

- My Brother's Health-
(Mid 2010)

My brother has allowed me to share his hair and mineral analysis issued by King James Medical Laboratory, Inc. of Cleveland, Ohio. With this test, 16 essential minerals are identified, with only six possible toxic elements available for testing. My brother is eight years older than myself and is a retired pharmacist. He and his wife have lived in Wyoming for 25 plus years. He has carried many amalgam dental fillings in his mouth for over 65 years. Today he carries only 5 amalgam fillings because he also has lost several amalgam filled teeth over the years. His CBC (complete blood count) from his regular doctor reads normal.

His toxic elements list (heavy metals) exceeded the low range and fell into the acceptable range (medium) for aluminum, arsenic and mercury. Mercury showed the highest reading in this category, followed by arsenic. The King James Laboratory identifies this as 'suggestive adverse tissue accumulation' or simply poison in his system. However, according to Dr. Cutler's book, *Hair Test Interpretation: Finding Hidden Toxicities*, with three essential trace elements falling in the acceptable range, there are violations to Counting Rule #1 and #2. This indicates deranged mineral balance, primarily due to body mercury stores. My physician would treat this and recognize it as a heavy metal problem; a regular M.D. would not treat this (metal accumulation) as a problem because he would not even recognize it. Because of lack of training and understanding, a regular physician would treat his type I diabetes, heart disease, high blood pressure, and high cholesterol with conventional supportive drug therapy. He has been a diabetic since age 39; also received a triple heart bypass at that time.

My brother's essential trace elements show the following LOW readings: chromium 300%; cobalt 50%; copper 400%; manganese 50%; selenium 50%; vanadium 800% and zinc 50%. His essential macro elements read: calcium 10% and phosphorus 200% BOTH LOW. Potassium and sodium were normal. Other nonessential elements of germanium and lithium listed as LOW.

His body's ratio for calcium:magnesium and calcium:phosphorus and sodium:potassium and magnesium:potassium and zinc:copper and zinc:selenium and selenium:mercury are listed ALL LOW. All of these low readings indicate a lack of balance and concentration of normal essential elements throughout his body even though his CBC blood level appears normal.

It is this author's opinion that my brother is a candidate for IV chelation therapy under the watchful eye of a chelating physician or similarly trained physician. But first, he must get his amalgam removed from his remaining teeth. He is making progress in this direction. (Died suddenly of a heart attack 6/14/13 at 77 years.)

(Interesting to note, two years before my brother's death, Dr. Mark C. Houston, MD, published his work entitled *Role of Mercury Toxicity in Hypertension, Cardiovascular Disease, and Stroke*. It was published in the *Journal of Clinical Hypertension*, Vol. 13, No. 8, August 2011. Dr. Houston addresses mercury bio-methylation, the basis of mercury toxicity and its vascular effects to include hypertension, coronary heart disease, myocardial infarction, and

stroke. He suggests a simple urinary laboratory test to measure catecholamines (epinephrine, norepinephrine, and dopamine) for possible chronic mercury poisoning consideration with baseline and provoked (DMSA or DMPS) for 24 hours with hypertensive patients. The test is covered by most insurance companies. Dr. Houston's work is most profound and detailed regarding mercury toxicity in regards to cardiovascular disease. In my opinion, it belongs in the teaching curriculums for all health professionals.

-My Sister-in-Law's Health-
(Mid 2010)

She has been married to my brother now for 47 years. She carries most of her teeth, but many are silver amalgam filled, with some molars wearing crowns. She suffers from Raynaud's phenomenon, high blood pressure, rheumatoid arthritis most notable in her hands (with tremors), and TMJ with constant teeth clenching. She is my age.

On August 25, 2010, she took the King James Medical Laboratory Hair Analysis Test. It showed she was accumulating aluminum, arsenic, mercury and nickel. Mercury and aluminum represented the highest numbers. Her essential trace elements scored low with chromium, copper, manganese, molybdenum, selenium, vanadium and zinc. Essential macro elements showed phosphorus and lithium to be low, and sodium literally high and off the chart (hair dye treatments will cause this). For this King James test, she violated 6 essential minerals falling in the acceptable range. But according to Dr. Cutler's *Hair Test Interpretation: Finding Hidden Toxicities*, Counting Rule #4 is violated, indicating deranged mineral balance primarily because of the mercury toxic load in her body. She too, because of her health conditions, needs to detoxify her body.

September 2010

September 10th late morning my physician's assistant called to warn me about my thyroid test taken the day before. He informed me I was reading a moderate increase again in my thyroid stimulating hormone (TSH) level. I came in at 7.55 TSH. This is not good. I felt fine, but he insisted I get back to taking my thyroxine hormone on a regular basis. I agreed and reached for my 75 mcg. tablets and now take them daily again. Perhaps I was being hit by another metal storm, as noted the year before. Crestor 5mg tablets are being taken about every other day now to keep my lipid levels in check as well as any elevated C- reactive protein levels (measurement of a specific blood protein in response to inflammation in the body indicating a rough risk of heart disease problems).

October 2010

Columbus Day 2010 and I just finished jogging one full mile. It has been a long time since I was able to do that. My only discomfort was some slight tendonitis, which resolved before the day's end. I also started another round of magnesium maleate for aluminum removal.

Mary has good blood pressure control again. She now taking a full tablet of atenolol 50mg and ½ tablet of her Maxzide prescription. She is out training for the annual Twin Cities Annual Marathon and Half Marathon run.

November 2010

November 2, 2010, I just finished running another good mile. Considering I use to run several miles about 9 years ago, this is a nice comeback. Obviously I have a way to go before I can reach that level again. Still, I feel good.

Mary found that her atenolol was holding her back on the long runs. She lacked energy and stamina to go the distance. But after conferring with her physician, she agreed to take her medication right after the big run coming up this Sunday, November 7th. She should do well in the half-marathon.

November 8, 2010, and Mary ran the ½ marathon in 2 hours and 35 minutes. She was 15 minutes slower than last year because of a more hurried speed for the first 10 miles followed by a slower mode to finish the race. But at 64½ years, I am very proud of her achievement.

November 9, 2010, and I am still puzzled about my thyroid which is responding somewhat, but not the way I need it to function as a normal working gland. Hormone supplementation is still necessary to correct the imbalance. Is the gland partially destroyed or are their other unrecognized considerations we (my physician and myself) have failed to address? Perhaps some other non-metal elements are interfering with the gland's normal activities such as the halogen group of bromine, fluorine, chlorine, iodine and astatine. Some researchers use high doses of iodine to replace a possible offending agent such as bromine or fluorine thought to be also toxic to the gland. I may approach the problem from this perspective and note if some improvement is achieved.

Somewhere down this experimental path I may have to admit that the gland is partial destroyed, and nothing I do will bring it back to normal functioning. Still, only persistence wins. Ankle spider veins are virtually gone at this point, with improvement in other showy leg vein areas.

November 27, 2010, Mary and I are starting another round of aluminum treatments with magnesium maleate tablets. Three days into the treatment, I notice some dizziness and slight headaches.

December 2010

Pearl Harbor Day 2010, and I am wrapping up another round of chelation therapy of 300mg DMSA and 100 mg lipoic acid OTC. This time, for whatever reason, I am noting some light-headedness with the therapy. I submitted my urine sample to my doctor's office today and can expect results in about 2 1/2 weeks. Mary's most recent urine test is being mailed to our home and should be here by December 9th.

Mary's urine test results arrived on the given date. Once again the DMSA indicates strong metal retrieval and removal of specific heavy metals. Compared to her previous test in mid-July, her test shows no more tungsten removal at this point and reduced amounts of lead. However,

her removal of arsenic increased 6 fold, while continuing the removal of cadmium and mercury at the previous level. She will have to continue the DMSA treatments. My results should be arriving in about 10 days. If my pattern is similar to Mary's (which I suspect), I will suggest to my physician that we reduce the number of urine tests done per year from four tests to two urine tests. This will keep us up to date and save some money in the process, remembering the cost per test at \$60 each.

