

# HAIR ELEMENTS



**PATIENT: Number 141 (2007)**  
**SEX: Female**  
**AGE: 46**  
**Location: Portland, OR, USA**

POTENTIALLY TOXIC ELEMENTS				
TOXIC ELEMENTS	RESULT $\mu\text{g/g}$	REFERENCE RANGE	PERCENTILE	
			68 <sup>th</sup>	95 <sup>th</sup>
Aluminum	11	< 7.0		
Antimony	0.026	< 0.050		
Arsenic	0.073	< 0.060		
Beryllium	< 0.01	< 0.020		
Bismuth	0.014	< 2.0		
Cadmium	0.084	< 0.10		
Lead	3.5	< 1.0		
Mercury	0.10	< 1.1		
Platinum	< 0.003	< 0.005		
Thallium	0.001	< 0.010		
Thorium	< 0.001	< 0.005		
Uranium	0.003	< 0.060		
Nickel	0.19	< 0.40		
Silver	0.20	< 0.15		
Tin	0.11	< 0.30		
Titanium	0.38	< 1.0		
Total Toxic Representation				

ESSENTIAL AND OTHER ELEMENTS							
ELEMENTS	RESULT $\mu\text{g/g}$	REFERENCE RANGE	PERCENTILE				
			2.5 <sup>th</sup>	16 <sup>th</sup>	50 <sup>th</sup>	84 <sup>th</sup>	97.5 <sup>th</sup>
Calcium	191	300- 1200					
Magnesium	59	35- 120					
Sodium	61	12- 90					
Potassium	13	8- 38					
Copper	35	12- 35					
Zinc	160	140- 220					
Manganese	0.97	0.15- 0.65					
Chromium	0.44	0.20- 0.40					
Vanadium	0.049	0.018- 0.065					
Molybdenum	0.057	0.028- 0.056					
Boron	0.23	0.30- 2.0					
Iodine	0.52	0.25- 1.3					
Lithium	0.004	0.007- 0.023					
Phosphorus	199	160- 250					
Selenium	1.2	0.95- 1.7					
Strontium	1.4	0.50- 7.6					
Sulfur	47500	44500- 52000					
Barium	0.24	0.26- 3.0					
Cobalt	0.012	0.013- 0.050					
Iron	7.7	5.4- 14					
Germanium	0.039	0.045- 0.065					
Rubidium	0.011	0.007- 0.096					
Zirconium	0.053	0.020- 0.42					

SPECIMEN DATA				RATIOS		
<b>COMMENTS:</b>				<b>ELEMENTS</b>	<b>RATIOS</b>	<b>EXPECTED RANGE</b>
Date Collected: 12/13/2007	Sample Size: 0.205 g			Ca/Mg	3.24	4- 30
Date Received: 12/17/2007	Sample Type: Head			Ca/P	0.96	1- 12
Date Completed: 12/20/2007	Hair Color: Brown			Na/K	4.69	0.5- 10
	Treatment:			Zn/Cu	4.57	4- 20
Methodology: ICP-MS	Shampoo: Aubrey Organics			Zn/Cd	> 999	> 800
	V06.99					

# HAIR ELEMENTS



**PATIENT: Number 141**  
**(2009)**  
**SEX: Female**  
**AGE: 48**

POTENTIALLY TOXIC ELEMENTS				
TOXIC ELEMENTS	RESULT $\mu\text{g/g}$	REFERENCE RANGE	PERCENTILE	
			68 <sup>th</sup>	95 <sup>th</sup>
Aluminum	0.8	< 12		
Antimony	0.017	< 0.060		
Arsenic	0.051	< 0.090		
Barium	0.84	< 2.0		
Beryllium	< 0.01	< 0.020		
Bismuth	0.014	< 2.0		
Cadmium	0.035	< 0.050		
Lead	0.51	< 1.0		
Mercury	< 0.03	< 0.80		
Platinum	< 0.003	< 0.005		
Thallium	0.001	< 0.002		
Thorium	< 0.001	< 0.002		
Uranium	0.085	< 0.060		
Nickel	0.09	< 0.40		
Silver	0.02	< 0.10		
Tin	0.05	< 0.30		
Titanium	0.54	< 1.3		
Total Toxic Representation				

