Trump's appointments of those who head the FDA, the CDC, the EPA and other powerful regulatory agencies are key early indicators of the potential for broader reform in his new administration. In this issue of Dental Truth, we look at the issues that flow from the regulatory activity of the FDA (drugs and dental materials), the CDC (vaccinations and water fluoridation), the EPA (fluoride, aluminum and other pollutants) and the FCC (cell antennas, radiation safety issues). Clifford Carnicom (right) reports on his own measurements of air quality and how he found much higher levels of air particulates on days when the skies had been sprayed by aircraft flying overhead. Which raises the question: is the EPA's way of doing air quality reporting covering up a covert government program?

A ground water safety engineer who has actually worked at the EPA for many years, Michael Evans, has been recently fired at the EPA for raising questions about the wisdom of water fluoridation, which uses hazardous industrial fluoride wastes. Evans also commented on one occasion about the wisdom of the massive aerosol spraying of aluminum into our skies. Since being fired in December he has gone much more public about how he was treated for doing his job, and about massive corruption in the agency. More on aluminum spraying, see back page.
Lawsuit Against FDA Dismissed Based on Standing

By Leo Cashman

The lawsuit against the Food and Drug Administration (FDA) over its 2009 Rule on Dental Amalgam Mercury received a setback on July 1st, 2016, when Judge James Boasberg ruled that the suit is dismissed based on the supposed failure of the Plaintiffs to show “constitutional standing.” The Plaintiffs in the matter were IAOMT, DAMS, other organizations and some individuals. The issue of “standing” in a civil suit is a technicality, but it is an important technicality. Unless the plaintiffs can show “standing” the whole case is dismissed early on, without the case ever getting into the substantive issues of the case. In order to establish “standing” in the case, the plaintiffs have to show that one or more of the plaintiffs will be affected by the judge’s ruling on the complaint. In this case, that would be to show that the FDA’s rule impacted the organizations adversely or does and will impact an individual plaintiff’s health, well-being or other personal circumstances. In the matter of standing, it does not matter how badly the FDA’s rule harmed the plaintiff in the past. All that matters is that the FDA’s rule can harm the plaintiff in the future and so the plaintiff’s personal circumstances have to be looked at carefully. Judge Boasberg dismissed the lawsuit without prejudice, meaning that the plaintiffs can come back and with a similar lawsuit that seeks to overcome his dismissal. Attorneys for the Plaintiffs are working on overcoming the standing issue and on also providing additional scientific information for the court to consider.
Anti-mercury leaders and activists are cautiously celebrating what appears to be a step forward in curbing the use of dental amalgam fillings in Europe. The expectation is that beginning on July 1, 2018, that use of dental (mercury) amalgam fillings in pregnant women, nursing women, and children under the age of 15 will be banned throughout the European Union (EU). This is following a meeting of three important EU institutions – the European Commission, the EU Council and the European Parliament – in which they all agreed to recommend this ban to the entire EU.

The EU, taken as a whole, represents 28 countries having a population, in total, of more than a half a billion people; and, taken as a whole, the EU would constitute the largest user of mercury amalgam fillings in the world. The impending move to protect the most vulnerable members of the population – pregnant women (and their unborn babies) and children – fuels a conviction among activists there that momentum is building for more progress toward stopping the use of amalgam fillings throughout Europe. Marie Grosman, a leader of the French group Non-au-Mercury-Dentaire, writes “Dentists once heavily used amalgam, but are abandoning it in droves, with several states either disallowing it (for example Sweden) or reducing it to less than 5% of all dental fillings (for example Finland, Denmark and the Netherlands).” Another activist, Genon Jenson, writes “We must first protect those most vulnerable to mercury’s neurotoxicity – the developing brains of children, babies and fetuses. Several nations such as Germany, the UK and Poland, have already announced that they don’t use, or that dentists should not use, amalgam for children or pregnant women.”

Evidence of Harm Documentary on Mercury Amalgam Hazards Now Available on DVD

The documentary film Evidence of Harm, produced by Randall Moore, is now available on DVD from DAMS. Please call DAMS in order to order one or more copies of this path breaking DVD. It features scientist Boyd Haley, patient Stacy Case, dental assistant Karen Burns and holistic dentist Matthew Young, and many others who are heroes in the ongoing saga of truth versus cover-up, See page 22 of this newsletter for ordering information.

DAMS is also offering the book the Toxic Teeth, by Robert Kulazc, DDS, and Thomas Levy, MD, on special at $20.00 plus shipping. The book gives an in-depth discussion of the hazards of root canal treated teeth, documenting the strong links to health problems.

New on our list of offerings is a DVD by researcher/educator Dane Wigington on Climate Engineer- ing and Weather Warfare. Wigington unveils the truth about one of the most covered up programs that is affecting our health and the key one that is affecting the skies, the weather and the entire planet. Recommended for all who care about their health or mother earth.

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By Leo Cashman
New Recommendations Aim for Safer Amalgam Removal
New Protocol is Known as SMART

An academy for “biological” dentists has updated its recommendations for safe removal of mercury amalgam fillings, in order to better assure the safety and protection of the patients and dental personnel. The International Academy of Oral Medicine and Toxicology, (IAOMT), published the new amalgam removal protocol on December 6, 2016. It also gave a new name to the revised protocol; it is now called the Safe Mercury Amalgam Removal Technique (SMART) and a training course for its members has been established. Those dentists who complete the training are then designated as being “SMART certified.”

The new protocol includes most of what has been given by the protocol in the past. But investigations done by its own scientists and dentists convinced the academy that there were some additional protections that should be added to its protocol. One of these was the problem of amalgam particle “splatter” that can emanate from the patient’s mouth during removal of old amalgam fillings. In order to address this, one of the recommendations now says “Protective gowns and covers for the dentist, dental personnel and the patient should be in place.” Another guideline says “In order to protect the patient’s skin and clothing, a full body, impermeable barrier, as well as a full head, face and neck barrier under/around the dam, should be used.” Once the amalgam mercury work is done, the guidelines call for “…proper handling, cleaning and/or disposal of mercury contaminated…. clothing, equipment, surfaces in the room, and flooring in the office.”

A complete description of the new SMART protocol is given on its web site at https://iaomt/safe-removal-amalgam-fillings/. The academy also offers a video of these recommendations at the web site www.thesmartchoice.com.
Concerned about Heavy Metal Toxicity?

Protect Your Health
Ask Your Dentist to Become SMART Certified

www.theSMARTchoice.com
EPA Mercury Amalgam Separator Rule - A Sweetheart Deal?  What will Trump’s EPA Do?

By Leo Cashman

A fter dragging its feet for decades, on December 15, 2016, the US Environmental Protection Agency (EPA) finally adopted its “final rule” on the important subject of cleaning dental amalgam waste water before the waste water is discharged into the sewage treatment systems. In the past, dental offices have been a major contributor of mercury discharges into the waste water treatment systems and, while some 13 states and 20 towns or cities have required amalgam “separators” to be installed in dental offices, most states and cities have not mandated use of the separators, and most dental clinics have not yet installed them. Now, under the new rule, EPA requires that all dental offices in the US must have amalgam separators operating at 99% efficiency or better, by early in the year 2020.

