



Top 40 Chemistries in the Past 40 Years

Presented by Hal A. Huggins, DDS, MS

The days of one disease (like pneumonia), one bug (the anaerobe), one pill (penicillin) are coming to a close. Toxic metals are teaming up with groups of non-related bacteria to offer a new kind of disease challenge to the health professions. These are called diseases of "unknown etiology" and they are expanding rapidly. All professions would be wise to recognize the "wisdom of the microbes" by using the "team" approach to counter these new attacks.

Forty years of observing changes in blood and other chemistries have taught me where to look for critical changes reflective of the effects of dental materials, supplementation, drugs and nutrition on human health. It is time to pass that information on to professionals interested in improving non-responsive or incurable diseases. **Are you one of those "cutting edge" people?**

If so, you would be interested in our January 8th & 9th - 2009 presentation called:

WHAT CHEMISTRIES CAN TEACH YOU

1

Chemistries I Have Known

More people daily are requesting that I put my chemistry interpretation information out to the professions – especially with the current resistance of organized dentistry and medicine to curtail the information – so that I do not die and take it with me. It is rumored that I have found a U-Haul that fits on the back of a hearse.

This is not a “how to correct” course, but a “where to look for answers from chemistry” presentation. It will show actual bottom line chemistry changes from my current data base of over 200,000 data points in an easy to understand graphic format.

From this information, whether or not you are using the Assist Report, you can feel more assured that your treatment is helping your patient’s health.

You can monitor changes brought about by reported “safe” dental products as well as medication and nutrition reactions. You will see the chemistries that reflect whether a person is on his/her Ancestral Diet. Are the TV and trade magazine ads telling the truth? You’ll know where to look to find out. This offers both you and your trusting patient more confidence in your treatment suggestions.

What are some of the age old chemistries that still hold true? What are some of the new DNA tests on root canals, implants and cavitations showing? Safety confirmation or immune challenge?

This information will soon be available to patients. Will you be able to answer their questions? Instill their confidence? Treat them in a health professional manner?

Here are some of the chemistries that are influenced by dental materials, and basically what they mean:



Stability point and Stability Range – probably my most important contribution to chemistry interpretations. These are levels, not based on the “normal” sick person, but target levels for us to seek based on people experiencing optimum health.

Calcium – Is this reflective of active, ionic calcium, or calcium contamination? How misleading serum levels can be when interpreted alone. The answer is found by comparing to hair levels.

Ultra violet light as a recharger for reversing calcium contamination. Its critical influence on improvements in ALS and MS, as well as other autoimmune diseases.

Phosphorus – representative of inflammation, or endocrine balance?

Glucose – a new twist – not as reflective of sugar, alcohol and caffeine as previously thought.

Cholesterol – a highly valuable asset, maligned by advertising, but actually our second best detoxifier. What is the stability point, and how do we get there? What happens if we are below that point?

Triglycerides – a real culprit and the way to change it rapidly without drugs.

Albumin – the best detoxifier you can have for any challenge – also serves as an indicator of potential speed of recovery and protein ingestion relative to Ancestral Diet.

Liver and kidney function tests that indicate how hard these organs are working to detoxify.

Sodium, potassium, chloride – compare hair analysis to blood chemistry to see what the real condition of electrolytes is. How much salt do you need?

How damaging is sea salt? 96% plus of our clients demonstrate that sea salt is not in the best interest of good health. Very important information in light of today’s dietary habit trends.

Bilirubin - As a predictor of red cell response to dental revision.

CPK (CK) – muscle degeneration index that can change over 100 points in a week. Heart and ALS primaries.

Red blood cells – there is no “male” and “female” range. Dental materials influence these, and in their absence, there is not only a more narrow Stability Range, but a specific Stability Point.



EXCITING NEW TEST:

Methyl mercury on the red blood cell. This is my only “BIOMARKER” for the amount of mercury toxicity a person is experiencing, but, along with albumin, it is an indicator of how fast they can recover.

