



**Transcript: #408 Biomimetic Dentistry and How to Safely Remove Mercury Fillings
with Dr. Alireza Panahpour**

Wendy Myers: Hello everyone, how are you doing? I'm Wendy Myers of myersdetox.com and you're listening to the *Myers Detox Podcast*, where we talk about all different types of topics related to heavy metal toxicity and how it dramatically impacts our health. Today, we're talking about mercury, mercury in dentistry and we're talking to my personal dentist, Dr. Dr. Alireza Panahpour. He's absolutely brilliant. He's a fierce fighter for removing mercury from our mouths and doing that in a natural way.

Wendy Myers: We're going to be talking about biological dentistry versus mimetic dentistry and biomimetic dentistry. We'll talk about the different methods that he uses, his protocols before and after removing mercury fillings, why you want to remove your mercury fillings and all the health issues that can be caused by mercury amalgam fillings. We'll also talk about the results, the stunning results, in a study by the World Health Organization of 35,000 people. We'll discuss the stunning symptom reduction people have had in a number of different health issues including allergies, dizziness, immune issues, et cetera, et cetera, after removing their mercury fillings.

Wendy Myers: We'll also talk about why biological dentistry may not be enough. It may not be enough to just have the biological dentist remove the mercury fillings. We'll discuss the extensive protocols that Dr. Panahpour goes through to prevent his own ingestion of mercury when he removes mercury fillings.

Wendy Myers: We also talk about gold and mercury fillings and why if you have gold and mercury fillings in your mouth at the same time, you pretty much have a battery effect in your mouth. You want to have that corrected. Dr. Panahpour is a fan of gold fillings, those are okay, but we talk about some of the pros and cons of

them. It's just a really, really interesting show. You have to watch this if you have mercury fillings in your mouth.

Wendy Myers: I know you guys watching the show are concerned about your heavy metal toxicity in your body, your burden of toxins. I created a quiz at heavymetalsquiz.com. It only takes two minutes to take the quiz. I know you guys are concerned about heavy metals in your body, how to remove them and how to detox them properly. I assure you that heavy metals and chemicals are the primary drivers of disease today. That's why I do this show because I want to help you live your best life and help you feel as good as you deserve to feel. Heavy metals, I'm telling you, are weighing you down. They are contributing to physical health issues, mental health issues and so many other problems today that people are having with their health, their immunity, chronic infections, et cetera, et cetera. Go take the quiz at heavymetalsquiz.com. Afterwards, you will get your results and a free video series answering all of your frequently asked questions about how to detox your body.

Wendy Myers: Our guest today is Dr. Alireza Panahpour. He's the most experienced holistic biological dentist in North America. He's also a biomimetic dentist. He's been practicing 100% holistic and biological dentistry since 1993. He's a true pioneer in dentistry. It's very early on and he's known as one of the world's most experienced DDSs for detection and removal of root canals with infection and for a cavitation surgery at the site of tooth extractions. Dr. Panahpour is a frequent speaker in holistic dental conferences and at naturopathic medical schools. He also has documented patient case stories of healing through holistic dentistry in his book, *The Good Dentist*.

Wendy Myers: Dr. Panahpour's commitment to excellence in natural biological dentistry can be seen in his personal commitment to education. He has more than 150 advanced continuing education courses on his CV. Active in educating the public about the effects of using mercury in dental amalgams since 1993, Dr. Panahpour was part of a movement that succeeded in the state of California to have dental offices post signs that informed patients about mercury, dental amalgams and the effects of mercury on human health. Dr. Panahpour's greatest desire is to educate the public about the need for holistic biological dentistry free of root canals, safe tooth extraction and natural biomimetic materials when necessary, as a path where every person's best health. You can learn more about Dr. Panahpour and his work at systemicdentist.com. Dr. Panahpour, thank you so much for coming on the show.

Dr. Alireza Panahpour: Thank you so much for having me. Good day.

Wendy Myers: I'm going to talk today about mercury in dentistry. What are your thoughts on that in general? Why are we still using mercury in the United States for cavities?

Dr. Alireza Panahpour: It's a very interesting subject. I do get phone calls from different patients and even different organizations, asking me the same thing. Maybe it starts with

some of the basics of my experience. I've shared this before in my different podcasts. In order for me to get into dental school, I had to take a number of courses, anywhere from biology, histology, chemistry, organic chemistry, genetics, physiology, you name it, all these pre-science courses. Then I was eligible to take the dental admission test and apply to dental schools.

Dr. Alireza Panahpour: With that said, when I got to dental school, they were telling me that most of the things that I'd learned in basic science don't apply now, and of course it was about mercury. All these classes that I took before I got to dental school, basically all the science courses had one thing in common and that was the periodic table. The table of elements.

Dr. Alireza Panahpour: The number one most toxic substance on our Earth is plutonium. What do we do with plutonium? Well, we enrich it to uranium and we basically make atomic bombs with it or some sort of a nuclear energy fusion.

Dr. Alireza Panahpour: Number two is mercury. So, my question was how could the second most toxic substance on our Earth be okay now? When I asked too many questions, I was told, "Don't worry about it. I have it in my mouth. I've always put it in my patient's mouth." These are my instructors that are telling me this, "I'm okay, I'm 100%, don't worry about it. It's okay." I just couldn't accept that answer so I would ask further questions and there was only one research project that was ongoing somewhere in South America. They actually took children, not adults, but children, and they shoved mercury fillings in their mouth and monitored them.

Dr. Alireza Panahpour: I think this research is still going on, and there was no other research. That really raised my curiosity and concern in dental school. Fast forward, as you can imagine we have 120 to 130 students in dental school, in the same room without any proper ventilation, sitting there and mixing mercury, placing mercury and carving mercury. At that time, we had our normal dental mask, but I went to the hardware store and bought the mask with mercury filters and what have you. The teachers still frowned upon me to a point where they told me that I'm scaring other students and if this continues, they're going to ask me to leave.