Over many years the American Dental Association (ADA) and its state chapters have claimed to be in favor of protecting the environment from mercury, but the ADA has always staunchly opposed the mandatory requirement of amalgam separators in states and cities. Now environmentalists have a victory of sorts, but disappointment with EPA and its rule linger because the new rule does not have the tougher enforcement of the mandate that environmentalists had been lobbying for. The problem is that the EPA’s rule does not require wastewater treatment facilities to monitor and report on the 100,000 or so dental offices in the US and neither will it require the EPA itself to do ongoing monitoring of all the dental offices. Rather, the EPA will only need to receive a one-time certification from the dental offices indicating that an amalgam separator has been installed. Costs of amalgam separators vary according to size, capacity and features, but the average separator system costs about $800 dollars. If monitoring and enforcement is lax, the concern is that some dental offices will backslide on continuing to use and maintain the systems and on proper disposal of the amalgam wastes. The dental office has to follow through in seeing that the captured amalgam is recycled or otherwise properly disposed of.

Non-profits such as DAMS and the academies for holistic, biological dentists also want the deeper solution. We want dental amalgam mercury to be entirely banned from dentistry. That would produce great health payoffs for dental patients and for the dental personnel who faces the hazards of working with mercury, and also eliminate, over time, the hazard that dental mercury poses to the environment. As in every other industry, the ultimate solution to the many mercury hazards is to stop the use of mercury in dentistry.

2017 update #1: EPA’s New Amalgam Separator Rule Frozen by Trump Executive Order

In an executive order issued on January 20th, the first day of his presidency, President Donald Trump issued an executive order freezing all new federal regulations for sixty days, giving his administration time to review each of them to decide if any are unduly burdensome to the industry being regulated. Since the amalgam separator rule had been finalized as of December 15 but not yet published as of January 20th, it was included in the Trump executive order freeze.

2017 update #2: Trump Picks EPA Critic Scott Pruitt as Head of the EPA

During the election campaign, Donald Trump threatened to greatly shrink the EPA and even to “dismantle it.” Now Trump’s pick to head the EPA may be the perfect man to do it. As Oklahoma’s attorney general, Scott Pruitt worked harder to fight the EPA and its enforcement of environmental rules than he did to protect the air, water and soil of Oklahoma. He closely followed the agenda of oil, gas and big agribusiness interests. In 2011 he challenged an EPA rule to limit mercury and other pollutants coming from power plants. In 2013 his re-election campaign committee was co-chaired by the CEO of one of Oklahoma’s big oil and gas companies. Monsanto was another big backer of his. So, we may not see Trump’s EPA chief to bring in a culture of reform at the EPA.
Although there are no real glitches or problems, the detoxification product that was sold as OSR until the year 2010 is still not approved yet as a drug. Perhaps partly because of the high level of respect for its inventor, Boyd Haley, PhD, the product was widely used as an anti-oxidant and a booster of glutathione, the body’s main heavy metal detoxification substance. But the product itself was a chelation molecule, having the shape of a claw, ready to grab a mercury atom, hang onto it and render it harmless. In year 2010, the US Food and Drug Administration (FDA) threatened to shut down the company making it unless it took the product off of the market and went through FDA’s drug approval process. Today, about six and a half years later, it is still working to finish the approval process.

Meanwhile, the company itself has changed, the product name has changed, and it has a new web site to keep the interested public posted on new developments. Now the company is named EmeraMed Limited. While the chemical name goes by the acronym NBMI, it has been given the generic name Emeramide, and the drug’s trade name is Irminix. Efficacy trials in Ecuador, where it was tested on mercury poisoned gold miners, have gone well, and further testing has been under way in 2016. The product’s “drug claim” is that it is effective in treating mercury poisoning. But the drug may also be effective in treating other problems and it is being tested for efficacy in treating lead toxicity and for chronic obstructive pulmonary disease (COPD). A key feature of the substance is that it is fat soluble and so passes through organ membranes, cell membranes, the blood-brain barrier and gets to where mercury and other toxic metals are most heavily concentrated.

The company’s web site is www.EmeraMed.com and this is the best source for updates on the timeline for product availability. Also, the web site is a source of information for those who wish to inquire about “early access” for possible “compassionate use” of the product before its final market approval is granted. Early access is not widely available but may be granted in case a physician is willing to request approval for it for a patient whose condition is deemed to be serious and for whom other efficient and safe treatments are unavailable.
Hamburg Out, Califf in as Head of Obama’s FDA

Who will Donald Trump Pick Now?

By Leo Cashman

FDA Commissioner Dr. Margaret Hamburg, relentlessly dogged by questions about conflicts of interest, resigned as commissioner, after serving since 2009 when she led the FDA during its much criticized dental amalgam mercury rule. Dr. Robert Califf was appointed by President Obama, an appointment which was immediately criticized because of Califf’s “extreme pharma links” because of his long career in helping big pharma companies market their products.

Margaret Hamburg, M.D.

Margaret Hamburg had served on the Board of Directors of Henry Schein, Inc., a major distributor of medical and dental products worldwide, and America’s biggest distributor of dental amalgam mercury fillings. It is estimated that she had received several million dollars from Henry Schein Inc., just for showing up at its board meetings once in a while. Despite her conflict of interest, Hamburg participated in shaping FDA’s amalgam rule, a rule that whitewashed all scientific concerns about the hazards of dental amalgam mercury fillings and which did not put mercury amalgams into the Category III, reserved for the “most hazardous” materials and which would have required a proof of the amalgam’s safety. During her tenure, Hamburg loosened conflict of interest rules governing who can serve on FDA expert advisory panels. Charges of corruption follow her even now, as she has been named as one of the defendants in the lawsuit against Hamburg, her husband and Johnson & Johnson Company, the company that makes the controversial drug Levaquin. The lawsuit charges that Hamburg’s husband’s hedge fund company profited immensely from its massive investment in Johnson & Johnson while, as FDA head, his wife “operated a criminal conspiracy ... to fraudulently suppress warnings about the devastating effects of Levaquin.” Levaquin is a highly risky drug that has carried an FDA black box warning; but critics say that Levaquin, a fluorinated drug, should actually have been banned a long time ago. The suit charges that over 5,000 people died as a result of Hamburg’s conspiracy cover-up of Levaquin’s hazards.

Meanwhile, President Barack Obama’s new FDA Commissioner looks like he will be equally cozy with big pharma. Dr. Califf has received grant support from Johnson & Johnson, Novartis, Lilly, Merck, and Schering Plough. He has received consulting fees from most of these and a dozen others and has financial links and equity positions in four medical companies.

2017 Update:

President Trump said to be Weighing New FDA Commissioner Choices

Jim O’Neil, a managing director at a Silicon Valley venture capital firm, is being considered to head the Food and Drug Administration. Being neither a physician nor a scientist, Jim O’Neil is more seen as playing a role in investing in biotech and medical tech companies, although he has served a stint within the Department of Health and Human Services (HHS) eventually working his way up to being principal associate deputy director there where he “advised the HHS secretary on all areas of policy” according to his LinkedIn page. O’Neil works at the venture capital firm Mithral Capital Investment, which was co-founded by Silicon Valley billionaire Peter Thiel, founder of PayPal, which he later sold to eBay for over $1 billion, and who has been a major funder of Trump’s campaign and a member of his transition team. O’Neil formerly was manager of Peter Thiel’s Thiel Foundation, and he is being strongly promoted to Trump by Thiel as being a suitable appointee for FDA Commissioner. O’Neil would like to see easier approval of drugs by the FDA and has said, in a libertarian vein, “Let people start using them [drugs], at their own risk.”

