% of the population has a healthy enough immune system to ward off the side effects.

The problem is that root canal therapy cannot sterilize the inside of a tooth. As a result, the trapped bacteria mutate and migrate to infect the heart, kidneys, eyes, stomach, and countless other body tissues. This theory, called the **focal infection theory**, states that a person can have an infection someplace and that the bacteria involved can be transferred by way of the bloodstream to another gland or tissue and therein start a whole new infection. Dr. Price found that 95% of focal infections started in teeth and tonsils. Dr. Price devised a testing method that showed root canal filled teeth that otherwise seemed healthy were actually still infected. This was done by implanting root canal filled teeth under the skin of laboratory animals. He found, in almost every case, that when the root canal filled tooth of a person with a disease was extracted and imbedded in an animal, the animal would develop that person's disease, or one similar to it. This involved diseases or conditions such as endocarditis and other heart diseases, kidney and bladder diseases, arthritis, rheumatism, mental diseases, lung problems, stomach ulcers, ovarian diseases, phlebitis, osteomyelitis, and pregnancy complications. Those infections proved so devastating that most animals died within 3-12 days. When these same teeth were sterilized with steam heat and embedded in animals, no adverse health effects were experienced. Furthermore, a large percentage of people recovered from their illnesses after extraction of the root canal filled teeth used in the experiments.

Modern experiences also support this theory. Dr. Issels, a German physician, recommended extraction of root canal teeth as part of his protocol for terminal cancer patients. With clinical experience over 40 years with 16,000 patients, he had observed a 24% total remission rate. Also, some transplant surgeons require root canal filled teeth be extracted before performing transplant surgery, because of the risk of focal infection to the new organ from non-vital teeth.

To summarize, Dr. Price did not say that root canal therapy should be abolished. Rather, he stated there are potential serious side effects and that the health of a person's immune system must be considered before performing a root canal procedure. Also, if a person has chronic health problems, existing root canal filled teeth or untreated dead teeth should not be ignored as a possible cause or influence. The following interview of George Meinig, DDS who studied Dr. Price's research can be found at www.tldp.com/issue/157-8/157rootc.htm.

ROOT CANAL TREATMENT IS SAFE VIEWPOINT:

Root canal treatment has been practiced for over 75 years, and is a recognized specialty by the American Dental Association. The purpose of root canal therapy is to keep a tooth by mechanically removing the source of infection from inside the tooth, which then enables the body to naturally remove the infection, usually an abscess, located at the end of the tooth. Infections create variable symptoms of pain and swelling, ranging from none to severe, so the number of visits required to treat the tooth is dependent upon how the body reacts after each visit. It normally takes 1-2 visits, but it could take more. Once it is determined that root canal treatment is successful, the tooth needs either a filling or a crown to protect it from possible future breakage, because root canal filled teeth are more brittle than vital teeth. It is estimated 14 million teeth are treated per year with root canal therapy, so if it produced problems, it should be quite obvious. If the teeth were instead removed, the options of replacing them are usually more costly and less natural. Those options include implants, cemented on bridges, and removable partial dentures. For more detailed information, go to www.ada.org/public/topics/root_canal.asp.

(over)

CONVENTIONAL TECHNIQUES:

1. Pre-formed gutta percha
2. Injected gutta percha (Thermafil)
3. Injected resin (Resilon)

BACTERICIDAL TECHNIQUES:

1. All heavy calcium oxide (Endocal - formerly known as Biocalux)
2. Gutta percha sealed with copper cement (Doc's Best)
3. Gutta percha sealed with heavy calcium oxide (Endocal)
4. Any obturation material, but first sterilized with a hydrokinetic YSGG dental laser (Waterlase)

EXTRACTIONS

If a tooth is to be extracted, either because it is not restorable or at patient preference, there are 2 different surgical techniques available.

STANDARD TECHNIQUE:

The technique taught in dental schools focuses on the removal of the tooth only. Sometimes the bone surrounding the tooth must be removed, but only to allow physical access to remove the tooth or because of bone pathology.

NON-STANDARD TECHNIQUE:

In addition to tooth removal, it is recommended that the **periodontal ligament** be removed as well. The tooth socket is cleaned out with a bur (not a curette) while being rinsed out thoroughly. It is thought that periodontal ligament removal increases the likelihood that the tooth socket will fill in with solid bone, thereby reducing the possibility of a bone cavitation (NICO) developing at the extraction site. Sometimes, medications are placed in the extraction site to facilitate healing. Unfortunately, experience indicates NICO can still develop even after ligament removal. Be aware periodontal ligament removal is not routinely done because it is regarded as unnecessary by the profession, so it must be specifically requested.

To find more information about these and other dental subjects, refer to the "Health Information Resources" handout.

This information is provided for educational purposes only, and should not be considered a recommendation for any particular treatment, product, or philosophy. You have the sole responsibility to examine the benefits and risks of available options and decide what treatment, if any, is to be rendered. The First Amendment of the U.S. Constitution grants the right to discuss openly and freely all matters of public concern, and to express viewpoints no matter how controversial or unaccepted they may be.