White blood cells – A quick indicator of immune response to root canals, cavitations, implants, nickel crowns and amalgam.

Urine micro albumin and creatinine – is the patient experiencing kidney recovery or challenge?

Urine pH – different from every health food representative and many alternative medicine doctors, based on end results. How it reflects changes from sick tissues to well tissues.

Urine porphyrins as an indicator of just how much interference dental materials cause in the energy producing systems involving ATP. High percentage changes in less than a week.

Spinal Taps – how fast can unwanted antibodies and proteins disappear in MS and other neurological diseases?



Venous Oxyhemoglobin as a marker of oxygen saturation in the red blood cell. How sequential removal of dental materials effects oxygen saturation.

Vitamin B-12 high levels relative to the progress of cancer. Methylation of mercury problems from B-12.

CAVITATIONS – why the FEAR FACTOR in organized dentistry? Why can the word no longer be said by dentists in some states? Why are oral surgeons threatened with license revocation if they perform them?

Do the “powers” know what I know? I doubt it, but they probably FEAR what I know. DNA knows all, tells all. But some assembly is required. What is in these “non-existent” holes in the bone first described by G.V. Black in about 1899? DNA testing tell who is at home in these centimeter cubed or bony defects, and toxicology can project how healthy the anaerobic excrement is in MS, ALS, leukemia, etc, etc. Many chemistries confirm how health challenging these taboo cavitation areas are. We must, as physicians and dentists, begin to recognize these areas as causative factors of incurable diseases if we are to consider ourselves as being health professionals. Just because the legal and moneyed police fear the truth, is no reason for us to continue “first do harm” knowingly. I suggest that we allow truth and health to prevail, when it is possible – as it is now. As an exception in the program, actual “how to” procedures for cavitation treatment will be discussed by two well experienced dental professionals.

Root canals, subject of our ‘Savior or Suicide’ booklet, will be expanded by virtue of DNA findings. Does it sound reasonable that cavitations and root canals would contain the same anaerobic microbes? What does sterilizing a column of air in the center of a tooth have to do with the real home of anaerobic bacteria? Dentistry won’t appreciate the answer, although patients with incurable diseases will be forever indebted. What is our real purpose in life? How many different anaerobes are present in a root canal tooth? One? Ten, a hundred? What is the end result of their toxins?

Implants - There is a new wave of implant materials, most of which contain biocompatible metals.

Are these valid replacements for tooth loss? How can you tell? What reactions are people now experiencing?

IV Vitamin C - what is its value, and how often should it be used – when? Considerations of use during surgery are critical for patient health.

Sequential removal of fillings – which are the 8 endocrine glands that are affected when fillings are removed? Which are helpful during healing, which are detrimental? How are they stimulated?

How does **conscious sedation** affect recovery for your patient?

What do the **new aluminum containing composites** (most of them) do to the body? Are they worth their extended longevity? Do they alter the chemistries?

This long awaited presentation will bring together the essence of the battle between which is more important: The life of the tooth or the life of the patient?

Be prepared – not scared. Call today for detailed information. Limited seating.

1-866-948-4638

Subject: Dr. Hal Huggins reveals his body chemistry discoveries of over 40 years of observations and 200,000 data points that constitutes proof of the concepts he has fought for during those 4 decades.

Object: To present a seminar informing the focus of each of many standards as well as research.

Chemistries gathered from actual patients suffering from reactions to dental materials.

You will learn where to look to evaluate whether or not your patient's dental procedures are helping or hindering their health objectives. This is not a how to correct seminar, but a where to look to find confirmation of patient challenges.

Patients are becoming more educated daily, and will soon be exposed to far more information, considering the FDA change in position on the safety of dental amalgam.



*** Find out the body's method of detoxification utilizing cholesterol and albumin, since they are the most powerful detoxifiers.

*** Learn the significance of red and white blood cells, since they are under the control of dental materials.

*** Learn the new technology of utilizing DNA identifications for anaerobic bacteria in root canals and cavitations.