Mercury Toxicity

Mercury is a fat-soluble toxic heavy metal and is considered to be the most toxic non radio-active heavy metal. In any form it is poisonous. Poisoning can result from mercury vapour inhalation, mercury ingestion, mercury injection and absorption of mercury through the skin. Despite its dangers and known role as a neurotoxin, many people have it implanted in their mouth, injected into their bloodstream, or are consuming it daily in fish. There are however public health initiatives to lower environmental mercury.
https://www.zeromercury.org

In February, 1998, a group of the world's top mercury researchers announced that mercury from amalgam fillings can permanently damage the brain, kidneys, and immune system of children.
https://americanbiodental.com/amalgam-mercury-dental-filling-toxicity

Other toxic effects of excess mercury include increased risks of:- heart attack, angina, arteriosclerosis, deafness, toxicity, kidney damage, auto-immune diseases, liver damage, arthritis, muscle weakness, Alzheimer's disease *https://pmc.ncbi.nlm.nih.gov/articles/PMC6765786* autism, depression, epilepsy, headache, insomnia, impaired learning ability, MS, numbness and paralysis, speech impairment, lung damage, birth defects, male and female infertility, miscarriage, dermatitis as well as contributing to digestive problems, allergies, candidiasis, menstrual and menopausal symptoms the list is endless. Indeed in my years of experience practising Biogenic therapy testing, I have found that almost every health condition where mercury is present in the body, has shown that mercury is the key toxin needing to be removed from the system. Once the mercury picture is addressed then health improves tremendously.

Mercury has 3 forms **Elemental Mercury** (metallic),
Inorganic (salts)
Organic (ethylmercury/methylmercury).

Ingested elemental mercury is poorly absorbed (2-10%), however, 90% of any methylmercury ingested is absorbed into the bloodstream from the GI tract.

Causes of elemental mercury toxicity include the following:

- Thermometers
- Barometers
- Batteries (disc batteries are a concern if ingested)
- Bronzing
- Calibration instruments
- Chlor-alkali production (used to make citric acid, sodium benzoate, high fructose corn syrup)

- Fingerprinting products
- Fluorescent and mercury lamps
- Infrared detectors
- Jewellery industry
- Manometers
- Neon lamps
- Paints
- Paper pulp production
- Photography
- Silver and gold production
- Semiconductor cells

The causes of inorganic mercury toxicity include the following:

- Antisyphilitic agents
- Acetaldehyde production
- Chemical laboratory work
- Cosmetics (especially non-safety tested skin lightening creams)
- Disinfectants
- Explosives
- Embalming
- Fur hat processing
- Ink manufacturing
- Mercury vapour lamps
- Mirror silvering
- Perfume industry
- Photography
- Spermicidal jellies
- Tattooing inks
- Taxidermy production
- Vinyl chloride production
- Wood preservation

The causes of organic mercury toxicity also include the following:

- Antiseptics
- Bactericidals
- Embalming agents
- Farming industry
- Fungicides
- Germicidal agents
- Insecticidal products
- Laundry products
- Nappy products
- Paper manufacturing
- Pathology products
- Histology products

- Electroplating
- Ethnomedical practices
- Seed preservation
- Wood preservatives

Fish

Tragically, our oceans are largely contaminated with industrial pollutants like mercury. Ocean and farm-raised fish pick up these toxic chemical residues, which bio-concentrate in their flesh. People who regularly eat fish have higher levels of methylmercury than those who don't. Some species of fish are prone to accumulating mercury. The amount of mercury in fish varies according to the mercury content of the water in which fish are caught. Mercury levels are generally higher in predatory, long-lived fish at the top of the aquatic food chain (due to them consuming other mercury-contaminated fish).

Species most prone to mercury contamination are:
king mackerel, marlin, pike, shark, swordfish, tuna (including tinned tuna). Also seaweeds, fish oils and shellfish can be contaminated. The advice for those wishing to eat fish is to use the acronym SMASH, and choose nutrient dense, low mercury containing salmon (preferably Atlantic wild caught), mackerel, anchovies, sardines and herring.
Remember the warnings issued by the government to pregnant and nursing women to limit their consumption of oily fish due to mercury concerns. Pregnant and breastfeeding women can transfer mercury to their newborns, causing significant neurological problems.
Even if you are a man or not planning to become pregnant, mercury from fish can still accumulate in your body and cause serious problems down the road.