ESSENTIAL AND OTHER ELEMENTS							
ELEMENTS	RESULT $\mu\text{g/g}$	REFERENCE RANGE	PERCENTILE				
			2.5 <sup>th</sup>	16 <sup>th</sup>	50 <sup>th</sup>	84 <sup>th</sup>	97.5 <sup>th</sup>
Calcium	482	475- 1500					
Magnesium	79	45- 180					
Sodium	240	80- 450					
Potassium	150	28- 160					
Copper	14	11- 30					
Zinc	210	130- 200					
Manganese	0.08	0.15- 0.65					
Chromium	0.38	0.40- 0.65					
Vanadium	0.028	0.018- 0.065					
Molybdenum	0.060	0.040- 0.10					
Boron	0.93	0.40- 4.0					
Iodine	7.2	0.25- 1.8					
Lithium	0.023	0.008- 0.030					
Phosphorus	293	250- 500					
Selenium	1.2	0.80- 1.3					
Strontium	4.1	1.0- 8.0					
Sulfur	44700	42000- 48000					
Cobalt	0.011	0.006- 0.035					
Iron	4.6	7.0- 16					
Germanium	0.027	0.030- 0.040					
Rubidium	0.16	0.030- 0.25					
Zirconium	0.038	0.040- 1.0					

SPECIMEN DATA				RATIOS		
<b>COMMENTS:</b>				<b>ELEMENTS</b>	<b>RATIOS</b>	<b>EXPECTED RANGE</b>
Date Collected: 10/18/2009	Sample Size: 0.201 g			Ca/Mg	6.1	4- 30
Date Received: 10/22/2009	Sample Type: Pubic			Ca/P	1.65	1- 12
Date Completed: 10/27/2009	Hair Color: Brown			Na/K	1.6	0.5- 10
Client Reference:	Treatment:			Zn/Cu	15	4- 20
Methodology: ICP-MS	Shampoo: Aubrey Organics			Zn/Cd	> 999	> 800

# HAIR ELEMENTS



**PATIENT: Number 141**  
**(2011)**  
**SEX: Female**  
**AGE: 49 NEW LOCATION: Southern California.**

## POTENTIALLY TOXIC ELEMENTS

TOXIC ELEMENTS	RESULT $\mu\text{g/g}$	REFERENCE RANGE	PERCENTILE	
			68 <sup>th</sup>	95 <sup>th</sup>
Aluminum	1.9	< 7.0		
Antimony	< 0.01	< 0.050		
Arsenic	0.078	< 0.060		
Barium	0.46	< 2.0		
Beryllium	0.010	< 0.020		
Bismuth	0.045	< 2.0		
Cadmium	0.019	< 0.050		
Lead	0.15	< 0.60		
Mercury	0.13	< 0.80		
Platinum	< 0.003	< 0.005		
Thallium	< 0.001	< 0.002		
Thorium	< 0.001	< 0.002		
Uranium	0.20	< 0.060		
Nickel	0.07	< 0.30		
Silver	0.01	< 0.15		
Tin	0.03	< 0.30		
Titanium	0.41	< 0.70		
Total Toxic Representation				

## ESSENTIAL AND OTHER ELEMENTS

ELEMENTS	RESULT $\mu\text{g/g}$	REFERENCE RANGE	PERCENTILE				
			2.5 <sup>th</sup>	16 <sup>th</sup>	50 <sup>th</sup>	84 <sup>th</sup>	97.5 <sup>th</sup>
Calcium	331	300- 1200					
Magnesium	26	35- 120					
Sodium	44	20- 250					
Potassium	26	8- 75					
Copper	23	11- 37					
Zinc	250	140- 220					
Manganese	0.06	0.08- 0.60					
Chromium	0.43	0.40- 0.65					
Vanadium	0.040	0.018- 0.065					
Molybdenum	0.031	0.020- 0.050					
Boron	9.1	0.25- 1.5					
Iodine	1.4	0.25- 1.8					
Lithium	0.015	0.007- 0.020					
Phosphorus	193	150- 220					
Selenium	1.1	0.55- 1.1					
Strontium	2.1	0.50- 7.6					
Sulfur	48300	44000- 50000					
Cobalt	0.007	0.005- 0.040					
Iron	5.3	7.0- 16					
Germanium	0.029	0.030- 0.040					
Rubidium	0.024	0.007- 0.096					
Zirconium	0.046	0.020- 0.42					