December 18th, 2010, my urine toxic metals test results came back through the mail via my doctor's office. I was wrong. The results show significant improvement in just about all areas. Aluminum does not even show on the reference range; perhaps the magnesium maleate treatments are working very well. Arsenic is down 26% (as opposed to the last test), barium down 25%, bismuth down 26% indicating a better draw of the poison, cadmium decreased 40%, cesium and lead down 26%, mercury down 77%, and nickel decreased 52%. Thallium remained the same, while tin dropped a good 40%. That lifted my spirits inside while outside a storm rages across California, suspected to be the worst in over 10 years. Now I am reluctant to reduce the regular urine metal tests to save a few dollars. I may be at a real turning point in my treatment picture, but I remain with guarded optimistic persistence at this point.

December 21st, 2010, I was watching TV in the evening and was drawn to an information commercial about the high concentration of autism found in military families across the United States. Later I verified this finding with a quick Google search with the work of Dr. Edward Yazbak, M.D., noting 1 out of slightly less than 70 children within military families experiencing this problem. This is a very sad sobering statistic. Considering the American armed forces only use amalgam in their treatment of dental caries, I would focus upon this fact considering our present knowledge base noting the amalgam dental treatments in both parents and the female concentrating mercury through the placenta into her unborn child. To rule out this possibility, hair samples of children need to be taken shortly after birth and analyzed for toxic elements, especially aluminum and mercury.

December 23, 2010, I just finished reading an article in the Fresno Bee entitled "EPA targets toxin in water" in the A6 section. Apparently the EPA examined water sources in over 30 American cities and found troubling levels of hexavalent chromium or chromium 6 in their water supply. Chromium 6 is a potent carcinogen made famous from the movie of 'Erin Brockovich' and the high chromium levels found in the water supply of Hinkley, California several years ago.

January 2011

Mid-January 2011 and it is the start of another new year with a routine visit to my doctor's office. We compared the findings of Mary's and myself most recent urine metal tests with the previous findings of about 4 months ago. He was pleased with the results and concluded we were to continue treatments.

January 18th, 2011, and Mary has just returned with a visit to her oral surgeon who did the titanium implants of two screws, while her regular dentist attached the two ceramic teeth to the top of the screws. The latter dentist applied too much glue in the original mounting of the teeth and the oral surgeon was assigned to extract this build-up from around the mounted area. Since this was her second trip back to remove the cement, the oral surgeon noted that her bone implant

of cadaver material was deteriorating. This is the structure holding the titanium screws in place. So he implanted some additional bone in the area to reinforce the structure. At this point we can only speculate that the original bone graft is failing because of her immune system attacking the cadaver bone or the titanium screws themselves, or both formations at the same time. Her face is swollen and she is not a happy camper. She is on amoxicillin antibiotic to prevent infection and Vicodin. She does not like the latter, so she is taking 600mg of Motrin to get the swelling down in her face and eliminate the pain at the same time.

January 26th, and I just finished another round of DMSA 300mg taken every 8 hours, plus 100mg of lipoic acid taken every 4 hours around the clock. Mary started another round of DMSA herself with 200mg taken every 8 hours, plus a low dose of 10mg of lipoic acid taken every 8 hours.

February 2011

It has been a good week for health improvement. I am currently jogging a mile every other day and cutting back on some calories to discourage the recent fat cells I gained over the holidays (6 pounds). I really feel good! Lots of energy and good attitude go on throughout the day. I also pump some iron, but to build tone mostly. In the process I am bulking-up somewhat.

Apparently Mary over did it in her running/jogging exercise program. For the last month she has sciatic discomfort and lateral calf pain in her right leg. Stretching has helped a lot but has not resolved the very tight tendon leading along this route. So she finally made an appointment with an acupuncture specialist in our area to fix the problem. Her first visit almost took the problem out. She is going back today, February 4th for another treatment. This was her first exposure to acupuncture. She appears to be making good progress, and is continuing her walking program with our dog.

February 6 and 7th, Mary and I begin another round of DMSA with 200mg and 12mg of lipoic acid. The second day of treatment she increased her lipoic acid level to 25mg per dose. Meanwhile, I stayed with my regiment of 300mg of DMSA and 100mg of lipoic acid. Once again the DMSA was dosed every 8 hours and the lipoic acid every four hours around the clock for three days. We are experiencing no problems with this cycle. And my jogging routine and weight training continues.

February 15th, Mary is still having a leg problem of throbbing in her right calf if she lies on her back in bed. Her doctor visit simply confirmed what we thought in the beginning: a sciatic nerve problem. X-rays were also ordered and two medications prescribed: diclofenac 50mg (anti-inflammatory and pain reliever) taken twice daily, and cyclobenzaprine 10mg (muscle and nerve relaxer) taken at bedtime. She woke up feeling good this morning.

March 2011

Monday, March 7th, brings no good news. Mary's X-ray shows some spinal stenosis or narrowing of the spine, which is putting pressure on her spinal cord. Still, she has seen improvement and pain relief over time with therapy. Stretching, walking, swimming workouts

have reduced the pain to the right lateral calf only. Her main difficulty at this time is the same: lying flat in bed trying to rest with a throbbing calf. Lying on her side brings relief. Her physician deems it referral pain, which is a good call at this point. This same day she started another round of 200mg DMSA taken every eight hours. In addition, she is taking 50mg of lipoic acid capsules every 4 hours around the clock for three days.

I started my final DMSA treatment with Mary this time. Half way through this cycle, we will both take a urine sample and submit it for analysis through Doctors Data again. Once the results are known, my physician will schedule me for a lipid test again.

March 14th, and I just saw my endodontist today regarding the failure of tooth #13. I believe it to be cracked just above the gum line because I am getting pain and head congestion. My physician put me on Biaxin antibiotic to control the infection. Eight months ago, the endodontist performed a root canal on the tooth because it supports my left upper bridge. After several tests, I decided to have the tooth pulled as soon as possible. There goes my bridge and chewing capacity at the same time.

Mary appears to be feeling a lot better lately. She is working out in the swimming pool at a nearby gym. Water therapy and low impact exercise helps her a lot. She has another appointment with the acupuncture therapist today, March 21st.

Tooth #13 on the frontal side only is gaining in pain and instability. I saw my endodontist again on March 14th for referral to an oral surgeon to have the tooth extracted. My regular dentist was contacted and he insisted I be evaluated by an allergy physician for a CT scan of the area to spot the infection on my left facial side caused by bacteria or fungal invasion. I complied and the CT test showed it to be a sinus problem caused by bacteria, most likely through the influence of tooth #13. Later my regular dentist called and with this new information he needed to prepare me for the surgery by removing my metal bridge of which one leg was attached to tooth #13 and #15. This was done the following Wednesday, March 16th. He sectioned the bridge twice near both teeth. The metal portion he dropped into my hand. I observed its shine and felt its weight, and I asked his opinion of its metal content. He thought it was mostly made of nickel. Nickel appears in my metal toxic profile and has shown little cooperation in previous attempts of removal from my body. Perhaps I am simply absorbing this nickel from my bridge- work. Nickel still remains on tooth #15 now as well as the metal bridge on the right upper side of my mouth. So with approximately 40% of my left bridge removed, 60% of the metal now remains. This is another of the 'good vs. bad' news outcome.

April 2011

Mid-April 2011 and after visiting my physician and going over my (and Mary's) most recent chelation results, we are both are still pulling significant heavy metals and the process should continue, according to our doctor. He did order updated laboratory tests, and asked me to return in July for a routine physical.