Dr. Alireza Panahpour: We won't get into that. I had to actually go to a hearing at my dental school to protect myself. Fast forward to 1993, when I graduated. I have a lot of family in Europe, a lot of doctors and a lot of people there in science. I went to Sweden to do a one month course on implants in dentistry. It was a Branemark course in Gutenberg. Right when I got there, because I was involved now with the university, Sweden banned mercury and I was really impressed. Of course, I took away as much research as I could. I paid thousands of dollars to have them transcribed into English, brought that and showed it to my peers and my teachers. Still, I was frowned upon.

Wendy Myers: You're being a real troublemaker at dental school.

Dr. Alireza Panahpour: I was even in certain organizations and meetings where I would bring up this issue and other dentists would get into my face, with anger, about to beat me up and basically threaten me that I need to leave the course and why am I talking about these issues and so forth. Fast forward, a few years later, I was actually invited to be on Good Morning Sacramento, where I talked about mercury.

Dr. Alireza Panahpour: Basically I was part of the group that was trying to get Proposition 65, about the dental materials, accepted. We wanted to pass this proposition. I did the show in Sacramento and within a week after, the state dental board attacked me for endangering people's welfare. I did not know that there's actually a gag law in some of our big states that prohibit dentists from telling their patients there's mercury in their silver fillings. Now, every time I spoke about mercury, at any kind of a lecture, I was attacked, either by the state board, Quackwatch or other entities. Basically attacking me about what I'm saying, that it has no research. All the research is mainly done in Europe, and there was no research available in the States.

Dr. Alireza Panahpour: This became a pretty big struggle with these entities. At one point, even Quackwatch sent four patients, a family, to me when I was part of a practice in Irvine, California. They pretended to be patients that live in Orange County. They all came and asked to have their mercury fillings removed and I did all of it. The next day I received four lawsuits from Quackwatch, not for any kind of clinical issues, like I did a bad filling that broke, or the tooth ended up being damaged, or such, but that I scared the patients. I told them if they don't get the mercury fillings out of their mouth, they're going to get cancer and they're going to die. I scared the patients during the treatments. I use advanced kinesiology, I'm a student of Dr. Dietrich. Klinghardt and Dr. Omura, so I use kinesiology when I want to know what type of cement I should use, or what type of composites I should use, or what kind of antibiotics I should use, or what kind of anesthetic I should use.

Dr. Alireza Panahpour: Of course, in order to do that, I have to touch the patient's shoulder. I have a surrogate when I do my muscle testing, which let me remind you, is the only muscle testing by Dr. OMura which has a patent on it. He's taught at major universities in Japan and Europe. At the time, I was going through his course at Columbia University.

Dr. Alireza Panahpour: They told me that I sexually harassed these patients and that I touched them in places that I shouldn't have. Of course, your dental malpractice insurance only covers you for malpractice, not for these types of issues. My malpractice insurance told me, "Settle, settle, settle." Of course, I said, "No" and my insurance company dropped me. I had to spend hundreds and thousands of dollars, protecting myself with a lawyer, and I had to pay \$700 an hour.

Dr. Alireza Panahpour: Well, long story short, during the depositions and back and forth, we found out that this family didn't even live in the United States. They lived in Belgium. They

were teachers for the military, to teach them English and what have you. Imagine, Quackwatch sponsored these people, flies them down, puts them in a hotel or whatever to pretend to be patients that live in California. Of course, by the time we were done with this case, we made sure that these four people could never come back to the United States again. They were videotaping me in a hidden purse while I was treating them.

Dr. Alireza Panahpour: By the time my lawyers got done with them, they basically put their tail between their legs and they ran away back to Belgium.

Wendy Myers: You hired those Beverly Hills lawyers.

Dr. Alireza Panahpour: Exactly.

Wendy Myers: I've hired those before.

Dr. Alireza Panahpour: Mr. Keith Fink is a vicious ninja. I'm talking about \$700 to \$800 an hour lawyers here. I pretty much went bankrupt but I had to fight for my rights. So, it's been an experience. Now I don't tell patients that they have got to get their mercury out. Patients reach out to me and ask me to take the mercury out. Now, we know that a lot of biological dentists, so-called biological dentists, take these weekend courses and on Monday they're a biological dentist and they have to follow a certain protocol.

Dr. Alireza Panahpour: We know that some of these protocols really started with Dr. Huggins, Hal Huggins. We used to refer to him as one of his warriors. He would give these classes and people would come take the classes. At the end of the course, if you paid \$6,000 more a year, you would be placed on Dr. Huggins' website. These patients will reach out, look at the website, find a dentist and go to him.

Dr. Alireza Panahpour: Now, with programs like IAOMT, there's what's called a SMART protocol. Basically, they make sure that a proper rubber dam is placed and you have to pay extra within these entities to get these certifications.

Wendy Myers: Can you explain what the IAOMT is?

Dr. Alireza Panahpour: IAOMT is basically a group of dentists, International Academy of Dental Toxicology, but basically a biological dental group that has courses and actually they have a convention coming up this weekend. So, they give courses, they invite me or different practitioners to talk about different aspects in so-called biological dentistry.

Dr. Alireza Panahpour: Now, there is no specialty in biological dentistry. Anybody can take a course on the weekend and on Monday, call themselves a biological dentist. I get calls from all over the United States, "We can't come to you. Who should we go to?" Now, if I don't know this biological dentist, if this is one of those weekend warriors, I would never refer this patient to a so-called biological dentist, but I will refer my

patients to what's referred to as biomimetic dentist, which is a whole different academy.

Dr. Alireza Panahpour: In this academy, pretty much everything we learned in dental school, as far as doing fillings is thrown out. Whole new concepts on how to prep the tooth properly, remove the decay, conserve as much tooth structure as possible and don't just jump to doing crowns. It is really about adhesive dentistry or restorative dentistry. You have to spend about \$10,000 to \$12,000 within these courses to get your certification and master it.

Dr. Alireza Panahpour: Any monkey can remove a filling, honestly. Anybody can sit there and drill the filling out, but it's about rehabilitation, it's about rebuilding, above and beyond the protocol to make sure that your patient's safe. That you as a doctor, your staff and the environment are safe. This is above and beyond all those things, which I highly recommend, of course, for any dental practice. You do have to take some courses, do some certifications, exams and purchase some X-ray equipment to keep yourself, your patients and the environment safe.