In Minamata Bay in 1956, a factory discharged inorganic mercury into the water. The mercury was methylated by bacteria and subsequently ingested by fish. Local villagers ate the fish and began to exhibit signs of neurologic damage, such as visual loss, extremity numbness, hearing loss, and ataxia. Babies exposed to the methylmercury in utero were the most severely affected. Furthermore, because mercury was also discovered in the breast milk of the mothers, the babies' exposure continued after birth.
https://pubmed.ncbi.nlm.nih.gov/7734058

On January 19, 2013, The Minamata Convention on Mercury was agreed upon at the fifth session of the Intergovernmental Negotiating Committee in Geneva, Switzerland. It is a global treaty to protect human health and the environment from the adverse effects of mercury. The major highlights of the convention included a ban on new mercury mines, the phase-out of existing ones, control measures on air emissions, and the international regulation of the informal sector for artisanal and small-scale gold mining. Treaty amendments in 2019 included restrictions on mercury-containing amalgams in dentistry.
https://www.who.int/news-room/fact-sheets/detail/mercury-and-health

Dental Amalgams

Mercury makes up about 50 percent of every amalgam dental filling, also known as 'silver' fillings. It contains a mixture of metals such as silver, copper and tin, in addition to mercury which chemically binds these components into a hard substance.
95 Percent of people with disorders of the central nervous system such as MS, epilepsy, paralysis and migraines also have silver dental fillings. This begs the question, would you want mercury, one of the most powerful neurotoxins on the planet, embedded in your mouth, only inches from your brain? The answer is obvious.

For decades it was believed that once mercury amalgam was dried in a tooth, no mercury was released into a person's mouth. But researchers have discovered that small amounts of mercury vapour are released during normal filling wear. With more sophisticated scientific tests now available, researchers now know that amalgam fillings generate up to 27 micrograms of mercury vapour per day. The vapours are released continually and studies have found that those with these fillings can have mercury vapour concentration 10 times higher than people without them. Simple activities such as chewing gum, drinking hot liquids, and brushing teeth can increase the release of mercury even more as can grinding the teeth, computer terminal exposure, exposure to magnetic fields, presence of gold fillings or gold crowns (even if covering mercury fillings) and braces. The amount of mercury vapour released during dental procedures could result in levels of exposure that exceed government safety standards. (See the video link below)

https://www.youtube.com/watch?v=9ylnQ-T7oiA&t=465s

This is scary. '**Smoking Teeth = Poison Gas'** the bluntly titled video from the IAOMT (International Acadamy of Oral Medicine and Toxicololy) uses a fluorescent light and phosphorescent screen to show mercury vapour coming out of a 25-year-old dental amalgam at body temperature. The vapor is 1,000 times the atmospheric mercury limits imposed by the EPA (Environment Protection Agency). With a million+ views and released 19 years ago, it is still a startling watch and in complete alignment to my findings during bio-resonance testing. Mercury is found to be the most pernicious toxin in almost every tissue of the body if present.

If you decide to have your amalgams replaced with an alternative material, the most important thing is to find a dentist who can remove your amalgams safely. Any dentist can technically replace your amalgams, but if they don't employ proper precautions some of the mercury in your fillings may go to your brain. Secondly, I would recommend getting healthy BEFORE you start on your fillings. Even a good dentist will likely liberate some mercury in the removal process and you want your detoxification mechanisms optimised prior to removal.
With Biogenic Therapy treatment it is possible to have removed existing mercury from the body along with other toxins and pathogens before contemplating changing your amalgams. After amalgam removal it is advisable to have a follow on Biogenic Therapy treatment to remove any liberated mercury and dental metals.

U Directives for Dental Amalgams

In 2017 the EU adopted the Mercury Regulation 2017/852, where under Article 10 it sets restrictions relevant to dental amalgam:

- **1 July 2018,** dental amalgam ban for dental treatment of (i) deciduous teeth, (ii) of children under 15 years and (iii) of pregnant or breastfeeding women, unless deemed strictly necessary by the dental practitioner on the ground of specific medical needs of the patient.
- By **1 July 2019**, each Member State must set out and publish on the Internet a national plan on measures to phase down the use of dental amalgam.
- As from **1 January 2019**, dental practitioners are no longer allowed to use dental amalgam in bulk, but only in pre-dosed encapsulated form so as to prevent exposure of the patient and practitioner.
- As from **1 January 2019**, all dental facilities dealing with dental amalgam (use of amalgam and/or removing dental amalgam fillings) must be equipped with amalgam separators […], with minimum retention level of 95%; immediately in case of new separators, by 1 January 2021 in case of existing separators.
- Dental practitioners must ensure that their amalgam waste are handled and collected by authorised waste management establishments or undertakings (no direct or indirect release into the environment).
- The Commission shall report by **30 June 2020** on the feasibility of a phase out of the use of dental amalgam in the long term, and preferably by 2030, and present concomitantly, if deemed appropriate, a legislative proposal.

https://www.zeromercury.org/about-mercury/mercury-in-products/dental-amalgam

Mercury Free Dentistry

The World Alliance for Mercury-Free Dentistry's mission is to phase out the use of dental amalgam worldwide. To accomplish this goal, they promote effective measures to phase down amalgam use and work internationally with governments and organisations. They state that between 270 and 341 tonnes of mercury are consumed globally for use in dental amalgam each year which becomes a huge environmental problem too. Dental mercury enters the environment via many different pathways. For example, dental mercury pollutes:

- **air** via human cremation, sewage sludge and waste incineration, and dental clinic emissions
- **water** via human waste disposal and dental clinic releases
- **land** via landfills, human burials, and fertilisers

https://mercuryfreedentistry.net

Vaccines

Thiomersal or thimerosal, is an organomercurial derivative of ethylmercury that has been used extensively over many years as a preservative in vaccines. Its primary purpose has been to prevent microbial growth in the product during storage and use, as well as to inactivate certain organisms and toxins during production.