In the meantime I received an interesting email from Bioresearch Online dated April 11, 2011. It included an article entitled "United Nations Urged to Ban Mercury in Vaccines." This was a request by the Coalition for Mercury-Free Drugs (CoMeD) for the United Nations to ban the product because it causes neurological problems such as autism and Alzheimer's. They cited

several world articles noting the poisonous properties in mercury preserved vaccines. In addition, they asked the Gates Foundation and UNICEF to comply with this request. The UN is expected to address the issue this fall at its third intergovernmental negotiation committee.

Another article appearing in the Shanghai Daily entitled 'Heavy metal contamination of arable land worse than radiation,' dated April 5, 2011. The author, Wang Yong, decries the activities of the Chinese people in the face of the Japanese nuclear problem versus the more identifiable problem of heavy metal pollution. The Chinese Ministry of Environmental Protection held a recent conference noting the seriousness of arsenic, cadmium, chromium, lead and mercury contamination caused by their manufacturing plants.

April 19th, 2011, and the stuff just hit my fan. A week before, my physician asked me to get a CBC (Complete Blood Count), lipid panel to check my cholesterol again, and a thyroid test. I passed the CBC with no problems, but I failed my cholesterol and thyroid test. Mary and I both returned from a twelve-day trip to China and over indulged in the food department. We ate three heavy meals a day with no exercise except some minor walking and we both gained weight. I packed on 13 pounds (including my Christmas gain of weight); Mary refuses to attach a numerical value to her eating expansion, but the food preparation and taste was absolutely outstanding. I also had less energy at the end of the trip, and now I know why. My TSH test for thyroid came in at a higher figure of 7.01, instead of less than 4.5. My metabolism is off course and accounts for my lack of energy. That, plus the weight gain sent my cholesterol spiraling.

American physicians will usually begin treating a thyroid problem with a TSH level of 3 or greater. British physicians will start treatment at 2 or greater.

	Dave's readings:
Desirable Total Cholesterol: less than 200mg/dl.	235mg/dl.
Bad LDL Cholesterol: less than 100mg/dl.	148mg/dl.
Good HDL Cholesterol: greater than 40mg/dl.	46mg/dl.
Serum Triglycerides (fatty acids): less than 150mg/dl.	205mg/dl.

My physician phoned me and suggested I increase my Crestor 5mg to once a day therapy and my levothyroxine to 75mcg. daily. I was taking Crestor every other day and my levothyroxine medication at about 50mcg daily (alternating between 38mcg and 65mcg daily; 75mcg dose excelled my metabolism too much in my last dose advancement). A dose of 75mcg daily may prove to enhance my metabolism beyond normal functioning. Once I get my thyroid back to a normal level, the cholesterol picture should improve quite nicely. At this point in my health come back picture, it looks like my thyroid is beyond repair because of the high mercury load. April 26th and I am feeling much better, and my weight picture is improving because I dropped 6 pounds. Still, this is the exact opposite of August 2008 report where I cited a high TSH, but my cholesterol picture was outstanding. This may be my body saying that an increased weight gain of almost 13 or 14 pounds (loved that Chinese food) to about 193 lbs. from 175 lbs. undermined my old doses of Crestor and levothyroxine. I am now at 182 lbs. Weight gain is obviously detrimental to my recovery plan.

Mary just got her laboratory report back a few days ago. She is doing very well at this point. Her CBC and basic metabolic panel were both normal. Her lipid profile or cholesterol check was outstanding again.

	Mary's readings
Desirable Total Cholesterol: less than 200mg/dl	152mg/dl.
Bad LDL Cholesterol: less than 100mg/dl.	73mg/dl.
Good HDL Cholesterol: greater than 40mg/dl.	53mg/dl.
Serum Triglycerides (fatty acids): less than 150mg/dl.	132mg/dl.

May 2011

Mary and I do not smell May flowers yet. We have both been down with a bacterial respiratory problem and smelling has certainly been altered. She may have picked it up at work and finally shared it with me. But I did pick up an interesting article in the May 6th edition of the Fresno Bee noting an increase of mercury found by scientists in the Arctic rim countries. Apparently the permafrost is melting faster and releasing more mercury threatening seals, whales and polar bears in the region. Melting ice is also expected to raise sea levels by at least five feet. China now is considered the number one country producing mercury pollution to almost a 50% representation.

It's the end of the month and I have dropped another three pounds. I am now at 179 pounds. My physician put me on 62.5mg of levothyroxine about 10 days ago and this helps with my thyroid adjustment as well as my continued weight loss. My sleep patterns are returning to normal too with few early morning risings. My energy level is good, but my right hip area is giving me trouble when I walk. Diclofenac (NSAID) provides relief, but the problem returns after a day or two of not taking the drug. The problem seems to be more of a tendon related than bone at this point. I continue to do stretching which seems to help with the improvement picture. My jogging is limited at this time, but I did a part jog/walk arrangement a few days ago without too much difficulty. Aging is part of the picture, but I refuse to accept it. But I did buy an inversion table to stretch my spine and leg tendons. But May does end on an up note.

Consumers for Dental Choice (Mercury Free Dentistry) published a newsletter on May 11th noting their accomplishments in Florida with anti-mercury sentiments among the Florida dentists. Bernie Windham presented his Dental Amalgam Mercury Solutions (DAMS) report at the gathering. DAMS is a very extensive and compelling piece of work listing many categories of mercury exposure. Under the Immune Conditions, and Part III of Autoimmunity noting immune and nerve problems, Windham points out the coupling of mercury and other toxic elements to hydroxyl, ammonium, chloride and sulfhydryl groups to prevent the occurrences of many cellular processes, including enzymes and hormones. These metal interferences contribute to the autoimmune diseases of MS, Alzheimer's, Parkinsonism, ALS, etc. Even the conversion in the thyroid gland from inactive T4 to active T3 is crippled by toxic metals, and may be part of my problem and current struggle. If I continue to remove my toxic load of metals, my thyroid may still improve. Hope springs eternal again.

But I just mentioned ALS above. Identifying some of the toxicity problems experienced by ALS (amyotrophic lateral sclerosis) patients has recently been pointed out by Woolsey and her work in the Journal of Alternative and Complementary Medicine, Volume 14, Number 9, 2008, entitled 'Cysteine, Sulfite and Glutamate Toxicity: A Cause of ALS?' She identified some accumulation points of cysteine, sulfite and glutamate precursor metabolism brought about by specific defective enzymes in the formation of glutathione synthetase and glutathione reductase because of possible blocking by heavy metals. Sulfur containing supplement products such as alpha lipoic acid and N-acetyl-cysteine proved detrimental because they may add to sulfite toxicity in ALS patients. Sublingual glutathione also has to be closely monitored to stabilize the patient. Woolsey's work notes the necessity of going slow and monitoring results in treating advanced cases of ALS, and perhaps other disease states as well.

Today's Fresno Bee (May 30, 2011, A-15) warns that a two year study of urban coastal areas of San Diego, Los Angeles, and San Francisco that several fish are unsafe to eat because of high levels of PCBs and mercury content. Additional studies are on-going in other areas of the state now. Pollution problems should be a major concern to our population, but most ignore or remain unaware of this huge health problem.

June 2011

This has been an interesting week. I had to switch dentists because I need bridge replacements and my previous dentist insisted I get implants to cover the exposed areas. My new dentist is "green" (holistic) and does not use mercury or perform root canals. He works with zirconium crowns and bridges, plus a form of snap-on-teeth. The zirconium's toughness will solve my problems, he felt. I mentioned the 'supposed' inertness of zirconium in my previous notes. My new dentist also discovered the fact that I have two large gray areas in my mouth which he labeled 'amalgam or mercury tattoos'. These are mercury and other toxic metals imbedded in oral tissue. Noting this finding, I elected to have them both removed surgically today (June 7, 2011).

