

Caspar ([00:00](#)):

I pulled a few quotes from our guest's website to set the tone of this podcast. The first one, "Your mouth is the gateway to the rest of your body." Or there's this one, "Treating one tooth at a time ignores the forest for the trees. No tooth exists in a vacuum." And who could forget? Bechamp's famous quote, "Terrain is everything. The microbe is nothing." Yet we're back into that interplay between toxicity, infections, specifically in your mouth. This is the story of dental infections with the BioDentist, Dr. John Augspurger. Now, Dr. John great to see you. It's wonderful that you could join us.

Dr. John ([00:40](#)):

Yep. Good to be here.

Caspar ([00:41](#)):

I know you, you've been working since you were a teenager and in this field, and you've worked around some amazing dentists one of the greats, Dr. Hal Huggins. Can you talk about your experience of how you got into this and how you got to work with someone like Hal Huggins, Dr. Rau, and others on this journey into becoming the bio dentist?

Dr. John ([01:03](#)):

Yeah. yeah, interesting how it all fold unfolded in my lifetime. So my dad was an orthodontist, and in high school I became a lab technician. So I got good at delivering, making appliances, haws orthodon appliances, bending wires, delivering appliances in patient's mouths. So I got proficient with my hands at not only making 'em, but delivering 'em. And then as I went through college, I always loved sciences, but I'm also an art, you know, I'm very much of an artist. I'm a musician. I play drums and percussion. That's really what I wanted to do at that time in my life. But there, one day I just got accepted to dental school and it just seemed like that was the most important thing to do, rather than go to Los Angeles and live out of a car trying to be a drummer.

Dr. John ([01:56](#)):

And so four years later, I became a dentist. During my dental training, I learned that dentists had the highest suicide and divorce rate of any profession, and that was back in the late eighties. So for me, the writing was on the wall a little bit, but I didn't know what I didn't know. I went through, obviously went through a very traditional training which is what I call my tooth mechanic training. It's not about disease in the mouth, it's about repair. Okay. And the insurance driven incentivization to a disease care system. You know, I didn't understand all that at the time. But that all occurred in Iowa. And then in 1990, I moved to Colorado. I happened to land in Colorado Springs right outta dental school, and I went to work for Blue Cross Blue Shield, which is, you know, a very big insurance company.

Dr. John ([02:47](#)):

And I noticed that I was just doing things to people and using Mercury and getting ex very different results with the same procedures done in different patients. So, for instance, like you do a filling on Mrs. Jones and you do a filling on Mr. Jones in the same day, same procedure, but one patient has a lot of pain and is angry, and the other patient is just fine. So I, that was another clue to me that there's more to this than just being a tooth mechanic. And at the time, being in an insurance driven environment, I was, I was, you know, forced to be under a lot of production you know, just, you were forced to produce. And it just felt to me like it was more about money than it was about health. And I was doing things like placing dissimilar metals in a wet acid environment called the mouth, you know, setting up

batteries and doing, you know, killing teeth, doing root canals when there's toothaches, which is a, which is I call that the taxidermia appointment for your tooth or an embalming, you know, the, the day you got your tooth embalmed.

Dr. John ([03:56](#)):

And because it's kinda like going to a doctor and saying, doctor, my finger hurts. And the doctor says, we're gonna take away the blood supply, and you get to keep your finger, you know, but your finger's gonna turn black and blue and green and stink, and, but you can keep it and it won't hurt, you know? And so it, so early in my dental career I happen to be watching CBS News 60 Minutes on a Sunday night, and a guy named Hal Huggins comes on, and the conversation is around mercury and dentistry. And Dr. Huggins got on there and said we have science now that indicates that this, this material doesn't belong in your teeth, and it's very toxic and it off gases under many conditions that are common to the mouth. And that caught my attention.

Dr. John ([04:43](#)):

So I called Dr. Huggins up and I said, Hey, I, I I'm a young dentist here in town, I want to, I wanna talk to you. And he hired me that night at dinner to be one of his dentists, because I'm also a lab technician. And I was local in town, and I had an office. And so I started working with Hal and then shortly, and Tom Levy was involved as well, Dr. Tom Levy, who's a cardiologist in Colorado Springs. And shortly thereafter, Dr. the 60 Minutes program, Dr. Huggins Clinic got shut down by the dental board. And and it's a big reason why Tom Levy became a, an attorney to, to defend Hal. But what happened after that is I got involved in the research on root canals, because since Weston Price in 1939, there isn't, there had been no science that I was aware of on the inside what's inside of a dead tooth.

