Introduction to Dr. Moldovan

Welcome back to the conversation. Today I have Dr. Moldovan with me to talk about the Silent Killers in your mouth. Hi, Dr. Moldovan. Welcome. Hi, Laura.

Thank you for having me. I'm excited. Me too. I want to introduce you to our audience and then we're going to jump right into this. You're a double board certified periodontist and a seasoned nutritionist.

You're not just a biological dentist. You are what I would call a game changer. Not only are we bringing you on to this summit to speak to our viewers, you actually have worked in my mouth and my husband's as well.

And I trust you implicitly. And that's why I've got you here today. Now, you're the founder and owner of Beverly Hills Health and Dental Wellness and you have multiple locations in Southern California.

You're an expert in the oral microbiome microbiome and the founder of or Asana, which offers natural science based products to brighten your teeth and nourish your mouth.

And our viewers can find you on your YouTube channel. As Dr. Sanda and your podcast, "The Holistic Dentistry Show Podcast." You've written a book called Heal Up!: Seven Ways to Faster Healing and Optimum Health.

And today we're really going to connect how oral health is linked to inflammation and chronic health conditions and how if you don't solve these things or if you don't go looking for these things, you may be in an endless cycle of trying to solve your symptoms and your health problems.

So as we jump right in here, can you link for us oral health gum disease and how that contributes? And I guess gum disease is not just it, but oral health in general, because we're going to go we're going to talk about a lot of things.

We're gonna talk about all the things that happen in our mouth. But how does oral health contribute to systemic inflammation and chronic disease? I can remember in my practice, you know, for years in Western medicine, I always knew that your mouth was a doorway for infection into your body.

And we know that in Western medicine we tell people to keep their mouths, you know, clean and get their cleanings and take good care of their oral health.

Well, Western medicine is missing most of the boat, so to take us there. Yeah, because, you know, most doctors don't look in the mouth, really. And that's the biggest problem, unless we're working, of course, with integrative physicians.

But number one problem with with gums, especially when bleeding gums start to occur. Most people ignore that, like, oh, my gums don't work hard, they bleed a little bit.

So what? Well, if your hand was bleeding, how would you feel? Just spontaneously bleeding. And 80% of the population has some kind of disturbance in the microbiome and when gums bleed, that bacteria from the mouth has an opportunity to enter the bloodstream and create inflammation.

That's systemic. So, for example, periodontitis or gum disease has been linked with coronary artery disease.

Oral Health and Systemic Inflammation

We know that that bacteria from the mouth is found in arterial plaque that could lead to increased rates of heart

attacks and strokes. And so there's more to this, though, right?

So I want to explore today. I want to explore habitations. I want to explore root canals. I want to explore amalgam fillings and talk about all the ways that the procedures that we're doing in modern dentistry are actually contributing to our overall sickness, not our wellness.

In fact, we may be doing more harm than good in many instances, and I'm sure you'd agree. So let's start with let's start with oral pathogens and what you're seeing, and maybe this is a good time to talk about habitations and what that means.

It's not a cavity, what that is, and how we find them. So a cavitation is basically a hole in the jawbone, just like a cavity is a hole in a tooth. And how do holes get in the jawbone, one might ask.

Well, typically holes are in the jawbone because bone hasn't healed. Something is there that's preventing healing. Typically what we find in these holes in the jawbone is bacteria, parasites, viruses.

How do I diagnose somebody with cavitation? Is a cone-beam CT scan, which in biological dentistry now is so important I cannot diagnose. I cannot treat patients without one.

That's why we have a cone-beam CT scan at all of our locations. It's part of a biological dental exam. Why? Because regular, traditional X-rays only show us 50% of the problems.

So what are you seeing in there when you do this? And what are you looking for? And is everybody qualified to read a cone-beam CT Not everybody's qualified, but there is great dental radiologist.

So if you don't know how to read a scan as a dentist, you know, just send it to the radiologist and they'll give you a full report of what's going on there.

When I see areas that, you know, let's say wisdom teeth that were taken out and, you know, for those of you remembering, oh, I had a dry socket while in that dry socket, what does that mean?