Scott Gottlieb, MD, is also mentioned as a possible Trump choice for FDA Commissioner. He is seen as having even more intimate ties with the FDA and with big pharma. Gottlieb would also like to grease the pathway for easier approval by FDA of new drugs. From 2005 to 2007, Gottlieb worked at FDA as its Deputy Commissioner of Medical and Scientific Affairs. He is currently a venture partner at New Enterprise Associates and is a member of the product investment board of drug company giant GlaxoSmithKline. He frequently writes for Wall Street Journal and Forbes on health care.
Manual Lymphatic Drainage
By Linda Cifelli

The lymph system, along with the spleen, thymus gland, and bone marrow, are the major parts of our immune system. The lymph system consists of lymph vessels and 600 to 700 lymph nodes. Lymph nodes vary from pinhead to olive size. Many are clustered like grapes and about thirty percent of them are at or around the neck.

Manual lymphatic drainage is a specialized form of body work where an artful therapist uses hands-on techniques to facilitate breaking up of congestion or sluggishness in the lymph system. Repetitive light touch at lymph node sites and light stroke techniques in organized sequences along lymph vessels are the main methods used. Lymph drainage is great to promote wellness. It is very relaxing and it often reduces pain. However, there are some contraindications, that is, there are conditions with which it should not be used. For example, it is not to be used when seizures, cardiac arrhythmias, or persistent digestive problems are present.

Linda Cifelli, RN, and is qualified to do manual lymphatic drainage in Virginia. She used it as a part of her detoxification program in recovering from mercury poisoning.
From the Hemp Plant, CBD Can Help Control Pain, Bring Calm and Relaxation, Promote Healing

By Leo Cashman

The cannabis plant has been best known for its marijuana variety, the variety that can offer relief from pain but that can also make the user "high." But another variety of cannabis, hemp, is an industrial powerhouse and, now we are learning, offers one of nature’s great gifts for health and healing. Hemp is a tall and sturdy variety and the fiber in the stalks of hemp is useful for making rope, paper, clothing and hundreds of other applications. Hemp seeds are now a popular health food, with the seeds being high in protein. But before you throw the leaves and stems of hemp into a compost heap, consider tapping into the natural substance called CBD that is found there, and that offers an amazing array of health and healing benefits.

At the September joint meeting of IABDM and IAOMT, author/holistic physician Dr. Frank Shallenberger, MD, spoke on the wonders of the cannabis plant, the differences between its marijuana and hemp varieties, and growing excitement for natural health over CBD, a substance that is derived from the leaves of hemp.

Probably the oldest plant ever cultivated, cannabis was grown in Taiwan as far back as 10,000 years ago. But different varieties of cannabis were selectively developed over the millennia, having very different biologically active substances called “cannabinols” or, sometimes, “cannabinoids.” Early on there was a tall, sturdy variety which had strong fiber was developed for making rope, fabrics and also foods and oils. That variety was developed into what we now call hemp and it has been commercially valuable over the millennia. Another variety was developed for its psychoactive properties and it was bred selectively for medical and religious purposes; that variety is what we call marijuana. In contrast to the hemp, the marijuana variety contains generous amounts of THC, a cannabinoid that is responsible for giving a marijuana user a “high.” Hemp plants, while they have virtually no THC, have substantial amounts of another important cannabinoid, CBD. CBD has been found to have many natural health uses including pain relief, calming down inflammation and balancing the immune system. It has no side effects and, unlike its cousin found in the marijuana plant, does not produce a "high." CBD is simply safe.

Perhaps surprisingly, the human body has natural receptors for both the THC found in marijuana leaves and the CBD found in hemp leaves. In fact, there are two types of receptors: CB1, found in the brain and the central nervous system and CB2, which is mainly a receptor the immune system. Why would the human body have receptors for substances that are made not in the body but, rather, in a plant? In turns out, as discovered in 1995, the human body does make its own hormones, called “endocannabinoids,” that signal the CB1 and CB2, thus explaining their importance.

One of the most important of these endocannabinoids is called anandamide, which has been called “the bliss hormone.” This natural, calming hormone is found in breast milk, and is also produced naturally by running and bicycling. It is what produces the “runner’s high.” Ordinary foods can help boost our levels of CBD and its healing benefits, but the amounts of CBD are much less than what can be found in a spray, tincture or other product that delivers CBD. So, the excitement centers around the potential uses of CBD in order to reap its wide range of benefits. Both THC and CBD can act on the receptors to decrease inflammation, pain tension and anxiety and to stimulate the immune system and increase energy levels. Benefits have been found in such different diseases and conditions as: insomnia, anxiety, depression, seizures, Parkinson’s disease, migraines, osteoporosis, Crohn’s disease, multiple sclerosis, cancer and more. It seems like CBD would be a helpful addition for anyone on the pathway of detoxification, overcoming the demons that come with mercury toxicity, and recovering health.

Cancer may be helped by THC and CBD in many ways, according to published science. Benefits are that they 1) decrease inflammation, 2) stimulate the immune system, which is our natural protector against cancer, 3) inhibit angiogenesis, the process of building more blood vessels in order to spread the cancer 4)
inhibit tumor cell growth and promote the death (apoptosis) of the tumor cells. Both THC and CBD have been found to have benefits for many types of cancer and, importantly, they don’t seem to have harmful effects on healthy cells. In most applications, just the CBD is used since CBD doesn’t get the patient “high”; it is not legal to grow hemp in the United States (weird but true—Canada certainly grows it), but hemp products, including CBD, are legal in all 50 states.

Quality and absorption are issues that were discussed in some detail by Dr. Shallenberger. For success, it is important to have a reputable source in order to make sure that a CBD supplement is of high quality and well absorbed. He says that uptake of CBD is 83% with vaping and smoking, but only 8% with oral supplementation unless it is “oral nano” delivery, which is 80% absorbed. He recommends the “oral nano” system of delivery, meaning an encapsulation of the CBD in tiny phospholipid capsules that the patient sprays into his mouth in an oral spray.

By Bobbie Roy

In 1974 at the age of 21, I became ill with mercury poisoning from my dental fillings. I suffered through years and years of horrendous, progressively worsening symptoms. The cause of my sickness remained a mystery until 1991, when I discovered mercury is used in amalgam dental fillings. After having this poison removed from my mouth, I slowly and steadily started to regain my health. It took a long time, but finally I began to feel like a somewhat healthy person. I survived a grim decades-long health crisis and felt cautiously optimistic about the future. That optimism was shattered when a smart meter was installed on my home.

Twenty-five years ago DAMS had provided me with priceless, life-altering information concerning mercury fillings. Just a few years ago DAMS did the same with smart meters, alerting me to the grave health problems associated with them.

