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COUNCIL OF THE CITY OF PHILADELPHIA

3

COMMITTEE ON PUBLIC HEALTH AND

4

HUMAN SERVICES

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Room 400, City Hall
Philadelphia, Pennsylvania
Thursday, April 16, 2009
1:20 p.m.

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PRESENT:

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COUNCILWOMAN MARIAN B. TASCO, CHAIR

12

COUNCILMAN W. WILSON GOODE, JR.

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COUNCILMAN JAMES F. KENNEY

14

COUNCILWOMAN MARIA QUINONES-SANCHEZ

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COUNCILWOMAN DONNA REED MILLER

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COUNCILWOMAN BLONDELL REYNOLDS BROWN

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BILL 090124 - An ordinance approving the
dental amalgam brochure adopted by the Board
of Health pursuant to Section 9-3102 of The
Philadelphia Code.

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V A R A L L O Incorporated
Litigation Support Services
Eleven Penn Center
1835 Market Street, Suite 600
Philadelphia, Pennsylvania 19103
215.561.2220 215.567.2670

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COUNCILWOMAN TASC0: Good

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afternoon. The Council Committee on

4

Public Health and Human Services is now

5

in session.

6

We would like the Clerk to read

7

the bill before us today.

8

THE CLERK: Bill No. 090124, an

9

ordinance approving the dental amalgam

10

brochure adopted by the Board of Health

11

pursuant to Section 9-3102 of The

12

Philadelphia Code.

13

COUNCILWOMAN TASC0: Thank you

14

very much.

15

We welcome you all here today.

16

We're here to continue the discussion

17

regarding this legislation sponsored by

18

Councilwoman Blondell Reynolds Brown.

19

Let me establish that there is

20

a quorum in the presence of Councilman

21

Kenney, Councilwoman Brown, Councilwoman

22

Quinones-Sanchez, Councilwoman Miller and

23

Councilman Goode.

24

We now recognize Councilwoman

25

Brown for some introductory remarks.

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2 COUNCILWOMAN BROWN: I thank
3 you, Madam Chairwoman Tasco and all the
4 members of the Committee.

5 We should know that this has
6 been a long road. Only five years ago,
7 we introduced a comprehensive bill to
8 ensure that consumers are made aware of
9 their choices when it comes to what is
10 placed by a dentist in their mouths.

11 Here's what I know: I know
12 that mercury amalgam fillings are
13 something that causes worry in some
14 jurisdictions, and I know also that -- I
15 have learned also that there are
16 alternatives. I also know that there's
17 even a potential problem where mercury
18 amalgam fillings, patients need to know
19 about them and their options.

20 One more thing that I know is
21 that I am a legislator. I am not a
22 physician or a medical expert. So when
23 Council required a brochure to be made,
24 we thought it appropriate and important
25 to have the Health Department, under the

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2 strong and able leadership of Dr. Don
3 Schwarz, as the best department to handle
4 this challenge.

5 The Board of Health and the
6 Health Department have done a tremendous
7 job of thoroughly, completely examining
8 the issue and coming up with a document
9 that while neither side is completely
10 pleased, both sides have moved closer,
11 and, therefore, we believe we have a more
12 fair document.

13 I want to commend the Consumers
14 for Dental Choice for their strong
15 advocacy on this issue. Patients would
16 not be aware with any certainty of their
17 options if the Consumers for Dental
18 Choice had not stepped forward.

19 Thank you also must go to the
20 Philadelphia Dental Society and the New
21 Era Dental Society for your
22 professionalism and your important work
23 with the Health Department in shaping
24 their brochure. It is indeed the result
25 of a collaborative effort.

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2 The long road does not end here
3 today, but it is a good stopping point to
4 reflect on where we are, and at the
5 conclusion of this process, it is our
6 hope that Philadelphians will be better
7 informed of their medical options.

8 We want to thank all of those
9 partners for walking with us on this
10 journey.

11 Thank you, Madam Chair.

12 COUNCILWOMAN TASCO: Thank you,
13 Councilwoman.

14 We now would like to call the
15 first witness, and that would be our
16 Dr. Donald Schwarz, Deputy Mayor for
17 Health and Opportunity, Health
18 Commissioner.

19 (Witness approached witness
20 table.)

21 COUNCILWOMAN BROWN: Good
22 afternoon and welcome, Dr. Schwarz.

23 DR. SCHWARZ: Good afternoon,
24 Chairwoman Tasco and other members of the
25 Committee on Public Health and Human

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2 Services. I am Donald Schwarz, Deputy
3 Mayor for Health and Opportunity and the
4 Health Commissioner for Philadelphia.

5 In my capacity as Health
6 Commissioner, I also serve as the Chair
7 of the Board of Health, according to the
8 Charter. Thank you for the opportunity
9 to present testimony today on Bill
10 090124, which serves as the means by
11 which Council can approve the dental
12 amalgam consumer brochure developed and
13 adopted by the Board of Health.

14 As per the City Charter, the
15 Board of Health serves as the regulatory
16 body of the Department of Public Health,
17 providing expert judgment on matters
18 related to public health issues and
19 regulation. Appointed by the Mayor, the
20 current Board is comprised of the full
21 complement of medical and dental public
22 health professionals defined in Section
23 3-901 of the City Charter.

24 As required in Chapter 9-3100
25 of The Philadelphia Code, the Board of

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2 Health met with the Philadelphia Dental
3 Society, New Era Dental Society and
4 Consumers for Dental Choice to create an
5 informational brochure for dental
6 patients in Philadelphia that explains
7 the potential advantages and
8 disadvantages to oral health, overall
9 human health and the environment of using
10 amalgam in dental procedures. Department
11 staff and members of the Board of Health
12 spent hundreds of hours in preparation
13 for the drafting of the final brochure,
14 including time spent in discussion with
15 the Philadelphia Dental Society, the New
16 Era Dental Society and Consumers for
17 Dental Choice, as per City Council
18 direction in Chapter 9-3100. The process
19 leading up to the first public hearing
20 led to agreement among the three named
21 organizations and the City that a brief,
22 clear fact sheet would best meet the
23 intent of Council's direction. A draft
24 fact sheet was then crafted and submitted
25 for public discussion.

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2 The Board first heard formal
3 testimony from each of the groups in the
4 setting of an official public meeting on
5 December 11, 2008. Of a total of 70
6 documents submitted at that time, 14
7 crucial, representative, and
8 scientifically rigorous documents and
9 summaries of the remaining 56 documents
10 were reviewed by the Board of Health
11 during December and January. Based on
12 the testimony presented and the articles
13 submitted, a revised draft document was
14 developed in January 2009 and presented
15 at the subsequent public meeting of the
16 Board on February 10, 2009. Again, the
17 comments of the stakeholders were
18 considered in the process of amending and
19 finalizing the information sheet. The
20 Board adopted the finalized information
21 sheet by regulation at the next public
22 meeting on March 19, 2009.

