



---

# **Teeth and their Symbiosis with Micro-Organisms**

## **Correlation between Teeth and Organs**

**by Horst Haustein, Dentist  
Germany**



Are the organs related to the teeth or are the teeth related to the organs? In my opinion the organs manifest themselves in the teeth; i.e. first of all the symbiosis of the body is disturbed and the formation of plaque and caries follows. Finally, various dental defects or even a dental focus will appear which causes repercussions on the organs. As a consequence the respective tooth often has to be extracted.

These deficiencies do not occur if the symbiosis of the body is intact. In times of good health, teeth can be cleaned with the fingers and no film, etc. will be found on them. However, if we feel ill due to some affection, like an influenza, films will appear immediately. They cannot be removed, even by the best tooth-paste, because the oral flora is disturbed so much that plaque formation recommences immediately. Additionally, the pH value is also changed, and if the flora is destroyed by gargles or if amalgam and gold form small batteries in the mouth, these symptoms will appear considerably sooner.

### **Correlation between organ and tooth begins very early in life**

Is it true that the organs act towards the teeth? When we consider an embryo, the mother may suffer from various complaints, i.e. in kidney, bladder or other organs. As a result a loss of teeth may occur during pregnancy. The proverb "Each child costs a mother's tooth" actually has nothing to do with the pregnancy. In the past, it was due to a lack of hygiene and medicine in the lower social classes. Nowadays, health assistance has improved, but still necessary measures are not taken

because the correlation is not explained to pregnant women.

As the saying goes: "The child takes whatever it needs". I would like to restrict this by saying that the child has a swift metabolism. This becomes obvious when considering what develops from the hardly visible sperm and the oocyte within nine months.

This swift metabolism is very demanding. If the mother's food intake is insufficient, the nutrient media needed are taken out of her deposits or organs and integrated into the child's cellular metabolism. Thus, also a part of the mother's diseases will be transmitted. Nevertheless, a healthy child may be born if the mother is effectively and biologically treated during this time.

### **Early biological treatment of the pregnant mother**

Affections of a pregnant mother can also be seen in the oral cavity. Despite the best care it is impossible to cope with the plaque formation and the rapidly growing caries (secondary) because the mouth flora is not in an equilibrium. In consequence, gingivitis will arise which in turn is related to the organs. These inflammations can appear as a purulent form or as a gingivitis gravidarum epulis (stage III). Depending on how severely the symbiosis has been disturbed, the epulides more or less hang over the teeth like grapes.

These changes in the oral cavity may also occur during menstruation or otherwise in a 28 days' rhythm. This is another proof for the relationship

of the teeth with the organs resp. hormones. At this state a normal intake of food is often impossible. The gums are bloated, venously congested and tend to bleed easily but coagulate quickly. They are very painful and often smell putridly. Also ulcerating processes will occur because proper care of the oral cavity is difficult at this phase. The pregnant patient has an unsound sleep, she feels exhausted, suffers from obstipation (often the whole reason for the consultation) and/or has difficulties when urinating; her lymphonodes are hard and palpable up to the first rib whilst sensitive to pressure.

The swelling of the lymphonodes corresponds with the degree of the stomatopathies. The lymphonodes have already been strained by diseased organs and have shown swellings before changes in the mouth arise. If the lymphonodes are soft externally with a hard centre, the lymphatic system is still functioning fairly well and must not be blocked any further by penicillin or sulfonamides. Metabolic disturbances and their consequences have to be eliminated.

The biological remedies of SANUM-Kehlbeck are highly suitable for this purpose. Experience throughout many years has proven that the application of these remedies support the well-being of pregnant women most sufficiently. Heel preparations can be combined with the SANUM remedies, and so, spontaneous success without any harm to the mother or the embryo is often experienced.

Lesser disturbances of the gums, for



instance gingivitis progressiva, may be cured without any great expenditures by the administration of biological calcium preparations. In cases of disorders of the menstrual cycle, calcium out of natural products (oyster-shells, oak-bark etc.) will soon and lastingly show its effectiveness.

### **The child of a mother with a disturbed symbiosis**

The child born by a mother with disturbed symbiosis will probably appear in the dental surgery at the age of two and a half or three years with brown, destroyed and cone-shaped teeth. It is hard to say whether the remaining teeth will be better. Certain conclusions can be drawn from the habitus, type and behaviour. Was the child breast-fed? Was it nursed with biological food instead of can products? Has the life-rhythm on the whole been harmonized between periods of rest and activity? These and other questions may give indications for a prediction about the remaining teeth.

