

"Health observations before and after amalgam removal"
Presentation at Estavayer-le-Lac, April 19th, 2002 (9th Melisa Study group)
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Ladies and Gentlemen,

- I was in my practice
- Patients came and said:
- Please take away all our amalgams
- I said: OK, I will do it
- I listed the patients
- I listed their symptoms
- I made a few statistics
- I sent them to Vera Stejskal

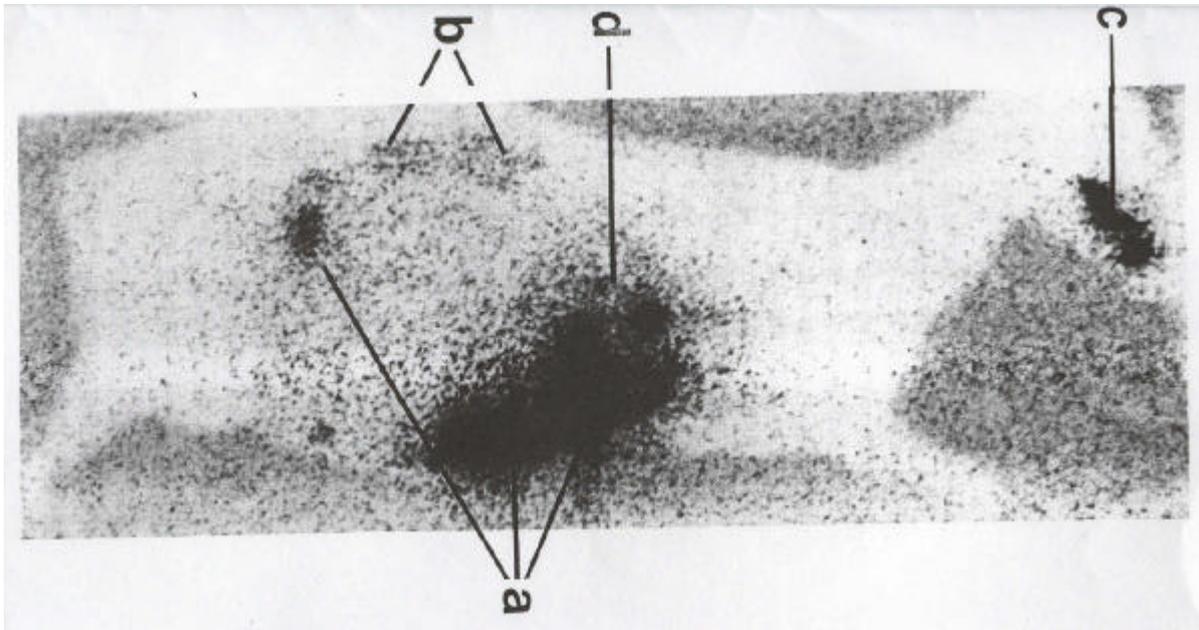
That was all!

No, not wholly, indeed Vera Stejskal asked me to translate my German article and to make an English and a French version, too. And that's what you have now in your hands!

OK, I will begin my presentation with a question:

Is anybody here who has already seen that picture?

Yes ? Yes, it is the radiograph of the sheep experiment by Hahn, Vimy and Lorscheider. It is in fact taken from the article which you find also on my list of references.



You can see here the contours of a sheep: the head, the legs. Dr. Vimy, who is a dentist, made little amalgam fillings in 12 teeth of the sheep using not the normal mercury but a radioactive mercury isotope. After he had killed the sheep 30 days later, he cut away the teeth on a level with the gums. Only the roots were left in place. After that he made a radiograph and could demonstrate where traces of the radioactive mercury isotope had gone, which came from the amalgams he had made.

You see where it has been deposited: In the stomach, in the liver, in the kidney, in the intestine, in the gums, and so on.

Ladies and Gentlemen!

That article was the final knock-down for amalgam in my practice!

Naturally, I had also been sensitised for this problem before. I remember exactly the first patient who had asked me to remove her amalgams, it was in 1989.

It was the patient no.73 on page 13 of my list! The numbers of the patients are not in chronological order.

She had peculiar sensations of "buzzing" and a feeling of slight vibrations or trembling in the whole body, she had also migraine and back tensions and even heart arrhythmias. Two years after the amalgam removal, the migraines hadn't disappeared completely but they were very much lighter and shorter and the sensation of "buzzing" and trembling had completely disappeared, also the heart symptoms. Today she is completely healthy.