23 The draft before you today is
24 the draft adopted by the Board of Health
25 as a regulation. It was approved by the

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2 Law Department March 23, 2009 and will be
3 forwarded to the Records Department for
4 the standard 30-day public inspection
5 period. At the conclusion of this
6 period, it will become an official
7 regulation of the Department of Public
8 Health. Department of Public Health
9 technical staff and the Board of Health
10 will continue to review applicable
11 scientific information on the use of
12 amalgam as it becomes available and will
13 consider revising the brochure as
14 warranted by changes in scientific
15 information.

16 I want to repeat that so that
17 the Council is -- the Committee is clear.

18 The Board determined that it
19 was important enough for us not simply to
20 craft a brochure, but to come back again
21 and review updated or new literature on
22 this topic on an annual basis, and we
23 will do so.

24 With passage of this ordinance
25 by Council, the wording of the

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2 information sheet will be retained as it
3 is for distribution to dentists in
4 Philadelphia who use dental amalgam for
5 distribution ultimately to patients. The
6 information sheet will also be posted on
7 the Department of Public Health website.

8 Speaking on behalf of the Board
9 of Health members, I believe that this
10 information sheet is a sound,
11 evidence-based and understandable patient
12 brochure that can be used by dentists in
13 Philadelphia to effectively educate their
14 patients on the health-related advantages
15 and disadvantages of dental amalgam.

16 Through the hard work and collaboration
17 of all parties involved in the process of
18 developing the brochure, I am confident
19 that as a final product, this will
20 provide important information to dental
21 patients in a clear, concise manner and,
22 most notably, inspire patients and
23 dentists to have a dialogue about the
24 issues surrounding dental amalgam. I
25 fully support the adoption of this

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2 brochure by this Committee and by the
3 Council Committee of the Whole.

4 I want to note, though not in
5 written testimony, that the Board has
6 also considered the issue of translation
7 of this document so that it's available
8 in more languages than simply English.

9 Thank you for allowing me to
10 present testimony on this important
11 issue. I will now answer any questions.

12 COUNCILWOMAN BROWN: I thank
13 you very much for your testimony,
14 Dr. Schwarz, and I'm sure all of us, but
15 in particular Councilwoman Maria
16 Quinones-Sanchez, is delighted to hear
17 that you've already determined that the
18 brochure will be put in different
19 languages.

20 Any questions or comments for
21 this witness?

22 (No response.)

23 COUNCILWOMAN BROWN: Well, we
24 thank you for what's called
25 stick-to-itiveness in working with those

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2 partners around the table to bring us to
3 this juncture.

4 DR. SCHWARZ: Thank you.

5 COUNCILWOMAN BROWN: Thank you
6 very much.

7 Our first panel, please join us
8 Freya Koss, Director of Pennsylvania
9 Coalition for Mercury-Free Dentistry;
10 Paul Gilbert, International Academy of
11 Oral Medicine and Toxicology; Zach
12 Hoover, Office of Senator Daylin Leach.
13 Please move forward to the witness table.

14 (Witness approached witness
15 table.)

16 COUNCILWOMAN BROWN: Just for
17 the record, the next panel will be
18 Dr. David Tecosky, Philadelphia Dental
19 Society, and Dr. Elsie Casimir with the
20 New Era Dental Society. You'll follow
21 the Pennsylvania Coalition for
22 Mercury-Free Dentistry.

23 Good afternoon.

24 MS. KOSS: Good afternoon.

25 COUNCILWOMAN BROWN: Please

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2 state your name for the record.

3 MS. KOSS: Freya Koss.

4 COUNCILWOMAN BROWN: Yes. And
5 you're welcome to proceed with your
6 testimony.

7 MS. KOSS: Thank you. Well, I
8 am finally delighted to be here, and I
9 can't thank you enough. It's been a long
10 road, hasn't it?

11 COUNCILWOMAN BROWN: It has
12 been.

13 MS. KOSS: Five years.

14 So my name is Freya Koss. I'm
15 the Director of the Pennsylvania
16 Coalition for Mercury-Free Dentistry,
17 which I established in 2004 for the very
18 purpose of bringing public attention to
19 the serious health effects of dental
20 mercury amalgam fillings.

21 I was suddenly struck with
22 double vision in 1998 and was diagnosed
23 with multiple sclerosis, lupus and
24 myasthenia gravis, all devastating
25 autoimmune diseases. The neurologists

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2 offered me nothing but prescriptive drugs
3 and I was told that my future was dim.
4 Fortunately for me, I quickly discovered
5 that the silver-colored fillings drilled
6 out and replaced seven days before were
7 50 percent mercury, one of the deadliest
8 elements found on earth.

9 I discovered that I wasn't
10 alone in this journey and was fortunate
11 to find Blanch Grube, a specially trained
12 mercury-free dentist in Scranton, to
13 remove my fillings safely. Slowly I
14 regained my health, with diet change and
15 nutritional supplements. Realizing I was
16 one of many in the general public and the
17 medical profession who knew nothing about
18 the toxicity of amalgam fillings, nor the
19 related illnesses, I knew that I had to
20 do something to enlighten the public
21 about this crime to humanity.

22 I met others who had also
23 become chronically ill and recovered
24 again after amalgam removal. We worked
25 together to hold public events

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2 enlightening whoever would listen. By
3 2004, I knew that something had to be
4 done on a widespread scale to reach the
5 masses. It was at that time that I
6 approached Councilwoman Blondell Reynolds
7 Brown about introducing legislation for
8 informed consent. She was more than open
9 to learning about this travesty,
10 particularly for the unsuspecting
11 pregnant women and children.
12 Councilwoman Brown understood what had to
13 be done on the legislative level.
14 Guiding us all the way, she, together
15 with David Forde, Chief of Staff now, and
16 Joe Meade, Legislative Assistant, we
17 forged ahead, and the rest is history.

18 Philadelphia is the first city
19 in the nation to mandate that dentists
20 give their patients a brochure calling
21 silver fillings mercury, with warnings
22 such as "mercury is released as a vapor.
23 Mercury is released as a vapor when
24 amalgam fillings are placed or removed
25 and through chewing. Mercury can be

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2 absorbed by the body and built up over
3 time. High levels of mercury can cause
4 toxic effects on the brain, the nervous
5 system and the kidneys. People with
6 amalgam fillings have higher levels of
7 mercury in their blood and urine than
8 people without amalgam fillings."

9 And thanks to Charlie Brown,
10 national counsel for Consumers for Dental
11 Choice, the brochure includes the Food
12 and Drug Administration's admission that
13 dental amalgams contain mercury, which
14 may have neurotoxic effects on the
15 nervous system of developing children and
16 fetuses.