In September 2011, a smart meter was installed on the side of our house by Idaho Power Company. The consequence of this action to my life and health has been a horrifying nightmare. About two weeks after this installation, a high-pitched buzz started in my ears and it has been there constantly since. There is no relief found from it — it is incessant. Never before in my life did I have problems with buzzing in my ears. I feel like I’ve been plugged in.

Several months later, I noticed a weakness, tremor and reduced dexterity in my right hand. My right arm became slow and stiff with restricted range of motion. My right leg developed tremors and now drags when I walk. I did some research on Parkinson’s and learned the disease usually starts on one side of the body first then eventually the other side is affected. Recently, the left side of my body is beginning to show the same symptoms. When I stand still my whole body shakes and trembles. Smart meters are known to cause Parkinson’s disease.

I have almost no stamina or vitality, and have depression, profound weakness and fatigue, digestive problems, reduced mental capacity, headaches, disorientation, screaming nightmares, irritability, muscle cramps, palpitations and feel off balance. My mouth and tongue don’t function like they should. My contacts need to be cleaned three times as often as before because mucous accumulation clouds my vision. I’ve aged twenty years in the past four.

Smart meters cause inflammation in the body. Inflammation assaulted my feet after the meter was installed and within a few months they became so excruciatingly painful I could barely walk. I can’t even stand to wear socks. It started on the soles of my feet as a sore, burning feeling and quickly progressed to an awful pain that felt like the bottoms had been beaten with a club and then

Continued on page 12
torched. If I wanted to get from here to there, I had to walk on them — pure torture. Next, it moved up and deeper into my feet, affecting muscles, tendons and joints. One of my ankles has swollen, red, bruised areas on it. The thought of being unable to walk terrifies and depresses me beyond words. In a brief span of a few months, I went from walking with absolutely no pain to becoming almost totally crippled. I was appalled what had happened to me in such a short amount of time.

Dietrich Klinghardt MD, PhD, made a video titled Smart Meters & EMR: The Health Crisis of Our Time. He recommends the tonic mushrooms shiitake, maitake, reishi as a treatment for electromagnetic radiation exposure. I began taking them, hoping they would help my feet. They did — almost immediately. I am also taking a lot of enzymes to control inflammation. My feet are by no means back to normal, but these two remedies have allowed me to keep walking without crippling pain.

Close to six months after the installation of our smart meter, I made the first call to Idaho Power to inform them of the problems I was having and to request my analog meter back. Their emphatic and callous response was that under no circumstances would my analog be returned. When I contacted Idaho Power again a couple months later to make another appeal for my analog to be brought back, it was an exact repeat of the first failed attempt. Next, my doctor wrote a letter saying that an analog meter should be returned to me for health reasons. In my final phone call to Idaho Power, I told them about my physician’s recommendation and letter; but it made no impression whatsoever. I commented it was a sad state of affairs when a health professional’s confirmation means nothing. I asked the rep if forcing these meters on everybody, whether they wanted them or not, is a moral way for his company to conduct business. Hostile, he threatened to shut our power off.

My condition was getting worse and I knew it would continue to worsen and it has. To find some answers, I did research on the internet and talked to a lot of people on the phone. Everything I read and everyone I spoke with advised shielding and filters as the best solutions. I put up metal shielding and plugged in outlet filters and was very discouraged and disheartened with the minimal improvement. A few months later I found out our power company is using a TWACS power line communication system with a wired meter. Unfortunately, in this situation, shielding and filters don’t help much.

Idaho Power insists the TWACS system they are using transmits signals over the power lines for only a couple of seconds a few times a day and is completely safe compared to wireless meters. This is totally false. It actually transmits signals 24/7, creating harmful radio-frequency radiation on the wiring throughout the house.

Every time I spoke with someone at Idaho Power, they falsely stated that the system is safe and does not transmit continuously. Their system uses unshielded power lines to carry data communication which they were never intended to do and turns the power lines and inside wiring of the house into antennas, creating unsafe, unhealthy, dirty electricity. Idaho Power tried to lull me into submission with their assuring, persuasive lies and make me believe it was pure fantasy on your part to even consider my health problems might be connected. Ridicule and a condescending attitude were heaped on for good measure.

My home, which is supposed to be a soothing sanctuary, has been turned into an electrified, toxic environment that is almost uninhabitable for me. After all the time, effort and money I have invested in trying to figure this out and the disappointment, despair and heartache I have endured, I am no closer to finding a solution to this unbelievable nightmare than I was when I started. The overwhelmingly depressing and enraging reality is there seems to be only two answers: either disconnect entirely form the grid and find an alternate source of power, or move.

What kind of choice is that for someone with limited financial resources, a house that has been paid off, who is no longer young, and who has been damaged by this technology? Both of these options seem like insurmountable hardships. Every day I am consumed with the thought “what am I supposed to do to survive this onslaught?”

To the irresponsible, immoral and ruthless group in charge of enforcing this never-tested-for-safety catastrophe, we are not even real, live people, but rather just commodities to be manipulated in order to improve their bottom line, no matter what the human cost is in suffering, misery and ruin. They could not care less about our well-being or whether we even live or die. It has been heartbreaking and gut-wrenchingly awful to try and cope with the absolute hell my life has become since this smart meter was shoved down my throat.

To try and overcome the sickness caused by my mercury fillings...
only to be struck down by this wretched meter and its dangerous technology is unbearable.

Bobbie Roy is a longtime DAMS member who lives in Idaho. We asked her to write her story about this after talking to her on the phone about her desperate situation. The web site www.eiwellspring.org is a good source of information, she says, about both wireless smart meters and wired smart meters that use power lines for communication. Similar problems are happening to many, many other people.

Wi-Fi’s Health Effects  Why to Stay Wired

By Leo Cashman

A compilation of over 100 scientific studies on health effects of Wi-Fi (the wireless way of getting your internet connection) has been put together by Kevin Mottus of the California Brain Tumor Association. The report is 73 pages long and gives studies describing the effects of Wi-Fi on the brain (tumors), the eyes (cataracts), fertility, reproduction, pregnancy, DNA damage, the heart, hormones and much more. We thank Andre Fauteux, a Canadian building biologist, who sent the report to DAMS. We can't print 73 pages of scientific summaries here, but Andre gives the following tips:

To reduce exposure, use ethernet connection (a wired internet connection, probably coming in through your wired telephone landline) as your preferred connection method; the wired Ethernet connection is also faster and more secure. If you must use Wi-Fi, use it as little as possible, turn it off – turn the router off - when not in use. And don't spend a lot of time close to one. Wireless devices should be in airplane mode when not using the internet, and devices should be set on a table and not on your lap or in your hand during use. If watching a movie, download it and then turn on airplane mode before watching. Don't keep devices in your pocket or elsewhere next to your body.