Dr. Alireza Panahpour: This has been some of the history behind this mercury issue. Oh, one thing I forgot to say is that these four patients were actually from Belgium, right after Sweden, Belgium, Switzerland, Germany, all these continents banned mercury fillings. All these European countries are banning mercury fillings because research is showing us how toxic they are for multiple different reasons in this medium of humans.

Wendy Myers: Can you explain that a little bit? The toxicity and the symptoms?

Dr. Alireza Panahpour: Yes, definitely, we're going to get into it, but let me first do a little share screen and let me start with some of the science behind what I'm about to present. This PowerPoint that I'm about to show you, this is what I really start with when I'm lecturing to different chiropractors, MDs and people that have a science background. I'll try to do my best to share some of this information so you guys really get the big picture here.

Wendy Myers: Anyone listening to the audio, you can go onto [youtube.com/wendymyers](https://www.youtube.com/wendymyers) and watch this video if you want to see these slides.

Dr. Alireza Panahpour: Fantastic, so basically this is an aspect of dentistry that I refer to as neuro-dentistry. As you see, this is our cranium. You have your upper teeth and lower teeth. The lower teeth are embedded in your lower jaw and to the TMJ joint. The lower jaw with the lower teeth really becomes the back part of your cranium. The upper teeth and upper jaw support the orbits. The bite here controls your cranium because of that connection.

Dr. Alireza Panahpour: Now, if we take a closer look, you can see how all these nerves that go to our teeth, gums and nose all come from one server, which is the fifth cranial nerve. Now, this right here is the fifth cranial nerve that basically comes from the

brainstem and it goes to what I call a big server or in science, we call it the ganglion. From this main major ganglion, you have nerve intervention that goes to the forehead, eyes, nose, teeth, upper lip, upper teeth and lower teeth. There's also intervention from this main nerve that goes to the vagus and that basically goes to your gut. Remember, these are your upper teeth, these are your lower teeth.

Dr. Alireza Panahpour: So, all these nerves that are responsible for your gums, for your teeth, for your nose and for your sinuses, they all come from one server. It's called the sphenopalatine ganglion. Now, let me take you to this next slide.

Dr. Alireza Panahpour: I'm sure you've seen this pretty much in every medical office you go to. This is a chart of our autonomic nervous system. The autonomic nervous system is composed of two divisions. Number one, the sympathetic body and that's yellow. We see how pretty much all of our organs have a sympathetic connection to the spine.

Dr. Alireza Panahpour: Now, this is your fight and flight. Basically, if a tiger walks in this room, me and you are going to run the fastest and jump the fastest. You've heard of mothers literally picking up cars to save their child. That's sympathetic, which is basically defend and attack. That sort of thing.

Dr. Alireza Panahpour: The parasympathetic, which is the other division of it, is basically your detox, chelation, healing, et cetera, et cetera. As you can see, all the organs are connected via the parasympathetic through multiple parasympathetic ganglions, or servers. In our body, we have one, two, three, four, five, six, seven, eight parasympathetic ganglions that control our parasympathetic function.

Dr. Alireza Panahpour: Now, look at the top four right here. These top four, otic, submandibular, ciliary, basically are, going back to this slide, are these ganglions one, two, three, four.

Dr. Alireza Panahpour: What I'm trying to say is that four of your major parasympathetic ganglions are connected to your dental health. These four parasympathetic ganglions that control your parasympathetic function are not only controlling your dental health, gum health and cranial health, but are also connected to the ciliarian, the motherboard basically that's connected to the fifth cranial nerve.

Dr. Alireza Panahpour: If we look at it, if this is the lower jaw and it's the base of the cranium, look at the number of arteries, veins, neural connections C1 through C7, that basically goes into our skull. We know that this structure, if you look at the head and neck anatomy, this structure right here is responsible for musculoskeletal system circuitry, lymphatic oral cavity, nervous system, endocrine system, respiratory system, and inflammatory response, et cetera. So, this engine right here, is such an important part of our health.

Wendy Myers: So, why would you want to contaminate it with mercury?

Dr. Alireza Panahpour: Mercury or even cranial dysfunction that doesn't allow proper movements, what's called cranial pulse and also infections in the jaw. Now, I want to bring up a little research that's been ongoing for years. It is referred to as the Nun Study, you know Holy Father, the Nun Study. This was in Baltimore. All the nuns went to the same dental school and medical school for all their treatments, which were given to them for free. After they passed away, they gave their body to science.

Dr. Alireza Panahpour: Number one cause of death for the nuns was cognitive issues, and then it was breast cancer, and then it was, I think, ovarian cancer. Now, when they went and looked at the brain, they realized there were certain spots in the brain that were responsible for their issues. So, if they died of cognitive issues, there was one spot in the brain. If it was breast cancer, it was another spot. If it was ovarian cancer, it was another spot. Each spot was basically connected to their certain disease that they died of.

Dr. Alireza Panahpour: The top three things they found in each of these lesions, number one was mercury, number two was biofilm, number three was aluminum. The question was, if there is no blood flow to the brain, there's a blood brain barrier, how did this bacteria, how did this mercury toxicity get to the brain? The conclusion was axonal transport, which means that these viruses, chemicals and toxins, are able to use this nervous system as basically a freeway to get to different parts of the body. That I found to be very interesting also, and I wanted to share it with you.

Dr. Alireza Panahpour: This is basically again what I call neural dentistry and you can get information on the science in reference to neural dentistry. Now, let's jump to mercury.

Dr. Alireza Panahpour: I've been attacked by having this lecture on so many different outlets, but due to the recent research, I think that more research is being presented now through different entities basically confirming the toxicity of these mercury fillings. Now there's Proposition 65, where each patient needs to be informed that there is mercury in your silver fillings, that root canals are bad for you and they could cause cancer.

Dr. Alireza Panahpour: Interestingly enough, if you're a dental office and you have less than 10 employees, you can put the Proposition 65 paperwork somewhere in the bathroom, behind the toilet. No one really needs to see it. If you have more than 10 employees in a dental office, then you need to put it in eyesight for every patient to see. That's really interesting also.