17 The brochure is an important
18 step in creating public awareness about
19 the potential toxic effects of amalgam
20 fillings. Consumers for Dental Choice,
21 the Pennsylvania Coalition for
22 Mercury-Free Dentistry, those injured
23 consumers who are here today, Karen
24 Palmer, Karen Burns, Linda Stein,
25 Dr. Paul Gilbert, Leslie Baird and all of

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2 those who couldn't be here today, thank
3 City Council for your willingness to
4 examine this issue and to Councilwoman
5 Reynolds Brown for her courage and her
6 fortitude in obtaining passage of the
7 mercury in dentistry law.

8 It hasn't been an easy path,
9 particularly with the Dental
10 Association's relentless lobbying to keep
11 the mercury secret from the public, first
12 attempting to block the bill and then to
13 minimize the dangers of mercury fillings
14 in the patient brochure. Can you
15 imagine? Mercury isn't even called a
16 toxic metal in the brochure. It's simply
17 referred to as a metal.

18 Consumers are entitled to know
19 the warnings and the contraindications of
20 placing mercury in teeth, those listed on
21 the amalgam manufacturers' material
22 safety data sheets sent to dentists, but
23 not privy to patients. The following are
24 the warnings that the dentists receive
25 and the patients never see, but they are

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2 entitled to: "This product contains
3 mercury, which is known by the State of
4 California to cause birth defects or
5 other reproductive harm. Removal of
6 clinically acceptable amalgam restoration
7 should be avoided to minimize mercury
8 exposure, especially in pregnant women.
9 Health hazards: Acute and chronic
10 mercury poisoning." Usually chronic.
11 "The number of amalgam fillings for one
12 patient should be kept to a minimum.
13 Exposure to mercury may cause irritation
14 to the eyes, respiratory tract and mucous
15 membrane."
16 Well, if I had known that, they
17 never would have put a mercury filling in
18 my tooth and I never would have been ill,
19 and neither would any of the people
20 sitting behind me.
21 In addition, there are
22 contraindications that patients don't
23 know about that are on that fact sheet.
24 "The use of amalgam is not recommended
25 for patients with kidney disease, in

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2 children six and under, in pregnant women
3 and nursing women."

4 We would like to see
5 improvements in the fact sheet addressing
6 the possible removal of several
7 statements which we believe to be untrue,
8 unsubstantiated and/or not helpful to a
9 patient trying to make an informed
10 decision. And that's what the ordinance
11 is about, and it does not fulfill that
12 portion of the ordinance.

13 Realizing the complexity and
14 the breadth of this dental health issue,
15 Commissioner Schwarz generously offered
16 to revisit the fact sheet for revision as
17 new information was presented, and we are
18 grateful for that.

19 We as a group thank
20 Councilwoman Reynolds Brown for coming to
21 the plate to champion this bill, which
22 unlocks the dental profession's
23 longstanding mercury secret. We salute
24 you, and despite our concerns relative to
25 certain language and the exclusion of

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2 manufacturers' warnings, we request that
3 City Council vote to require immediate
4 distribution of the brochure in its
5 present state so as not to delay
6 consumers from learning that their silver
7 fillings are really mercury and that they
8 have a choice of a non-toxic filling.

9 We ask that steps be taken to
10 prepare a new brochure that at least will
11 provide the same information and warnings
12 that manufacturers distribute to dentists
13 with their amalgam products. Although
14 patients are entitled to receive this
15 information, they rarely do.

16 According to Jim Love, attorney
17 for the International Academy of Oral
18 Medicine and Toxicology, quote, "In the
19 case of dental amalgam fillings, a
20 manufacturer is required to supply
21 warnings to physicians and dentists, who
22 are required to pass the warnings to
23 their patients so that they can make an
24 informed decision about the use of
25 fillings containing mercury or other such

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2 dental implants."

3 I would like to introduce
4 now -- may I do that or will you call the
5 next person?

6 COUNCILWOMAN BROWN: I have my
7 script here, so I'll be calling up all
8 the others to testify.

9 MS. KOSS: Okay. So I won't
10 call anybody up, but I would like to say
11 one more thing. There has been a bill
12 introduced by Senator Daylin Leach on the
13 state level. He introduced it in the
14 House, and now he's a Senator and we have
15 a bill in the House and the Senate now.
16 It's a similar bill for informed consent
17 brochures on the state level, and Leach
18 said, "You don't go to the dentist's
19 office thinking your treatment will
20 involve a potentially harmful toxin.
21 Pennsylvanians should also be aware of
22 the health and environmental threat and
23 of the existing effective alternatives to
24 mercury fillings. My bill will do just
25 that," and we thank him, too.

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2 COUNCILWOMAN BROWN: We thank
3 you for your testimony.

4 For the record, was it you or a
5 representative from the Coalition for
6 Mercury-Free Dentistry that were able to
7 be a part of those discussions and
8 deliberations over the past many months?

9 MS. KOSS: I was at the
10 meetings, along with Charlie Brown and
11 two dentists.

12 COUNCILWOMAN BROWN: Okay. All
13 right, then. I just wanted that to be
14 reflected in the record.

15 MS. KOSS: Yes.

16 COUNCILWOMAN BROWN: Any other
17 questions or comments from members of
18 this Committee?

19 (No response.)

20 COUNCILWOMAN BROWN: Well, we
21 thank you for your advocacy and for your
22 contagious passion around an issue that
23 has caught the attention of all of us and
24 ultimately will make a difference. For
25 me, my impetus was the potential impact

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2 on newborns and children.

3 MS. KOSS: Yes.

4 COUNCILWOMAN BROWN: So it

5 makes a dent on that issue for expecting

6 moms.

7 MS. KOSS: Yes.

8 COUNCILWOMAN BROWN: More

9 information is always, always better.

10 What the consumer ultimately does is what

11 they do, but the more information is

12 always better.

13 MS. KOSS: You know, my

14 concern -- and I'll just say this. My

15 concern is the way the fact sheet is

16 written now, there are a lot of

17 conflicting comments. One sentence says

18 it's dangerous and the very next sentence

19 says there's no proof that it's a

20 problem. So you have somebody in a

21 dental office with no understanding of

22 what this is all about, and at the end of

23 the brochure, it says ask your dentist.

24 Well, you have a group of minorities and

25 low-income people who also are not aware

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2 that Medicaid and HMOs will pay for a
3 white filling. That was included in this
4 brochure until the last draft, and nobody
5 at the last meeting with the Department
6 of Health ever brought that up. It was
7 in there and all of a sudden, it
8 surreptitiously disappeared. So you have
9 people who are on Medicaid who will ask
10 their dentist, What is this all about,
11 and he'll say, They're safe, don't worry
12 about it, and they'll throw mercury in a
13 pregnant woman's teeth or in a child's
14 tooth.

15 There is no reason why that
16 Medicaid element was removed, and I would
17 like to ask Dr. Schwarz actually how that
18 happened. It was never part of the
19 discussion during that meeting.