I began to be more and more interested in that amalgam problem. But after I had read the article of Hahn, Vimy, and Lorscheider with the radioactive fillings in sheep, I decided to stop definitively using amalgam.

I packed my last six Dispersalloy boxes in a parcel and sent them back to the factory.

That was in March 1994.

In the same year, Urs Paul Gasche, who was one of the first journalists fighting amalgam in Switzerland, made a very impressive tv broadcast in Swiss Television. He invited several amalgam advocates and opponents and various amalgam patients who had just made their own experiences with amalgam removal.

I will now show you a series of 20 photos of this and another television programme. You will get an impression of how the public amalgam discussion became more and more important at that time in Switzerland. I took all the photos with my digital camera directly from a video tape in front of my television screen. I beg your pardon for the very bad quality of the pictures. They look as the quality of my English language is: only functional!

But it was the simplest way for me to document the period and to explain why myself and many colleagues of mine had suddenly so many patients who were interested in having all their amalgams removed.

Here you can see the journalist Urs Paul Gasche. He had invited two representatives of the Swiss Dental Association, Daniel Kempf and Hans-Caspar Hirzel, and here you see Prof. Becker and Dieter Kublitz, two well-known amalgam opponents from Germany. The great absence was indeed Prof. Jakob Wirz from Basel, one of the most prominent amalgam advocates of Switzerland and even Europe. But his statements which he had published in his article "**The unfounded fear of amalgam**" were explicitly quoted.

"In persons with many amalgam fillings, the strain on the body does not even account for a quarter of the amount of mercury that is taken in by food!

The mercury coming from amalgam is eliminated completely by the body.

Mercury from fillings is harmless, mercury from food is toxic".

Ladies and Gentlemen,

All dentists in Switzerland know these sentences by heart!

Prof. Felix Lutz from the University of Zurich was also invited. He explained why he wanted no longer to train his students in Zurich to make amalgam fillings, because he thought it would be more sensible to invest time in the future by training his students in making composites than in the past by training them in making amalgams.

Here is Erica Brühlmann-Jecklin. Here is her book, which – as you see - I have not only bought but also read and which made a great impression on me.

And here are three amalgam patients who recorded their experiences after they had their amalgam removed.

At the end of that tv broadcast, the public in the studio had the opportunity to vote on which representatives had been more credible. Here is the result: 79% of the public voted for the amalgam opponents, 20% for the amalgam advocates.

Another broadcast on television had also an immense public resonance: BBC reporter Tom Mangold interviewed several personages. You will know three of them.

Here you see indeed the first one; you know his name but you have never seen him: It's Dr. Murray Vimy explaining his sheep experiment which I showed you at the beginning of my presentation.

Here you see Dr. Boyd Haley, Prof. Vasken Aposhian, Prof. David Eggleston, Prof. Gustav Drasch, Dr. Diana Echeverria. They all have done most important research and have established why amalgam is a real problem for all people.

Here you see a Swedish lady politician who stood up against amalgam and promoted the legislation that limits amalgam in Sweden.

Do you know her, Vera?

And here you are going to see the two other persons you know. They are from Switzerland, Marcelle Monnin and Nathalie Calame. They both have much influenced the public amalgam discussion here in the French speaking part of Switzerland. Here finally you see the dentist Dr. Moret from Monthey. He presented in that tv programme one of his patients, a young athlete who had to abandon competition because he developed such intense pain in a leg. After ineffective consultations of many specialists, Dr. Moret removed his amalgams and all the pains disappeared!

Ladies and Gentlemen,

All these pictures did not only impress me but also a lot of my patients. And we dentists had a sudden afflux of patients who wished to have all their amalgams removed.

At present the dentists in Switzerland are still being instructed by the universities that composites should only be made when the cavities are relatively small. For large fillings, it is still recommended to make amalgams or crowns. As I have abandoned the use of amalgam, I should actually have to make crowns. But most of my patients who came and wished to have all their amalgams removed, explicitly wanted composites, because they hadn't enough money for the much more expensive crowns.

I think one reason of my success perhaps lies exactly here: I made composites instead of the usual crowns, which contain a gold alloy basis, and I believe more and more Max Dauderer – the well-known toxicologist in Munich – who clearly warns of using metals at all after removing amalgam.