Dr. John ([05:40](#)):

And so Dr. Huggins knew a guy named Boyd Haley head of biochemistry at the University of Kentucky that had the science that could, could identify anything based on molecular weight. So Huggins was smart enough to know that the inside of a dead tooth was gases, and we just didn't know what the gases were. We just knew they were dangerous and stinky. Right? So fast forward to a movie came out about this called Root Cause. It came out in 2019, that's in a movie that talks about the science that was performed. Basically, a dozen dentists got together and extracted 5,000 teeth and sent 'em to Boyd Haley over the course of two years. And Boyd Haley was able to identify that we're dealing with hydrogen sulfide gas methyl mercaptan and, and thioethers, all of which have a denaturing effect on metabolic enzymes inside the mitochondria.

Dr. John ([06:32](#)):

So, in other words, this is a reason why gangrene, the treatment for gangrene has always been death, or I'm sorry, the treatment for gang for death has always been amputation, sorry. Right? So ever, you know, always, and, and dentistry is the only profession that thinks that we can disinfect the inside of a tooth that has 80 million nerve endings inside. You know, we've got these miles and miles of tubules, that's all soft tissue. And once it loses its blood supply and it loses its fluid flow, there's no way to seal even, even these root canals that are done with lasers. You can powerfully disinfect the inside of a tooth, but you can't sterilize it. And even, even if you could, it wouldn't stay that way. And you can't seal it. And there's a lot of dentists that think he can, but no, you can't.

Dr. John ([07:21](#)):

And, and since the advent of three-dimensional x-rays, we've been able to see just how much disease we're real, we're really dealing with around not only root canal teeth, but all dead teeth and cavitations. So so anyway, back to the study. So if anybody is, wants to familiarize themselves with the study that was done on root canals I suggest they check out the movie Root Cause. Of course, that movie didn't last long. It was taken down very quickly as, because the dental profession doesn't want to have that conversation around you know, the, the standard of care of a toothache being an embalming procedure instead of what's you, instead of what it takes to save the life of the tooth, which I'll get into later in the conversation here. So so I was involved in a study the Science on Root Canals in the late nineties.

Dr. John (08:15):

And then in mid about 2016 my beloved and I decided to seek out the best healthcare in the world. And we found it in, we found what, what we found was in Switzerland at the time, it was Dr. Thomas Rau at the Paracelsus Clinic. I, and I knew about Dr. Rau many years because he has such a international reputation for being one who can really cure a complex chronic disease. And he also had a dental clinic in his private hospital in Switzerland. So that was a very interesting concept for me to go study under in a different country. Study what is, what's the magic there to not only healing our patients completely, but to involve the mouth in an, in an experience called getting your health back. Cuz like I said earlier, dentists are trained to be nothing but tooth mechanics.

Dr. John (09:18):

And it's not about the disease, it's about the repair. So so here we are learning Swiss biological medicine in Europe. And about same time I went through the A C I M D program with Dr. Molika to become a naturepath. So I have two medical degrees as a naturepath but I have a license as a dentist. I'm a dentist. But I really wanted the education not only inside the US but outside the US so that I could really develop what, what now is called the bio dentist way, which is really a protocol that we get the body involved in a dental experience so that we can do really, really mainly do two things to, number one, save the life of a tooth. And number two, to change the conditions in the body so that when we have this assault on the body called the septic experience called taking out the dead teeth, okay.

Dr. John (10:19):

Which, which is surgically removing extracting teeth and the poisons around them that surround the ligament and the jawbone, and including the cavitation sites as well, where, where teeth were pulled many years ago, typically wisdom teeth. So when we ha so we, so I built this protocol and it just, it, it goes way beyond nutrition. It's really about changing the conditions in the body. And in Swiss biological medicine, it's really about drainage Okay. In many ways. So so we so in 2016, I was really starting to develop the concept around how to get the body involved. So what we have here in Denver now is a separate clinic called BioVital, which is under medical directorship. Okay. It's not under my license, it's under the license of an M licensed MD. And we have bio dentist here at our location in Denver called the Human Universal Health Institute.

