Apical Periodontitis, Heart Attacks, And Chronic Disease

by

Thomas E. Levy, MD, JD

Dr. Levy believes the primary reason for MOST chronic degenerative diseases are Root-canal treated teeth.

The Root Canal Treated Tooth

Over 5000 consecutive extracted root canal-treated teeth were examined and analyzed. ***100%*** had pathogens and highly potent pathogen-related toxins. If there does exist a nontoxic root canal-treated tooth, it remains to be found and reported. Of note, "normal" teeth extracted for orthodontic purposes and analyzed showed no toxins or pathogens.

All root canal-treated teeth continually produce endogenous toxins as the pathogens proliferate. Root canals that have been "identified" as infected have been found to have fungi, viruses, and over 460 different types of bacteria. (Siqueira, 2009 [19828883])

Another study that looked at "asymptomatic" and symptomatic root canals, the DNA of bacterial pathogens was seen in ***34 of 34*** patients. (Rocas 2011 [21846535]) M**ost** root canal-treated teeth have variable degrees of CAP (chronic apical periodontitis), and are completely asymptomatic. (Garcia, 2007 [18059244])

Finding a sterile root canal-treated tooth would be as amazing as finding a sterile mouth; either finding ***simply does not exist***, as it is the mouth that "feeds" the remaining pulp and apex with microbes and pathogens. Root canals are fatally-flawed procedure, assuring chronic infection 100% of the time.

Root Canals and Heart Attacks

The DNA of oral pathogens typical for root canal and gum infection flora has consistently been identified in coronary atherosclerotic plaque [Haraszthy (2000), 11063387; Mattila (2005), 16277580; Mahendra (2010), 20657096]

In a study of 103 patients undergoing coronary angiography, 65% had coronary artery disease and 42% had CAP (chronic apical periodontitis) or infection at the root of the tooth. Patients with CAP had a 2.8 times higher risk of coronary artery disease. The DNA of oral pathogens typical for root canal and gum infection flora has consistently been identified in coronary atherosclerotic plaque [Haraszthy (2000), 11063387; Mattila (2005), 16277580; Mahendra (2010), 20657096]

DNA of pathogens typical for periodontal infection and endodontic (root canal) origin were present in the blood clots aspirated from patients with acute myocardial infarction. [Pessi (2013), 23418311]
Total amount of DNA found in the clots was ***16 times higher*** than was present in just the arterial blood.
Since there is already clear-cut documentation that root canal-treated teeth ***directly cause*** many heart attacks, this study by Petersen et al.(Petersen, 2014 [24338091]) indicates that the ***asymptomatic CAP-afflicted tooth will be expected to have an even greater negative impact on the coronary arteries and on chronic degenerative disease than the root canal-treated tooth***. Both are bad, but asymptomatic CAP would appear to be worse.

Pessi's study shows an ***inescapable*** conclusion: Root canal-treated teeth and periodontal disease have ***cause-and-effect*** relationships to coronary artery disease and heart attacks.

In the *Journal of the American Dental Association*, it was stated that **individuals who reported having had two or more root canal-treated teeth were statistically more likely to have coronary artery disease**. (Caplan 2009 [19654253]).

90%+ of all patients with CAD and heart attacks have dental infection/toxicity. Root canal-treated teeth are now established as a direct cause of acute myocardial infarctions. Periodontal disease has long been an established risk factor for coronary artery disease. Asymptomatic chronic apical periodontitis is perhaps the most ***undiagnosed***, yet ***most important direct cause of heart disease***, along with all other chronic degenerative diseases.

Root Canals and Cancer

In addition to the cause-and-effect relationship that is now established between root canals and atherosclerosis, a strong link has also been long-noted between root canals and cancer. In the 1950s when very few root canals were being done, relative to today, Dr. Josef Issels found that ***98%*** of his adult advanced cancer patients had, in Issels' words, "between two and ten dead teeth." Dr. Issels categorized a root canal as a dead tooth. [Issels (2005) *Cancer: A Second Opinion*, Garden City Park, NY: Square One Publishers, Inc.] Issels always extracted these teeth first, and his cancer survival rates were quite phenomenal.

While the lymphatic system is designed to flow in only one direction, disease, inflammation (as would be seen with the chronic presence of oral pathogen toxins in the lymph), enlarged lymph nodes, and other conditions can result in retrograde lymphatic flow as well. This effective "sharing" of lymphatically-drained pathogens and toxins makes the head, neck, and chest especially sensitive to the antioxidant depletion caused by root canals, and **it is a major factor in the causation of cancer in the head, neck, and chest**.

Any treatment plan in a patient with a brain tumor or breast cancer that does not include a proper extraction of root canals and other infected teeth is missing the ***most consistent way*** to both get a tumor remission and a maintenance of that remission, without relapse or the appearance of a new malignancy. ***The cause of a cancer must be eliminated along with the cancer itself in any complete cancer treatment protocol***.

Pathogens, including the significant periodontal pathogen *Fusobacterium,* are "significantly enriched in breast tissue from women with malignant disease" (Hieken, 2016, [27485780]). This same pathogen has already been strongly linked to cancer elsewhere, and it has been shown to secrete factors that promote a pro-inflammatory micro-environment, setting the stage for malignant transformation (Castellarin, 2012 [22009989]; Kostic, 2012 [22009990]).

In many women, chronically infected teeth cause much of the breast tissue to be continuously suffused by lymph containing oral pathogens and their related toxins.

In summary:

CAP teeth, both with and without root canal treatments, due to its extraordinary ability to ***deplete antioxidants and promote chronic inflammation*** in affected tissues and organs, can be considered:

1. The single most important cause of atherosclerosis and heart attacks, and
2. The single most important cause of cancer of the head, neck, and chest.

Currently, about 25 million root canal procedures are performed every year. These infected teeth are in addition to the enormous number of asymptomatic CAP teeth.