Let's now have a look at my article: Normally, when I have a new amalgam patient who wishes to have his amalgams removed, I lay down his medical history. I note his symptoms, and if he asks me about my experiences with other amalgam patients, I show him the table in my article:

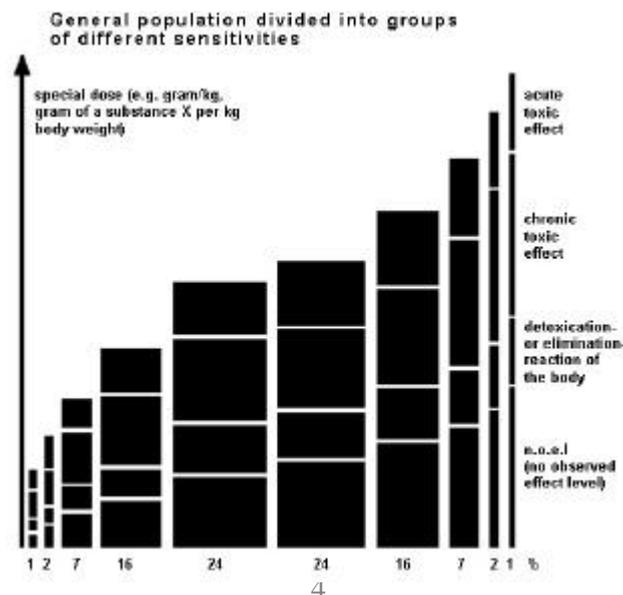
You find it on pages 3 and 4 of my article. Here are listed 75 patients, female or male, every patient has his number which corresponds with the numbers in the patients' histories; here is his age group; here is the number of amalgam fillings he had; here is the date when the first filling was removed; here the date when the last one was taken out. All the patients listed had certain problems of health. Here are the symptoms they told me about, I put a "1" in the corresponding column if the symptom was mentioned. Here in that column, I noted the date of the last consultation, and here I noted the estimate of his health the patient had formed at that date.

And here are the results:

Symptoms of 52 women and 23 men	
Migraine	36x
Headache	32x
Gastro-intestinal problems	27x
Neck tensions	25x
Paraesthesia	19x
Dizziness	18x
Allergies	13x
Vision disturbances	13x
Back pain	12x
Mental disorder	12x
Joint pain	10x
Shoulder/arm pain	10x

After removing the amalgam, patients believe their health has become	
much better	68%
better	12%
somewhat better	9%
no improvement	7%
worse	1%

After that, I show the diagram on page 1 to the patient and explain it:



Here is the partition of the general population into different groups of sensibilities. The upper areas of the four mean the patients feel very ill, the lower ones mean the patients feel healthy and do not have any symptoms.

Between these areas, the patients have some light symptoms but probably do not attribute them to amalgam, in those areas the symptoms are stronger.

If you now take a certain burden of a toxic substance -it may be mercury from amalgam fillings-, at a certain exposure the approximately 10% of the patients on the left side feel really ill, the majority of the patients in the middle feel more or less healthy and, at the other extremity on the right side, the patients feel so healthy that even 50 amalgam fillings wouldn't disturb them.

I found this diagram in the "Kieler Amalgamgutachten", which I have mentioned in my reference list, and I thought it so good that I reproduced it in my article. Today, it enormously helps me explain their health situation to the patients. Usually the patients understand that diagram very quickly.

Here on the next diagram on page 2, you can see the distribution of my amalgam patients in the different groups of age. You can see that twice as many women as men wanted to have their fillings removed. And most of them were past thirty years of age, but we had also younger patients. Are women at a certain age more sensitive to or simply more interested in amalgam problems than men, or are they really more often ill than them? I don't know.

Very often my amalgam patients, having read all the patients' histories of my article, tell me that they recognised their own history.

I think I will not go more into details, we haven't enough time, but you may want to read these patients' histories at home. I have specially updated my article for you and appended the latest patient testimony I received.

Last summer, Urs Paul Gasche, the journalist you saw at the beginning of my picture presentation, called me and asked me if I could send some addresses of my patients to his colleague Claudia Peter. He had made a year before, and she would make again, some portraits of patients in the PulsTipp Magazine.

I asked certain patients and most of them agreed spontaneously to give information about their experiences after amalgam removal.

Here is Claudia Peter and here is her article, which appeared in November of last year: "*Amalgam was guilty*". You will find the complete report by Claudia Peter in the appendix of my article.