20 COUNCILWOMAN BROWN: Well, the
21 reality for us today is that there have
22 been many, many months of collaborative
23 thinking around the table, and we work in
24 a process where seldom does anyone at
25 that table end up with 100 percent on

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2 their issue. It's a process that moves
3 us to find as much common ground as we
4 can, recognizing and accepting that we
5 will never be 100 percent of where we
6 want to be. And the goal of this
7 document was to move the needle so that
8 we're at a different place than where we
9 started five years ago.

10 MS. KOSS: I think we're at
11 definitely a better place. It's probably
12 the best brochure in the country.
13 However, it is confusing and it wasn't --
14 the idea was not to balance it. It was
15 to give patients the truth based on
16 science. And the fact that I'm bringing
17 up the Medicaid issue is, there were many
18 discussions at that last meeting and it
19 went back and forth, take this out, put
20 this in, but that was never brought up.
21 So I was shocked and appalled, and I
22 can't imagine why poor people shouldn't
23 know that they can have white fillings at
24 no extra charge. Why don't they know
25 that? Their dentist is not going to tell

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2 them. And that's the first thing that
3 should be changed.

4 COUNCILWOMAN BROWN: Well,
5 after we take care and wrap this up in a
6 neat way and acknowledge all the work
7 that's been done, that may become a next
8 opportunity, but it's imperative that we
9 wrap up the enormous amount of work
10 that's been done --

11 MS. KOSS: I understand.

12 COUNCILWOMAN BROWN: -- up to
13 this point.

14 MS. KOSS: And the next issue
15 that has never been addressed is
16 implementation. How do we know that the
17 dentist is giving it to the patient? How
18 do we get it to the dentist? I mean,
19 that's never been discussed in any of the
20 meetings that I've been in.

21 COUNCILWOMAN BROWN: Well,
22 that's well taken. Our role is
23 legislators. We're not the experts and
24 we're not the implementers. But I'm
25 confident, given the professionalism and

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2 the leadership of that office, that what
3 we move to and what moves to the Mayor's
4 desk will indeed be honored and executed.

5 MS. KOSS: Good. Thank you
6 very much.

7 COUNCILWOMAN BROWN: Thank you
8 very much. You're welcome.

9 Our next panel, Dr. David
10 Tecosky, Philadelphia Dental Society, and
11 Dr. Elsie Casimir, New Era Dental
12 Association.

13 (Witnesses approached witness
14 table.)

15 COUNCILWOMAN BROWN: Good
16 afternoon.

17 DR. TECOSKY: Good afternoon.

18 DR. LLOYD: Good afternoon.

19 COUNCILWOMAN BROWN: Please
20 state your name for the record and you're
21 welcome to proceed with your testimony.

22 DR. LLOYD: I'm Dr. Arnell
23 Lloyd. I'm here representing Dr. Elsie
24 Casimir for New Era Dental Society. Also
25 I'm here on behalf of the Greater

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2 Philadelphia Health Action Non-Profit
3 Community Health Center, which I'm
4 currently the Dental Director for, and so
5 this topic is near and dear to my heart.

6 I'd like to say that probably
7 in the beginning dentists were a little
8 rowed about this issue, mainly because
9 we've seen how successful fillings have
10 been, amalgam fillings have been, long
11 term compared to the tooth-colored or
12 resin fillings.

13 And so with that said, I'd like
14 to thank City Council and especially
15 Councilwoman Blondell Reynolds Brown for
16 bringing this to the forefront, because I
17 think what you did was educate not only
18 the constituents, the public, but
19 probably a lot of dentists also. We
20 weren't exactly always aware of all of
21 the scientific information that goes into
22 the research which the Department of
23 Public Health put into putting this
24 brochure together. There was a lot of
25 research, and I commend them, commend

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2 you, because it's based on fact and not
3 just doing, you know, information that
4 cannot be proven. So we're going to
5 stick with that.

6 Also, New Era supports the
7 current brochure in its form. I mean,
8 100 percent. I mean, I'm sure we would
9 have liked to have had some other issues
10 included. However, it's a starting point
11 and will educate, and contrary to the --
12 well, I don't want to start anything, but
13 contrary to the previous speaker's
14 statement about dentists not informing
15 the Medicaid population about their
16 choices, a lot of them do know. That's
17 what my population is basically that I
18 deal with, and they do come in and they
19 do request resin fillings, and at that
20 time I do educate them on the
21 differences, not just the differences of
22 amalgam, but resin versus amalgam, why
23 you should or should not have an amalgam
24 and why a resin filling may be better for
25 you or why it may not be better for you.

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2 And, as you said, an educated consumer is
3 the best type of person, the more
4 information you have. As Oprah says,
5 when you know better, you do better. And
6 that's what we're trying to do.

7 I agree with not putting it
8 into pregnant women's mouths. So that
9 issue is at the top of the list. Young
10 children, because their teeth are going
11 to exfoliate or fall out at some time, it
12 doesn't have to last a long, long time
13 like an adult's. So we can use more
14 resin in children. However, I still say
15 that amalgams last longer and are more
16 compatible with the tooth structure if
17 it's a deep cavity, and a lot of the
18 patients that I deal with have deep
19 cavities.

20 But with that said, again, I'd
21 like to take the opportunity to thank all
22 of City Council, again, Councilwoman
23 Blondell Reynolds Brown. I think that
24 now that the fight is over and, you know,
25 that everything is in place, I think it's

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2 wonderful what you have done, and we will
3 take this opportunity to inform our
4 patients and talk about the differences
5 between amalgam and resin.

6 COUNCILWOMAN BROWN: Well,
7 thank you for your testimony. We do have
8 questions, but we want to hear from our
9 other witness and then we'll open it up
10 to questions.

11 Please, sir.

12 DR. TECOSKY: Chairwoman Tasco
13 and members of the Public Health
14 Committee, thank you for allowing me to
15 speak before you today. My name is Dr.
16 David Tecosky. I'm a practicing general
17 dentist in Philadelphia, and I am
18 President of the Philadelphia County
19 Dental Society representing
20 Philadelphia's dentists. I also speak
21 today on behalf of the Pennsylvania
22 Dental Association.

23 I am here today to testify in
24 support of Bill No. 090124, which would
25 approve the dental amalgam brochure

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2 recently adopted by the Philadelphia
3 Board of Health, and we thank you,
4 Councilwoman Reynolds Brown, for your
5 efforts on this issue, and I think that
6 Dr. Lloyd expressed it very well.

7 As this Committee has wrestled
8 with this issue repeatedly over several
9 years, there is no need to remind you of
10 its long history. Fortunately, the City
11 Council chose to rely on the public
12 health and scientific experts on the
13 Board of Health to develop a
14 scientifically sound brochure, and we are
15 hopeful that we have reached the end of
16 this difficult journey.

17 This brochure was required by
18 legislation passed by City Council on
19 December 13, 2007. Since that time, our
20 dental associations have worked with the
21 Board of Health and the Health Department
22 staff to ensure that this brochure will
23 be a helpful tool as we continue to
24 inform our patients about their dental
25 restorative choices, while maintaining a

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2 strictly scientific and accurate
3 viewpoint. With the strong leadership of
4 Deputy Mayor Schwarz, the Philadelphia
5 Board of Health approved a brochure in
6 February which we believe accomplishes
7 both goals.