Martin Blank, PhD, a physical chemist and one of the world's leading scientists on the biological effects of electromagnetic fields, talked in an interview about the effects of Wi-Fi on children in the schools. He said “There are limited things you can accomplish, but I think one of those is to protect the children. The children are most vulnerable. They are the ones that are going to suffer the most, especially with this push to do so under the guise of good education. ...I think the introduction of Wi-Fi in schools is sinful. It’s criminal. Good education doesn’t need this. There are ways to bring these programs in without this technology. Generations have actually learned better without this. There’s absolutely no need to have children sit there with this exposure for however many hours they keep it on. They could bring in the programs by cables [wired, not wireless], or books, but they don’t need Wi-Fi. I think children are going to succumb to this in larger numbers, and we’re going to see a higher incidence among children of things like brain cancer. It’s not high yet, but I think it’s going to get much higher.”
Focus: Federal Communications Commission

By Leo Cashman

Americal first! While all other countries of the world are exercising caution before approval of the build-out of the newly invented 5G (5th generation) of cell phone – cell antenna technology, the US Federal Communications Commission (FCC) rushed ahead with its approval of the build-out of the technology. In its rush to act, the FCC was led by Obama appointee Tom Wheeler, a former lobbyist for the CTIA, a wireless industry association. While critics have long criticized the FCC for setting RF radiation standards that are ridiculously unprotective of health, they now fear that the epidemic of heart palpitations, rashes, dementia, and neurological damage will continue to grow, with children, the elderly, and other vulnerable parts of the population being especially at risk.

As Obama’s FCC Chairman Wheeler himself has said, the new 5G technology will require a “vast infrastructure that will require the massive deployment of small cell antennas.” Instead of having the 300,000 cell towers/ cell antennas that America has now, 5G will require the building of more like five million 5G transmitting antennas, that will be smaller, harder to notice and just about everywhere. In fact, 5G antennas will be closer to where people walk and cars drive, hanging on streetlamps and power line poles, perhaps two on an average block or “every twelve houses” in many towns and neighborhoods. They will not be just near shopping malls, they will be inside shopping malls and inside larger office buildings. Health conscious people, wanting to avoid the hazard of relentless 5G radiation, will simply have fewer and fewer places to go. And electrically sensitive people, which there will be more and more of, will have in their protective homes, like in a bunker, unable to venture out into the neighborhood for exercise, sun, and activities of a normal life. Critics also note that the pervasive 5G network will involve far more than cell phone communication: it will be a key to ushering in self-driving cars, and to communicating with all sorts of “smart” appliances and chipped devices in the home. As Wheeler himself has admitted, it is expected that the 5G system will be tied into satellite communication (and drones?) and military systems, suggesting that 5G will provide an advance an agenda of surveillance and invasion of privacy, on top of the harm to health.

One critic, Dafna Tachover, is an attorney and CEO for a group called We Are the Evidence, that speaks out for the human rights of the victims of EMF poisoning as caused by all-pervasive Wi-Fi and smart meters. She has described the behavior of Tom Wheeler’s FCC’s as being “based on lies” and “evil, pure evil.” In an interview with Josh del Sol, of Take Back your Power it was claimed that Tom Wheeler was appointed as FCC Commissioner just a month after $700,000 in wireless industry contributions went to President Obama’s campaign committee.

2017 Update

President Trump appoints Agit Pai. One of the most avid wireless industry supporters on Wheeler’s FCC Commission was Agit Pai, a former Verizon attorney and lobbyist. Pai was appointed by President Barack Obama in 2012 at the recommendation of republican senate minority leader Mitch McConnell. Now Agit Pai has been picked by President Trump as the new chair of the FCC, replacing Wheeler. In presiding over his first open FCC meeting, Mr. Pai announced the formation of a new federal broadband committee to identify barriers to infrastructure deployment and make recommendations to remove those local barriers. The new committee will work to revise pole attachment rules and identify ways to encourage cities to adopt “deployment-friendly” policies. Clearly, Agit’s FCC wants to use money and other incentives to weaken all local zoning opposition to the massive 5G rollout.

Dafna Tachover

“Bad Things happen when people are silent.”
FBI Sleuth Discovers that Fluoride was Her Poison

By Leo Cashman

Melissa Gardner, worked an investigator for the FBI, but for 15 years of her adult life, she had tantalizing clues, but no clear answers, as to what it was about living in the USA that caused her acne. She talked about her own health puzzle in an interview by Dr. Karen Becker of Healthy Pets com. Her story really begins with her childhood; since her family's water came from a well, her dentist prescribed fluoride pills while she was growing up. She didn’t realize it at the time, but the sodium fluoride pills – quite toxic – caused her to develop a sensitivity to fluoride. While attending Georgetown School of Foreign Service, she spent some time studying abroad in West Africa. Although she had had severe cystic acne while in the USA, the acne disappeared while she studied abroad in West Africa. The acne would always return after she came back to live in the United States. When she went abroad to work in Scotland and Tunisia, the acne disappeared. But within two days of returning to the United States, her cystic acne was back. What was it in the United States that was causing her cystic acne? One factor that she investigated was the fact that in the US, 70% of the water supply in fluoridated and this creates a pervasive fluoride exposure for most living here. She found that she was highly sensitive to fluoride in toothpaste and other sources. After writing an e-guide about fluoride and cystic acne, she heard from many others who had the same problem! She has written a book entitled The End of Acne How Water is the Cause of the Modern Acne Epidemic, and the Cure.

But Melissa Gardner found that fluoride's health effects go far beyond acne. Melissa took an interest in the considerable amount of fluoride is left as a residue in commercially raised food that have been sprayed with cryolite, which is a sodium aluminum fluoride compound that is sprayed as a pesticide on the grapes in the San Joaquin Valley in California. Pet owners have learned that feeding dogs and other pets raisins is harmful because their dogs develop kidney disease after eating grapes or raisins. In the 1980s, the Environmental Protection Agency, EPA, approved the use of cryolite as a pesticide and by 1989, veterinarians were reporting kidney failures in dogs. Melissa’s research confirmed that the kidney failure was due to fluoride poisoning from cryolite residues. The dogs were being fed grapes and raisins as tasty rewards when they were being trained. Dog owners and trainers learned to stop using the commercially grown grapes, sprayed with cryolite, and raisins as rewards in training their dogs.

There are actually many reports of animals and people being harmed and poisoned by fluoride in the food, in dental treatments, from water fluoridation and from fluoride pills that dentists sometimes prescribe for children who are not drinking fluoridated water. In a previous issue of Dental Truth, we interviewed a Colorado rancher named Cathy Justus and learned how her horses were poisoned simply by drinking the fluoridated water that came from the nearby town's fluoridated water supply. All of her horses were harmed with dental fluorosis, arthritis, lameness, reproductive problems, and they had a bad “attitude.” Some of them died. Some of her dogs died, too. But Cathy Justus was a good sleuth, too, and figured out that it was the fluoride in the town’s fluoridated water that was plunging her horses into the health nightmare. Slowly, many of them recovered once the aroused and informed citizens forced the city to halt its fluoridation of the tap water. The story of Cathy Justus and her horses is told on the DVD under the title Poisoned Horses, available from DAMS.

Children have also been sometimes poisoned by fluoride through fluoride in food, toothpaste and other sources, and parents ought to be careful about putting raisins, grapes or grape juice into their school children's lunch box, especially if those fruits are commercially grown.

The end coming for fluoride tablets?