Many licensed vaccines do not contain thiomersal. These include vaccines in single-dose presentation or vaccines for which thiomersal would interfere with vaccine efficacy such as live vaccines including measles, mumps and rubella (MMR), oral and inactivated polio, yellow fever and BCG vaccine.

Other vaccines may contain trace amounts of thiomersal (<0.5 µg per dose), if thiomersal has been used in the production process, but has not been added to the final product. A third group of vaccines have thiomersal added in varying concentrations (10 to 50 µg per dose) as a preservative to prevent contamination with microorganisms when formulated in multi-dose vials. These include vaccines against diphtheria, tetanus and pertussis (DTP), diphtheria and tetanus toxoids (DT), tetanus toxoid (TT), hepatitis B, *Haemophilus influenzae* type b (Hib), and influenza.

The WHO states that concerns about the toxicity of thiomersal are theoretical and that there is no compelling scientific evidence of a safety problem related to its use in vaccines, although public perception of risk has been reported in some countries.

https://www.who.int/teams/health-product-policy-and-standards/standards-and-specifications/norms-and-standards/vaccine-standardization/thiomersal

I can only share what I have found in my experience over the decades of bioresonance testing and that is if thiomersal has been detected within the testing regime of a person, (adult or child), it has been found to be a detrimental part of a health compromised individual and that it is a part of a bigger picture along with other toxicants that needs to be addressed.

Over the past decade, the prevalence of autism and other neurodevelopmental disorders such at attention deficit disorder have been increasing at epidemic proportions, and many experts believe that mercury from vaccines is at least partly to blame. It is thought that a child's reduced ability to excrete mercury children's detoxification abilities may vary greatly and are not fully developed until after age 10 years may also play a role. New research has found that Electromagnetic Fields from constant exposure to computers, mobile phone use etc. seem to be linked to this reduced mercury excretion.

Exposure to Electromagnetic Fields (EMFs) & Increased Mercury Body Burden

Research indicates that exposure to Electromagnetic Fields (EMFs) from sources like mobile phones, Wi-Fi routers, and computers increases the release of mercury vapour from dental amalgam fillings rather than reducing its excretion, leading to higher levels of mercury in the body. Even a short-term (15 minute) exposure to mobile phone EMF resulted in significantly higher levels of mercury release. While some studies suggest this increased, unbound mercury can lead to elevated levels in urine, other research highlights that EMF exposure can contribute to heavy metal accumulation and inhibit proper detoxification mechanisms.

https://pmc.ncbi.nlm.nih.gov/articles/PMC9175125

- Exposure to MRI machines, which use strong static magnetic fields, has also been shown to accelerate mercury release from amalgams.
  https://pmc.ncbi.nlm.nih.gov/articles/PMC4795328
  EMF exposure can induce oxidative stress, causing an increase in free radicals (reactive oxygen species, ROS) and damaging cellular antioxidant defence mechanisms, such as glutathione.
  Increased, free mercury in the body can disrupt neural responses. Some researchers hypothesise that this combination of EMF exposure and increased mercury release may contribute to higher, rates of neurological issues, such as autism in the offspring of mothers with amalgams exposed to EMF.
  https://pubmed.ncbi.nlm.nih.gov/27026954
  https://pmc.ncbi.nlm.nih.gov/articles/PMC602578

  Pregnant women, children, and people with high sensitivity to mercury are considered at higher risk from the increased mercury release triggered by EMF.
  Some experts recommend reducing exposure to high-level EMF sources (like keeping mobile phones away from the head, reducing screen time) to prevent this accelerated release, particularly for individuals with mercury amalgam fillings.
  https://pubmed.ncbi.nlm.nih.gov/26544100

Positive Steps

The Zero Mercury Working Group (ZMWG) is an international coalition of more than 110 public interest environmental and health non-governmental organizations from over 55 countries from around the world formed in 2005 by the European Environmental Bureau and the Mercury Policy Project. ZMWG strives for zero supply, demand, and emissions of mercury from all anthropogenic sources, with the goal of reducing mercury in the global environment to a minimum. Their mission is to advocate and support the adoption and implementation of a legally binding instrument which contains mandatory obligations to eliminate where feasible, and otherwise minimise, the global supply and trade of mercury, the global demand for mercury, anthropogenic releases of mercury to the environment, and human and wildlife exposure to mercury.
https://www.zeromercury.org

Mercury Removal with Biogenic Therapy

With the Biogenic Therapy method of treatment, not only can I identify the presence and type of mercury within the body, I can be very specific about the organs/areas affected. I can then administer an individualised energetic resonance to instruct the body to remove the mercury from these areas. At the same time supportive measures are given to the excretory pathways and stressed organs.

A typical mercury removal treatment lasts two or more days and is part of a series of treatments that remove all metals and heavy metals along with chemicals etc. to help restore the body to good health.