8 Dental amalgam is a safe,
9 affordable and durable material that has
10 been used to restore the teeth of more
11 than 100 million Americans. Dental
12 amalgam has been studied and reviewed
13 extensively and established a record of
14 safety and effectiveness. The Board of
15 Health has reviewed that record and the
16 scientific studies underlying it.

17 The resulting brochure is not
18 what we recommended to the Board of
19 Health, but it is an acceptable
20 compromise that is supported by science
21 and addresses an issue that is clearly of
22 concern to City Council and the Board.
23 On behalf of the dentists of
24 Philadelphia, we ask that this Committee
25 approve the brochure as written by the

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2 Board of Health.

3 Thank you for your time and
4 consideration.

5 COUNCILWOMAN BROWN: We thank
6 you very much for your testimony, and we
7 do have questions from Councilman Jim
8 Kenney.

9 COUNCILMAN KENNEY: Thank you,
10 Madam Chair.

11 COUNCILWOMAN BROWN: You're
12 welcome.

13 COUNCILMAN KENNEY: I didn't
14 obviously follow this issue as closely as
15 Councilwoman Brown or the people involved
16 in the discussion, but is it the filling
17 itself or is it the insertion and removal
18 of the filling is what causes the
19 problem? I mean, is the filling in the
20 mouth in a solid state, is that an issue
21 or is it just when it's heated to be put
22 in or heated to be taken out?

23 DR. TECOSKY: I think that the
24 concern is not the material in its use in
25 wearing it. The question is, is there an

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2 effect of the mercury. It's not heated
3 when it's used. It's mixed. And once
4 it's mixed, it's already in a form that
5 is not free mercury.

6 COUNCILMAN KENNEY: But when
7 you're taking it out, you're drilling it
8 out, so you're creating a heat from
9 the --

10 DR. TECOSKY: There is some
11 heat created, yes.

12 COUNCILMAN KENNEY: But I'm
13 saying, is the assertion of its danger
14 when it's going in and when it's coming
15 out or when it's in there?

16 DR. TECOSKY: I don't believe
17 that we believe that there is danger,
18 significant danger, from that.

19 COUNCILMAN KENNEY: In any of
20 the processes?

21 DR. TECOSKY: No.

22 COUNCILMAN KENNEY: Okay. But
23 I'm saying once it's -- I go to the
24 dentist enough, and I actually enjoy
25 going to the dentist, frankly. I know a

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2 lot of people don't like it, but I don't
3 mind it at all. But when it's set in the
4 cavity, there is no -- even the people
5 who are advocating to get rid of it
6 altogether are not contending that
7 there's a leaching issue or any type
8 of --

9 DR. TECOSKY: You have to ask
10 them that, but I believe there's an
11 extremely low level of release in chewing
12 and grinding of teeth, extremely low.

13 COUNCILMAN KENNEY: I mean, one
14 of the things -- I mean, the last
15 testimony, certainly people have their
16 opinion and they're dedicated to their
17 issue, but I'm listening to the two of
18 you and I can't imagine you putting
19 anything in anyone's mouth that you
20 knowingly would think was going to harm
21 them. And I'm sorry, Doctor. You're --

22 DR. LLOYD: Lloyd.

23 COUNCILMAN KENNEY: In your
24 cohort of patients, I can see you're a
25 dedicated person who is working with a

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2 population that really needs your help,
3 and I can't imagine that any of you guys
4 would knowingly do something to hurt your
5 patients. I think it's pretty obvious.

6 But, I mean -- because some of the
7 testimony in the past was the Dental
8 Society's secrets and not -- I mean, I
9 just want to make sure that we don't
10 leave here today thinking that you guys
11 are somehow trying to cover up something
12 or hide something.

13 DR. LLOYD: No, not at all. I
14 still have amalgams in my mouth that I've
15 had for better than 40 years, and I would
16 not remove them unless I needed a new
17 filling, and maybe I would put in a resin
18 filling only for cosmetic purposes. It
19 wouldn't be because I was fearful of the
20 mercury in the amalgam.

21 And then amalgam is what it
22 says, like when you say that amalgam is
23 mercury, it's not -- amalgam by its very
24 definition is a conglomeration of
25 different substances, and it's a little

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2 of this, a little of that, a little of
3 this. So it's not entirely mercury
4 anyway, and that's a little misleading
5 to --

6 COUNCILMAN KENNEY: Well, I've
7 read and been told I can get mercury from
8 eating too much tuna, too.

9 DR. LLOYD: Right. Exactly.
10 Salmon you can get it from. So --

11 COUNCILMAN KENNEY: But you
12 guys are happy with at least the
13 compromise as it is today?

14 DR. LLOYD: Yes.

15 DR. TECOSKY: It's acceptable.

16 COUNCILMAN KENNEY: Okay.

17 Fine. Thank you.

18 COUNCILWOMAN BROWN: Any other
19 questions from members of the Committee?

20 (No response.)

21 COUNCILWOMAN BROWN: Well, we
22 thank you very much for your testimony.
23 We appreciate the fact that you are
24 professionally okay with the
25 understanding that it's based on medical

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2 research and we will use the term "an
3 acceptable compromise."

4 Thank you very much.

5 DR. TECOSKY: Thank you.

6 COUNCILWOMAN BROWN: Our last
7 panel, Karen Palmer, dental assistant;
8 Susan Kreider, registered nurse, and
9 Karen Burns, dental assistant. Please
10 come to the witness table.

11 MS. KOSS: Excuse me. It's
12 Susan Kreider.

13 COUNCILWOMAN BROWN: Thank you
14 very much.

15 MS. KOSS: Excuse me. But
16 Linda Stein was signed in.

17 COUNCILWOMAN BROWN: You're
18 welcome to come to the witness table.

19 (Witnesses approached witness
20 table.)

21 COUNCILWOMAN BROWN: Please
22 state your name for the record and
23 proceed with your testimony. Good
24 afternoon, ladies.

25 MS. PALMER: Good afternoon.

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2 My name is Karen Palmer and I want to
3 thank you for this opportunity to express
4 my views, but, most important, my
5 gratitude to Councilwoman Reynolds Brown
6 for her courage in this ensuing battle
7 for the right to know and to all of the
8 City Council members for their unanimous
9 vote in December of 2007. To hold the
10 distinction of the first city ordinance
11 for an informed consent in a consumer
12 fact sheet is certainly commendable, and
13 I will forever applaud all your efforts.

14 I am compelled to present
15 myself to you in regard to informed
16 consent concerning silver mercury amalgam
17 used in restorative dentistry due to the
18 enormity and gravity of this public
19 health issue that has become largely
20 political for so long to the detriment of
21 people, young and old, everywhere.

