

# CAVITATIONS (Tooth Socket Infection)

Causes and Treatments of Hidden Jaw Infections

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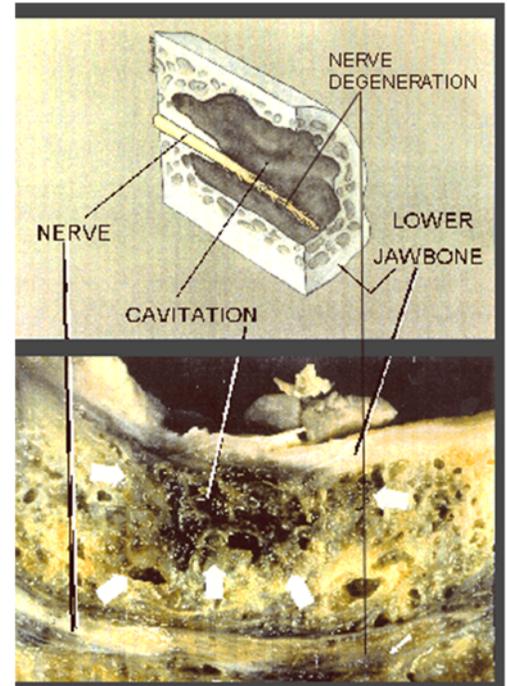
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Just as a cavity is a hole in the tooth, a cavitation is a hole in the upper jaw or jawbone. Cavitations are areas of dead bone that harbor low-grade bacterial infection. Most cavitations never cause pain and routinely go undetected even with an X-ray, however, some can produce pain, headaches, and/or facial pain. **Cavitations are a result of poor blood flow in the bone marrow caused by decaying teeth, root canals, trauma to the jaw, but mostly from poorly performed dental extractions leaving behind the periodontal ligament and/or bone shards.**

Recent research shows that cavitation tissue samples contain toxins which are the waste products of anaerobic bacteria (bacteria which thrive in the absence of oxygen), which is why antibiotics are rarely effective. These toxins account for the localized destruction of blood supply causing tissue death in the surrounding jaw.

There is concern these toxins contribute to other systemic diseases by spreading to distant parts of the body via blood, lymph channels, and nerve pathways. Chronic tonsil focal infections and/or sinus drainage are common with cavitations.

Antibiotics don't work in certain areas in the mouth. Most dental infections are in the tubules of the teeth and/or in the bone where the root of the teeth attach. Antibiotics cannot reach either. There are millions of tiny dentinal tubules in one tooth. If stretched out end to end, these dentinal tubules would extend 3 miles, which makes it impossible to sterilize. Antibiotics cannot reach dentinal tubules or the jawbone under and around the roots of the teeth.



## Jaw or Tooth Trauma Reduces Blood Supply to the Jawbone

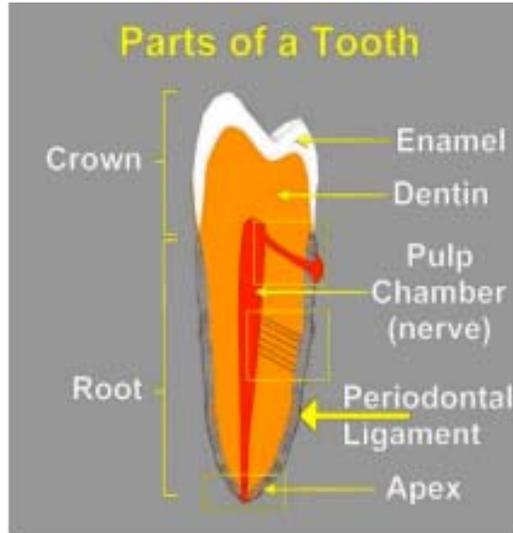
Cavitation can be the result of dental trauma, most of which we receive at the dentist's office. Large fillings, crowns, bridges, periodontal scaling, injections, and other procedures can all reduce the blood supply to the jaw. This will impede the toxins from leaving the bone, as well as the nutrients and oxygen from getting into the bone. High speed drilling can also cause damage to jaw bone. Any type of trauma to the jaw from an auto accident to a punch in the jaw can lead to reduced blood supply causing cavitations later in life.