Bacteria from the mouth invaded the bone and it didn't allow it to heal, creating a dry socket. And the traditional treatment at the dentist is just to pack it with some kind of gauze and medication and just letting it heal on its own while in the process of healing bacteria, viruses, fungus get actually trapped inside the jawbone and some of it kind of morphs into these organisms that don't need oxygen to survive.

So they they just live there. Our immune system keeps up with it. It doesn't typically cause pain. Some of my patients come in, you know, I'm so chronically fatigued, I don't know what's wrong with me.

I have brain fog. My doctor tells me I have high inflammation in my body and there's really very little to know dropping. A lot of times it's just really tightness that patients actually feel right here on the side or maybe tonsillitis that is recurring.

That's a sign typically that you might have a cavitation in the side, but typically there's no pain associated with it. It's unbelievable. Now, I know because I know you.

I know you've got some crazy stories about what you found in people's mouths. And I've actually seen some pictures of some of the stuff you found. Can you tell a parasite story? Absolutely.

I love to share a story. I have several. One of them that I can think of, I recently actually posted a YouTube video about this, you know, a young patient.

And she was in her late twenties for last couple of years, could not get out of bed. She couldn't hold a job because of the brain fog. And she used to be a cheerleader, had a lot of energy like.

And one day I could I just fell into bed. I couldn't get up anymore. And I think what happens is, you know, we get this glass that's filling up with all kinds of inflammation.

Up until one day when Achilles, the drop that spills the bucket and our immune system can no longer keep up with it. And that's what happened to her. And when I took her clothing CT scan, she had perfect teeth, no cavities, perfect gums.

But when I looked in the area where her wisdom teeth were taken out, huge black holes on the CT scan. So what I did to treat these cavitation, I actually make a small incision in the back and I open it up.

And as I opened it up and I pressed on the gum, these gray, squiggly, warm like structure, like, just came out of the gums. I'm like, Oh, that's it. I got to record this.

So I actually got some, some footage because it's hard to believe that something like that can get stuck in code for years and years. She couldn't believe it herself.

And this I treated her, I want to say, about a year ago and I mean a few months after I treated her, she went back to work. She's holding a job again.

Her mind is clear. She got her energy back. And that was that was that was crazy. Did you treat her with ozone? Can you talk a little bit about that and what went the application of that?

Cavitations and Hidden Jawbone Infections

Yeah. So the way we treat these kind of lesions in the jawbone is I open it up, I have to scoop out all these microorganisms and I always like to biopsy because if this stuff is in the jawbone is somewhere else, it's not just there.

Some micro microbes like to hide themselves from the immune system. So our immune system is not great. That can detect everything every time. But some particles do escape, some microbes do escape, and they can be launched in other places in the body.

That's why we believe bacteria from the mouth lodges in the brain. That's why it causes brain fog. So once we remove the source or the breeding ground through ozone and ozone is something that sterilizes bacteria, viruses, pathogens, impair a science and it doesn't injure ourselves.

That's why I love ozone. Now I clean everything up. I actually draw blood and use someone's own growth factors to put back in the site to promote the healing.

I never, ever do something that's synthetic, such as a bone graft that comes from cow, which by the way, is actually caused, can cause an immune reaction in itself just using the patient's own natural healing potential.

But exponentially magnified. And what you just described is one of the hallmark signs that you're working with a biologic dentist, that you're not going to be using synthetics or, you know, bone grafting.

You're going to actually use much more natural and healthy alternatives to helping people solve their oral problems. Now, this brings us to root canals, and this is a huge topic, and I know it might seem like we're cramming information here, but I've got so many questions for you in the time that we have together.

So can you talk about root canals and the danger and maybe also talk a little bit about why they're so prevalent in our modern dentistry? What's the deal here?

Yeah, and I have to share my story with root canals. I actually had a root canal when I grew up in Romania when I was 14 years old. And I didn't you know, I didn't know anything back then about biological dentistry and that root canal since I was 14 over the years, it started turning dark and I was looking at I'm like, Why is this turning dark?