Dr. Alireza Panahpour: Now, let's talk about mercury fitness. As I said, mercury is the second most toxic substance on our earth. Mercury clearly affects our immune system. It's been observed for centuries now, that it has a lot to do with chronic viral, fungal and immunocompromised patients, even Parkinson's, Alzheimers, et cetera. Mercury basically inhibits cellular oxidation and inhibits your macrophage and neutrophils, which is your immune response and defends against candida.

Dr. Alireza Panahpour: Now, candida and mercury have a love and hate relationship. Every time, let's say for one reason or another, your mercury levels go up, your candida level goes up too, to protect you from that mercury toxicity. Why do I bring this up? A lot of patients tell me that, "I'm going through candida toxicity, to dump my candida out of my system, but I'm feeling headaches. I feel a bit schizophrenic, like I'm angry." I said, "Well, take into consideration that you're disturbing that equilibrium." I'm sure you know this really well because you have supplements and protocols in mercury detoxification, so they really have to go hand-in-hand.

Dr. Alireza Panahpour: Now, we know that the World Health Organization did very, very interesting research between 1988 and 1990. \$420 million was spent on the largest health survey in history. This was the World Health Organization before, not now. It's a little different now.

Wendy Myers: Very different organization.

Dr. Alireza Panahpour: Yes, ma'am. You should have another podcast on that, by the way. Survey size was 35,000 people, covering a basically huge population, and these patients had mercury fillings. They had a series of issues that were related back to mercury. When they went and took these mercury fillings out, there was no mention of any supplementations before, during or after like binders, chlorella, nothing. 89% of their allergies improved. 87% of chest pains, 91% of depression. You can read through the rest.

Wendy Myers: Let's go through it. People want to hear this.

Dr. Alireza Panahpour: Allergies improved 89%, chest pain 87% and depression 91%. I have a friend of mine, an associate in New York, he's a psychiatrist. He will not treat a patient with psych issues unless they take the mercury fillings out. Dizziness improved 88%, memory loss 73%, fatigue 80%, headache 87%, insomnia 78%, irritability 90%, irregular heart rhythms 87% and vision problems 63%.

Wendy Myers: That is astounding.

Dr. Alireza Panahpour: This is 1988 to 1994. Again, this is without supplementation, without binders, without chelation, et cetera, et cetera. Believe it or not, we know that the silver amalgam fillings as a patent, the patent is owned by the FDA and ADA, the American Dental Association. The patents on our silver fillings are owned by the American Dental Association and another association that starts with an F.

Wendy Myers: How convenient.

Dr. Alireza Panahpour: It generates a large amount of revenue. One of the things we've heard through our lawyers, that our freedom fighters are mentioning to us, is that if ever let's say, the American Dental Association comes out and says, "You know what? We messed up. Mercury is bad, so we removed it from the market." The lawsuits

will be worse than the tobacco industry. That's how terrible it could be. Interestingly enough, if you look at the patent law, it says the device that is used outside of the body.

Dr. Alireza Panahpour: So, the patent on mercury fillings, is for the device that is used outside of the body. Really what the American Dental Association and these other health organizations are saying that our teeth are not a part of our body.

Wendy Myers: That's incredible.

Dr. Alireza Panahpour: Our teeth are not attached.

Wendy Myers: They're not inside our heads either.

Dr. Alireza Panahpour: Correct. Now, there's a revolutionary finding that your teeth, through your nervous system, arterial, venous and lymphatic, are actually a part of your body.

Wendy Myers: Wow, what a revelation.

Dr. Alireza Panahpour: Very interesting stuff that is coming out. So really, this drove me crazy for years.

Wendy Myers: Is this new research that's just come out?

Dr. Alireza Panahpour: Just last night, hot off the press. It drove me crazy. How could an organization get such a patent on a device that is used outside of the body? One night with a few friends, after a few refreshments, it came to me as I was walking back to my room at a conference as I was about to go to bed. It came to me. Now, as conception begins, there are certain cells, ectoderm, mesoderm, that are part of our development into this entity. Now, ectoderm is responsible for our nails, skin and teeth. So, the fact that our teeth originate from ectoderm, which is also responsible for nails and skin, that's how they got away with it. I can only imagine the millions of dollars that were spent to make this happen. That's where it's coming from. That's why they were able to get away with these patents.

Wendy Myers: You know, it's interesting. I've asked this question to every dentist that I've had on the show, why is mercury allowed in fillings? You're the first person to mention that the FDA and the American Dental Association profit from the placement of mercury in our mouths.

Dr. Alireza Panahpour: Absolutely. When I did the show *Good Morning Sacramento*, years ago, I basically presented the same thing that I'm telling you. I also said how could I trust my health to an organization that's making profit from this? It's like trusting my health to Enron or British Petroleum. Again, for me, I don't care how much research you show me. I don't care who presents whatever research. Mercury is the second most toxic substance on our periodic table. No amount of it is safe. Further, we know some of the first research that came out was about mercury

and our dental amalgam effect on the cardiovascular system. I have the research name and who the people that did it are right below.

Dr. Alireza Panahpour: Of course there's been much more since, but this was one of the first that was presented to us. We also knew that dental contributions to cancer and mercury silver fillings. Basically half of silver fillings, that is titrated and placed in people's mouths, is composed of 50% mercury filling, and the rest of it is copper, silver and many other toxic trace elements that are mixed together. That becomes this amalgam filling that is placed in their mouth. Now, most people with adult fillings have several grams of mercury in their teeth. Remember, it only takes only milligrams to cause health issues. Again, below I have the research for you guys.

Dr. Alireza Panahpour: Now, if you go to, for example, one of the websites called IAOMT or go to YouTube, there's a video called *Smoking Tooth*. It's about how they took a 50 tooth that was extracted, they used certain technology, they rubbed the silver filling with an eraser of a pencil and you can see the vapor that's coming out of it. As we're talking, as we're eating, as we're drinking, this vapor is constantly being released.