Dr. John (11:19):

It's HUH institute.com. And so we, in home of bio dentist and bio vital, so really it's a, it's a biological medical center that's wrapped around a dental experience here. So we, we work since 2016, we've been developing that. And currently I'm still practicing dentistry for a little while longer. I'm writing a book right now about this and just, it's really gonna be a groundbreaking way to bring health and education to the not only the people who are interested in health sovereignty okay, but really are, are looking at the

conditions in their mouth and and really just making the decision like, wow, maybe my mouth is the reason why I'm sick and why I can't get somewhere. So so that's really what our work is here in Denver, is to work very closely with a, with a few select people that really want to involve their body and their health in a way that is deeply biological. And and you know, we're, we're after, you know, building the mouth in such a way where it just is incredibly stable, long term teeth are long, sharp and beautiful and balanced and and non-toxic. So yeah, you know, it's quite the journey typically for most patients that work with us. But my goal is to work myself and every other dentist out of a job.

Dr. John ([12:59](#)):

Truly.

Caspar ([13:00](#)):

Yeah. It, it, it's one of the fields that is yeah. When, when you're one side of the field and you're learning about it, you're in a completely different paradigm than what this is. What bio dentistry, what Dr. Rau. Hal Huggins and others doing. And I, I had Dr. Rau on, I believe his podcast goes live in a couple days, and a lot of what European biological medicine is about and what Paracelsus clinic and what he does with biomedicine is looking at toxic burden and how many people carry such a large toxic burden with them that then relates to infections, but also vice versa. And as you stated, when infection is present, true doc detoxification is not possible. Yeah. Can you go into why that is the, the case? Because I can understand in a very toxic environment, infection is possible. It's the case my father alls brings up. As you have a house with garbage all around, you're gonna have pests, cockroaches, rats, whatever. As long as it's messy, it's gonna have those. But go into the other way of seeing it. What detoxification, infection relations.

Dr. John ([14:02](#)):

Yeah. Yeah. Great question. So, so

Dr. John ([14:06](#)):

There's, there's a, I see chronic infections as really the wild card as to people's health. And when you, so let's talk about that. So when you have a chronic infection or, or even an acute infection, you have an inflammatory response around that. Okay? So you have pain, swelling, redness, and fever, right? Those are tools that the body uses, okay. In order to quarantine or breakdown or mobilize or save the body, you know, get the immune system in there, get more blood flow used, temperature, and, you know, using fever, the body's very smart, knows what it's doing. But when you have these chronic infections, especially these infections in the mouth, that don't hurt. Okay? And that's the key thing is cavitate, I rarely do patients come in here and talk about capitations as these are painful things. You know, I'm usually the one saying, we got a situation here based on what we see.

Dr. John ([14:59](#)):

But the chronic infections, you have an inflammatory response by design, okay? And what when you have a chronic inflammatory response, that's gonna be, that's gonna be an it's gonna create an acidity in the body, it's gonna, it's gonna demand a lot of energy from the body. So and what, when you have that acidity and that, that demand for higher energy, we're also gonna have a, you're gonna have a prooxidant system that's kicked in. So, and the, you know detoxification and inflammation are actually opposites. So inflammation is an oxidant system. And detoxification is an antioxidant system, okay? And when you have this oxidant system being called upon all the time, that is gonna depress the body's

ability to detoxify, which is gonna increase the body's toxicity because the body needs to do detoxify all the time. But when it's being suppressed by a chronic infection and a chronic inflammation, then toxic toxicity is just gonna be going up.

Dr. John ([16:05](#)):

So I don't believe, now I'm just a dentist, okay? But I don't think detoxification, the time for detoxification is not when there's dental infections in the mouth. Okay. So, and then when, so the last bit of this is when you have chronic inflammation, oxidant system, depressed detoxification, and increased toxicity as a result of that, which is the antioxidant system, you're gonna have a lowered immune response with that as well. So you've got this vicious cycle going probably in two directions. And the, like I said, the wild card is getting the infections out of the, out of the body, and they happen to live mostly in the mouth because the jawbone is, especially the mandible, the mandible is, is a unique bone. It's kind of out and back as far as the, the, the blood supply and the the, yeah. The blood supply. And you know, we're, it's different than other bones like that.

Dr. John ([17:00](#)):

And, and it's different. And the maxilla and the mandible are also different because they have these little white things sticking out, right? So it's the only place in our body where we have this gut wall that has been by design, been penetrated by a tooth. And so that, that junction, that gap junction of the wet skin called the gut is so important that we don't have a leaky gut there. Okay? And when we have these chronic underlying problems and these chronic inflammations that people are dealing with, these gap junctions are going to be become, they're gonna be stressed out and they're, you know, we we're gonna have this leaky gut thing. And and it really starts in the mouth because the mouth is kind of upstream from the entire gut system. And that's this gateway to the mouth thing. And it's kind of like if you poison a stream way upstream, it kind of screws up the river.