### SPECIMEN DATA

**COMMENTS:**  
 Date Collected: 1/16/2011      Sample Size: 0.199 g  
 Date Received: 6/23/2011      Sample Type: Head  
 Date Completed: 6/24/2011      Hair Color: Brown  
 Client Reference: 1277386      Treatment:  
 Methodology: ICP-MS      Shampoo: Aubrey Organic  
V010.08

### RATIOS

ELEMENTS	RATIOS	EXPECTED RANGE
Ca/Mg	12.7	4- 30
Ca/P	1.72	1- 12
Na/K	1.69	0.5- 10
Zn/Cu	10.9	4- 20
Zn/Cd	> 999	> 800

## **Health history for hair test 141**

Further tests to add 2009 and 2011

Late 2003-2006: moved into a 1910 home with lead paint. Inadvertent lead poisoning from renovations led me to investigate chelation, which I learned would require me to remove all amalgam. Since by 2007 I was also needing to remove a new copper amalgam placed in May 2005 which created severe right sided headache and gum recession, I finally learned about mercury amalgam poisoning on the internet, decided to remove that (and all remaining) amalgam and was able to negotiate a cessation of all renovations, and removal/encapsulation of acute lead poisoning sources (home, water, old bathtub, tested all ceramics) (which may not have been perfect).

May 2007: Removed 6 amalgam in two sessions, safely by an IAOMT dentist.

Problems with truthfulness and compliance in contract with this dentist. Had a Cliffords Test. Signed a contract to replace mercury with only Diamond bond and Diamond Crown (due to my allergies to everything dental).

Spring 2008: During check-up I discovered that the removalist had placed random materials of his own choosing that I continue to have problems with (including radioactive barium bonding materials for one remaining composite with BPA; and for two porcelain fillings of unknown composition). When I first discovered the problem, the dentist agreed to replace two of the six fillings and any future fillings with Diamondlite and a safer bonding material. I discovered his unreliability by accident, having remained a patient. Problem was probably that he was not comfortable placing Diamond Materials (which are tricky) but all of his incoming business seemed to be asking for Diamond Materials. He was rarely confronted about what he was doing because of the high turn-over rate (most of his business seemed to come for amalgam removal only) and because of his non-disclosure. He wasn't hiding it though. Dentist honestly believed he was protecting his patients by doing this.

Fall 2009: two and a half years later, I accidentally found out (by moving and trying to find a new dentist) that the Portland dentist had left some hidden amalgam behind in two teeth (Came up on old-style bite wings but which 3 dentists could not read on a pan-x).

May 2007: Had been advised by an earlier dentist's naturopath to take Vit C (liquid frequent doses) and Chlorella before and after removals. Chlorella made me feel bad immediately so I stopped. Vit C immediately made me feel better so I took huge amounts in divided doses, 2,000 every couple hours, across this time (10 gms/day for the first year). Set up one Vit C IV for day of removals but again found the naturopath working with the new dentist to be untruthful (she claimed only Vit C in, then later admitted full of glutathione also, seemed to dodge q. about what further was in it, so I canceled. Much later learned that IV glutathione is counter-indicated.

August 2007: Never having heard of cilantro being something to avoid, and not knowing it was in the thai food, ate some cilantro in a meal; bad brain fog for a couple weeks.

A different naturopath advised to take homeopathic constitutional remedy: felt much much worse from it.

Embarked upon internet research that suggested it is a bad time to do homeopathics when mercury is whizzing around after removals, during dump since homeopathics will move things into as well as out of cells (so if you have more whizzing around, you can drive it deeper into tissues/organs with homeopathics at this time).