Dr. Alireza Panahpour: Now, another important part about this is what we refer to as the galvanic effect. It is whenever we put two metals next to each other, they create a battery effect. This battery effect, why would you want to have a battery effect from silver fillings on top of the nerves that are connected to your parasympathetic ganglion? Why would you want that? Above and beyond the mercury toxicity, that battery effect will keep these nerves on a charge. Depending on your immune system, your immune system adapts and develops.

Dr. Alireza Panahpour: That's been one of the major issues with patients who call me. "I went to a biological dentist. Every time I get my mercury fillings removed, the tooth dies. I want to get them out. I have to get them out but every time I go to a biologic dentist, I take the mercury out and the tooth dies. Why?" Well, it's because suddenly that battery effect is removed and these nerve endings start firing. If that surge is not controlled through neural therapy, which is basically trigger point injections, or acupuncture within advanced acupuncture, to get rid of that surge, to create harmony again, these teeth die.

Wendy Myers: Can you talk a little bit about gold fillings and what happens when a patient has gold fillings and mercury fillings in their mouth simultaneously?

Dr. Alireza Panahpour: That is double whammy. You're in double trouble. There's no real gold left in America, number one. That's part of it, pure gold. I know that once a year, there's a company that comes to my office. They pick up all the broken crowns and whatever I have and they refurbish them. They take all this metal, gold, they melt it, and then resell it back to the companies. We know that they add certain dyes and colors to make it look more like gold.

Dr. Alireza Panahpour: If you're talking about real gold, good gold, proper gold, we know that if you have a gold crown and mercury, above and beyond the battery effect that I just mentioned, the vapor that is released from mercury fillings is actually absorbed by these gold fillings. Now, the worst is when you've had a mercury filling that was shaved and a gold crown was placed on it, that's even more dangerous. So that again, toxicity vapor keeps that nerve ending and the associated organs and the ganglions at a charge.

Dr. Alireza Panahpour: For example, if I have a mercury filling on a tooth, that's connected. That tooth is connected to a certain organ, or there's a connective charge that's going on. As soon as this is removed, that charge becomes a short circuit. That's why through trigger point injection or acupuncture, we try to overcome that surge that's happening. So, that's the thing with gold.

Dr. Alireza Panahpour: Now, placing gold crowns or gold fillings is truly an art. There's only one person I know that actually measures the voltage of each tooth with the corresponding gold crown, to make sure that they're adaptable and it doesn't harm your energy, your central nervous system, your autonomic system, as we talked about in the early slides. It's truly a talent. If my patient asks for gold on these inlays or fillings, I refer my patients to that specific dentist. If you go into your dentist and you want to have these mercury fillings out, what they're going to put instead?

Dr. Alireza Panahpour: Well, depending on how much tooth structure there's left, they could do a composite tooth-colored filling for you. Let's talk about the composites. Composites are plastic material. They are full of BP, methacrylate, polymethacrylate and also off-gas. You're trading one evil for another. Now, there are good, clean composites out there, which are more like glass-like materials. They are very advanced, but they're very expensive. If you're going to your dentist and you want to have mercury fillings taken out, above and beyond all the contamination and the vapors and the protection, you want to make sure you get the MSDS sheet of the material that's going to be used for your tooth.

Dr. Alireza Panahpour: Unfortunately, most dentists try to keep their overhead down, so they purchase the cheapest ones that are out there, so that they can use it fast and furiously. Then of course, there's biocompatibility. Some patients can't stand certain materials. Again, we can maybe do another podcast on biocompatibility another time.

Dr. Alireza Panahpour: Dental material now to replace mercury fillings is a whole other world in which you have to be really careful what is going into your mouth. Is the laboratory in the United States? What kind of technology do they use? You want to look at their material. So, it's basically going down the rabbit hole further and further. I personally use advanced kinesiology and heart rate variability to be able to see which materials are better for my patients.

Dr. Alireza Panahpour: There are certain tests out there, biocompatibility tests that use your blood to tell you which materials are good for you. Well, blood is a filtering mechanism and it's constantly changing. So, if I'm sick, if I'm mercury poisoned and my doctor tells me, "You got to get your mercury fillings out," and I go get a blood test to see which materials work, my blood is really polluted. What we found out with these patients is that right at that time, when they're toxic, when you still have mercury fillings, their body's telling us one thing. After two years, when they go through chelation and detoxification, the body becomes allergic to what was placed. Again, it's quite an interesting subject, but one really has to do their homework or make sure that they are with a proper, experienced, dentist that is not only advanced in neural dentistry, but biomimetic dentistry. One who works with proper acupuncture, or certain naturopathic doctors who understand that and of course uses safe methods and protocols.

Wendy Myers: That would be you, correct?

Dr. Alireza Panahpour: I do the best that I can. I am a biomimetic certified instructor, so I have the biological experience, teachings and knowledge in reference to biomimetic dentistry. Interestingly, last year, Delta Dental gave out a survey and 87% of all teeth that ended up getting crowns are going to end up getting root canals. So, in biomimetic dentistry, we truly try to avoid crowns as much as possible.

Wendy Myers: You're my personal dentist. I can assure you that you are doing things that I have never even heard of. You're working at a very, very deep holistic level. Looking at the person's meridians, their energy fields and so many other things that you're addressing and looking to preserve and optimize when you're working on someone's teeth. I had another question about mercury fillings.

Wendy Myers: How can someone remove them safely? If someone is listening here, the majority of people have mercury fillings placed in their mouth. What is the best way to go about getting them removed?

Dr. Alireza Panahpour: First, you need a competent dentist who has biological understanding and neural understanding of what has been happening to your body due to your mercury fillings and what happens when you have these mercury fillings removed. That's number one, they have to have that understanding and knowledge.

Dr. Alireza Panahpour: Number two is to make sure that that dentist has advanced restorative and adhesive training in that district, which is biomimetic dentistry. Not that they took a weekend course, no. They took a number of courses and got certified. They have their certificate from the Academy of Biomimetic Industry. So, I would say those are the top two.

Dr. Alireza Panahpour: Now, there is the Huggins Protocol out there about how to keep you safe. There's the SMART protocol out there about how to keep you safe and you can

Google it, see all the criteria and make sure your dentist is SMART-certified, or Dr. Huggins-certified.