Dr. John ([17:55](#)):

And the mouth is really the source of this. And the source is being the dead teeth, the root canals, the cavitation, like I said, that don't hurt that, that dentists are not carefully looking at, at this problem. And capitations in the old extraction sites. So so, and, and the process of going through this is way outside the scope of just a dental experience in my opinion. Like, you don't go to a dentist and get a a, an abscess tooth pulled other way and ha and involve the body in this process in biological medicine. Otherwise you're gonna be on antibiotics which kill the gut biome, which is hugely important, okay? And can possibly need pain pills. And I tell my patients, I don't use pain pills cause I don't need 'em. Cause our patients don't hurt afterwards. And I'm strict about our protocol, how I take a dead teeth out.

Dr. John ([18:49](#)):

I don't take 'em out one at a time and I don't take cavitations out one at a time ever. That's breaking the law of biology. When there is death in the body, the body wants it all out, not some of it out, all of it out in a safe experience. So protecting the body through the assault of the septic experience called getting a tooth pulled. And if there's another root canal somewhere else in the mouth, how is the body gonna heal the wound that has just been created, especially if there's been an open hole left there. Okay? I believe the ligament needs to come out. You need to reestablish that blood supply. I'm constantly looking for cavitations around dead teeth when I pull root canals cuz they're there because they can, cuz it's, you know, dead teeth are offgassing creating all kinds of death around the bone around them.

Dr. John ([19:39](#)):

So we gotta, you know, dentistry has really gotta take a close look at the current situation with with dead teeth and how that's treated and, and get, and, and I prepare my patients well in advance of this experience. You know, they come to Denver, they stay with us, you know, we have a nursing, you know, we have a medical clinic. They, they spend time with our nurses. We get colonics involved with ozone gas. We treat the gut system, we treat the extracellular matrix. This is really critical. You treat the, the, the, the what I call the inner ocean. Okay? You clean the ocean, this is where the cells are pooping in the body. You've got to make the ocean clean so that when the onslaught of removing the dental infections happens. And, and like I said, it's, it happens all at once and people are sometimes so afraid of it.

Dr. John ([20:33](#)):

I was like, well isn't that too much? And I was like, no, it's the other way around. You know, if you leave a little infection over there and you miss it, it's just like leaving a little fire over there to the fire department. Okay. You know, we got trees surrounding us here in buildings and I tell my patients like, okay, if we got a grass fire and a bunch of, and we got a forest fire and we got a building on fire and a house on fire over there, do you think the fire bar department's gonna show up and say, you know, we, you know, we're just not gonna put that one out today cuz your insurance doesn't cover it. Or we just, we're not gonna put that one out today because you can't afford that. You know, disease doesn't care how much money you have.

Dr. John ([21:11](#)):

Okay? And it is, and this is why I'm training dentists right now, okay. This is why we have the bio dentist way. There's a way, there's a methodology, a protocol that is a culmination of many years of, of studying, of like kind of doing it a certain way and then now doing it the way I do it now. And the reason why I'm strict in my protocols is because I tell my patients our goal is no pain and no swelling. And to wake up the next morning after a surgery like that and have your blood be cleaner than it's been in decades so that you can, so that now your body can take all that energy that was required to, to, to power that inflammatory response and power the detoxification systems in the body and power the immune system. Okay? All the energy that that's required to, to manage Now we've pulled the, it's a rug pole, we pull the rug on the reason why the body has problems powering all these systems at the same time, unless you've got a to ton of energy.

Dr. John ([22:16](#)):

But, but anyway, this is the rug pole on the problem called why am I so darn sick? Right? And you know, and I, and I look at how we do this now and it's, you know, it's just such a beautiful thing cuz people, I think people want, what they want is they want health sovereignty. Yeah. Right? And when, when there's all this sickness in the world and going on, people just want to be healthy and not have to go to doctors that for their standard of care disease, control, disease care ways of treating things and looking at things. So anyway, I'm sorry that might have been a long story, but no, no. I hope that answers your question on just really how this whole thing, how the mouth and the body are so intimately connected and so involved with each other that you know.