Finally, the FDA has actually cracked down on fluoride tablet, sending a very stern warning letter to Kirkman Labs, a manufacturer of sodium fluoride (a deadly poison) tablets for children. ! Where were the watchdogs at the FDA while, for decades, Kirkman Laboratories and other manufacturers sold sodium fluoride tablets, for the supposedly purpose of helping prevent tooth decay in children. The use of this poison, sodium fluoride, for a health claim makes it a “drug” but it was an unapproved drug because the FDA had never approved the use of sodium fluoride as being safe or effective. (We know that it has no benefit and its main effects are to harm teeth, lower intelligence and
Fluoride, a Poison  continued from page 15

harm overall health.) But earlier in 2016, the FDA finally cracked down on this sweetener-coated poison for kids. On January 13, 2016, the FDA sent Kirkman Labs a WARNING LETTER, warning of UNAPPROVED NEW DRUG VIOLATIONS, listing four “drugs” that Kirkman is selling, all of which contain varying amount of sodium fluoride, labeled in all cases “for once daily, self-administered, systemic use as an aid in dental caries prevention.”

Susan Kreider (above) Has Died

A longtime activist who sought to warn the public about toxic dentistry and medicine, Susan Kreider died in November 2016. Frail and using a cane, she came to realize that she was severely vaccine injured by a series of Hepatitis B shots in 1991, required for her work as a nurse. But she further realized that she had been poisoned by getting 14 amalgam fillings back in the 1980s and six porcelain-nickel crowns. Susan once wrote to a newspaper, “Please, please continue to uncover the dirty dealings of the pharmaceutical and dental industries. The future of our children is threatened, with increases in “auto-immune” diseases such as autism, diabetes, asthma, and ADHD ....they are sicker than ever. Wouldn’t we love to see a research study about the degree of heavy metal toxicity in our most violent criminals?”

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- Shingles (Herpes Zoster)... And Much More!
VAXXED Film Ties MMR Shot, Vaccine Mercury To Autism

By Jane Dolan and Leo Cashman

Ultimately, the cover-up of the connection of vaccines to autism is doomed to fail because of one stubborn reason: the parents. It was the parents who knew the truth, that there was something about the vaccination program that took their normal, healthy, functional child backwards into a world of social isolation, gut pain and digestive problems, the difficult world of autism. It was a mother, Sallie Bernard, a New Jersey mother of an autistic boy, who pounced on the stupidity of the heavy use of Thimerosal, a highly toxic mercury compound used in many of the mandated childhood vaccines. Her activism led to a groundswell of questions and demands first in her state, and then nationwide. Some members of the US Congress do have integrity and have listened to the parents. One of them was Representative Dan Burton from Indiana, grandfather of a severely vaccine injured, autistic boy named Christian, who’d had seven shots in one doctor’s visit. Under strong prodding by such Congressional leaders, the Food and Drug Administration (FDA) ordered a phase-out of Thimerosal in all of the mandated childhood vaccines. FDA’s order came in July 7, 1999, near the end of a decade that had seen a shameful ten-fold increase in autism all around America – and this was according to the US Department of Education’s own data.

It was parents in England who noticed the severe bowel disorders of their children following the vaccination of their children by the MMR (measles, mumps and rubella) vaccine that led to the famous article on February 28, 1998 in the British journal, Lancet. One of the gastro-intestinal doctors who listened and learned from the mothers was Andrew Wakefield, MD, and he was one of 13 authors of the landmark study in Lancet that reported a stunning observation: the measles virus had been detected in the inflamed GI tracts of children who had developed neurological symptoms and autism following the MMR vaccine. The study, while not-anti-vaccination, raised a serious question about the MMR vaccine, asking whether the MMR vaccine had played a role in causing “a new syndrome of autism and bowel disorder” in those children. The medical and public health establishment attacked Wakefield and other authors of the Lancet article as villains, demanding retraction of the article and accusing them of attacking the vaccination program and even the health and welfare of children. But Wakefield would not back down and on January 28, 2010, was found guilty of “medical fraud and malpractice” and lost his license to practice medicine. His supporters, including many parents of autistic children, decried this action and called it the culmination of a relentless cover-up. Wakefield, by then one of the most widely admired – and vilified – doctors in the world, continued to speak and write about the vaccination controversies. His book Callous Disregard – part autobiography and part science- was published in year 2010. He learned about the shameful history of the MMR vaccine and the harm it had done earlier in Canada and how it should have been banned based on what had happened in Canada in 1987. At that time, the Canadian government banned the MMR vaccine, then known as Trivirix, because many of the children were injured, developing meningitis. But in 1988, the same MMR vaccine re-labeled as Pluvarix was approved for use in Britain, while its manufacturer was shielded from lawsuits. It was the desire to cover up this sort of corrupt behavior that drove the corrupt journalism, and the British medical authorities’ desperate attacks on Wakefield and their demand that the journal Lancet retract the Wakefield paper (which Lancet did).

Moving on into the year 2000 and beyond, autism rates did not decline as might have been expected following the phase-out of mercury from the mandated childhood vaccines. Why no decline in autism? Was the mercury in so many of the mandated vaccines harmless after all? Not the case! In fact many mistakes, including the mistake of using mercury in vaccines, continued to drive the ongoing high incidence of autism. Children, infants and even the unborn fetuses were being exposed to many harmful toxins in vaccines, including formaldehyde, aluminum and, even mercury. Was this done by design, crafted to disguise the role of vaccine mercury in causing autism? A first mistake was that the FDA allowed the existing stocks of vaccines with their mercury to continue to be used until the supply was exhausted, which was most likely not until sometime in 2003. (Big pharma’s money apparently more important than babies’ health). Secondly, the CDC, unrelenting, called for...
more and more additions to the schedule of mandated childhood vaccinations and many of the mandated vaccines had “trace amounts” of mercury as Thimerosal. With something as toxic as mercury, the impact of these many “trace amounts” added up to a detrimental mercury exposure. A third mistake was that a new massive promotion began for the flu shot which had a lot of mercury in it, far more than a “trace” amount. Since the flu shot was not mandated for children, it escaped from FDA’s curb on mercury in the mandated childhood vaccines. It had, in fact, 25 micrograms of Thimerosal, which breaks down into 12.5 micrograms of ethyl mercury. The flu shot it was highly recommended for children as young as 6 to 23 months and for pregnant women. Thus, mercury from flu shots was getting into the bodies of the unborn fetus; ethyl mercury easily crosses the placental barrier to enter the fetus. Then the same child may be menaced again by a flu shot at a young age, and repeatedly menaced while growing up.

A fourth mistake was that, aluminum, another neurotoxin, in found in many of the mandated vaccines, in very significant amounts, and is just one of a witch’s brew of toxins used in vaccines. There is a synergy between the two poisons, mercury and aluminum, meaning that the presence of each of the poisons magnifies that damage done by the other one.

Parents of autistic children, along with doctors with integrity such as Andrew Wakefield, are doing a great deal today to bring to light the facts about vaccine injury as a major cause of autism. The new documentary film VAXXED: From cover-up to Catastrophe tells their story. Andrew Wakefield tells of his first encounter with vaccine injury and autism, as shown to him by the parents of the vaccine injured children. William Thompson, PhD, a whistle-blower scientist at the CDC, tells how he was ordered by CDC to falsify research results and cover up the CDC’s own evidence that showed that the MMR vaccine is unsafe. If enough people see this documentary, it would demolish the big media cover-up and expose how the autism explosion has been largely due to vaccine injury and the corruption at the CDC. VAXXED is available now on DVD and can be ordered from DAMS.