You see here Ursula Müller, she is patient no. 4 of my paper. She didn't want to have her picture in the magazine but agreed to pose as a patient. A photographer specially came from the PulsTipp editor's office and took this photo in my practice.

You see part of the face of the patient covered by the Kofferdam, my hands and those of my assistant who holds the Clean Up suction piece. If you look very closely, you can even see the oxygen tube which I now use for all my amalgam patients. They inhale oxygen during the short time of the removal of the amalgam.

Here are the other patients whom I had indicated to Claudia Peter.

Claudia Peter interviewed all these patients and rendered their symptoms and their statements after the amalgam removal in this table.

She chose four of them and described them more in detail.

Please note:

Ursula Müller is patient no. 4, Georg Krattinger patient no. 11, Jeannette Krattinger patient no.71 of my article. Tin Curtins was not yet mentioned there because I have seen him only later. But he is a good example of how even one sole amalgam filling disturbed the health of a very sensitive patient.

The first patient – Ursula Müller – was also very sensitive, had a lot of amalgams, was very, very ill, and today is completely healthy.

The second patient is an example for a man who didn't at all believe that the removal of amalgam could help him. Today, he has completely overcome his strong migraines.

The third patient is the wife of Georg Krattinger. We can see here how the amalgam problem can often occur in even more than one person of the same family.

But what especially and particularly interest me were the two reactions of Prof. Adrian Lussi from the University of Berne and of Prof. Jakob Wirz from the University of Basel in the interview with Claudia Peter.

I am reading from that report:

Prof. Adrian Lussi, amalgam expert at the University of Berne, misses a control group in Engel's study. „An appropriate control would have been a group of patients with amalgam fillings and the same health problems, who refused removal“, he explains. „A comparison of the two groups would have shown whether it was actually the amalgam removal which improved the patient's health“.

I think the method of Prof. Lussi is very complicated. It will be difficult or even impossible to find patients who are really comparable with the patients who wished to have their amalgams removed.

Please mind: I am not at all against the method of Prof. Lussi because he will be forced -like me!- to question the patients, to listen to them, and to **believe** them.

I absolutely admit that my method of comparing individuals „before and after“ the amalgam removal could and should be improved. The whole medical literature, however, is full of direct comparisons "before and after"! It isn't „my way“ at all!

I also admit we should have a more systematic method of questioning the patient, we should perhaps even have more persons, two or three, for that examination, why not even an amalgam advocate?

Let's now go to the statements of Prof. Jakob Wirz.

You know his article in German. It has also been translated into English, French, and Italian.

I will now read to you from the English version. It is in reality rather a lampoon against the amalgam opponents than a scientific article.

He says:

"This list (regarding the chronic poisoning symptoms of mercury) is comprehensive, however exceptionally suitable for journalistic abuse. It includes symptoms such as these:

- **Nervousness**
- **Inability to concentrate**
- **Depression**
- **Headaches**
- **Tiredness**
- **Loss of memory**
- **Insomnia**

- **Nephralgia**
- **Tremor in hands, tongue, jaws.**

Practitioners of alternative and holistic medicine with an eye for business can extend this list in connection with amalgam fillings to include more than 50 serious symptoms. In this manner, almost any clinical syndrome can be traced back to the mercury in amalgam restorations".

Prof. Wirz knows indeed all symptoms a lot of my colleagues and I have found in patients. The only difference which exists between us is: He doesn't believe the patients. Perhaps he didn't question them enough, perhaps he didn't listen enough to them, perhaps he didn't work metalfree. He doesn't believe the patients because

Prof. Jakob Wirz trusts in the scientific literature.

But let's read his statement in the PulsTipp magazine:

"Prof. Wirz of the University of Basel is convinced that the complaints of Engel's patients were mainly caused by their psychic condition and their environment. Amalgam only serves as a scapegoat here, he criticises. It is still the most extensively examined material used in dental medicine."

Either Prof. Wirz doesn't know what a migraine is or he hasn't read my article. I suppose the latter is applicable.

Indeed my paper was published only at the end of that journal, and only the three first pages were rendered. If the reader wished to read the whole text, he had to order it specially from the editor.

And by the possible 4000 readers, only 12 copies were ordered (I know it exactly because I called the editor and asked him).

But what Prof. Wirz certainly did read is the other article about amalgam in the middle of the same issue.