Caspar ([23:09](#)):

Absolutely. No, I mean when I listen to this, this is truly a holistic and artistic interpretation of what dentistry should be. Yeah. It is. You know the next step I believe where it needs to go and, and should be already at. And if anyone's listening and wondering, well how would I know if it's not any pain to it, any

infection. I'll, I'll give a quick case because I've had Fraser on Bailey who was behind root cause the documentary who was made over who my father first identified. I remember years before he made that first said, Hey, you got a tooth problem, right? I'm seeing this now. And that's cause he, he went everywhere and he had chronic fatigue. So that was his issue. Yeah. Young guy, healthy guy got punched, you know, and had a root canal and the whole story goes on from there.

Caspar ([23:53](#)):

But it was chronic fatigue. It was just malaise. It was, you know, not feeling himself depression, these sort of things that come along. So no one was going to tell him it was due to his teeth. Right. That was the last thing most doctors told him. Right. And it was only after, you know, my father said, and a few other people said, Hey, what about your teeth? Right? And then he got cone beam imaging found, you know, the pocket there that was infected and causing all of this. Now if anyone's listening and say, okay, I might have some of that, I have a root canal or I've been thinking about something in my teeth may be the issue. Would you say go get a cone beam imaging done Or is there a different starting point even?

Dr. John ([24:37](#)):

Absolutely not. So part of my protocol is, is a cone beam. Yeah, I have saying, I said if there's no combining, there's no diagnosis.

Caspar ([24:47](#)):

Right?

Dr. John ([24:47](#)):

Yeah. Cuz you cannot see what you cannot see in two-dimensional.

Caspar ([24:51](#)):

Yes.

Dr. John ([24:52](#)):

Yeah. You have to have the third dimension, especially on multi rooted teeth like upper molars, you know, they have three roots and the cone, the, the x-ray beams in two, two-dimensional are coming sideways and it's two dense in between all these roots to see anything that's happening in between the roots. But now all of a sudden when you can see in between these roots and you can see down inside you, and that's why I said when I pull multi rooted teeth like that, I go into the bone in between the roots because I wanna see that blood coming outta there. I'm that oil slick that comes out of there. That's not healthy blood. Yeah. It doesn't take, anybody can look at that blood and say there's an oil slick in that blood that's not red blood. I've seen orange blood come out in between dead teeth and, you know.

Dr. John ([25:33](#)):

So back to the cone beam thing, not only that and diagnosis is a really important thing. And, and we can certainly talk more about diagnosis on teeth that are vital as well. That's part of the bio dentist way. But for your listeners today, absolutely get a cone beam and also go to a dentist that's gonna interpret this in such a way that what they're looking for is not just less bone density around dead teeth, but also look at the capitation sites. Cuz most cone beams, if not all, have the ability to measure bone density in,



in what's called hounds field units. We can, we can cursor over the area in the bone marrow and we can see if it's positive or negative and if it's, if it's negative, it's for sure you've got lack of mineralization in the, in the bone and the question's always what's in there.

Dr. John ([26:30](#)):

And typically it's, it's the hidden gang green. There's a, there's a good book that's out that I want I wanna mention here. It's Tom Levy's book called Hi Hidden Epi hidden Epidemic. And that's our patient on the, the cover of that book. And we worked closely with Dr. Levy and this patient. I she showed up with at least a dozen root canals and had all kinds of health problems and just, you know, you feel like you're dying when you have that much death in your body. I, I can see why. And so we, over the course of time went through the bio dentists way and you know, you know, it took about two years to finish the case cuz it involved a lot of implants and bone grafts and things like that. But, and, and that's kind of on the extreme, but you know, there are some people that are in that condition where they just don't wanna lose all their teeth.

Dr. John ([27:18](#)):

But my goodness to have the, you know, tooth replacements are always compromises. Even even zirconium implants, which I love. I have them in my own mouth after having titanium. I took it all out and put Zirconium in now and what a difference it makes unbelievable. But you know, the, not everybody can really wrap their head around that or has the, the financial resources to do something like that. But even re because even replacing teeth with a well-fitting denture that has sharp teeth in it, you know, I'm a lab tech technician, I make a lot of my own appliances and you can't see 'em, you, you know, you look in the mouth, you see nothing but sharp teeth and well-fitting appliances and that's another option as well. Of course you lose a fair amount of bone going that direction, but then, then that's the big advantage to implants is they're much more like real teeth. But but to get your health back is the main thing you gotta start with, with, you know, with really being thorough and having the right proper diagnosis. And cone beam is absolutely part of that. And so is heart rate variability. Yeah, we look at that as well. We, we feel like heart rate H R V is a real important piece to, to really just let us know is the patient in sympathetic or parasympathetic lockdown, which really changes our approach to doing dentistry at that point. So

Caspar ([28:39](#)):

Very cool. We use H R V as well. Which system are you using?