A longtime California DAMS member writes:

When I spoke to you last week about “chemtrailing,” you asked if I would send you something in writing about the experience several people have had here in Santa Clara county regarding residue from “chemtrails.”

My family has planted a garden on this property every year since 1928. However, this past spring we decided not to. For the previous three years the plants appeared to be growing nicely until they get ready to produce; then plants start dying back. A medical assistant who lives within the city limits of San Jose has a small garden in her back yard and she, too, complained about her plants simply not producing. Other older people who have grown gardens for years have had to give it up for the same reasons. The commercial farmers who farm on a larger scale use genetically modified seeds and plants, and their crops are doing very well and go to market.

The other issue that I have experienced is that I am a “sunbird” and every year I lay out in the sun beginning in March because I don’t want to get burned. However, this last spring I didn’t get out until June and I fell asleep for an hour. When I went inside and realized how long I had been in the sun, I panicked, thinking I would have a serious sunburn. However, when I looked in the mirror, there wasn’t any indication that I had been out in the sun for an hour. The air is so dirty that the sun’s rays cannot penetrate as well through the dense toxins. I sit out in the chaise lounge and watch the planes. The first plane leaves a real wide chemtrail and a second plane immediately follows and leaves a very narrow chemtrail. I would go to the beach in Santa Cruz [30 miles away, on the ocean] but my sons tell me that they use more aerosol spraying near the ocean; they do that to induce rain. So, there is nowhere to go.
EPA Reporting on Air Quality and Health Hazards

By Clifford E Carnicom

This article represents a summary and excerpts from the paper “The Obscuration of Health Hazards, An Analysis of EPA Air Quality Standards,” which can be found on www.carnicominstitute.org.

This research paper raises questions about the air quality standards in use by the U.S. Environmental Protection Agency (EPA). There is a discrepancy between air quality observed and measured by this researcher [Clifford Carnicom] and what is being reported by the EPA. This analysis raises important questions about the methods and reliability of the data that is used by the EPA to make decisions and judgments about air quality and its impact upon human health.

Measuring fine particulate matter in the air. The most important indicator of air pollution as it relates to human health is called “PM 2.5.” PM (particulate matter) 2.5 consists of materials less than 2.5 microns in size and is generally invisible to the human eye. PM 2.5 material is considered to be of high risk to human health as it penetrates deeper into the lungs and the respiratory system. The World Health Organization (WHO) describes the severity and impact of fine particle pollution (PM 2.5) as follows: “There is no evidence of a safe level of exposure or a threshold below which no adverse health effects occur. The exposure is ubiquitous [widespread] and involuntary, increasing the significance of this determinant of health.”

One problem: EPA’s Scaling system. The scaling system that the EPA uses to measure air pollution is called the Air Quality Index (AQI). This index is of a simplistic “traffic light” style, where green means “all is fine,” yellow is to “exercise caution,” and red means that “there is a problem.” The index appears to be easy to understand; in reality air quality is complex and EPA’s scale obscures the practical and more common levels of air pollution that affect our daily lives. The EPA index encompasses a very large range, going from 0 to 50 micrograms of PM 2.5 per cubic meter (ug/m³).

But this index was developed when the state of our knowledge was such that the health effects of the lower concentration levels of PM 2.5 in this scale were less understood. A more useful and relevant scale, ranging just from 0 to just 80 ug/m³ is now adopted by various other countries and pollution-monitoring manufacturers as the practical range of impacts by air quality upon human health; the upper levels within that range are of serious concern! Further, it is now understood that changes as small as 10 ug/m³ within this range have immediate and detrimental effects upon human health, including an increase in mortality! Portable, reasonably affordable, electronic PM 2.5 measuring equipment is now available. This equipment provides the consumer with a quick education on the state of air quality. These measurements, now accessible at the consumer level, provide a stark contrast to the interpretation of air quality as presented by the EPA through its Air Quality Index, AQI.

The EPA AQI has a long history of being a simplistic “traffic light” scale approach. It is now adopted by various other countries and pollution-monitoring manufacturers as the practical range of impacts by air quality upon human health; the upper levels within that range are of serious concern! Further, it is now understood that changes as small as 10 ug/m³ within this range have immediate and detrimental effects upon human health, including an increase in mortality! Portable, reasonably affordable, electronic PM 2.5 measuring equipment is now available. This equipment provides the consumer with a quick education on the state of air quality. These measurements, now accessible at the consumer level, provide a stark contrast to the interpretation of air quality as presented by the EPA through its Air Quality Index, AQI.

Specifically, the lower and mid-range concentrations of PM 2.5 (e.g., 40-150 ug/m³), where the real action is, are obscured and under-represented in the “traffic light” scale approach while the extreme low-end concentrations (very clean air), that are unlikely to exist, are over-weighted. Furthermore, the extremely high values, such as might occur in a volcanic eruption, and that are unlikely to occur, are shown and fairly represented.

Problem two: EPA presents the data always averaged over 24 hours thus masking shorter term “spikes” in bad air. A second example of EPA’s obscuration involves its methods of averaging the data. It is known that, in addition to persistent “low-level” concentrations being of concern, that short-term high concentration exposures of PM 2.5 are equally significant in their impact upon human health and mortality. But in EPA reporting, the data currently under collection is always averaged over 24 hours and thus masking such short-term effects. There is no justification for EPA presenting air quality data using only 24 hour averaging. Short-term high concentration levels do commonly occur and are measurable with modern equipment.

Our independent measurements and results. Carnicom Institute (CI) conducted a field study of air pollution conditions in the southwestern U.S. in the winter of 2015-2016. Those familiar with the work of CI are aware of the effort the Institute has devoted toward the geoengineering and bioengineering issues. These field studies show directly the impact of atmospheric aerosol operations upon PM 2.5 concentration levels. The factors of...
EPA Reporting on Air Quality
continued from page 19

Mid-range concentrations and short-term high concentration exposures are an important part of the analyses that have been made. **There is good cause to be concerned.**

Do EPA web site portals falsify air quality readings?
Theoretically, the U.S. Environment Protection Agency provides the public with real-time data on the state of air quality through their website, which includes the AQI. Unfortunately, the field studies conducted have revealed direct conflicts between observations taken real-time and those presented by the EPA for this same location and time. The EPA website portal has in no way revealed the impact of short-term visible particulate pollution at low to mid-level concentration ranges. To the contrary, the EPA interface stated that all was well and normal. There is additional cause for concern about the responsiveness and accuracy of the EPA air quality reporting.

**Recommendations**
A recommendation by CI is to adopt a system whereby the 2.5 PM concentrations (µg/m³) are reported directly in real-time. A simple system that presents the concentration levels from 0 to 100 µg/m³ in real time can be used. There is no need for mapping, scaling, transforming, or averaging the data. The public is encouraged to educate themselves on the seriousness and realities of low to mid-level PM 2.5 concentrations and to the effects of short-term high-concentration exposures, including mortality increases. The public is also encouraged to develop a citizen-based monitoring network that serves as a source of independent and impartial data that can be used to complement as well as audit the reliability of United States EPA data, including the EPA web portals.