22 I would venture to guess that
23 most are at least not initially thinking
24 about the first ones to be exposed and
25 negatively affected by chronic mercury

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2 vapor exposure, even before the dentist
3 or the patient, and that would be the
4 dental assistants, approximately 266,000
5 in this country that are serving millions
6 of patients and lack the serious
7 full-body protections needed during the
8 placement and removal of this toxic
9 substance. That number is one less,
10 since I being diagnosed as carrying 1,275
11 percent toxic mercury body burden above
12 baseline normal and having received a
13 definitive diagnosis of mercury
14 poisoning, I could no longer work.

15 I continue to suffer every day
16 from the neurological damage to my body,
17 the result of handling mercury daily for
18 decades at my job as a dental assistant,
19 now disabled because of the severe
20 paresthesia, chronic fatigue syndrome,
21 peripheral toxic neuropathy, loss of
22 tendon reflexes, along with other
23 symptoms of demyelination that is
24 hallmark of progressive neurodegenerative
25 autoimmune diseases like MS, and memory

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2 loss.

3 What I am now aware of and
4 experienced firsthand is that all dental
5 hygienists release vapor from mercury
6 when they scale and scrape teeth with a
7 hand or electronic instrument and when
8 they polish teeth with a rubber cup or
9 bristle brush. As dentists drill
10 fillings, even more significant levels of
11 vapor pour off the fillings. The dust
12 and the particles created from the
13 drilling process contaminate the
14 patients, the doctor, the staff,
15 surrounding countertops, walls and
16 floors, and in fact, mercury vapor goes
17 right through the mask and gloves I was
18 told were protecting me.

19 Dental students need to take
20 note and beware. Optimal evacuation and
21 ventilation devices and equipment are so
22 key for everyone who enters into a dental
23 office, school or hospital clinic. What
24 happened to we are "first to do no harm"?

25 Dentists that continue to place

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2 this known neurotoxin are affecting the
3 health of the entire body as the mercury
4 leaches out of the fillings and is
5 absorbed throughout, sadly, from head to
6 toe.

7 It is most sobering to note
8 that mercury lodges in the brain, where
9 it stays year after year, suppressing the
10 immune system and killing neurons by
11 destroying their myeline sheath. I am
12 proof of that.

13 Have you ever wondered where
14 all the mercury-laden dental wastewater
15 goes and its subsequent use after it
16 reaches the sewage treatment plants? As
17 then called sludge, sold as fertilizer
18 for food that we eat, and the vicious
19 cycle continues. This problem can easily
20 be solved with the installation of
21 amalgam separators that capture the
22 mercury, which is later properly recycled
23 before leaving the dental office.

24 Patients must be told when they
25 are given a choice of filling material

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2 options that each silver amalgam filling
3 being placed just inches from their brain
4 contains at least 50 percent mercury and
5 that mercury vapor is released when they
6 chew, brush or grind their teeth and also
7 when they eat hot or cold drinks or food.
8 Mandatory informed patient consent is
9 crucial because of the permanent damage
10 to the brain and kidneys that can occur.

11 Much to my discredit, I now
12 know more about mercury toxicity than in
13 all the years I handled it. Needless to
14 say, I am outraged to learn all this,
15 much too late in coming, when I realize I
16 was slowly poisoned over time from a
17 profession that I gave the best years of
18 my life.

19 In closing, you should all know
20 that in a 1995 California lawsuit,
21 attorneys for the American Dental
22 Association made the following statement:
23 "The ADA owes no legal duty of care to
24 protect the public from allegedly
25 dangerous products used by dentists."

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2 It is profoundly clear to me
3 who truly has our best interests at
4 heart. Now I understand fully why
5 individual cities and states are no
6 longer waiting for federal agencies like
7 the FDA or the EPA to best protect their
8 citizens and their pristine environments
9 in Arizona, California, Connecticut,
10 Maine, New Hampshire, New York, Oregon,
11 Rhode Island, Vermont, Kansas,
12 Massachusetts, and the list goes on and
13 on. I hope and pray Philadelphia and
14 Pennsylvania will be added to the list,
15 and soon.

16 This Council has a very unique
17 opportunity to have an enormous positive
18 impact on the current and future health
19 and well-being of the people and
20 environment of this great city. I remain
21 faithful that they will seize the moment
22 to do just that.

23 And if I may just, in closing,
24 address this gentleman, Councilman Jim
25 Kenney, who had a question about the

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2 mercury in the fillings in the placement.
3 The state House bill by Daylin Leach, if
4 I can just read what his website says, "A
5 full one-half of a typical dental amalgam
6 filling is made up of liquid mercury, but
7 I would surmise that most people are not
8 aware of the risks that can be involved
9 with that. Leach explains that mercury
10 is a toxin that attacks the central
11 nervous system and endocrine systems.
12 Overexposure to mercury can cause damage
13 to the brain, nerves and hormonal
14 functions, often producing a condition
15 nearly identical to autism. Children,
16 pregnant women and women who wish to
17 become pregnant are at a particular
18 risk."

19 That does not mean that others
20 are not at risk for neurological damage.
21 That would be me.

22 Mercury fillings are currently
23 considered by the federal government to
24 be an environmental hazard before and
25 after their use, and other studies show

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2 some release of mercury during
3 installation of the fillings and
4 continued emission of mercury vapor
5 throughout the life of the filling.

6 COUNCILWOMAN BROWN: We thank
7 you very, very much for your testimony.

8 MS. PALMER: I do have copies
9 of my testimony for you all. May I
10 present that?

11 COUNCILWOMAN BROWN: You can
12 remain seated. We'll certainly pick that
13 up from you.

14 Thank you.

15 MS. PALMER: I want to say that
16 I have a gift for you, Councilwoman, and
17 for all of you, and it comes in the form
18 of these three color handouts at the back
19 of my testimony.

20 COUNCILWOMAN BROWN: We thank
21 you.

22 MS. PALMER: There are three
23 things. The first thing to protect the
24 patient is known as a clean-up device.
25 It is a small ring that fits around the

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2 tooth that virtually sucks the vapor and
3 the particulate matter while the tooth is
4 being drilled.

5 The second photo is of a
6 six-inch corrugated hose type that fits
7 on your chest, so that when dentists are
8 drilling and that voluminous vapor is
9 emitted, the hose collects all of it, and
10 the staff and the doctor and the patient
11 are not recontaminated.

12 And the third picture is a
13 picture of a mercury amalgam separator.

14 Three things can solve this
15 whole problem for everybody in this
16 world.

17 COUNCILWOMAN BROWN: Thank you
18 for your testimony and for your exhibits.

19 Please, you want to state your
20 name for the record and proceed with your
21 testimony.

22 MS. BURNS: My name is Karen
23 Burns and I'm a dental -- I'm a disabled
24 dental assistant. I was a dental
25 assistant for 24 years until I couldn't

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2 do it anymore.