Dr. John ([28:44](#)):

My wife is here. She can tell you.

Speaker 3 ([28:46](#)):

It's it's the autonomic nervous system. It's a very high level autonomic testing from Dr. Rau.

Caspar ([28:54](#)):

Yeah. Go from, okay. Yeah. We use here Heart Quests from Dr. Michael Kessler. That's, that's similar to I think what RA uses as well, but really looking at the ANS or you know as far as balancing right and understanding are you in that sympathetic state? Overstressed, then you have hormonal imbalance, everything else. So that's very cool that a dentist, you know, could use that and is applying these things to really analyze and like you said, truly diagnose. Now, I wanted to also provide some people not just



the doom and gloom of everything, but a little bit of positivity in, in prevention because there, there are a lot of people out there that could say, Hey, listen, I've never had a root canal. I'm pretty, you know, healthy as far as that, but I am weary, you know, the, the, the foods we eat are more toxic. There's more, more sugar and everything and more kind of artificial things in everything. More toxins in general are entering the body and that's gonna impact that. So what are your top preventive tips for not getting infections in the teeth?

Dr. John ([29:53](#)):

Well, great question. So those patients that might be saying that, that to themselves right now, maybe sometime in their life might encounter a tooth that's starting to become temperature sensitive.

Dr. John ([30:06](#)):

Okay. It's a cold. Okay. So, so I think that that's a really important discussion to have because at, you know, teeth are very mechanical and a tooth is the only body part that cannot swell. It cannot expand. If it could, it would. So when there's an inflammatory response inside of a tooth, that manifests as a temperature sensitive Okay. Or pressure sensitivity or both. Okay. So for those of your patients right now that are seemingly perfectly healthy, their teeth work great and their breath doesn't smell and everything looks fine and they chew fine and they don't have food traps and they don't have bleeding gums for all those people that are that healthy, that's great. Stay on the path and, and you know, learn everything you can about your mouth. But for those of the, those people who have been healthy for many years and now all of a sudden are starting to have things like temperature sensitivities show up with a tooth, okay?

Dr. John ([30:59](#)):

Like I said earlier, a tooth is the only body part that cannot swell. And what that means is the inflammatory response inside of a tooth that's now manifesting in temperature sensitivity is different inside of the tooth than everywhere else in the body because the tooth cannot swell. Okay. And why does a body part swell? It swells because, because the body is calling for more exchange of fluids, whether that's blood or lymph, the immune system, whatever, whatever blood brings blood brings oxygen, nutrition, minerals, the immune system and the lymphatic system even on the micro, which is the, the matrix. Okay? The inner ocean and the macro, which is the lymphatic system, the lymph nodes, okay, that has to drain. So you've got this exchange of fluid and that's involved in the swelling process. So in biological medicine, we believe that inflammation is a tool that is the, the, the power of inflammation is meant to be harnessed.

Dr. John ([31:59](#)):

Not to be suppressed, okay? And that's kind of a different difficult thing when you got a tooth going off it, it was cold sensitive. Now it just downright hurts all the time. It throbs. Okay? So the tooth, what's happening is it's setting up a, it's, it's accepting more blood because it needs more buffers. Maybe the problem with the tooth is a cavity, okay, maybe it's decay, maybe the tooth is stress fractured. Maybe a person grinds their teeth maybe the tooth is bending. Okay maybe it's loose. Okay? And it's blood supply is threatened or, or all the above all of these conditions could be going on. But a tooth, tooth is an under its own inflammatory response. And with that inflammatory response inside that tooth, it sets up a blood pressure gradient inside the tooth. Okay? So now because the tooth is accepting more blood because it needs more buffer to buffer all the acid attack if it's decay or trauma or stress fracture, you see then it's, so now the blood pressure inside the tooth is higher than the rest of the body.

Dr. John (33:04):

And when we think about that, that's very interesting because it's a lot like a tourniquet at that point. Because when the heart beats at a certain pressure and there's blood, the the cardiovascular system is at a certain pressure that blood is not able to get inside that tooth. Okay? And that's why I say it's like a tourniquet because at that point, a tooth is by design cutting off its own blood supply, okay? And for a lot of you, and this is typically when a tooth is very near, its its own death experience, okay? Cuz there's a tooth will only be able to survive such a thing for a matter of days if, if, if there's no intervention there, okay? And again, even biological dentists will say, well, you need a root canal, we got a laser, it's gonna be fine, but it's still a death experience for your tooth.