Several days prior to this, I re-examined and compared my wife's toxic test results with my own going back at least 18 months. We paralleled toxic elements almost to the letter. I feel this is too much of a coincidence. So I began to think of a common denominator to account for this observation of parallel toxic results. We eat and drink the same for the most part. Our water supply is monitored by the city and is considered safe. I have a \$3000 water softener in our garage attached to some very visible copper tubing to conduct the soft water into our house where our drinking water is treated by a reverse osmosis system. Now I decided to examine the system. To my amazement, I found a copper linkage to the system composed of bends and twists with 15 solder joints to connect the apparatus and make it work. Solder, I remembered is toxic in itself. How toxic was my next thought? Returning to my computer I addressed this issue with Google and found most of the toxic elements existing in solder to almost match my wife's and my own toxic element profiles. Armed with this possibility, I authorized a local agency today (June 7, 2011) to perform an analysis on our regular water as well as our drinking water. The results will be mailed to us in about two weeks.

June 15, 2011 and the toxic metal screen results from our house water supply are emailed to us earlier than expected. Ten heavy metals were tested from the drinking water (reverse osmosis) and kitchen water. All tests were negative except for the kitchen water showing high levels of copper. In fact, the copper level is five times over the acceptable limit set by the EPA. This is not a good thing because at this level it could easily cause liver and kidney damage, or possibly induce Wilson's Disease. The good news is that our drinking water is safe, but our laundry and shower water supply is tainted. It is put together with copper tubing. The average house may contain over 500 pounds of copper to include electrical wiring, water pipes and conduit interchange. For the present, this possible toxic route of copper is being held in check within our house. We continue to explore other possible toxic metal routes into our bodies, or realize that our ingestion of heavy metals has occurred over a very long time from various sources.

June 16, 2011 and my TSH test results came back with a 3.8 number. This is acceptable to my physician so I will continue with a 62.5mcg. daily treatment of levothyroxine hormone for my thyroid gland shortfall.

June 24, 2011 and I have an amazing amount of energy. I just completed another round of DMSA. Mary finished another round of chelation therapy, too. Once again I am having trouble sleeping and wake up about 3 A.M. and watch TV for about an hour until sleep sets in again.

In about 10 days my new dentist will begin preparing my mouth for some new zirconium bridges.

July 2011

My current 'green dentist' removed the crowns on #18 and #20 in my left jaw on July 5th. Both contained mercury to my surprise. Tooth #20 was coated less than #18. Number 18 had a deep amalgam (mercury) filled cavity. It should have been removed by my previous dentist, but did not when it was capped with a ceramic crown. Both teeth were repaired and readied for a zirconium bridge within about two weeks. From this experience, I can conclude my previous dentist was not so green after all. At this point four areas have been corrected to remove mercury findings, and I AM PISSED! Four years have essentially been lost in chelation therapy, as well as a huge monetary expense. With the mercury poison still in place in four areas (two more will be found in the next two years), I am only removing newly absorbed particles being distributed from the poisonous sites within my body and recontaminating myself. All I have been able to achieve from the beginning of my ordeal is to maintain the status quo of poisoning because of body distribution and simple and active diffusion (moving the poison from a high concentration to areas of lower concentrations and less contamination of mercury free areas within my body). So there is little wonder why my cholesterol readings were outstanding at the very beginning of chelation therapy when I began, and now they read simply average or higher over time. Damn, my poison trail and problems have only been kept at bay. With additional dental bridge building expected in the next few months, I contacted my physician by email and suggested we halt toxic urine evaluations until my dental work is completed less we find more mercury. He agreed, but reminded me I am due for a physical examination.

July 22 and I decided to quiz Mary about her mouth and the possibility of finding more mercury in her teeth like my most recent findings. She remembers only one lower molar crown

that she currently has and was covered by the dentist of years past to mask the 'gray color' of the tooth. Her new green dentist will look at this and provide some additional insight into our heavy metal problems.

July 26th and I just returned from my dentist's office with some additional information. He said there is a possibility that mercury may lie under the metal bridge I have remaining, tooth #2 and #4, plus another bridge post at tooth #15. And after describing Mary's molar covered with a metal cap because it was colored gray, he claims the tooth is highly suspect for mercury. Tooth #15 should be exposed next month. In the mean time, we both intend to continue with chelation as before. We should be able to get to the core of things within the next few months.

August 2011

I completed my doctor's physical in mid-July. Everything appears to be in line at this point except for my lipid panel. My cholesterol has dropped to 117. Now I am back to a daily dose of Crestor. And with all the mercury removal in July, I will consider this to be another metal storm my body is going through. Again, this is very frustrating. It will take some time and more chelation to quiet the storm.

August 31st, and my green dentist just uncovered tooth #15. It also contained an amalgam filling measuring 1mm x 2mm which was removed. A zirconium bridge is being built to span from tooth #15 to #12. In the meantime, I will continue with chelation therapy. Thus far, with the aid of my new green dentist, five separate areas (three teeth and two tissue areas) have been addressed and removed. Once again I wait for improvement in my overall health.

September 2011

September 13th, my green dentist installed my new upper zirconium bridge for tooth #15 to #12. Mary was seen after me for an overall evaluation and dental cleaning. No mercury tattoos were discovered in her mouth, but one molar cap or more may be suspect for mercury. Both of us will continue with chelation and take a urine test again in November and see if some improvement is seen.

September 13th, Mary made her first visit to our green dentist for a routine cleaning. He identified a composite filling was needed on tooth #5. He also noted that capped teeth #3, 30 and 31 could be hiding mercury fillings under each tooth. This was very upsetting to Mary. Still, she is continuing with chelation to await the new results.

October 2011

I am wrapping up another round of chelation. At this point, I am feeling very good about my day- to- day health. I have lots of energy and perhaps too much. In another 12 days I will repeat my chelation procedure and take the urine test again. My weight is at 176 pounds as of 8th October, indicating a loss of 18 pounds since April of this year. October 14th brings some bad news; my brother needs another heart bypass operation to restore circulation. One of his main heart arteries is now 90% occluded.

October 18th, and chelation put on hold because I am battling an ear infection. But the good news is that according to Consumers for Dental Choice dated this day, the World Health Organization (WHO) has urged a switch from amalgam. According to the 'Future Use Of Materials for Dental Restoration,' WHO advocates this action because amalgam releases a significant amount of mercury and raises general health concerns while alternative materials are currently available.

October 20th, several California cities declare a resolution against dental amalgam: Malibu , Santa Ana, and Costa Mesa have joined to rid the public of the dental material.

October 24th, and I just returned from a visit to my physician's office. Again he tested my arteries for plaque build-up. The test proved negative. But I asked him about his National Institute of Health study (NIH) with chelation therapy which was a double blind study involving 55,000 patients in the U.S. extending over several years. He said he finished his work and gave the results to NIH and await their findings. We both agreed the study lacked a lot of merit because no metal base line information was included. NIH missed the boat on this one. They claimed base line metal findings could not be included in the study because of cost over rides exceeding their \$30 million budget. Still, some information should come out of this vast patient study. (Findings of the NIH study appeared in March 27, 2013 published edition of the Journal of the American Medical Association and concluded that EDTA chelation therapy modestly reduces cardiovascular events. Considering NIH did not get patient pre-treatment base line toxic metal results or post treatment toxic metal results because of a lack of funding, the results are encouraging but not dramatic.)

November 2011

November 1st and I just submitted my most recent urine sample to my doctor's office while going through another three day chelation cycle of DMSA and lipoic acid.

It is mid-November and my results are back. Some improvement noted, but now the road to success becomes more obvious. My metal bridge spanning teeth #2 and #4 must be removed and replaced with zirconium. The test shows continued draw of mercury, lead, cesium, thallium, and barium from another source. The source of some of these metals may be the metal bridge itself or amalgam fillings in one or both teeth or both. I will ask my dentist to replace the bridge in January, 2012. Some good results were noted with arsenic and cadmium; 42% decrease with arsenic and a 57% decrease in cadmium.

