

IABDM Position paper on Root Canal Treatment

By Dawn Ewing, ND, PhD, DNM

Dr. Ralph Steinman of Loma Linda University long ago proved that the flow of fluid through the dentinal tubules of a healthy tooth moves from inside to outside. This means there are microscopic openings in the tooth on the OUTSIDE of the root.

When a root canal is done, even by the most highly trained endodontist who uses laser, ozone, and sealers to treat the pulp chamber of the tooth after all soft tissues have been removed, the tooth is destined to potentially fail.

Let's pretend we could completely sterilize the tooth. This is not possible, but let's pretend. What about the flesh left in the tubules that open into the pulp chamber from all sides of the tooth? As that flesh is robbed of life, it decays and turns into a breeding ground for pathogens. Anaerobic bacteria find their way into the tooth through those openings and now is in a "heaven" of sorts. It is a dark, moist, warm environment with a lot of decaying flesh to eat. As they thrive, they multiply and can move back outside the tooth and spread to other areas of the body, adjoining jaw bone or remote areas alike, setting up secondary infections.

I personally have NEVER seen a root canal tooth that was sent off for culture come back anything other than diseased with all kinds of things including *Borrelia* and *Botulinum*. I have sent in teeth that had been treated with the highest level of endodontics only to confirm extreme infections.

At the same time, the bigger problem is that root canal treatment effectively kills a part of the body that was once alive and able to conduct electricity, and then blocks energy from moving through that area.

Try taking a lamp and removing one inch of wire from inside the cord. Plug it in, and you will not be able to get the bulb to turn on. The gap where the wire was removed might be sterile or it could be sitting in *Stachybotrys* mold. It doesn't matter. The sole reason the lamp doesn't work is the electrical disconnect. To fix it, an electrician would have to splice the wire together completely to remove the gap.

The human body has its own electrical system. A dead tooth, a root canal tooth, is the gap in the wire.

Even so, just as the IABDM does not advocate root canal treatment, we do not recommend removing every root canal tooth in every patient.

We do strongly suggest they get every root canal tooth evaluated, as an incredible number of them do, in fact, fail over time or cause severe health consequences that most MDs are unable to find the "root cause" of.

We recommend that patients find a biological dentist who can do a CBCT scan or who offers bioenergetic testing to see just what kind of a burden they may or may not be placing on the individual's health.