Scrofulous children need calcium preparations in appropriate doses. These children have a better development of the dental enamel parts than of the dentin substance. The teeth can be broken with bare fingers or can be scaled off with instruments without creating any pain. The enamel is formed by the ectodermal ectoblast and therefore has a different structure than the dentin. This has a mesodermal development and is influenced by other rhythms. In this respect I need not discuss the question of biological nutrition or the consequences that vaccinations have on organs, endocrine glands or on the dental stock.

### **Teeth reflect former processes**

It has been proven that an infection which has been regarded as unimportant, can later manifest itself as a long-term cystitis or nephritis with all consequences. The experienced disturbances continue to act as hardly perceptible inflammations in the childish body and become chronic. In spite of their short, hardly recognizable duration, these processes become visible in the development of the teeth. If the later dentition of the remaining teeth is pursued, one can see at which age these disturbing processes took place.

The fissures in the enamel construction which have been caused by a disturbance of the calcium budget reach as far as into the dentin and show the period of their development. We call them rachitic dentitions, but in fact they signify unrecognized infections. Rachitic appearances have the same genesis (disturbances in the calcium budget), but the period is longer and more precise and also more related to the bone construction. Judging the results of unrecognized infections, small grooves, transversally running to the longitudinal axis of the tooth, are taken into consideration. Comparing these findings with a dentition table one can state at which stage of tooth formation the affection took place. Thus, the time factor serves as a recollection clue. Up to the age of approx. 10 years the differences are about plus/minus 1/2 year. After that one can calculate up to plus/minus one year.

This time factor is of great importance

because the diseases are often recognizable only for a short period (e.g. less serious intestinal infections). Therefore they are merely considered as slight irritations and are additionally veiled by medicamentous treatment.

These grooves can be found in irregular intervals in a lot of patients. This fact shows the cyclic succession of the ups and downs of the body's defense power. Therefore it is possible to find the lymphatic retrocongestions of the illness and to point them out to the patient almost in chronological order.

### **Mucous membranes also indicate processes**

Attention must be paid to the connections of the lymphatic vessels which reach to the angles of veins, to the existing anastomosis (transversal connections) and also to the lymphatic caverns. Then it becomes perceptible which kind of illness may arise. It also shows that secondary infections, although appearing to be an acute illness, have merely veiled a primary disorder.

It is known that the lymphatic vessels can retrocongest up to three nodes. The lymphatic vessels of the ears, the oral cavities including the tonsils and those of the bronchial tubes retrocongest to the lymph nodes of the teeth and the gums (that means: bronchial tubes - ear - nose - teeth). These closely attached processes mainly show up on the mucous membrane with coatings specific to the illness and with respective active germs. Gingiva affections arise and often



reach terrifying dimensions. As soon as these findings in the oral cavity improve, we can be sure that the patient is recovering in general. Here, too, the interrelation with the organs becomes evident.

Tables for acupuncture also show the relation of the organs to the teeth. Teeth are depicted as the cause of illness. However, this is not quite correct. The symbiosis of the mouth will only be disturbed as a consequence of the illness. The gingiva (firmly lying mucous membrane) and the mucosa (movable mucous membrane) indicate the inadequate functions of the organs by their colouration.

In cases of diabetes, for instance, the gums show a typical paste-like consistency with a soft tonus and a bright bluish-red appearance. In cases of nephritis they are grey to blue-grey and tensely swollen, not venously congested and often have a smeary covering. Febrile

processes also entail stomatitis ulcerosa with a smeary layer, but show little congested blood at the margins of the ulceration. The stomatitis ulcerosa caused by a viral infection of the oral cavity has congested blood at the margins and is accompanied by a light intermittent fever.

All these affections of the mucous membrane can only appear under certain environmental conditions (Vincent). These diseases strongly depend on the lymph flow. If it is blocked by medicine, healing is very slow. In this case the body gets a further burden instead of relief.

#### **The transversal grooves of the teeth demonstrate the development of illness**

During dental growth, all organic burdens mark their „runes“ onto the teeth. These runes in the shape of transversal grooves are deeper or broader, depending on the strength

of the illness and its duration. Comparing these transversal grooves on the teeth with corresponding table data, we can determine the approximate time at which the harmful incidents occurred.

All stronger influences during and after puberty will only be perceptible at the roots of the teeth. In my experience, the disturbance of the calcium budget continues as a structural change of the spongia of the lower jaw from the 15th year of life onwards. It begins between the root tips at the age of 15 and goes up to the canalis mandibulae till the 20th year of life. From this age onwards illness is recognizable in the marginal extent of the alveoli.

*First published in the German language in the SANUM-POST magazine (1/1988)*

© Copyright 1996, Semmelweis-Institut 27318 Hoya, Germany

*All Rights Reserved*