The two authors, Hermann Metzler and Carlo Metzler, have worked very hard studying the scientific amalgam literature. Carlo Metzler is a well-known dentist in Switzerland and his father Hermann Metzler a well-known chemist. In fact, the article of the two authors was estimated by the special science commission of the Swiss Dental Association to be so important that it received even its own photo on the front page of that journal.

On 11 pages, the two authors give a survey of the whole scientific literature on amalgam. Having read and analysed over 80 articles and books (even the article by Vera Stejskal!), Hermann Metzler came to this very astonishing conclusion:

"Mercury delivery by amalgam is significantly smaller than that caused by food. Methyl-mercury from fish is teratogen, mercury isn't, and amalgam is not either at all.

A question the author as a chemist and documentalist asked himself: Why has mercury not yet become an indispensable trace- or oligo-element for life?

The relative slowness of reaction is well known. There could be a deeper reason: Nature can have it more conveniently and easily than with the expensive and heavy mercury."

(Dr. Hermann Metzler, SMfZ 8/1998)

And at the end the authors write:

Acknowledgements

The authors thank Prof. P.Hotz, Berne, Prof. F. Lutz, Zurich, and Prof. J. Wirz, Basle, for their critical review and the precious advice.

I could absolutely not believe that Professor Lutz, who had encouraged me and had made possible the publication of my article in the journal of the Swiss Dental Association, could have agreed with such a view. I sent him and the other two professors the same letter and asked them to express their opinion on that citation of Hermann Metzler.

And here are their answers:

Prof. Hotz didn't answer. He didn't want to express himself either when I sent him, in 1995, the article by Hahn, Vimy and Lorscheider with the sheep experiment.

Prof. Wirz did answer. He wrote:

Dear colleague,

Thank you for your above-mentioned letter, which I would like to answer shortly as follows:

I am not entitled to put into perspective statements of authors of earlier publications even if I have tried then with critical review to interpret misunderstood perceptions in a differentiating manner.

This would also have been the case for your publication if I had been asked. There exists no reason for me to revise my own statements, which I have made regarding this topic in various publications.

Prof. Jakob Wirz

March 12, 2002

And finally Prof. Lutz gave me the following answer:

Dear colleague Engel,

Thank God we are living in the century of "evidence-based dentistry". Things become relative if we consider the fact that evidence in dentistry amounts to only 8%. Therefore, we have to be in doubt about the credibility of many publications. On principle their authors are responsible for the contents of their writings.

In the present case, it is being tried obviously, by mentioning several names, to strengthen the importance of the publication. It is, in fact, true that the persons mentioned co-operated in that paper, however, as editors in charge of the SMJD and not as co-authors.

I hope to have served you with these clarifying statements.

Prof. Dr. Felix Lutz

March 6, 2002

I find his response very remarkable: Should, in fact, in dental medicine only 8% of all published scientific literature be evidence-based?

Did the doctors Carlo and Hermann Metzler, did the professors Wirz and Hotz, and does even the American Dental Association and with it all the professors advocating amalgam in the world overvalue the suspicion that the other 92% could not be evidence-based?

Did they realise that more than 90% of the whole scientific literature on dentistry– also the so often mentioned amalgam literature! – could not really be based on evidence but is more on presumptions?

Ladies and Gentlemen,

I absolutely support the opinion of Dr. John van Limburg Stirum from the Center of Complementary Medicine at Kilchberg in Switzerland, who after the publication of the PulsTipp article wrote to the editors:

"Anger and indignation rise in me when I consider how many happy and healthy people's years are sacrificed owing to dentists maintaining the harmlessness of amalgam".

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I thought I would finish my presentation here, but now I am very sorry to report to you that the statement of Prof. Lutz is the last letter I received from him. As we could read in the newspaper, he passed away with his wife on 10th March past.

I will never forget that in spring of 1998, after I had sent him a first version of my investigations, Prof. Lutz himself encouraged me to make a paper. And he also made possible its publication in the Swiss Journal for Dentistry. To me and many others, he will always be one of the most admired and respected professors. Science and research were his life and that of his beloved wife. Never will we forget them.

Well, I am at the end of my presentation.

Let's summarise:

- I was in my practice
- Patients came and asked me to take away their amalgams
- And I said: Yes!
- I listed the patients
- I listed their symptoms
- I made a few statistics
- I sent them to Vera Stejskal
- That was all!

I thank you for your attention.