December 2011

Holidays are almost upon us. We are both feeling okay, but I do not seem to have much energy as before. And Mary is loosing hope in the metal reduction and really does not want to go on with the therapy. I am the opposite and can hardly wait until my last metal bridge is removed.

January 2012

We are starting a new year and let's hope it is a break-through for our health. The Fresno Bee ran an article on January 5th in the Nation and World (A9) section about the findings of a federal group which recommended the reduction of 10 micrograms of lead per deciliter of blood to 5 micrograms when testing for the heavy metal in children. This will bring almost 1/2 million children into the treatment arena to reduce brain damage and raise intelligence levels.

The 10th of this month I had my last metal bridge removed, plus a small amalgam filling on tooth number two. In ten days or less this will be replaced with another zirconium bridge. Another round of chelation therapy will begin soon. This may become the moment of truth after five long years of medical treatments.

Read an interesting article by the International Center for Nutritional Research Inc., 2008, on the Dental/Cancer Connection by Dr. Gerald H. Smith. He singles out internationally known researcher Dr. Yisguaju Imura, M.D., for observing that all cancer cells contain mercury. Another cancer cause pointed out by Dr. Smith is the work of Dr. Otto Warburg, noting the lack of oxygen in the cells leading to the cancer formation in the host. This seems plausible when you unite the work of researchers at Queens university (December, 2011) if treating some forms of cancer with nitroglycerin to improve the low concentration of oxygen found in cancerous tissue written in the Science Daily.

January 18th, I just returned from the vet office with my dog Cupid. He weighed in at 20.6 lbs, but 7 months ago he was at almost 23 lbs. In addition, for the last 2 or 3 months he seems to be drinking a lot more water than before. The vet techs gave him two injections, his usual yearly DHLPP and Bordatella. Both injections contain thimerosal (mercury) and aluminum. His weight loss and increased water drinking may be forerunners of diabetes, from which my last dog passed 13 years ago. I did not think of this possible connection until many hours after my dog's visit to the vet and his listless attitude after the shots. The next day I started him on a regiment of alpha lipoic acid 10mg and 25mg of DMSA every twelve hours for 3 days.

January 21st and another round of DMSA and alpha lipoic acid begins for me. For some reason I felt a little run down during the three day usual therapy for myself. Two days after therapy I felt much better. Ten days later and I am getting dull hip and leg discomfort. This could be my statin drug with a side effect response of muscle discomfort indicating the dose is too high or I am on the wrong statin at this point. There may be no connection here so I will monitor the situation and let my doctor know what is happening.

January 28th and my dog Cupid is doing okay and appears to be drinking less water and his appetite is good and getting better. I will chelate him again around February 1st.

January 31st and my new and last zirconium bridge has been installed over teeth #2 and #4. At this point my teeth have been all rebuilt with six mercury areas removed for a total cost of \$12,000.

It is the last day of the month and today's Fresno Bee, section A6, notes an article about southern China and the Guangxi Zhuang Autonomous Region. Apparently the Longjiang River has been polluted with a high toxic level of cadmium from a mining company further up the river. Citizens along the river have been drinking bottled water until the source is under control and the poison in the river diluted to a safer content.

February 2012

February 7th, and it is almost a month since my last metal bridge was removed along with my last amalgam filling. I am feeling very well with a lot of energy during the day, with no real need to take a nap. Even my dog Cupid appears to be more energy driven and with a better attitude all around. His mood is more playful and less anxious; his chelations are going well. My only body complaint at this point is my second finger of my left hand and my right upper outer thigh. For the last 5 days, I wake up to muscle/tendon pain/discomfort. I may have to adjust my Crestor dose again. If I skip a night dose, I do not have the pain problem the next day. I will monitor this for a few more days and see what happens.

February 15th, The Fresno Bee just released an article in the A11 Section noting an FDA find of high levels of lead in over 400 lipsticks tested. All tested products contained lead, some from the top companies in the world such as L'Oreal and Maybelline, Cover Girl, and NARS.

Good Morning American announced (February 16th) brown rice syrup may contain up to six times the amount of arsenic allowed in our drinking supply. Fruit juices, rice crackers, cereals energy bars and "shots" containing brown rice syrup may add considerable arsenic intakes to the consumer. This was reported in the Journal of Environmental Health Perspectives.

February 19th, my muscle problem has settled down after some intense stretching and exercising of the hip region. I am back to a regular daily medication schedule. Mary and I continue with DMSA and lipoic acid treatments.

March 2012

March 7th and I came down with another problem with diverticulitis in my descending colon; not much fun. This is my 4th problem over a six year period. I will go off antibiotics on the 18th. I will start another chelation round on Monday and take a urine sample on Tuesday the 20th. My doctor also wants me to do a CBC, lipid panel and thyroid test within the next two weeks.

Mary is still doing chelation on a schedule basis. She appears to be in good health at this point.

March 17th (St. Patrick's Day) and just read about a Swedish study extended over a twelve year period involving over 55,000 women reporting that breast cancer risk may be increased if cadmium is consumed in the diet. Apparently the metal will copy the female estrogen hormone and can contribute to cancer in the breast. Cadmium is found in many farm fertilizers and cigarette smoke. Vegetables can take up the metal in their root system and distribute itself throughout the edible portions and is consumed by the human host. This was reported in the March 15th issue of Cancer Research.

March 20th. and I decided not to take the urine test as planned. Most of the diverticulitis symptoms has dissipated at this point, and interestingly coincides with my DMSA regimen. Not sure what this means now. I will do another DMSA treatment starting about April 2nd. I also saw my dermatologist today for a full body scan. She was amazed by what she saw, absolutely nothing in regards to scaling skin areas or possible actinic keratosis. She said not to come back to her office for a year. I told her that it is amazing what happens to your body once most of the mercury poisoning is removed. This was good news.

April 2012

April 10th, my results are back from my blood draw last week for lipid panel and TSH (thyroid) values. It was not where I wanted it to be.

	Dave's readings:
Desirable Total Cholesterol: less than 200mg/dl.	218mg/dl
Bad LDL Cholesterol: less than 100mg/dl.	127mg/dl*
Good HDL Cholesterol: greater than 40mg/dl.	49mg/dl
Serum Triglycerides (fatty acids): less than 150mg/dl.	106mg/dl

(I have two cardiac risk factors: age and family history; <130mg/dl is OK, <100mg/dl is better.)

My TSH value came in at 4.07, which is not where I want to be. In comparing this to May 2010 testing data, it was 0.54. Over the last two months I raised my dose level of levothyroxine from 62.5mcg to 75mcg. Even at this level I am barely in the acceptable levels for TSH normal values of less than 4.50. This tells me a lot. For some reason, chelation or whatever at this point, I need to decrease my TSH values and try for the lower values of previous draw of 0.54. To do this, I will let my physician know that I am increasing my thyroxine daily intake to either 81mcg to 87.5mcg (75mcg dose plus 1/2 dose of 25mcg) to get the levels down while increasing my stamina as well as my resistance levels. All of this makes more sense now. I may even, over time, have to go to 100mcg of thyroxine to get my level of TSH around 0.54 again, or decrease my body's metal load.

April 19th, and my results are back Doctor's Data. Some of it is exciting; some is not. Comparing it to my results of March 16, 2011 (one year ago), I find antimony identified in my body at 0.2mcg/gram creatinine; it has not been pulled for two years. The big news is that arsenic pull has been reduced (tissue load) from 48 to 11mcg/gram creatinine or 77% decrease. Barium, nickel, mercury, thallium, and tin remain approximately the same pull as before. Cadmium showed 0.3mcg/gram creatinine or 57% less pull, cesium slightly down, and a 30% drop in lead 1.6mcg/gram pull. I am continuing with chelation therapy.