## Dental Extractions Routinely Result in Cavitations

Cavitation sites are most commonly found where the 2<sup>nd</sup> or 3<sup>rd</sup> molars (wisdom teeth) have been extracted, and in the space left behind where wisdom teeth have been extracted, ie, the retromolar area. The most common cause of cavitations are bone infections resulting from an incomplete tooth extraction. For example, **99% of dentists do not remove the periodontal ligament when extracting a tooth which can lead to infection.**

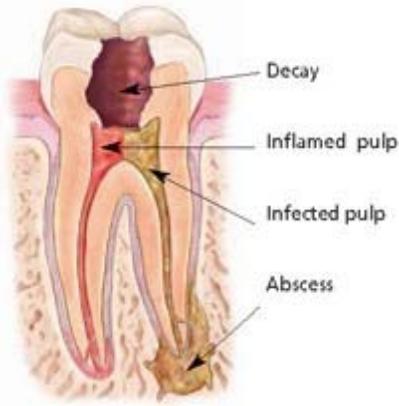
When a woman delivers a baby, she must also deliver the afterbirth. When a tooth is removed, there is an equivalent of the afterbirth, the periodontal ligament. This is a group of fibers, half of which originate within the tooth and half from the bone surrounding the tooth. They merge and form a hammock-like structure that unites tooth and bone. There is normally no bony attachment between the tooth and bone.

Theoretically, when a tooth has been pulled, the body will eventually fill in the space in the bone where the tooth once was. But when the ligament is left behind, an incomplete healing commonly takes place, which leaves a hole or a spongy place inside jaw bone. Experts speculate that perhaps this is because the bone cells on either side sense the presence of the periodontal membrane and "think" that the tooth is still there.



A very good video on this subject can be viewed at <https://www.youtube.com/watch?v=FfvjAUfgSNs>

## Root Canal Procedures Cause Abscesses in the Tooth Socket



There is no doubt that the quality of the bone marrow affects the health of the tooth. It doesn't make a lot of sense to spend thousands of dollars restoring dead teeth when the bone beneath them is infected and dying. Virtually all root canals result in residual infection due to the imperfect seal that allows bacteria to penetrate.

In addition, when a tooth has had root canal treatment or is in a dying state, bacteria within the tooth produce very strong chemicals that are highly neurotoxic and can destroy many critical enzymes within the body. If there is prolonged pain, indicating infection after a root canal, antibiotics are of little value since this is a problem of chemical toxins in addition to the anaerobic bacterial infection.

## Frequency Systems Eradicate Infection in the Teeth and Jaw Bone

There are varying degrees of toxicity in jaw bone. Some can easily be eradicated through the use of Tooth Tonic Plus (TTP), which can be purchased at RoyalRife.com. TTP is a liquid herbal formula that is swished in the mouth (\$40 for a 6-month supply). However, **the best option is using a frequency system to eradicate the infection.** Prices of frequency systems range from \$1200 – 1700. Obtain from Accessing-Health.com

If surgery is necessary, it's **highly recommended** it be performed by a qualified dentist trained in the procedures outlined below. Make sure to choose a qualified cavitation dentist properly trained to remove all infection in the bone. Obtain this list from Lorraine Larzabal (808-482-4123). Cavitation procedures vary from \$1,000 - \$1,500 per quadrant and are out-patient.

## Cavitation Cleaning / Cavitation Surgery

Many ask why their regular dentist should not do this procedure. Simply put, most are not qualified. In addition, most dentists have a symptom-oriented medical approach. They are not geared to address root causes of the permanent damage and destruction to natural teeth and surrounding bone.

Many dentists routinely perform root canals, partial root canals, and perform extractions leaving behind the periodontal ligament, all procedures that usually result in cavitations. Further, conventional dentists do not recognize the close connection between dental health and such areas as nutrition, the immune system, and the central nervous system. Unqualified dentists can leave necrosis behind which inhibit bone regrowth resulting in bone infections that can go undetected for years.

Trained cavitation dentists are able to:

- recognize toxin-containing holes when reading X-rays,
- are skilled in determining the scope of the diseased bone prior to removal,
- use a dental burr rather than a curette when removing diseased bone to prevent toxins from being pushed into the lymphatic drainage system,
- use high suction and saline flushes to prevent toxins from getting out of the opened cavitation into the mouth,
- clean out the cavitation area properly after the gangrenous pulp is removed.

When done properly, it's not unusual to have seemingly unrelated symptoms demonstrate a positive improvement within seconds of the removal of a cavitation. Responses within a day or two are also common.

In summary, it is not advisable for a dentist unfamiliar with the term "Cavitations" to learn how to perform this procedure on you. **There are only ~30 dentists in the U.S. properly trained to diagnose and clean cavitations.** For a list contact Lorraine Larzabal at 808-482-4123 or <https://accessing-health.com/>



The blue line above indicates the approximate area of cavitation (necrotic and infected bone) that was uncovered with elective extraction of the lower first molar.

### ELECTIVE EXTRACTION OF A ROOT FILLED TOOTH

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