Better to wait until dump is over or until after have done a lot of chelation. Stopped working with that homeopath.

September-October 2007: Researched more online, read a lot on Autism-Mercury, and eventually found Andy Cutler's books and protocol. Finally found FDC started reading.

November 2007: ordered books.

Dec 2007: ordered first hair test.

November, December 2007-Jan 2008: needed to do nightly saunas to get relief while learning about how to chelate, reading Andy's books and FDC, waiting for test results, then ordering DMSA.

In Feb - August 2008, began what amounted to four months of weekly chelation with DMSA only starting 6.5mg and ending 12.5mg @ every 2.5hrs day/3 hrs night. Took a couple breaks while having to travel. Last doses in August suspected problem with neutrophils (infection in leg from falling off a chair). Moved out of state. Took a long break. Don't know if I was able to fully stop lead exposure from house while chelating.

But did experience improvements so kept going. Was eating a lot of calcium in dairy which was protective plus all of Cutler's recommended supplements.

16 round chelation trial considered a success: Round improvements of vision, hearing (all right-sided), teeth felt part of head again, gums pockets from 5 and 4 down to 2, stopped grinding my teeth at night, left hip and thigh pains gone, able to breath through nose at night while sleeping for first time in 20 years the most notable symptom improvements.

Felt better on round but also would "use up" the dose quicker than the stated 3 hours. Became aware I was a "fast metabolizer". Became aware of why I craved/loved organic grapefruit and gpr juice products. Discovered there was GSE in my liquid vit C (all these things were slowing down my fast phase 1 liver metabolism and probably slowed phase 2). Began to dose more frequently than 3 hrs according to how quickly I felt I'd used up the dose (would dose when began to feel bad, when began to feel all sped up). Bought a capping device and began putting Vit C powder (sodium ascorbate) in every dose of chelator.

Discovered I was probably healing my adrenals with the Liquid Vit C (ascorbic acid) which I took just before each meal to help with digestion. Found I was in a minority of those who preferred/did better with acid rather than buffered form of C. Still doing well on it after all these years.

January 2009 began 1mg ALA, with 12.5mg DMSA, moved to 6.5mg ALA, then 12.5mg ALA. On advice from FDC increased ALA

(which was making me feel much better), to higher doses by not only chelating more frequently but also more evenly across day and night. Antonio brought to my attention Andy Cutler's insight that some can do much better and take higher doses with MORE frequent dosing, even when they are much worse at very low frequent doses at slightly longer but still within half-life intervals (AI).

After brief experimentation, I felt best chelating ALA every 2 hours day and night. Paradoxically felt much better-rested if I woke up for nighttime doses every 2 hrs than if I slept a slightly longer interval.

Advised to take DMSA less often for my high lead (because of the suspected but never confirmed neutrophil problem). No candida problems. Probably used DMSA every other chelation round across this 3 or four month period for lead and to reduce build-up of ALA side-effects from redistribution. Began taking a sauna at the end of round and drinking large quantities of water at end of round. These reduced or removed end-of-round redistribution symptoms.

ALA chelation trial of 11 or 12 rounds sometimes using DMSA: counted it a success; removing mercury but also arsenic which had not been touched by the DMSA. Much bigger improvements especially in hearing in the right ear. Subjective sensation of a draining out of the right ear (and eye) area which led to better hearing on the telephone, headphones, in life in the right ear (stereo effect). This was an old, old symptom that I had not noticed so much until it was being removed.

Had to take a chelation break in August 2009. When I stopped I really regretted some regression that occurred in the right ear/hearing issue. But also noticed that it did not regress all the the way back. Most of the improvement held. Testing for low energy levels revealed a very low Vit D level (14).

Almost immediately learned I would not be able to chelate again until removal of newly-found hidden amalgam in two teeth.

Sept or Oct 2009: finally found a new dentist in new location whose ancient xray machine turned up hidden amalgam on #18 and #19.