3 First, I want to thank you for
4 your tireless effort in getting this
5 done, and Freya Koss, too, and everybody
6 who sincerely is working on this, not
7 just acting as if they're working on it.

8 There are studies -- everyone
9 is talking about the science and the
10 studies. There are studies in other
11 countries that, of course, we can't use
12 here. And in Norway alone where they did
13 an extensive study on dental assistants
14 getting sick, amalgam has been banned.

15 I believe that since people are
16 all getting sick in different ways --
17 like Karen spoke about her illness. I
18 have fibromyalgia, chronic fatigue. I
19 can't think straight anymore. I can't
20 type. That's why I didn't type you out
21 what I was going to say today. I gave
22 you my test of the mercury that's in my
23 body. I've been working for years, I
24 guess eight years, trying to get the
25 mercury out of my body, and I've spent

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2 thousands of dollars out of pocket,
3 because this is socially unacceptable,
4 because there's no science saying that
5 what mercury poisoning is, where I'm
6 getting it from. When I tried to get
7 workers' compensation, they asked me if I
8 ate tuna fish. They would not accept the
9 fact that that mercury -- you see that
10 line -- that that is what's causing my
11 illness. So now for eight years and
12 thousands of dollars, I sit and get IV
13 treatments three times a week and pay for
14 it out of pocket, and it's only come
15 down -- it's still in the elevated area.

16 I think, like Karen said, we
17 need to first protect the patients and
18 then, of course, protect the dental
19 assistants and, of course, the dentists.
20 I don't know how they can think that this
21 is safe and how they can sleep at night,
22 because I'll tell you, I feel terrible
23 that I mixed those amalgams that these
24 dentists put into these patients' mouths,
25 especially young children and pregnant

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2 women.

3 And that's all I have to say.

4 COUNCILWOMAN BROWN: We thank
5 you for your testimony.

6 MS. BURNS: Thank you for
7 listening.

8 COUNCILWOMAN BROWN: Please,
9 good afternoon.

10 MS. SHEIN: Good afternoon. My
11 name is Linda Shein. Thank you for
12 hearing my testimony this afternoon.

13 COUNCILWOMAN BROWN: You may
14 proceed.

15 MS. SHEIN: I was rarely sick
16 as a child and young adult. Then at age
17 31, the dentist told me my fillings all
18 needed to be replaced and did I want to
19 use silver or gold. I asked, What's the
20 difference?

21 And the dentist said, Nothing,
22 but the silver costs about one-quarter of
23 the price.

24 As I had just finished graduate
25 school and had serious loans to pay off,

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2 I say, Well, that's easy, I'll take the
3 silver.

4 Shortly thereafter, I had
5 menstrual bleeding for 40 days, and every
6 day at various times I would feel a fog
7 come over me and be unable to think
8 clearly at work. I did not make the
9 connection to my dental work. Who would?
10 I trusted my dentist, and he didn't tell
11 me that there was really a difference
12 between silver and gold.

13 Over time I developed severe
14 headaches and allergies to all kinds of
15 foods and medicines and got sick with
16 every viral infection that went around.
17 It took weeks to recover from infections
18 that should have passed in days. The
19 allergies got worse over time,
20 progressing to fragrances, including
21 cleaning chemicals and perfumes, making
22 it impossible for me to work in a normal
23 business setting. I spent all I had
24 trying all kinds of therapies, none of
25 which helped and many of which made me

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2 sicker due to my allergies and weakening
3 immunity.

4 One day I met a realtor and
5 explained the type of fragrance-free
6 housing I needed, and she asked me if I
7 had mercury poisoning, as she had
8 suffered with this same syndrome. She
9 said it was often caused by silver
10 fillings, which are really 50 percent
11 mercury.

12 Mercury, I said? No way.

13 She referred me to a medical
14 doctor who had suffered the same illness,
15 who helped her to recover. I went to see
16 this doctor. The first thing he said
17 was, Open your mouth. Did you know that
18 you have a mouth of full of mercury?

19 I was horrified, really
20 horrified.

21 He took a careful history,
22 which made it very clear that all of my
23 problems started when those very fillings
24 were placed.

25 After removing my fillings last

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2 year, six weeks later I began to tolerate
3 more vitamins and supplements, things I
4 had not been able to take for years. By
5 being able to take these supportive
6 therapies, my system slowly got stronger,
7 and over the next few months, I was able
8 to tolerate almost any vitamin or
9 supplement I took, and many of my food
10 allergies went away.

11 This was my first amalgam-free
12 winter in many years, and, finally, I was
13 not sick with every bug that came along.
14 I think this might address the question
15 of whether or not there is mercury coming
16 from these fillings once they're placed.
17 It's not just when it goes in and when it
18 comes out, which is clearly when the
19 biggest dangers are, but when you heat
20 them up, as the dental assistants pointed
21 out, when they clean your teeth, when
22 they drill on them one way or the other,
23 when you chew, when you drink coffee. I
24 was having the biggest problem sort of
25 late morning at work after I'd have a cup

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2 of coffee, right after lunch after I had
3 my next cup of coffee, and that's when my
4 head would go weird, probably because the
5 amalgams were being heated up.

6 So now I am 48 years old. When
7 I was 31, had the dentist told me the
8 truth about the difference between silver
9 and gold fillings was that silver
10 contained 50 percent mercury, not an
11 amalgam of a little bit of this and a
12 little bit of that. There's a little bit
13 of this and that of everything but the
14 mercury, which is 50 percent. Had I been
15 told that there was 50 percent mercury in
16 the filling that he would place, I never
17 would have opted for silver and would not
18 have had my life become one of endless
19 sickness and struggle.

20 It is the right of every
21 American to know what is being placed in
22 his or her body and to make the choice of
23 what he or she wants. It is really
24 unclear just who we are protecting by not
25 disclosing this critical life-altering

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2 information. I do not understand the
3 agenda. I do not understand who is being
4 protected by not fully disclosing the
5 actual science around this material.

6 Thank you very much for
7 providing a disclosure flyer for dental
8 patients regarding the mercury content of
9 amalgams so others will have the chance
10 to make the informed decision that I did
11 not have. It is critical to get this
12 brochure approved and distributed without
13 delay, I do agree. However, having
14 reviewed the brochure as it currently
15 stands, I believe it leaves too many
16 ambiguous portions that would enable a
17 trusting patient to turn to the very
18 dentist who placed all the amalgams in
19 his or her mouth and ask, What do you
20 think?

21 There can be no room for doubt
22 in this disclosure flyer, as the
23 well-intentioned dentist -- and they
24 really are well-intentioned. They really
25 truly are not trying to hurt anybody.

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2 They don't know that they are, and to
3 actually realize as Karen did, that
4 they're placing this poisonous substance
5 into children and adults all over the
6 practice, would be a horrifying thing to
7 realize. Nobody is trying to kill people
8 here. However, the reality is still the
9 reality of what this stuff is.