May 2012

I did only one chelation treatment this month because Mary and I were on vacation for 14 days out of the month. I still travel with all my antibiotics just in case.

June 2012

My face and neck and chest are breaking out with a small white pustule skin infection. I decided to treat it with half-strength Septra tablets for about 7 days, and it appears to be working. Mary and I are continuing with chelation again. Interesting to note is the finding of two black hairs in my snow white mustache of 25 years, suggesting that my falling arsenic levels will spawn regrowth of normal hair color, like the top of my head and my eyebrows which are back to my birth hair color. This is rather amazing to witness.

First day of Summer and for the last six months I found I could read the writing on the television nightly stock report without my glasses. Three months ago I determined my right eye was stronger, with the left eye taking its sweet time to focus in on the subject. Although my new glasses of one week made a slight correction in my vision, I can now see almost equally well with either eye. It is nice to read the information on the TV without my glasses. At least when I go jogging, I will be able to see better than before because I do not jog with glasses.

June 25th, 2012, and I am feeling great. Lots of energy, drive and physical capability now that I have been on 100 mcg. dose of levothyroxine for about six weeks. Looking back on my recording of May 19th, 2010 my TSH was 0.54 while I was taking an 88 mcg. dose of levothyroxine, and my cholesterol readings were outstanding! I concluded at that time my thyroid had improved because of chelation therapy because I had an excess of energy (some sleep deprivation, too). That was incorrect because by September 2010, my TSH jumped to 7.55 and my cholesterol readings deteriorated likewise after I decreased my levothyroxine dose. But by June 16, 2011, my energy level was high and my TSH was 3.8 while taking 62.5 mcg. of thyroid, again assuming my thyroid had improved. Finally, on April 10, 2012, my TSH came in at 4.07. Since I was not satisfied with that reading, I began increasing in increments back to higher doses of levothyroxine by boosting it to 75 mcg. daily and finally to 88 mcg. daily like it was in May, 2010. At that time my cholesterol readings were outstanding. Now that I am back to 100 mcg. of levothyroxine daily, I expect similar readings when my next TSH level is drawn. At this point I am beginning to believe that my thyroid gland has been damaged by the heavy metals beyond the possibility of ever seeing normal functioning again. Depressing as that reality is, I will continue with this dose level of thyroxine until proven otherwise. As of this date, I am currently on another round of DMSA and lipoic acid treatments.

July 2012

July 2nd, I just finished another chelation treatment and so did my dog Cupid. Cupid acts like a two year old dog, full of life and vigor, but he sleeps a lot.

Just got an email from my brother and he wants to try DMSA treatments. And it is July 7th, another mouth infection responding to amoxicillin this time. This suggests it is a soft tissue problem under my bridge on the upper left side.

July 9th, and I feel like my blood pressure is up and I am experiencing light headedness. Perhaps my levothyroxine dose is too high at 100mcg per day. Tomorrow I will cut the dose to 75mcg and pick up to 88mcg daily where I was before in May, 2010. For me, that appears to be the most effective dose while feeling good. Hopefully, it will keep my weight in check, because

today I weighed in at 177 lbs. No protruding gut, either. Looking good again for 68 years on the planet.

My mouth infection turned into a sinusitis. My physician put me on Biaxin 500mg twice daily for 10 days. He also wants to see me again in two months. It is now July 28th., I am feeling much better. My weight dropped two more pounds. I am at a very trim 175 lbs. I need to get another lipid panel and thyroid check in about six weeks

August- September 2012

Mary and I have completed a couple rounds each of chelation for the last two months. Mary just had her annual flu shot so she wants chelation now to get rid of the 25mcg of mercury preservative in the shot. I am still having problems with my sinuses, mostly on the left side. Treating it with Afrin spray, doxycycling 100mg twice daily, and some Bactroban nasal twice daily. It seems to help and the sinus drainage is quiet pronounced. My levothyroxine is back to 88 mcg. now.

September 21st., I just received my lab results ordered by my physician. He ordered a lipid panel and TSH (thyroid) test again. My TSH came in at 2.41 which is good and similar to the British system for optimal functionality. This is an improvement over my 4.07 score of several months ago (April 2012). My AST or (SGOT) liver function test came in at 32 U/L (range of 17 to 59 U/L), so I am in the middle, and this is okay. My liver panel is as follows:

	Dave's readings:
Desirable Total Cholesterol: less than 200mg/dl.	206mg/dl
Bad LDL Cholesterol: less than 100mg/dl.	141mg/dl*
Good HDL Cholesterol: greater than 40mg/dl.	50mg/dl
Serum Triglycerides (fatty acids): less than 150mg/dl.	73mg/dl

(* I have two cardiac risk factors: age and family history; <130mg/dl is OK, <100mg/dl is better.)

This is not a stellar result, but I am on the right glide path. My total cholesterol dropped 12 points from my previous test. My bad cholesterol rose 14 points over my last test. My good cholesterol remained essentially the same. But my triglycerides dropped from 106 to 73mg/dl for a 31% reduction. This tells me the 88 mcg. daily dose of levothyroxine is just about right for now. So I will maintain this level until changes occur. My weight is holding steady at about 177 pounds.

October 2012

October 5th, Mary and I just completed another round of chelation; testing will be done sometime this month for both of us. I expect Mary's reading to stay the same, while mine should show some signs of improvement.

Read a sad and heart-breaking article in the Fresno Bee (October 4th) on page A8 regarding radiation/chemical testing performed secretly by the U.S. Army on a segment of the St. Louis

population during the Cold War. Apparently the area had Russian characteristics, and sprayed from high rooftops and aerial assault on two separate occasions over a ten year period large amounts of a fluorescent powder of zinc cadmium sulfide mixed with radioactive substances. Almost immediately the area's population experienced high rates of cancer and mortality. Granted, this occurred fifty years ago, and the exposure to radioactivity and heavy metals on human populations and their results were unknown at the time, this experiment is totally inexcusable. At this point, the U.S. Army has not replied to this story nor eye witness accounts.

October 8th, I began another round of magnesium maleate 500mg tablets to treat aluminum toxicity. I should be doing this more regularly with 500mg taken three times daily (every eight hours) for 10 days. The product is also a good source of magnesium.

October 20th, I just finished-up with the magnesium maleate treatment. The product makes me feel light-headed and somewhat forgetful while I am on it. In a few days I will start another round of DMSA and perhaps submit a urine sample again.

November 2012

November 2nd, Mary and I both submitted urine samples to our physician. At this point, I am suggesting that Mary's results will show the same because she continues to carry a mercury filling in a lower molar. Mine should continue to show improvement.

November 26th, Mary and I have received our laboratory results. Mary's results stayed about the same all around as I expected. However, her arsenic level is up over the last 16 months; mine is up also within the last 7 months. Our food ingestion over the last six months indicates a rather rapid rise in arsenic ingestion, probably from chicken and/or rice.

My arsenic level jumped in 7 months from 11 to 72. I am also pulling more aluminum and barium and nickel. The real eye opener is the huge drop in mercury from 2.4 to 1.1 within the last 7 months, showing the improvement since all my mercury dental has been removed. Cadmium, lead, thallium and tin remained about the same. And the newest pulled heavy metal is Gadolinium (used in MRI's) at 0.2. In short, the chelating agents are reducing the heavy metals as expected, but more work needs to be done. We also need to protect ourselves with the rice and chicken problem by buying the Tyson brand of chicken. But since all rice is infected with arsenic according to ABC News, we are in difficulty to avoid the total problem. Once again, the value of chelation becomes more and more important on a day to day existence.

I am having some right knee and leg pain and swelling. I may have injured it or perhaps my cholesterol agent is giving me problems. My physician's assistant is following me for the problem. He also says I need a physical and blood work to be done next month.