#18 had been replaced with composite unsafely in 1994, then re-replaced in 2008 by the "safe" dentist once with bad materials, and then a second time with "safer" bonding agent and Diamond lite! No dentist (on these THREE occasions) chose to either mention or to remove the mercury at the bottom of the filling, though on the final two occasions that was the function of each visit and what I contracted with the dentist to do, with the understanding I was going to chelate and would be badly damaged if there were remaining mercury specks anywhere. I realize that in 1994, to remove the mercury on the bottom of this tooth would have meant crowning the tooth. In 2007 and 2008 I believe it was a matter of lack of confidence of the dentist in his skill doing onlays as opposed to inlays using Diamond lite or any other material.

May 2010: Finally found a (hopefully) safe new dentist in Southern California. Because of dental allergies, I was looking for someone with a track-record placing (zirconium-based) Diamond Bond and Diamond Crown. This dentist very reluctantly replaced the two hidden amalgam teeth. (Unprofessional mocking of patient by dentist and his assistant; wanted my business but also took the view I was imagining the hidden amalgam; paranoid.) He probably behaved this way because he never did see the bite wings (earlier dentist would not cooperate by sending). New dentist agreed to go forward on view I was being unwise about health, and also about finances - insurance would not cover. He was disapproving of unnecessary trauma to teeth -- so am I! Only when we were both poring over the pan-x again just before starting and I asked him about some slight anomaly around #18 did he suddenly change his attitude. I did not really see anything there -- I cannot read them -- but I had briefly seen the bite wings that showed up white against black on two teeth so I pointed generally to that area and he did then totally change his demeanor so he must have looked harder and noticed something in a weird spot.

When new dentist drilled #18 he ended up finding a "mistake" by a much earlier amalgamist, whose drill slipped creating a strange little pocket low on the side wall of a tooth. The dentist had "solved" this mistake by cramming some amalgam in it to prevent decay.

When new dentist drilled #19 he found a layer of amalgam lining the bottom of the tooth. Even in the chair, he was loath to remove it, remarking I'd need an onlay, but I insisted I could not safely chelate without its removal so he went ahead. Again his whole demeanor changed once the mercury layer was out and he changed drills again, explaining there was decay underneath. This was a who-knows-how-old filling that had been replaced with composite in 1994, then twice by the Portland dentist (so forth try)

May - October 2010: In the months following removals on the left lower side of the mouth, I noticed two unexpected major improvements. a) I finally also stopped clenching my teeth on the back right side of my mouth in my sleep. (I had stopped most of the grinding after the first removals May 2007, and did not realize that I was still doing it, until the final less intense right sided clenching was relieved by the hidden amalgam removals). b) I could breath fully through my right as well as left nostril at night while sleeping (almost fully fixed this after May 2007 but more fully resolved after May 2010 hidden amalgam on lower left side of mouth removed).

November- January 2010: Had some weird symptoms (extreme right shoulder pain) that I thought might be metal related.

Jan-June 2011: Resumed reading the FDC list to try to figure out if I was becoming copper toxic or (pure speculation) if this could be another dump phase following the removal of the hidden amalgam (did not want to believe this for obvious reasons).

January 2011: collected hair sample. It came back in June.

May 2011: Replaced #3 and #4 with Diamond Bond and Diamond Crown materials using new dentist skilled in this area (did a good job with the first two he worked on; improved my health further). #3 and #4 had been hurting. Dentist removed for putative decay. Again mocking the possibility of mercury remaining underneath, and doubtful about decay. Referred me instead to a specialist in facial pain. But when I came back to get them replaced anyway, he was intrigued to hear that mercury can cause pain along third cranial nerve (trigeminal pain?) Dentist did find decay. Would not report on what mercury he found and removed. This dentist has said he believes that all chelation just spreads the mercury around more.

#3 had been very close to the pulp. It was a copper amalgam placed in 2005 that started (with the lead exposure) the whole process (I knew I needed to remove that tooth because it was causing problems and I learned I could not chelate out any of the acute lead exposure without removing all the amalgam). This tooth I think may always be giving me problems. My new dentist would not replace it until he had tested the tooth to see if it was still alive. This made me feel confident that he knows what he is doing and is an excellent dentist. He is conservative, probably in a good way, but even so will entertain his patients' "concerns." To his surprise (given the pain level) it was still quite alive.