Dr. John (33:52):

And my passion is to keep that tooth alive as long as the death hasn't gotten too far inside that tooth. You must have a cone beam. You must know prolozone therapy. This is where ozone gets involved. This is where we use Swiss biological injectables like procaine and homeopathy, B12 ozone gas. And then do the dentistry, get the decay out of the tooth, tr you if it's stress fractured, you know, bond the tooth together, make it stronger, even if it's temporary, just get the conditions changed. So the blood, so the blood supply inside the tooth, the tooth can start to regulate that, get that blood pressure back down so that cold sensitivity goes away and the tooth can actually heal itself. Okay? So for dentists to become tooth healers, okay, we must get the body. You can't have a leaky gut and, and continue you know, you, you and you gotta know H R V in order to do this.

Dr. John (34:52):

And you've got to you've gotta address what I call the inner ocean, which is the extracellular matrix. You can, I believe you can never go wrong by treating the matrix, you know, improve, upregulate the matrix, it doesn't come with side effects, doesn't come with problems, it comes with the results. Okay? And we get the gut system working better, and therefore the gut biome is now starting to mo gr upregulate towards probiotic because the conditions have been changed. So the bugs are starting to take care of themselves in ways that are incredibly powerful, okay? Rather than trying to take a bunch of probiotics and putting it in the wrong conditions. And those bugs are morphing in the wrong, wrong ways. Okay? This is a biome situation as well, and I'm talking about trying to save a life of a tooth here, okay? But this is, these are all the forces that are at play as a dentist is, is trying to help a patient heal their own tooth.

Dr. John (35:52):

Cuz I think that's what patients want. Oh yeah. They want their mouths healed, okay? They want the gut system. They, the gap junctions to be tightened. You want your teeth long, sharp and beautiful, easy to keep clean. I think that's what people want. So for those of your listeners that are listening now that are very healthy, but maybe have a friend or maybe have a loved one that is going through it dental, it's like, what the hell do I do with this tooth? You know? And, or, or, or, or even you know, a teenager that's coming up in life thinking about getting their wisdom teeth out, you know, you better not. I'm, I'm a, I'm a strong component of this being done biologically. Okay? And and, and even surgical procedures, very, very important. This is why I'm training dentists right now, and I'm training doctors and health professionals right now so that they can understand the importance of the mouth to the rest of the body and how to we prevent root canals okay. From happening in the first place. And what's unique about a tooth, because it can't swell. What's unique about that and what's unique about the approach to that? So that we take that inflammatory response and we steer it instead of suppress it or remove it completely by killing the tooth. Okay?

Caspar (37:09):

Right? No, so much of prevention I've found, whether it's in dentistry or just in health in general and in in your body, is listening to the whispers of the symptoms before they become screams. Right? And if you listen to the whispers that the sensitivity, you know, and everything that is the whisper of, oh, this is called I'm feeling it. I need to do something, I need to act, my body is telling me. And then to be that is prevention. That's true prevention. So tell, tell, tell us, when is the book coming out? What can we expect from that. I, I wanna hear about, I always am looking for a good book to read.

Dr. John (37:43):

Well, the book is probably, you know, I'm still a practicing dentist, so I'm.

Caspar (37:48):

It's tough, right?

Dr. John (37:48):

Yeah, it's tough. You know, I'm, I'm in full-time business right now. Yeah. I write on the weekends. When's the book coming out? It's, it's gonna be a while. You know, building the protocols took me the better part of eight or nine years. And you know I'm, I'll say a couple years okay, you know, our, what'd you

Caspar (38:09):

Do? It?