I finished dental school. I started, you know, being a biological dentist and learning more about the dangers of bacteria on the jawbone. And as I was flossing it, I started to detect the smell.

Looking at the X-rays, people were saying, there's nothing wrong with it. Your tooth is fine. Well, I listen to my gut and I said, you know what? I'm going to take this tooth out.

I took it out. It just so happened that it was going to be on the meridian of digestion. And by the way, I didn't take it out myself. I actually had a colleague.

I took it out. To ask, Do you do this yourself? You're a crazy surgeon. So after I removed that, I also needed the site. I had an implant placed right after removal and only no bone grafting was done when I left.

When I was healing, I started to notice my digestion, started to improve because this tooth was on the meridian of digestion. I couldn't believe it. You know, I had this tooth with me for, you know, almost 20 years by the time I had to remove teeth and my digestion was sluggish, I couldn't tolerate certain foods.

And it really helped me by removing the stool, really improve my digestion. And so what's happening there with root canals? Why are root canals such a problem and why do you go looking for them when people come to you with I mean, obviously as a by the dentist, you're doing a full health intake and you're learning about people's whole health history because what's happening in their mouth can give clues to what's happening with their symptoms in other parts of the body.

But what's why are they so bad for us? Yeah. So essentially root canals are dead teeth. That's what they are. And why we're root canals are really invented is really to help to find a way to hold the tooth in the bone so people can chew with it.

So like, oh, great, I don't have to lose my tooth. But unfortunately, a lot of bacteria gets trapped inside that root canal treated tooth. There's many, many side channels.

It's inside of a tooth. And the Adonis or the root canal specialist really only cleans the main canal. The studies that we do have on our treated teeth is that they can hold 50 times more bacteria inside of those little channels and healthy teeth.

And once that bacteria is inside, the tooth spills into the bone, the tooth start to turn black and the bone around. It sometimes turns black as well because, you know, as bacteria spills into the drop bone, it actually gets inside the blood vessels and people start to feel sick.

It increases the level of inflammation in the body. And I think that's the real problem with the root canals is the level of bacteria that they hold inside.

I know there's people watching right now who are thinking, gosh, I've had four or five root canals. What should they do as a biologic dentist? What do you do about root canals?

The first thing I would recommend is to have a clean CT scan to really evaluate the root canals thoroughly. If you go to a dentist and they just take those two dimensional X-rays that you would normally get, those are not enough to really diagnosed and to, you know, to know that things are okay.

So you must see a biological dentist, get a CT scan to analyze the intricate structure of those seat and see if there's any bacteria that's spilling into the jawbone.

Root Canals and Ceramic Implants

And especially for those of you listening that are not feeling well, you have chronic fatigue, brain fog, you're dealing with autoimmune issues, and these are the root canal treated.

Teeth are going bad or they're starting to develop cysts. We recommend removal typically, there's also a process called pretreatment or redoing the root canal, but the likelihood that it's going to work is only in the 75% chance.

So, I mean, it depends. In order to achieve good resolution, I'm always a believer of long term stability. If our root canals gone bad, my recommendation is to remove and replace it with a ceramic implant.

Okay. And, you know, let's talk about ceramics since you mentioned that, you know, a lot of people have metal implants and there's a difference between metal and ceramic implants.

And in fact, I even learned from you and we'll get to this in this interview, we'll talk about, you know, amalgams and mercury and replacing fillings.

And we put ceramic fillings in to wear into my teeth where my mercury fillings used to be amalgam fillings. So why do we want to use a ceramic implant?

Great question. A lot of people still don't know even dentists that ceramic implants exist. And some people do have a problem with titanium implants. Titanium implants, just to give you a history, have been around since the 1980s.

And it wasn't accidental discovery, actually. You know, the scientist, Dr. Brennan Markey actually wanted some pins to point. He was studying bone growth and he found some pins in the lab.

They just so happened to be titanium and he put them in the leg of an animal, actually, and he couldn't remove them. After six months they had fuzed to the bone.

So this process is called ACL integration and there's only two different substances that fuze to the bone, titanium and ceramic zirconia basically titanium was first and then about 20 years later we got into ceramics.