#4 had been replaced in 1994 and no one would deal with it until this dentist. I feel comfortable about his skill level and am grateful the other dentists let it lie because this dentist is a real craftsman with the Diamond Crown. There was decay. Pain in those teeth has subsided quite a lot since removals. But no major improvement symptoms as after last ones. So hoping this

means there were no (appreciable) specks in these two? Or not enough to cause my body to yet again initiate a dump at 6 months out? (we'll see I guess).

June 2011: Get back new hair test. Hair test not showing copper toxicity. Reluctantly conclude strange pain symptoms after May 2010 removals of hidden amalgam may have been a second cycle of dumping (following the graph on p. 52 in AI). Symptoms came at just about the 7-10 month mark after those removals and began dissipating about the 13 month mark. Metals still dealing with: low yellow arsenic (plus low green amounts of lead, cadmium, mercury, barium, and nickel). Arsenic and very high uranium probably from living now in So Cal (second hair test suggested that arsenic had been brought down some with ALA chelation). Original arsenic probably from life-long ingestion of non-organic chicken up until about 2003 or 2004 (plus other sources no doubt).

No chelation across this time because of continued uncertainty about further hidden amalgam under 5 remaining teeth, including one tooth never looked under since 1994 unsafe amalgam removal. Waiting to see if pain from latest removals would dissipate. Aware that my current dentist though a Diamond craftsman, and meticulous about getting the teeth as white as possible (I believe he does an excellent job removing whatever he can see in there), does not support or understand the importance of doing this for chelation rather than vanity purposes.

July 2011: Considering having #2 replaced (TPH, radioactive Barium bonding materials from Portland dentist). Because this one hurts, too. There was not time to replace it in May (the excellent new dentist did do a small stop-gap filling on one area though).

I think it may have been problematic placement to begin with (Portland dentist may have used activated charcoal in my mouth after removals to "bond" with the remaining metals inside the tooth before filling with other materials, instead of meticulously drilling and scraping all the metals out. I have read recently on FDC that this can lead to a poor contact with the bonding agent and quicker decay). Which accounts for it needing to be replaced after only 4 years. Either that or I am seriously allergic to the BPA/Barium materials in there and that is causing the irritation.

If I do this there will still be 3 remaining mystery teeth with possible hidden amalgam:

1 and 2) two lower right molars. Both currently filled with porcelain and radioactive barium bonding materials by Portland dentist, possible bad bond due to activated charcoal use. The larger one has a thin line of black visible between the white filling and the tooth itself. Less so with the smaller one.

I suspect mercury at bottom of the larger tooth, perhaps not enough to show up on xray? For the last 15 years all dentists have done special xrays of these two bottom molars and their roots. A long-ago amalgamist told me one of the roots looked funny in a bad way (was on a "watch" for being dead). Kept being surprised it was not dead yet.

Is it possible that any amalgam layer at bottom of tooth would be blocked in pan-x by the porcelain onlay (because large, as if a crown almost) and I only "got lucky" with those ancient bite-wings for the molars on the other side, mostly because one of the amalgam specks was on the side, not bottom?

3) One upper right bicuspid. Mercury safely drilled out by Portland dentist, then filled with bad materials and redrilled and refilled with diamond lite and a "safer" bonding agent a year later. Very kind man, and had felt bad about putting in the wrong materials, but was unlucky/unskilled adjusting for the bite, too. A piece of tooth immediately broke and still seems a little broken



there. Though no amalgam came up here on the ancient bite-wing xrays, and though no one can tell on the pan-x what if anything is going on, one can visibly see gray matter through the tooth (looks like something was left behind everywhere).