Dr. Alireza Panahpour: I get two types of patients really, I get athletes that come to me, Olympic athletes or healthy, strong people who say, "I've heard about these issues. I want them to have these mercury fillings removed now because I don't want it to catch up with me down the line." Strong individuals, they have good chelation patterns, detox patterns and they're healthy. I would say, from zero to 10, they're a nine plus plus. Those patients are easy.

Dr. Alireza Panahpour: We make sure they're getting their electrolytes and they're getting enough water. We've put them on some supplementation and we add binders, mouth rinses, and we gently remove these mercury fillings and they do great. But when you have a patient that's dealing with adverse autoimmune issues, possible cancer, Alzheimer's and all these other health crises, we have to go above and beyond and it's not that easy.

Dr. Alireza Panahpour: For those patients that are dealing with these issues, please don't go to anyone that just has a nice website. Make sure what we're talking about right now is covered, 100%. For these patients, I will not work with them unless they are seeing someone that is helping them, like you and your protocol, or a good naturopath that is able to help them through this protocol. Of course, I always recommend intravenous IV support, right at the time of removal or right after.

Wendy Myers: Like IV vitamin C and glutathione, and things like that?

Dr. Alireza Panahpour: Well, you can't really mix glutathione and vitamin C together in the same bag. They have to be administered a little differently, just FYI. So we want to make sure we follow the same protocol, so not only that these teeth don't die upon removal and end up needing root canals, but you want to make sure the patient's taken through safely. So, those are the basics that I would recommend. Of course, again, every patient is a little different. I have a patient that I can't even keep my wife on when she comes to the office, because she goes on a sympathetic fight. Her nervous system goes crazy. So, every patient is different.

Wendy Myers: Yeah, it's interesting you just said that. I just made a connection because I used to have several mercury fillings that I had removed when I was 21. I just made the connection between my tooth dying and having to have a root canal and a cap following a couple of years out for that extraction.

Dr. Alireza Panahpour: Number one thing we're seeing, even in our healthy patients, is mercury fillings are basically metal and through years of drinking hot, drinking cold, biting, this metal expands and shrinks and that starts putting fracture lines into the tooth. I can't tell you how many patients come to me, "I had my mercury fillings removed. We did biocompatibility testing. I saw the acupuncturist. I followed all your instructions but why is my tooth still hurting?" Well, when we got into it,

there were fracture lines that were missed during the replacement of these mercury fillings.

Dr. Alireza Panahpour: If the tooth has a fracture, you take the metal out and you pop some material on there, every time patient's biting down that fracture elongates itself. So, as a biomimetic dentist, we're trained in the Ribbond technique. The Ribbond technique is basically thin sheets of Kevlar that are used for bulletproof vests, and are strategically placed underneath the fillings over the fractures to act as a shock absorber. That's another reason why a biomimetic dentist is required. To be honest with you, I don't know of any biomimetic, biological dentists right now in the United States.

Dr. Alireza Panahpour: Last week, I had a patient of mine that went to a dentist that pretended to be biological and biomimetic. When I had a talk with this patient and explained the difference between biological and biomimetic, the patient called the dentist and confronted that doctor. Within minutes, he removed his association with biomimetic dentistry. Just because someone has a good website or someone is good looking or has a beautiful display, doesn't mean they know what they're doing.

Wendy Myers: It's interesting, I came to you one time because I was having severe tooth pain in one of my teeth where I definitely had a mercury filling removed at one point, because my whole mouth was full of mercury when I was 21. I had them replaced with composite, but I had a tooth fracture that was causing me intense pain. Then you'd recommend pulling the tooth, at that point for me, it just wasn't salvageable, there was a very, very large fracture. I just thank you so much because it's really helped me to get the correct information. I think most dentists would have just put some composite on there.

Dr. Alireza Panahpour: Correct.

Wendy Myers: Or have done a root canal, what have you, and sent me on my way.

Dr. Alireza Panahpour: I have a number of patients come to me with similar issues, but they're also clenching and grinding. So take everything we just talked about and add clenching and grinding to it, "Why is this tooth dying? This isn't even a natural tooth." Now with the mercury filling on top of it, it's even worse.

Wendy Myers: That was me too, I was in a very stressful period.

Dr. Alireza Panahpour: Correct, that's why I brought it up.

Wendy Myers: Yes, I was clenching and grinding. Let's talk about that a little bit, because I think that's something a lot of people are doing, especially now people are so stressed.

Dr. Alireza Panahpour: Absolutely, absolutely.

Wendy Myers: From the pandemic, there's a lot of fear, a big release of fear and uncertainty going on in the world right now. So, what is happening? What are the effects of grinding and clenching and what can people do about it?

Dr. Alireza Panahpour: I've always been a curious individual and I want to know why, why, why, why are you clenching and grinding? If I'm able to find out why you're clenching and grinding, then I know how to take care of it. Clenching and grinding happens due to some sort of a gain and loss within your system. In a word, your system is losing faster than it's able to repair itself and gain itself. So, it's not only a muscular issue, but a neural issue, joint issue and psychological issue.

Dr. Alireza Panahpour: We see patients that, due to a lot of bad dental work, the harmony of their bite as it relates to the cranium and the rest of the body, has been lost. "I had a filling done, it never felt right. I keep going back to the dentist, they keep adjusting and adjusting it and adjusting it, and they took a tooth off from the above tooth. I had to get the crown redone." All of these things and that repetition, the harmony of the bite, the cranium is gone.

Dr. Alireza Panahpour: So, what happens when these muscles of the head and neck go into spasm? Well, whenever muscles go into spasm, they get shorter. As they get shorter, the number one thing that happens is the lower jaw shoots backward. When the lower jaw shoots backward, it takes the tongue and the epiglottis back with it. It cuts your airway. All these sleep apnea devices, what are they meant to do? Take the lower jaw forward.

Dr. Alireza Panahpour: So, your body now wants to push your lower jaw forward, so you can get oxygen in, but muscle memory takes it back. It becomes a vicious cycle. That cycle embeds itself into your brain function and to your basic autonomic nervous system. So, whenever your body starts stressing, the clenching and grinding starts again. I have patients that have gone through my bite protocol on clenching and grinding. They did just fine. As soon as something traumatic happened to them, they started clenching and grinding. So, there's that combination. I always tell my patients at the end of the treatment, "If you're under stress, put your appliance back in again to protect your teeth, to protect their function."