December 2012

My physical results are essentially normal on December 10th. My cholesterol is reading about the same, but my testosterone level has fallen into the low range yet still normal, but my folic acid level is low. My knee problem is essentially gone with a week's therapy of Indocin 50mg. taken twice daily. I need to do more exercising, such as jogging or walking to improve

my right leg function. If I stand in one spot too long, such as at work on the computer, my right leg begins to react negative.

I am now taking DHEA 50mg. tablet daily to increase my testosterone levels. In addition, after reading "Detox with Oral Chelation" by Dr. Garry Gordon, M.D., I've decided to boost my daily intake of oral supplements with yeast selenium 200 micrograms (mcg) per day, and 1000 milligrams (mg) of vitamin C (with bioflavonoids twice daily). Dr. Gordon insists on CoQ10 (200mg.) and Omega-3 1000 mg. taken daily also. His book advocates the use of vitamin C and selenium as natural chelators on a daily basis to assist with the body's need for chelation as an on going life experience because our planet is very toxic with mercury, lead, and cadmium. Pets and animals should also be included in the chelation process.

His expertise is in intravenous therapy with EDTA, but uses oral DMSA and alpha lipoic acid in his practice and recommendations as well. His medical practice results have been most noteworthy over the last 25 years. He states all products are extremely safe and effective in treating patients, with minimal side effects or none.

Alpha lipoic acid is available OTC and found most everywhere as 200mg. capsules. Gordon recommends taking 200mg. three times daily when chelation is considered for a three day period. Mineral supplements are held at this point, and resumed when chelation is completed. Gordon insists lead chelation may go on for 25 years to rid the body of extensive accumulation in bones.

January 2013

I received an email from my brother and sister-in-law a few days ago indicating their use of a 'green dentist' to begin their work of removing existing amalgam fillings in their teeth. My sister-in-law will be removing two large amalgams soon and replace one tooth with a cap. My brother will be followed up for treatment considerations. Both are taking chelation products now. I just finished with another three day round of chelation therapy on January 9th.

January 16th and I introduced chelation to my pharmacist (female) associate at work who has multiple physical problems at age 53, and a mouth full of amalgam fillings. I gave her my physician and dentist information so that she can get started with planning and organizing her transition into proper chelation therapy.

February 2013

My pharmacist co-worker flashed her winning smile to me today (19th), with two new composite fillings and a new metal-free porcelain crown. Another co-worker sought me out for bone and muscle aches going past eight years. He, too, has a mouth full of silver amalgam fillings since he was a kid. I explained to him I felt his fillings were causing his pain problem and gave him a choice of long range control consisting of glucosamine treatments taken twice daily or alpha lipoic acid treatments to rid his body of excessive mercury build-up. He decided to try the lipoic acid route first and get back to me after several months. Meanwhile, he is interested in getting his mercury fillings replaced with composite material.

For some reason, my right knee is swelling up again (February 20th). Now I am taking indomethacin to keep the swelling down. True, I have been exercising a fair amount, it is still

unusual for this to occur. The tendons surrounding the knee cap are very tight and stretching appears to help.

March 2013

March 14th, my right knee is better; using an ace wrap at work and for activity around the house. Enjoying golf and basketball outings.

My doctor put me on 500mg of Niaspan to get my cholesterol pattern down somewhat. After three months, my lab test shows almost no change. Instead, my physician doubled my Crestor from 5mg to 10mg daily, while discontinuing the Niaspan. We will look at this again in about three months.

My pharmacist friend does well on Vitamin C, selenium, and 200mg of lipoic acid taken daily. She is eager to start DMSA. She will begin test dosing to see if she reacts to the product before proceeding to a three day pattern on the drug to begin her DMSA cycles.

Our Fresno Bee of March 21, 2013, on page A10 records a major increase in autism diagnosis with school aged children. The age group of 6 to 17 years for autism are seeing increases from 1 in 86 children to 1 in 50 children. This is a report by a senior scientist with the National Center of Health Statistics. This represents an astounding increase of 72% from 2007 with results gathered from 2011-12 year groups.

March 29th, my male co-worker, is doing much better in his overall health, he claims. He is on chelation therapy with alpha lipoic acid and vitamin C. He uses small 25mg doses daily of lipoic acid and the same doses for 11 days of intense chelation therapy. He has lost 10 pounds and his body aches and pains are gone. He feels much better and will continue this process.

April 2013

Weighed myself April 2nd after completing chelation period of three days and came in at a hefty 182 pounds. Ran my usual run on April 5th and weight returned to my normal 177 pounds. I must be retaining water during the chelation period process. Knee problem doing better with more stretching and exercise.

April 12th, I began another three days of chelation therapy. I am currently taking 400mg of DMSA with 100mg of alpha lipoic acid every eight hours, and another 100mg lipoic acid every 4 hours to keep a rhythm for the three day chelation period. For the previous two months I was experiencing blurred vision when I was not taking the medication. But now that has subsided and my vision is normal all the time (with my glasses). At night I can read the TV print fine without my glasses. I am not sure what this means at this point.

April 16th, read an article on the net provided by KSEE 24 News about a six year old female who was diagnosed with lead poisoning traced back to her playing with children's lip gloss, one of her favorite toys for practicing in her mirror. The problem was caught when she was tested for lead poisoning before she entered an Iowa kindergarten.

April 20th, evening and my dog insisted on going outside after I set our house alarm system for the night. His urgency to pee succeeded in slamming my right hand holding his dog leach into the kitchen cabinets as the furry critter exited the rear door with me in tow. The alarm

sound was deafening, so I had to retreat and turn off the alarm system and grab a phone while continuing with the dog's business outside. As he looked up to me with relief, my dog was now content to roam the grass while I answered the expected phone call from my alarm company. After giving the operator my name and password and saying goodbye, we re-entered the house where I examined my throbbing hand for the injury caused by the slam against the cabinet knob. I was dumbfounded to note a small red area, but no BRUISE!. I always bruise, especially from my elbows to my fingers. And why not, my skin is thinner in these areas, and it has been going on for 10 years now. Hardly a mark was showing. I am not sure what this means at this point.

May 2013

Mary and I just returned from three great weeks in Europe. We visited eight countries, mostly with a 12 day cruise. I will start another round of chelation on May 26th. Running and lifting weights on a more regular schedule. Weight remains at 178 lbs.

June 2013

Ran again today and worked in the yard a bit. I have a doctor's routine lab request for cholesterol and thyroid. Test is taken on June 3rd. Scheduled to see MD on the 17th.

Received a most unpleasant phone call mid-morning on the 14th. My Sister-In-Law Margaret called through her brother to inform me of my brother's death. She suspects he passed in an instant because of a posterior heart embolism. There was no suffering. We will miss him a lot.

My laboratory results can back with essentially no change after 4 months. My cholesterol readings presently show I fall into a category 'A' (good) level. We will press on.

July 2013

I just finished another round of chelation therapy at the beginning of this month. In another week or so, I will begin aluminum treatment once again. Mary's CBC and cholesterol lab results are back; she appears to be doing very well on her regimen of exercise and diet control.

	Mary's readings:
Desirable Total Cholesterol: less than 200mg/dl.	145mg/dl.
Bad LDL Cholesterol: less than 100mg/dl.	79mg/dl.
Good HDL Cholesterol: greater than 40mg/dl.	49mg/dl.
Serum Triglycerides (fatty acids):less than 150mg/dl.	85mg/dl.

These are great readings. She is currently taking 10mg lovastatin daily.

My daughter mailed me a book (July 17th) entitled "Wheat Belly" by Dr. William Davis, M.D. Dr. Davis claims that genetically altered wheat stalks in the early 1970s are changing our

good health for the worse possible outcomes, including diabetes, high cholesterol, celiac disease etc. The book achieved #1 status on the New York Times bestseller list. This may clarify (or may not) some of the mysteries I am experiencing with my removal of heavy metals from my body. In response to the book, Mary and I are cutting are wheat intake starting today, July 22nd. I now weigh 177 pounds. Mary is about 142 pounds.