### **Main questions:**

- 1) How much damage do you think I did by chelating for ca. 8 months (2008-2009) with that amount of hidden amalgam in?
- 2) I have what looks like some arsenic symptoms that came up during the putative dump phase after hidden amalgam removal. a) Having to sleep upright in bed from Dec through Feb or March due to extreme right shoulder pain when prone, and b) from March to May sleeping with right arm stretched above head. Q: Does the imperative to get on with ALA chelation trump the possibility that more possible hidden amalgam remains?
- 3) Or does the unreliability of the dentist in question and the power of ALA to do damage rather than good trump the imperative to get on with chelating/doing another trial? (That's in addition to possible prior damage chelating with hidden amalgam -- one bitten, twice shy?)
- 4) What I hope to do is at least replace the one that actively hurts before going further. So should I then and then try another chelation trial with the remaining three mystery teeth in place? (The concern being the unreliable dentist may have placed porcelain that contains metals in two of them, did put radioactive barium in the bonding for two, in addition to leaving behind visible gray/black or possible specks of mercury in all three).
- 5) Though I have already replaced two of these unreliable fillings this year (maxing out the insurance), I could probably still get away with replacing the one that is hurting right now (because insurance will cover decay, if it is decay not allergy -- I do not have a MELISA test). But because of financial and insurance limitations, I would probably need to wait until Jan 2012 to remove the final two or three. So if I wait to replace these remaining fillings yet again, I will not be able to chelate again for my arsenic/mercury with ALA until Jan 2012.
- 6) Given the profile of all three hair tests (mineral transport orderly in all three, despite obvious mercury and lead problems in history), and the improvement of symptoms and the hair tests after chelation, does this suggest chelate now (because looks like I didn't do too much damage from the hidden amalgam) or OK to wait (because damage was done, but my systems are stable, and better to do it right this time because now I am going after the stuff in organs and brain)?
- 7) I realize the answer is "I don't know" but would really appreciate any thoughts or comments anyone else has to any one or more of the questions.

## Hair Test 141 (Initial History 2007)

Location: Portland, OR

Female 46

- Mother had full mouth of amalgam from her own childhood; bad response to vax as toddler; braces on upper teeth at age 15 (gum recession); amalgam placed between age 17 and 24?, adrenal insufficiency diagnosed at 24, on low dose replacement till age 36; 3? amalgam replaced with composite at age 33 with dentist who used no precautions; became ill (candida, brain fog) but docs treated it as if lyme (no positive test but fevers, good response to antibiotics); bad walking pneumonia age 37; more amalgam placed between age 38 and 43, the final one causing right eye headache, right eye difficulty (eye creating binocular vision problems); learned about amalgam on the internet; removed 6 amalgam 10 months ago (age 45) safely under full IAOMT protocol; no amalgam remaining. Replaced with 5 porcelain onlays (DiamondLite) and 1 composite (choice based on biocompatibility test).
- No chelation, yet. Two months ago purchased and read Cutler's books. Did sauna late Nov to early Jan (felt better on sauna days). After removal eye has radically improved (put away stronger prescription/back to older lighter glasses), headache symptoms have gone away or continue to dissipate; saliva gone to normal and sinuses cleared immediately, teeth felt part of head again; dental pockets went from measurements of 5 and 4 to 2 after four months; easier to breathe at night, definitely do better if I take liquid Vitamin C (ascorbic acid, may need for digestion?) (500 mg) at least 4 times per day. Took up to 9 and 10 grams in first month after removal, since then between 2 and 4 g/day. For three months before hair test was taking a multivitamin that had 2 mg? copper, manganese, molybdenum (all turned up high on test), and as well as enzymes, cal/mag, other mins, etc. Stopped taking this after hair test results came in high copper, stopped eating nuts, too. Noticed my basal temperature chart went down (low thyroid?) as soon as I switched to a less good multi.
- I take extra zinc (50mg total per day, divided into 3 doses), E (400IU), and B complex (100mg divided into 2 doses) and folic acid (1600mcg, divided into 2 doses), as well as C at least 4 times per day and one multivitamin every day. Should I try to supplement low boron or get on a wide spectrum multivit/min again? Subjectively feel healthy. Would love advice on the hair test. Hair test (Dec 20, 2007) taken 7 1/2 months after removals.