Dr. Alireza Panahpour: We also know that your cranium is responsible for lymphatic movement which is called the cranial pulse. If this cranium is not able to open properly in association with the rest of the body, then the lymphatic gets clogged up. Another movement of clenching and grinding is to help pump the lymphatic down. Remember, when I'm talking about the muscle of the head and neck, I'm really talking about the muscles of the bites, shoulders, neck and all these balancing muscles.

Dr. Alireza Panahpour: When these muscles get tense, they start impinging upon the blood flow to the head and neck and dumping toxins out. That's when we hear our patients say,

"We have no lymphatic movement. I have a foggy brain. I forget things." Because that's not happening properly. There's probably over 25 different types of explanations about clenching and grinding that's available to us. Again, I've taken all these courses, asked thousands of questions, but they all focus on this right here.

Dr. Alireza Panahpour: No one is looking at shoulders and hips, so that's why I always pay attention to all of that. When I see a patient that comes in one shoulder is here, one shoulder is down here, their cranium completely has shifted, their eyes are off, their ears are off and their hip is off. No matter what I do here, I can never get that patient right. So, I have to have a broader therapy that I work with, not just me, with an osteopath and a chiropractor, to help bring them back to alignment. Only when we bring back to proper alignment and everything is happy, that's when the clenching and the grinding stops.

Wendy Myers: Yes, that's really good advice too. You need to continue using your night guard and you have a very special one that you devised.

Dr. Alireza Panahpour: Correct.

Wendy Myers: That's the one that I use and that's good advice to continue to use it when you're stressed. But anyone out there, I urge you, if you're going to your dentist and they see wear patterns on your teeth, don't ignore that because it could cost you your teeth in the future. I knew I was clenching and grinding, but I didn't know that in the future, I could lose a tooth as a result of that or I would have been more diligent about wearing my night guard.

Dr. Alireza Panahpour: Well, it's interesting you talk about those wear facets. What happens is if you're getting those wear facets, this dimension, this vertical dimension because of loss of tooth structure, gets shorter and shorter and shorter, which puts more tension on the muscles and the joints. Remember one millimeter of tooth loss in the back is three millimeters in the front. I see patients that have clenched and grinded so much that their upper and lower teeth at the front are contacting each other so hard. They tell me, "Why do I have headaches all this year?" It is because of that. At the end of the day, when we bring our patients into harmony with my work and my chiropractor or osteopath, we do need to go back and level the bite, so they don't have to wear the appliance anymore. They're only wearing it at night.

Dr. Alireza Panahpour: Let me tell you, this therapy actually works for our athletes as well. Right now I have two Olympic athletes for the Winter Olympics that I'm helping. The CEO of this organization has reached out to me, very curious, how through my appliance, I was able to increase these athletes' tensile strength by more than 10%. If you see me at the Winter Olympics with a banner out there because he was curious how I was able to increase their tensile strength by just using my appliance and bringing their bite in a more harmonious place.

Wendy Myers: That's amazing.

Dr. Alireza Panahpour: Which is a big thing for an athlete, 1% is huge.

Wendy Myers: Yes, yes, yes, yes. Is there anything else that you want to tell us about mercury fillings and how to remove them properly, for anyone out there that's concerned about this or alarmed by what you said today and wants to have them removed?

Dr. Alireza Panahpour: Definitely do your homework. As a dentist, I have a curriculum vitae, a CV that basically says for the past 25 years, every course that I have taken and the continuing education units or residencies and what have you. Make sure you get access to that, make sure that your dentist is up-to-date with some of the most advanced materials and pathways of restorative dentistry, adhesive dentistry, a member of proper organizations, not just the one weekend, like this weekend is the IOMT conference in Bellevue, Washington. I guarantee you, on Monday, a lot of new biological dentists are going to be coming to the market because they did a weekend course with other biological dentists. So, don't fall for that.

Dr. Alireza Panahpour: At the end of the day, dentistry is an art form. You want to make sure that you're involved with someone who has truly enough experience and the best way is to make sure they are certified by these holistic biological dental associations, especially in SMART protocol, and that they have advanced experience in biomimetic dentistry or adhesive restorative dentistry.

Wendy Myers: Fantastic.

Dr. Alireza Panahpour: If you're truly dealing with a lot of healing crises, a lot of autoimmune diseases, Alzheimer's, et cetera, et cetera, you want to make sure you get your dentist and your naturopath to have a very close relationship together. You are constantly working with both of them. That's my feedback.

Wendy Myers: If someone has cancer, it's the chicken or the egg kind of conundrum, as we know that the metals promote cancers, but should they have the mercury fillings removed or can cancer patients be too fragile for that?

Dr. Alireza Panahpour: Well, it depends what stage they're at. If it's just starting, in remission or very active. I was speaking to the specialist that my patient was seeing and when I even talked about vitamin C, I wanted to get his approval for using vitamin C intravenously while I was removing these mercury fillings. This is what he told me, "Well, this is not the norm and I cannot allow it to happen." Because he had never heard about mercury being toxic, or using intravenous IV to have mercury fillings removed. For these patients, I rely on my advanced naturopaths who also focus their practice on patients that are dealing with cancer. I don't try to know it all because there's so much going on with this patient, that I definitely need help.

Wendy Myers: What are your protocols for a pre and post mercury filling removal?

Dr. Alireza Panahpour: It depends on who the patient is. The basics are, I want to make sure they're drinking clean water, not dead water but water that's pH proper and has minerals and electrolytes in it, which is hard to find. You have to buy minerals separately, buy electrolytes separately and mix it together every day. Make sure they're on basic binders, either charcoal or chlorella. I want to make sure that I know about any scars on their body that they have. These are our healthier patients. This stuff starts about two to three weeks before surgery, before removing the mercury fillings.