The work of Carnicom Institute encompasses a broad range of research over nearly 20 years into health and environmental issues. The reader is invited to examine that work at [www.carnicomstitute.org](http://www.carnicomstitute.org). The full paper discussed above can be reviewed at [www.carnicomstitute.org/wp/obscuration-health-hazards/](http://www.carnicomstitute.org/wp/obscuration-health-hazards/).
Leaders and Pioneers of Holistic Dentistry Remembered

Stephen Koral, a holistic dentist who practiced for 33 years in Boulder, Colorado, died of leukemia on May 21, 2016, one day shy of his 69th birthday. He had been active in International Academy of Oral Medicine and Toxicology (IAOMT) and had served as its President. He is survived by his beloved wife, Marion Moller and their two children, Alex and Lily, as well as by two children from a previous marriage. Dr. Koral had been publicly active in promoting holistic dentistry, testifying before the state legislature in favor of permitting dentists to remove amalgam fillings without fear of prosecution by the state dental board. He also testified before Congress about the hazardous impacts of mercury amalgam fillings on a patient’s health and on the environment.

Dwight Lee Tschetter, DDS, (here, to the right) of Minnetonka, Minnesota, died on June 14, 2016 following a massive stroke that he had suffered about a week earlier. He was 67. Dr. Tschetter was a pioneer in holistic dentistry in Minnesota, having started a holistic, mercury safe dental practice that, Tooth by the Lake in Hopkins, Minnesota, back in 1982. He was an active member of the IAOMT, whose conferences he regularly attended, often accompanied by his wife Barbara. He mentored Kari Seaverson, DDS, after she joined his practice many years ago and eventually he sold his practice to her; although he continued working there. He is survived by his wife Barbara, his sons Jason and Lee, two sisters, two step children, and seven grandchildren. He is remembered by his humor, good nature, good craftsmanship, and for having served a multitude of patients over the years.

Gerald E Vermette, DDS to the right (center) DDS, died on February 27, 2016, at the age of 85. He had worked as a dentist in Skowhegan, Maine since 1957. In the 1980s that became the first mercury-free, holistic dentist in the state of Maine. In 2002, Dr. Vermette pushed for legislation to eliminate mercury from dentistry in Maine. He and his allies achieved some success when, in 2002, Governor Angus King signed a bill into law that required the posting of an “informed consent” placard on walls in dental offices in the state. The bill, LD 1409, alerted patients that “silver” amalgam fillings are actually about half mercury and that there are health and environmental concerns regarding their use. Dr. Vermette was a longtime active member of the Holistic Dental Association and the IAOMT. He was preceded in death by his beloved wife, Ruth Vermette, who had worked in his dental office.

Alex Shvartsman, DDS, of Smithtown, NY, on Long Island, died in early June of 2016. He was at home, alone, when he died and it was said by a variety of sources to have been a suicide. His patients reacted in shock and in disbelief that their dentist had committed suicide. Well-known as holistic dentist, Shvartsman was in his early 40s and in apparently good health at the time of his death. His presentations on subjects such as the importance of nutrition and breast feeding in dental and jawbone development, biomimetic dentistry (mimicking nature with our dental material choices), and non-toxic dentistry, can still be found on the internet; they capture his confidence and command of these subjects. Growing up in a Jewish family in the Soviet Union, he became a dentist after migrating to America. Initially he became a cosmetic dentist; but, even though he was not placing amalgam fillings in his patients’ mouths, as a cosmetic dentist he was not using the elaborate protections needed to remove them safely and he developed severe mercury poisoning. That health crisis years ago prompted Dr. Shvartsman’s shift into holistic dentistry and his rise to prominence as a critic of conventional dentistry and medicine and as a proponent of the holistic thinking and practices. Dr. Shvartsman is survived by a wife and a son.
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<td>Smoking Teeth equals Poison Gas (mercury vapor release from amalgams), By David Kennedy, DDS</td>
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<td>Fluoridate, a DVD by David Kennedy, DDS</td>
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<tr>
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<td>Part 1 has four segments on fluoride, each 28 minutes long, as follows:</td>
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<td>1) China's Crippling Waters, 2) Chris Bryson, author of The Fluoride Deception, interviewed</td>
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<td>3) Why I Changed my Mind, with Hardy Limeback, DDS, 4) William Hirzy, Ph.D., interviewed</td>
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<td>Part 2 has four segments: 1) Poisoned Horses (poisoned by fluoridated water), 2)Bad Bugs (gum health), 3) Smoking Teeth, and 4) The Secret Story of Fluoride</td>
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<td>Take Back your Power, By Josh del Sol - documentary on hazards of smart meters</td>
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<td>Climate Engineering, Weather Warfare - its impact on health, the planet, By Dane Wigington</td>
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Dane Wigington, Truth Teller on Health and the Planet

Michael Evans’ public statement was presented in full detail by blogger Dane Wigington, who for years has been speaking out on the harm and the violations of our basic freedoms posed by climate engineering practices. Wigington, who lives near Redding in northern California, has brought many aspects of the issue to light, such as the harm being done by aerosol spraying to forests, soil, water, crops, human health, the atmosphere and the planet’s stability. He has featured Kristen Meghan, a former Air Force Industrial Hygienist, who, noticing high inflow of aluminum, barium and strontium compounds at Tinker Air Force Base from a contractor “whose name was not listed,” found high concentrations of these toxic metals contaminating the base itself. He has featured Rosalind Peterson, a former crop loss adjuster with the USDA Farm Service Agency, who has spoken out on crop damage due to the aerosol spraying program. He has featured Francis Mangels, a former US Forest Service Biologist, who has spoken out on high aluminum contamination of the snow on Mount Shasta, a place which is far from industrial pollutants and where the snow should have no aluminum in it at all. Mangels has reported finding that (1) the metal contaminants have made the soil pH 100 times higher than normal, (2) with the atmosphere’s ozone layer damaged, ultraviolet B rays are burning the bark on the south side of the trunks and (3) an “insect collapse” has left the northern California region with only ten to twenty percent of normal population of insects. This has led to “bird collapse” because of the birds that are starving. Tree die-offs are occurring, with California having lost over 100 million trees.

The earth is in trouble, as well as her creatures. Each year breaks the record global temperature over the previous year, due in large part to the massive aerosol spraying program which makes planetary warming worse, not better. From the daily reports of dramatic melting of the Himalayan glaciers to the erosion and steady disappearance of arctic and Antarctic ice cover, signs strongly suggest that the earth is far too close to a runaway global warming. But the controllers of weather events want to give us the illusion of normal weather, and normal winter, says Wigington. “Winter” cold waves and snow storms that suddenly come and go in northern states are being engineered, he says, to give the illusion of normal winter weather. But this fake weather, to cover up reality, is being engineered at the great expense of adding to the overall global warming that is already underway.

For more details and discussion, readers may go to Dane Wigington’s web site, www.GeoengineeringWatch.org. His DVD, Climate Engineering, Weather Warfare, is now available from DAMS.