So ceramic dental implants actually have been on the market for about 40 years. They're not that reason. People don't know that. So we do have a lot of studies.

The ceramic implant that I use today called ceramics has over ten years studies, 15 year studies that actually in thousands of patients is just as successful as titanium.

The big difference between titanium and ceramic is that we want to releases ions such as, you know, titanium being a metal. What happens in a moist environment, it corrodes, it goes through the process of corrosion.

Ceramic implants don't corrode. They don't release ions in the environment or in the mouth, for that matter. So we know in the case of titanium implants from periodontal studies that titanium particles actually are found in the surrounding tissues of the gums they've even found in the lymph nodes.

The clinical significance of that that we know more in autoimmune disease, people with autoimmune disease should not get titanium implants with the information we have today.

We didn't know this ten years ago, but today we know that in people with autoimmune disease, titanium can actually make that worse. And not just titanium, any metal like mercury, for example.

Yeah, I mean, I know people are watching this right now going, oh my gosh, I have to I have root canals, I have titanium implants, I have mercury fillings.

What am I going to do? Well, you know, I have a burning question. Why isn't conventional dentistry using ceramic if it's so much safer? I think it's that because they haven't learned it.

And even though we have the company that's trying to promote and actually I'm a frequent lecturer on the ceramic dental implants system in the dental community, and I offer Hands-On courses through their program.

There's not a lot of interest because it's hard to learn something new and it is a little bit more technique sensitive to place a ceramic implant. There are more and more specialists who are actually providing ceramic implants because more people are asking for it.

There's more education on it and people can understand the difference. And I think there's an awakening to understand that, you know, if you're putting something in your body, you better know what it is and not trusting the doctor as blindly.

Okay. So we're going to do this interview in two parts. We've got about 5 minutes left on the first part of it, and I want to spend that time on amalgams.

So amalgam fillings have mercury in them. And I came to you for help getting rid of mine that were placed 20 years ago. My husband's were placed. Oh, gosh. When he was a teenager.

So his were 35 or 40 or 40, almost 40 years old. And what did you notice when you got into Sam's mouth? His were older than mine. And when we came and you looked in there and we did all of our combined sets, you notice something about Sam's amalgams?

Yeah, they're actually expanding. They were corroding, expanding and cracking the teeth. So that's something that that happens actually with mercury fillings.

A lot of people don't know this, but I actually lost a tooth because I had a huge mercury filling that eventually crushed my tooth in half. So you can actually lose teeth that way.

A lot of people say, Oh, what's the big deal? All these mercury fillings don't hurt me. Why should I remove them? And really, what happens and you know, there's actually a great video online called The Smoking Tooth video.

Essentially, we know anytime you eat, you brush your teeth, you're eating, especially hot foods, small amounts of vapors of mercury come off the teeth.

And where does it go? We ingest it so that mercury gets attached to the fatty tissues. You know, it's a neurotoxin. And especially for mothers that are listening or mothers to be that mercury gets passed on to the unborn baby.

You know, I was researching, you know, we were just recently writing I was writing a big blog post about toxins in the environment. And I was doing some research on mercury and I was looking up research articles.

And of course, I came across FDA Web site recommendation funds. The Centers for Disease Control and everything that came across was really propaganda for mercury is safe.

We won't talk about that for a second because the government's telling us it's safe and we're here saying no amount of mercury is safe. Zero. It's literally one of the most toxic things to the human brain and the human body.

There is no safe limit of mercury. So let's talk about that. Yes, it's a political issue at this point, Laura, in a lot of the European countries, mercury fillings have been banned.

But sadly, here in the United States, we still place them, especially in the low income people and kids. And studies in sheep show that, you know, the moment you place a mercury filling in somebody's mouth within a month in this particular study, the sheep's liver, kidneys, brain was full of mercury.

And this happens in humans as well. And it's irreversible. So yes, we can. Chelating and I went through years of collation to try to get it out of my body, but the best way is to avoid it and really educate yourself to it and not let the dentist just put in, especially, you know, on Medicaid, Medicare or medical put in just any filling, you know, that they have available.