Dr. Alireza Panahpour: Again, if they have multiple areas through muscle testing, I want to know which area the body wants me to go after first. I just don't jump into it, you can't and I don't. If they have any scars that are below the head and neck, and I know that scar is going to start firing, or be a short circuit when this equilibrium is altered. I want to make sure they're able to get neurotherapy or some sort of a scar treatment, be it acupuncture or other stuff right after my treatments.

Dr. Alireza Panahpour: I don't do IVs at my practice right now, anymore, because number one, it's really hard to find and dental organizations are really watching me like a hawk. I basically send my patients out to a friend who is a naturopath, an associate to get the IVs done. That's very important as well, and make sure if the patient is clenching and grinding and you take mercury fillings out, well, you're irritating the system more. You want to have proper precautions to make sure that you do all this work and the patient doesn't go home and clench and grind the bejesus out of that tooth. Again, every patient's different, but probably have big elephant suction.

Dr. Alireza Panahpour: I looked like Darth Vader with my mask on. I have ionizers and special filters going on in the room to take the mercury out, so I'm not putting it into my next patient, the next operator or to my assistants. I have a private room for this with special suctions and I actually tell my employees, my dental assistants to leave the room. Even with all the precautions, I still don't want to take any chances. Both of my assistants are young, I'm sure they want to have babies in the future, so in my heart, I cannot even with all the precautions, expose them to the vapor.

Dr. Alireza Panahpour: I've personally done some tests and without my gear, mask, gloves, creams and all of that, every time I remove mercury fillings my mercury levels go up. Even though we all take these precautions, we know that mercury can zip into anything. We have to wear 15 gloves over each other to be able to prevent the mercury going through my gloves to my skin.

Wendy Myers: Wow.

Dr. Alireza Panahpour: There's a special cream, industrial cream I have to put on and then put my gloves on. We just sat here and talked for the past hour about all the protocols,

but believe me, my mercury levels go up. Thank God I have good chelation, I have good detoxification, so truly after these, I'm at the infrared sauna, I'm boosting up on my greens, on my chlorella, to poo it out, pee-pee it out and sweat it out.

Wendy Myers: A lot of dentists are not using those precautions and have been working with mercury their entire life. It's not surprising that the dentistry profession has the highest suicide rate out of any profession.

Dr. Alireza Panahpour: Correct. I used to participate in forensic dentistry years ago and number one cause of suicide with dentists and the city coroner's office always related to schizophrenia. You see this little wire, it has a little plastic covering over it? So does our nervous system, that mesh, that's electrical mesh, has a protein production called the tubulin, which is full of myelin. We know that mercury destroys that myelin right away, lack of myelin causes schizophrenia.

Dr. Alireza Panahpour: When I was with the forensic division, doing forensic dentistry, for every dentist that came in, I ordered a mercury panel. The mercury was above and beyond any amount you could think of. After a few tests, I was actually let go. They told me, "Thank you so much, don't come back again." Because it was costing them money to run this laboratory.

Wendy Myers: You're just causing trouble everywhere you go.

Dr. Alireza Panahpour: Yes, I will try. Well, I'm a curious individual, I want to know. I want to know if I can help. That curiosity is what got me here, to this point. I truly want to help patients that truly need my help. If you come to me with one mercury pebble filling, I probably will refer you to an associate to do it. But if you are dealing with a healing crisis and you truly need my specialty, that's really where I'd be involved, putting myself in danger to help my patients. Again, every time I do this, I have got to deal with my own system and with my own health as well.

Wendy Myers: Where are you located? Where can patients come and enjoy your services?

Dr. Alireza Panahpour: Right now, I'm in Los Angeles, California. Actually in the next few months, we're launching a satellite practice in Northern San Francisco by the Santa Rosa area. I do some consulting in Mexico at La Luz Wellness Center. This is where I'm a consultant and I have other dentists that I've hired follow my protocols strictly, with me being present.

Dr. Alireza Panahpour: We are working on some projects in Paris. I'm waiting for my license to go through. I was sponsored by a very advanced medical clinic there and possibly Miami, I don't know. We'll see, there's another project we're working on, but that's more facial aesthetics so I can't wait till our next podcast. I can share about facial settings in dentistry.

Wendy Myers: Yes, that would be fantastic, and in your office in Mexico, that's in Chihuahua, in Northern Mexico.

Dr. Alireza Panahpour: That's true. It's a little town called Casa Grande. If you just google La Luz Wellness Center, boom. This is where we have a hotel and we have a medical division. This is where patients come to stay days, weeks or months at a time and go through detox, chelation and improvements. Of course, dentistry is the first line of defense. We've made it very convenient for our patients that truly need our help to be there, so we're present. We have a 24 hour chef, all organic, the food is actually being grown within the same colony. Again, we take really good care of our patients there.

Wendy Myers: Where can people reach out to you and find you if they want to work with you?

Dr. Alireza Panahpour: My website is a systemicdentist.com, the email is info@systemic.com which is the best way to get in touch with me. I travel so much, so I try to answer the phone here and there myself as well, but that's the best way to get in touch with me.

Wendy Myers: Okay, fantastic, fantastic. Well, Dr. Panahpour, thanks so much for coming on the show. Are there any parting words that you'd like to give the listeners?

Dr. Alireza Panahpour: There's always sunshine at the end of every storm, so we all need to focus on that sunshine. Hard times will eventually end, but hard people, strong people keep on going. Let's go for the good fights, let's protect the ones that can't protect themselves, and let's keep our curiosity going, especially in this day and age with all this craziness with COVID-19 and '20 and '21 and '22 that are underway.

Wendy Myers: Yes, absolutely. Well, Dr Panahpour, thank you so much for coming on the show and everyone, Dr. Panahpour's my personal dentist. This is who I go to, this is who I trust with my teeth and my daughter's teeth. He is absolutely the best dentist in the United States. I highly, highly recommend working with him. Everyone, thanks so much for tuning into the show. I really appreciate you taking time out of your busy schedule to tune in every week. I absolutely love doing the show and bringing you all of these different guests and their expertise. I work really hard to find the very best people on the planet that really know what they're talking about, so that you can live your best life and enjoy the health and the joy that you deserve. Thanks for tuning in. I'm Wendy Myers of myersdetox.com and I'll talk to you guys next week.