Dr. John (38:10):

Our goal right now is to just really get the word out and where people can, you know, they can be in my, my online classes and just get the education started and for the few people who become patients here because they really see the value of coming to Denver and spending time with us and really getting it done a certain way. Well, you know, there's still that, but you know, my passion has always been a teacher. You know, Gandhi said, be the change you want to see in the world. And this is the change I wanna see in the world. I, I, I heard a lot of people early on when I was a traditional dentist, and even when I was a semi biologic dentist, because there's a great disparity between, you know, you can go to a weekend course and call yourself a biological dentist. It's not regulated, right? Like, and there's a spectrum, there's a scale, you know, and, and we're clear over here on this, this very strict end, you know, we don't give people oral antibiotics unless we absolutely have to because we don't need 'em, right? So that puts us clear over here, you know, so, you know, just the changes that are that are just really necessary to bring about that change in the world. So yeah. A couple years, we'll see maybe sooner,

Caspar (39:28):

Hey, listen, you, you, you got a lot on your plate. And I do think, and now is the time we need to educate people and make them aware that there is another way. Because I think so many people that I even speak to and doctors themselves say, well, what else is there? You know, they think it's only this way. They still have their blinders on and aren't even experiencing or hearing about anything else that may be out there. Biological dentistry, European biological medicine, I mean, my father traveled the world to try and do this, but nowadays you have people like yourself right in the backyard who are teaching others.

So that's a wonderful thing. Yeah. So, so thank you for that. And where can people learn more about you? If there's doctors listening, where can they you know, learn from you also, or if there's patients listening, where can they become your patient? Well,

Dr. John ([40:14](#)):

Everybody can find me@biodentist.com. B I O D E N T I S T.com. Biod.Com. that's the, that's my dental office. They can also go to the Human Universal Health Institute, and that's the larger 20,000 foot campus that we have here. We built an institute around the dental experience here. And that's H for human U for universal H for health institute.com. So h u h institute.com is really the the overarching website that houses bio dentist, bio vial, and also our nonprofit is called Biologic. And they can go to the HUH institute and become sign up and be on our email list. And when when I have classes, there'll be announcements. I think the next, we have one coming up here. I'll be training dentists on October 20th, 20 and 21 of this year. We're also gonna have I will be having a training for doctors and chiropractors and nature paths and health nutritionists and healers and acupuncturists and, you know, just outside the scope of dentistry, but really design more about what's happening in the body and why the body, why the mouth is important to the body so they can see it differently.

Dr. John ([41:34](#)):

That's gonna be coming up in October. The next, what we call the founder's message, that's my Monday evening Zoom online class for new patients that are interested in what we do. And even if you don't become a new patient, you can still jump into my online class. That'll be on March 27th, and you can sign up at that at h institute.com/events. And that's a free class on the evening of March 27th. And I will do a little deeper dive into just all of the Biogens Way protocols and how we go about things. And and for those of you that are listening that have a dentist that you like, tell your dentist that there's, there's good education out there and that there's just, there, there can be another level of how to look at the mouth and how to treat the mouth and get the body involved in the process. So you know, that's really what we do here.

Caspar ([42:31](#)):

Yeah. So vitally important to get others on board if we wanna see this carry forward and really protect our greatest wealth, which is health. Yeah. So Dr. John, thank you again for coming on. Really appreciate we'd love to have you on again. Hopefully that book gets done. We could talk about that in a couple years.

Dr. John ([42:47](#)):

Yeah, absolutely. And in closing, I'd like to say, I'd like to say something, please. It is our goal to start a revolution here and this revolution in healthcare, an integrated biological medicine and dentistry. And I envision a day when money is not the, the obstacle to overcome. And when insurance covers the entire body. So for instance, if you can get a hundred thousand dollars worth of chemo because you have cancer, why can't you get a hundred thousand dollars in your mouth? Because that's what's driving it. Okay? And we just stopped this separation between how the insurance industry separated the mouth and the body Okay. To stop that and bring that all back together, okay. And fix our food supply so that we have real soil and real water so that we have real plants. And, you know, we're, that's what we're doing here at the H O H Institute is we just, we dream of a day when we can see that re that consciousness really coming around into the healthcare, healthcare realm and where doctors are, are

think integrated instead of separatists and Newtonian, you know, we really want to bring this together just like the laws of biology, physics, and chemistry.

Dr. John ([44:04](#)):

Obeys. So I just wanna leave that with everybody, that there is a consciousness and it is rising. And you know, as humans here in our little bubble at here in Denver at H U H Institute, we are, this is the work that we're doing so that we can spread the good news and we have a lot of good news.

Caspar ([44:22](#)):

Yeah, yeah. No, there's, there's a ton of good news out there. And this revolution, it is happening and you're, you're a part of that. We could all should be a part of, of that cuz we do owe it to ourselves to live as healthy as possible. And part of that means caring for what happens in our mouth as the portal to the rest of our body. Check out Dr. John's websites [bio dentist.com](#), [h u h institute.com](#). And until next time, keep writing your own healing story.