Yeah. You know, when we went through the process of removing ours, I had like a long discussion of it.

Mercury Amalgams and Safe Removal

You have a team of people that work with you, so one of your dentists actually did mine and he was explaining to me, you know, I was concerned, like, is this safe to remove?

This is disrupting the amalgam and disrupting the mercury. Am I going to be at risk? And there's a lot of precautions that go into place when when you're removing an amalgam.

But what he's told me that struck me as fascinating was he was at more risk than me. And the people working on my mouth were at a higher risk of getting exposed to the mercury than I was while they were removing it.

You talk about that. Absolutely. He's absolutely right, because, you know, we're being exposed on a daily basis from this removal. So what happens when we come into a mercury filling, the vapor that gets released is over 2,000% higher than the EPA allows in the atmosphere at any time yet in dental school, we're not taught to remove this safely.

And actually one of my colleagues, she actually got some mercury intoxicated. She's no longer practicing because she didn't know any better. And unfortunately, she found out about it too late.

And maybe there's no coincidence that the highest risk of suicide is in dentistry in terms of professions. And because, you know, mercury is a neurotoxin.

And a lot of dentists were not using a precaution when cutting into mercury, are for sure toxic and it's affecting them. There's precautions, though, that you take when you're removing amalgams to protect me, to protect the dentist who was working on my mouth.

Can you talk about because I want our audience to be really clear that there's a very safe way to do this. And once this was explained and of course, I have full trust in you and the way that you practice dentistry.

And so I knew I was in safe hands, but I'm also very inquisitive and I like to know how things work. So yeah, so it's about that. Very, very important if you're considering having your mercury fillings removed to find a dentist who's certified in smart removal safe from Mercury, a certification is important.

And what do we use? We actually use this kind of dam that isolates the tooth in question and prevents you from swallowing any of the material that's coming off the felling.

Also, it's got this huge suction that we put in front of you to suck the vapors that are toxic. So the dentist and the assistant are actually wearing gas masks, as you notice, to protect themselves from the environment.

Don't make the mistake I made. I actually had my mercury fillings replaced in dental school when I knew nothing about safe removal and I googled a lot of it and actually I got headaches from that blurry vision.

I feel well at all and I couldn't understand at the time understand why I'm feeling sick. It wasn't until a couple of years after that that I had my mercury levels tested in a natural park and they were through the roof.

We know. Yeah, the smart removal certification and the process that comes with that is actually tested to prevent ingestion of mercury. This has been so valuable so far.

Dr. Moldovan, I want to thank you so much for joining us today for this talk on oral health and how it pertains to the root causes of chronic illness to our audience, I hope you found our conversation insightful and helpful.

If you're a summit purchaser, stay right here because we're about to dove in even deeper into this discussion with Dr. Moldovan. We're going to cover the mouth microbiome and what you should look for when you're searching for a biologic dentist in your area.

If you're not a summit purchaser, click on the button on this page to get access to a continuation of this conversation and many others and get the tools you need to reclaim your health.

If you're watching this continuation of my talk with Dr. Moldovan, thank you for being a valuable member of our community and we're going to dove right back in.

Dr. Moldovan, I would love for you to talk now about the oral microbiome because I know this is a huge area of expertize of yours. You have a whole line of products that supports the microbiome and I know this is a passion topic for you.

So why I think people are even surprised to hear what I thought that was just in our gut. But there's our gut in your mouth right? Exactly. The mouth is the opening of the GI tract.

So we must look at the bacteria that happens there. Yeah, I'm a periodontist. So as periodontist, we actually look at the terrain of the mouth and this can be out of balance.

The same thing like the gut from stress, from using too much Listerine, for example, too many chemicals in your mouth. If you're killing all your bacteria, more of the bad bugs are going to grow back.

So in my practice, one of the first things that I do, especially people with bleeding gums and bone loss around the teeth, which can be about 80% of the population, mostly from from poor oral hygiene, are maybe not wanting to floss so, so important to practice good oral hygiene.

But some of this bacteria is transferred down to us from our parents. So some people say, oh, yeah, my mom lost her teeth at an early age, so you might have inherited genetics, plus the bacteria that goes hand in hand with that.