Friday, the 26th, I finished the book and decided to bake two loaves of gluten free bread. I did this using a standard wheat bread recipe. The finished product looked the same as regular bread and a typical texture, but it lacked the taste. So now I am anxious to try some sure winner recipes I obtained from the net.

Dr. Davis starts his book by explaining in great detail the genetic modification of wheat starting in the 1970s to the problem of wheat today. The gluten in the modified wheat is no longer a whole grain product releasing its complex carbohydrates over an extended period (hours). His studies show the product's release of carbohydrates to the blood stream to be almost immediate. This in turn raises the glycemic index to an alarming rate. Multiple this by the number of wheat products ingested by the consumer on a daily basis and the sugar load on our systems becomes overwhelming. This product can even disrupt the body's bone formation. He claims to improve the lives of rheumatoid and osteoporosis patients by 40% with the elimination of gluten in their diets. High cholesterol patients could also reduce their LDL levels significantly by reducing their daily intake of carbohydrates (wheat products). Peripheral neuropathy problems, dementia and brain dysfunction (seizures, encephalopathy) are also reduced or eliminated without wheat in the patient's diet. For celiac disease patients, the elimination of gluten in their diets is essential for small bowel health and well being. His gluten elimination from the diet will improve acne, many skin diseases including psoriasis, and even regrow hair.

To regrow some of my hair would be most appreciated. And to improve my thyroid function and cholesterol picture, this would be most welcomed. For Mary, she would like to improve her blood pressure problem and cholesterol picture while dropping some weight in her abdominal area. However, this is a most difficult regimen to follow--total gluten removal and no wheat! Hope is one thing, reality is another.

August 2013

Mary and I just returned from South Dakota and Wyoming. We had a memorial service for my brother on August 22nd. It turned out to be a sad and heart warming affair celebrating his life. His wife indicated that he had no hair on his body when he died. With mercury poisoning, that is a key indicator; as well as many physicians who see patients regularly and remark on the lack of body hair, and the association and observation of deteriorating health. Alas, it is too late to do anything for him, but I reminded my sister-in-law to keep working on the removal of her mercury level on August 26th.

Before traveling to S.D. and Wyoming, I made an appointment to see an orthopedic doctor when I returned from my journey (about a year ago I fell off a high rock while fishing). Yesterday I had an X-ray taken and examination. The M.D. thought it is an arthritis or cartilage problem. I told him it is a small tear in my right medial meniscus. He responded with 'let me do the diagnosing.' After the ultra sound today, a 'large' right medial meniscus tear was identified.

I am scheduled for surgery on September 11th. That explains the swelling and pain on and off over the last 12 months. I thought a little tear would heal itself. I gave it enough time to heal.

After suffering from an intestinal problem for the last two months, we had to put our beloved dog Cupid down on the 26th. He was 15 years old and weighed less than 13 pounds. He had lost ten pounds of weight in about four months or so.

September 2013

Surgery went well on my torn meniscus. Two weeks later and I am almost back to normal. Walking well and going back to work for one day on the 26th. Leaving the following day for a 2 day fishing trip to the Trinity River area about 73 miles west of Redding CA. Hope to get some steelhead and salmon fishing in with my son and grandson. Mary started another round of chelation on September 24th. I will do some chelation next month.

October 2013

October 7th, I am just finishing up on another round of chelation therapy. I will probably take a urine or hair test in the next few months to review my metal profile again. October 21st, I am wrapping up another chelation round. The Fresno Bee ran a large article on October 20th, entitled "Will Washington Label GMO Food?" on page C3. The article defines Genetically Modified Food and its content is not required with current USA policies. Sixty four countries of the world require GMO labeling. Monsanto is fighting this tooth and nail.

Before the Bee article, Mercola.com released their thoughts on "How Agricultural Chemicals and Hospital Stays Contribute to Alzheimer's," October 17th. Monsanto's Roundup containing glyphosate apparently inhibits plants from using manganese and zinc. Zinc shortages in the human body may be contributors to Alzheimer's and Parkinson's. Staying away from gluten products (wheat) is another way to avoid the disease state.

November 2013

Screwed up my healing knee again a few days ago with a simple pivot motion while carrying a 20 pound load. Doing tens therapy' provided by my son. A lot of the swelling is down and functionality is almost normal. Went on vacation over Thanksgiving to Hawaii. We had a lot of fun, but it did not help my knee.

December 2013

Saw my orthopedic surgeon on the 9th. He gave me a shot of cortisone in my swollen right knee. Today is feels better, but I still have some discomfort. I am signed up at our local gym to do some exercises to strengthen the knee, and hopefully get more functionality.

Christmas Day and the knee is responding to stationary bicycle workouts with 30 minute treatments almost on a daily basis. My gym trainer has also outlined a routine I can do to strengthen my upper body as well as work on my knee problem.

Saw my dentist last week to replace my lower left bridge in my jaw. The new bridge did not work because tooth #20 broke off. Now I need #20 pulled and considered for implant replacement (including position #19). Implants use titanium screws imbedded into jaw bone to hold a zirconium crown cap in position. Supposedly the screws are coated to prevent seepage of the metal. I will check on this when I start the process next month. If I decide to go with this thought, it will take a year or more to fix this problem.

January 2014

January 10th, as I begin the New Year. Saw another green implant dentist today. He can fix my problem using zirconium screws implanted into my left jaw bone (2) and top them with ceramic. This means no metals in my mouth, and I feel great about that prospect. Still, the procedure is expensive. My only problem is to decide if I want both implanted at the same time or spread the discomfort out over time. In addition, if I do this procedure, I must leave my previous dentist and joint this new dentist to get follow ups and cleanings. I find that unsettling, too. Still, the new dentist denounces the dental amalgam use by current non-green dentists. He, himself, suffered from amalgam (mercury) sickness looking after his previous patients. Now he uses a respiratory mask and positive pressure room to treat these patients. In a way, he is a breath of fresh air.

January 17th, I read an interesting article by Dr Mercola: Scientists explain Age-Related Obesity: Brown Fat Cells. His article details the importance of brown fat cells (saturated with mitochondria) to give us energy and generate heat in the process. Obese people have less brown fat cells, and so do diabetics and older people. Brown cells come from muscle tissue and are activated by exercise, good sleep, and cold temperatures.

By the same token essential fatty acids are necessary in the body for normal activity. Likewise, according to Lyn Hanshew, MD., (Toxic Heavy Metals and Inflammatory Pathways), Omega-3 and Omega-6 both must be in balance with the body for normal activity. Omega-3 plays the role of positive factors such as vasodilation, anti-inflammatory, enhanced immunity, decreased pain; Omega-6 does the opposite of vasoconstriction, increased inflammatory effect, immune suppression, and increased pain. To feed these positive mechanisms, B6, magnesium, zinc, niacin and vitamin C must be present in ample quantities. Heavy metals block the normal mechanism (such as mercury, lead, cadmium, etc) of magnesium and zinc, as well as disrupt enzyme activity to give the patient worse inflammatory problems in arthritis and asthma.

Got amalgam illness/poisoning? Andrew Hall Cutler, PhD, PE, and my new green dentist lists the following to consider: allergies, asthma, autoimmune diseases ALS, ankylosing spondylitis, myasthenia gravis, Parkinson's disease, Alzheimer's disease, Schizophrenia disorders, personality disorders, anxiety, panic attacks, ADH problems, learning disabilities, endocrine disruptions, depression, obsessive-compulsive disorders, manic depression, rheumatoid arthritis, juvenile arthritis, lupus, chronic fatigue, fibromyalgia, sciatica, gastritis,

irritable bowel syndrome, colitis, Crohn's disease, sleep problems, anorexia nervosa, bulimia and possible many more problems.