So simple tests we do is a swish and spit test. You swish, you spit in a test tube and and we analyze the 11 different kinds of bacteria that can cause oral inflammation as well as brain fog or rheumatoid arthritis, gut issues, etc..

So you have a whole line of oral products that are geared towards supporting the oral microbiome, right? Yeah. I think we're we have to step away from trying to kill everything because after all, there's ten times more bacteria in and on our body that there's human cells.

So we're never going to win that bottle. Battle of constantly using antibacterial mouthwashes we have to nourish the good microbiome. So I recommend that you use something natural.

I have a whole product line of or a up product that or Salon.com based on nourishing the microbiome. So don't use fluoride. Fluoride is really not necessary.

I think using like a mineralization probiotic tooth powder that I created, it has calcium hydroxy appetite to really nourish the enamel as well as prevent cavities.

So many studies to day show that like having a probiotic after brushing and flossing can help decrease gum inflammation, decrease cavities, improve breath, and even help with sinus health and airway health when our mouth is healthier.

Oral Microbiome and Fluoride

And, you know, you brought up something that I've got to know more about. So what's the deal with fluoride? I'm sorry I got cut off for a second. So what's the deal with fluoride?

To use it or not use it? I am not a fan of fluoride and actually I looked at their studies on fluoride and really we don't have good studies to show that fluoride kills cavities.

There's a great documentary called Fluoride Gate and really explains how fluoride ended up with our water supply. And really it ended up in our water because of an agricultural byproduct.

That's what fluoride was. And basically they didn't know what to do with it and a great way to get rid of it through the water. But many European countries and many communities have banned the use of fluoride in the water in the United States is still happening.

They actually just decreased the limit from one parts per million, 2.8 parts per million. And I'm not even sure why this decrease in fluoride may be because, you know, they ran out of their, you know, stash that they were supposed to dump in the water.

I don't know. What what's the danger of fluoride? Because we're taught, you know, as we raise our children, that we should be giving them fluoride treatments, that we should be having fluoride fluoride in the toothpaste.

But what is the danger to the human body that fluoride. The danger of ingested fluoride, it actually can weaken the teeth. So people that have fluorosis or these brown spots on the teeth are the result of too much fluoride in their water is a problem they actually can cause more brittle teeth and more brittle bones.

The biggest problem, though, is not the effect that it has on the teeth, but the effect it has on the pineal gland. It actually will calcify the pineal gland.

And we know that fluoride decreases the IQ in kids. There was a study done to show that kids with higher level fluoride in the water had lower IQ levels.

Yet we still use it here in the United States. Yet we still use it and we don't need it. The thing is, as you know, even as adults, you know, sometimes you go to the dentist, they want to do these fluoride treatments.

No, you're actually better off using a calcium hydroxide appetite, you know, in your food, lower your sugar, really change your diet if you're prone to cavities.

There's many other ways to to protect your teeth. And then music fluoride, which doesn't even work anyway. So this is this is becoming such an enlightening discussion.

I want to keep going with the comparison of conventional dentistry to biologic dentistry. Could you share could you share with our audience if there are other materials or procedures, materials used in dentistry or procedures and dentistry?

So we've talked about a couple, right? We've talked about amalgam versus ceramic fillings. We've talked about ceramic versus titanium implants, we've talked about root canals.

But I'm sure there are other products that you got to stay away from. Yeah, the estrogen disruptor, BPA, and it can hide in a lot of the let's see, mouth guards, night guards now we can choose now BPA free and also fillings.

You know, a lot of people go to the doctor speaking of mercury replacement and they say, oh, you know, give me the white fillings, but not all white fillings are created equal.

Those can be toxic as well. We use a BPA free selling in our practice, but you can ask your dentist, is this filling BPA free? If they don't know, it's a huge problem.

They should know what they're using. Well, I hope mine is. I have one of those. Yeah, well. Oh, yeah, hard to tell. I just, you know, but if you if the recent ones in our office, they were 70% filled with ceramic.

So it's a liquid ceramic filling. It's a material that actually comes from Germany and it's much more stable. You know, what's the problem with plastic?

You know, if you put it in hot water, it starts to become soft. And that's the problem with plastic fillings. Not only that, they release BPA every time you eat something hard is that they actually shrink a lot more than ceramic fillings.

So you end up replacing this filling a lot more often because it starts to leak underneath. Right. Next time I see you, can we look at my white filling?

Make sure it's no longer. Concentrated on the amalgam. I'm sure we would have noticed if something. You would have noticed. Okay, so what other any other things that are used in the regular dentist's office that are dangerous to us?

Yeah. And sadly, you know, we're undoing so many things that were done in dentistry. What were redoing them like in a safer way? I think, you know, one man's food could be another man's poison becomes also a dental materials.

And the best way to avoid that is to do a biocompatibility test for fillings, especially for people that have high sensitivities to everything. So the patients that come to our office, oh my God, I'm sensitive to this.

They have a long list of allergies. We say, okay, you know, even though we know our fillings are safe or most people definitely have allergy tests and we use a test called Biocon to really test us.

Tell us like what exactly is good or not good for that patient's body. So we've covered a lot of ground today. And I'm going to have you I'm going to have you share with our audience what we should be looking for in a biologic dentist, share where to find them.

And the questions you need to ask that are really important, because I learned from you and the other dentist that works in your office that anyone can call themselves a biologic dentist.

And that's kind of scary because it's not like there's not a regulatory board making sure that you're doing everything right as a biologic dentist, right?

Yeah, exactly. And that's one of my missions to put, you know, biological dentistry to make it more standardized and really put it on the map as a healthier style of dentistry.

And there's some questions you can ask. Number one, do you use fluoride? I think if your dentist uses fluoride, they're not biological. Number two, do you use ozone in your practice?

Every biological dentist should use ozone because there's nothing else that replaces it. So they need to use ozone in the water inside their units as well as ozone, gas underneath the filling to make sure that that area sterile before it's filled.

And I want to make a distinction here. Not only do you treat with ozone like you did with my husband, the water flowing through your pipes that goes into my mouth when you're working on me is ozone needed water, which is that is a huge clue that this is a real biologic dentist office.

So not only ask if they use ozone, ask if they have also needed water. Absolutely. We use it also as a rinse in the office. And you can also ask them another question is what kind of mouthwashes do you use if they tell you, oh, we use chlorhexidine, that's toxic and actually paradox is another name for it, or perio guard.

It's commonly used by most dentists, if you're biological or holistic, that is using that Goldfine and another dentist, because they're clearly not understanding that these chemicals shouldn't be used in somebody's mouth.

Okay, what else? Give us some more. This is so. I inquire about fillings. What kind of fit do you use? BPA free fillings. Do you use BPA free night cards?

Do you have a comb beam CT scan in your office? Reputable biological dentist by now have a comb beam CT scan in their office. Mm hmm. And or do you do you put amalgams in?

Oh, yeah. Did you have are you certified for smart removal? That's a great question to ask for sure. Okay. Anything else? And then where we can find biologic dentists, because I know everybody's going, how am I going to find one in my area?

Yeah. The best way to find a dentist, that biological dentist in your area is to go to a I, a OMV. I'm a member as well of our association, International Association of Oral Medicine and Toxicology.

Finding a Biologic Dentist and Home Care

I combed t talk and they do have resources there for patients. You can go find a dentist in my area and unfortunately they're not screened by the association.

So some of them just by paying a membership, there are biological dentists. So you will have to call and ask the questions that I gave you earlier to ensure that that's the right place for you.

Okay, perfect. Now, as we wrap up here, I just want to give you the floor to talk about I got asked my million questions and you know better than I do.

What did I leave out? What does our audience need to know? What are the last pearls? I mean, our audience is savvy. They've been working on their health for a long time.

They're learning from this summit that chronic infections, toxins, nutrient deficiencies, traumas, stress, all of this is blocking their ability to get well.

And I would put the topic that we're talking about today into the toxin and infection bucket, right, if we don't solve these issues. So what else would be just parting words, other concepts?

We didn't cover words of hope. What would you like to say if floor is yours? You know, the human body is so complex and the mouth is oftentimes forgotten.

That's what we notice. People go to that. I don't feel well. Okay, let me check my heart. Let me check my oil. I'm going to do this detox. I'm doing I. V. ozone.

But the mouth typically the last thing to be looked at. So definitely, if not feeling well, I'll go to biological bonus, get a CT scan and remember that at home, in order to be able to clean well, I want to give some guidelines here.

Number one, you don't have to use an electric brush. You can, but using also a manual brush with the right toothpaste or tooth powder is very important.

Try to find natural products, avoid alcoholic mouthwashes okay those are actually can increase the risk of oral cancer when you use alcoholic mouthwashes and a lot of them have actually a very low age.

So I don't recommend that using a water flosser it's very, very important to clean around the teeth, around implants, around the veneers. Those of you that use string floss, great.

But make sure you use it correctly. String floss art. You know, a flossing is very, very hard to master. So even if you use string floss, I encourage you and I challenge you to actually do a test, use the string floss and then use a water flosser and see if you get any more things out than with a straw.

Most of the time you. Well, and then thirdly, don't forget to check your tongue. We didn't talk about that. The tongue can hold up to 60% of bacteria.

I highly encourage everyone. Just look in the mirror, start looking at your gums, stick out your tongue. If your tongue is coated white, you have dysbiosis.

If your gums are inflamed, that's a problem. Don't ignore these problems, even though they don't hurt because the smaller the problem, the easier it to fix.

Okay, I have a question. I know you have some chewable oral probiotics. Yeah, I have them. They're amazing. So if you have that on your tongue, do you recommend tongue scraping?

Do you recommend using the probiotics? Like, what do you do? Our water flosser actually comes with a tongue scraper. So if you do have a tendency to do have the coated tongue, definitely use that tongue scraper.

That's in there. You don't have to use it every day. What we do find, though, that the chewable probiotics actually will turn the tongue pink, will actually clean the tongue without having to use a tongue scraper.

So very, very important to just check in with you once in a while. Okay. Amazing. Where can our audience find you? And I will say everybody here, I live in San Diego.

I drive north for an hour to get to Dr. Moldovan because she's that amazing. So those of you that live in Southern California, you have no excuse not to go.

She has three offices and we go to the Huntington one and it's about an hour from us. But how those are you have offerings for people to come and see you.

You also have products that people can get online from you. I know you have a passion for teaching practitioners as well, so lots of stuff available depending on who you are and what your interest is.

So tell us all the places we can find you. If you're interested in the way we practice is beverlyhillsdentalhealth.com. Yeah, we have locations in Newport Beach Beverly Hills and Encino also orasana.com is a products I mentioned and if you live too far from us, you can actually learn how to clean your teeth and take care of your oral microbiome correctly by visiting orasana.com I have a resource tab there with all their research articles that are popping up on the oral microbiome.

For those of you interested also at drsandamoldovan.com We are going to have practitioner courses and also consumer courses for people to learn more about oral health and even do some of the personalized testing remotely.

So tell us how to spell or orasana and tell us how to spell Sanda Moldovan. Let's make sure everybody knows that. Yes or orasana is orasana.com and DR. SANDA MOLDOVAN and also my podcast, The Holistic Dentistry Show highly encourage you.

We have some very interesting topics into a holistic oral health. This has been so good. Thank you for letting me just pepper you with a million questions as quickly as I could.

I wanted. To know. So we're going to spend it probably 20 to 30 minutes on any one of those topics and just gone deep. But I want to really give a broad view of why biologic dentistry is so important, why it's why we've shifted in our family and now we are biologic a dentist family.

We we love it and mean why I'm recommending my own audience and clients to seek biologic dentists in their area. So thank you so much for the work you're doing.

Your passion is infectious. I am so thrilled to be able to help you spread the word and get this out to consumers, practitioners, everyone. I'm right there with you.

We need to teach and learn more about the mouth and the microbiome and safe dentistry. Yes. Thank you so

much, Laura. You're amazing. Thanks so much, everyone.

Until next time. Take care. Bye now. Bye.