10 So there can be no room for
11 doubt in this disclosure flyer, as the
12 well-intentioned dentists, many of whom
13 are unknowingly mercury poisoned
14 themselves, truly believe there is
15 nothing wrong with these fillings based
16 on years of trusting the American Dental
17 Association, the same way that I trusted
18 my dentist. For a dentist placing
19 amalgams all these years, it is
20 understandable that this type of
21 information threatens the very core of
22 his or her belief system, implying that
23 he or she may have already poisoned the
24 very patient asking the question about
25 the next fillings he will place.

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2 There is no room for ambiguity
3 in this disclosure or we risk it will not
4 accomplish its important task. Again,
5 please make whatever changes are being
6 proposed to remove the ambiguity while
7 getting it published without delay.

8 Thank you.

9 COUNCILWOMAN BROWN: Thank you
10 very much.

11 Any questions from members of
12 the Committee?

13 (No response.)

14 COUNCILWOMAN BROWN: We wish to
15 thank all of you for your very compelling
16 testimony. Thank you very much.

17 Anyone else to testify on Bill
18 No. 090124?

19 Please, sir, you're welcome to
20 come forward. Are you Mr. Paul Gilbert?

21 DR. GILBERT: Yes.

22 (Witness approached witness
23 table.)

24 COUNCILWOMAN BROWN: Good
25 afternoon, sir.

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2 DR. GILBERT: Thank you.

3 COUNCILWOMAN BROWN: State your
4 name for the record and proceed with your
5 testimony.

6 DR. GILBERT: My name is
7 Dr. Paul Gilbert and I have a license to
8 practice dentistry in New Jersey,
9 Pennsylvania and New York state. I'm
10 actually retired now, but I did have a
11 license -- or I do have licenses in those
12 states. I graduated in 1962 from the
13 University of Pennsylvania right here in
14 Philadelphia. I practiced about 44 years
15 before I retired in 2006. I used mercury
16 fillings for 11 of those years only, and
17 the remaining years I practiced without
18 it. So I've seen a lot of change occur
19 in dentistry.

20 So you'll understand where I'm
21 coming from, I am a lifetime member of
22 the American Dental Association. I
23 joined it in 1962 when I graduated, and I
24 joined because it represented dentistry
25 and because pretty much everyone just

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2 simply joined. It was just the thing to
3 do at that time.

4 I followed the American Dental
5 Association's position on amalgam and
6 other things that they tend to emphasize,
7 like fluoride, for years by reading
8 virtually every American Dental
9 Association newsletter that's come out,
10 particularly in the last 15 or 20 years,
11 and reading through all of the journals
12 that they have. They come out with a
13 monthly Journal of the American Dental
14 Association. And from the newsletter
15 particularly, it became evidently clear
16 to me that the American Dental
17 Association is a trade organization, with
18 the sole purpose of supporting the
19 financial well-being of itself and of
20 dentists. I mean, this is what it should
21 be, but the American Dental
22 Association -- and remember, I'm a
23 member -- also supports -- they say they
24 support the health of the public, and
25 this is true only if a particular issue

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2 makes dentists and the dental profession
3 look good, hence the American Dental
4 Association's relentless support of
5 amalgam and its equally relentless
6 attacks on tobacco, lead and sugar.

7 I'm also a Master of the
8 Academy of General Dentistry. That's an
9 organization that supports general
10 dentistry and fosters continuing
11 education. So I'm well educated. In
12 1985, I joined the International Academy
13 of Oral Medicine and Toxicology, and I
14 understand that I'm representing them.
15 The International Academy of Oral
16 Medicine and Toxicology -- and I'm a
17 Board member now -- is a network -- and
18 this is on their website -- of medical
19 and research professionals who seek to
20 raise the standards of scientific
21 biocompatibility in dental practice with
22 information from the latest
23 interdisciplinary research. That means
24 that what they teach us comes from
25 scientific research from all over the

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2 world and from not necessarily just
3 dental professionals. It's also
4 peer-reviewed research. It's only
5 peer-reviewed research that they will
6 present at meetings. And I say this in
7 spite of a derogatory and contradictory
8 statement by Dr. Gamba in a letter that
9 he wrote to the Board of Health.

10 So I want you to understand
11 that I am quite familiar, by having read
12 articles -- or I should add that the
13 International Academy of Oral Medicine
14 and Toxicology, the IAOMT, also has a
15 newsletter, and in that newsletter, every
16 single issue -- they print abstracts of
17 scientific research, international
18 research, almost always on mercury.
19 They're usually abstracts, because the
20 articles are too long to present in a
21 small newsletter. So I have read
22 countless pieces of research that all
23 come to the conclusion that amalgam is
24 toxic or at least because the mercury
25 that's in it. I have never seen a piece

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2 of research that ever came to a
3 conclusion that it was safe, unless the
4 research came from the American Dental
5 Association. Otherwise, always toxic.

6 Councilman James, you had a
7 question about amalgam, about whether it
8 emits mercury or not, and I wanted to
9 perhaps clarify it even a little further
10 from what you've already heard. If you
11 look in the dictionary -- and I did. I
12 just took my Webster's College
13 Dictionary, not a very sophisticated one,
14 down from the shelf. If you read the
15 word "amalgam," you will see that amalgam
16 is technically a mixture of any metal
17 with mercury. Now, the word "amalgam" is
18 used for other reasons as well, but
19 that's its technical meaning. It has to
20 be something mixed with mercury. It
21 could be gold, it could be silver, it
22 could be tin, it could be any one of the
23 components that are in dental amalgam.
24 But it's a mixture. And if you read
25 about the definition of the word

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2 "mixture," you will see it says that a
3 mixture is any substance or several
4 things that are combined, but the key
5 thing is that they always retain their
6 individual properties. So if you had to
7 take salt and you would take sugar and
8 mix them together, you might not be able
9 to tell which is the salt and which are
10 the sugar grains, but nevertheless, each
11 one of those grains is either salt or
12 sugar, whether you put them in water or
13 not, whether you evaporate it and dry
14 them out. It's still always sugar and
15 water, and that's true with amalgam. It
16 is always made up of the metals that
17 combined it.

18 Now, it's a unique mixture
19 because there is some interaction between
20 the components, but the fact is that the
21 silver will -- you can still identify the
22 silver that's in it, the tin that's in
23 it, the zinc that's in it, and you can
24 certainly identify the mercury that's in
25 it. If you shine a mercury vapor lamp on

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2 it, you can demonstrate the vapor coming
3 off the filling without any -- without
4 doing anything to the filling. You can
5 just hold the tooth with the filling in
6 your hand and you'll see it.

7 If you take a drum analyzer,
8 which is a scientific device intended to
9 measure mercury vapor in the air -- it
10 was intended originally to be used in a
11 factory, but it simply measures mercury
12 in the air. Whether you stick the nozzle
13 of the machine in the air in a factory or
14 you put it in someone's mouth, you can
15 always measure mercury vapor coming off.
16 The point is that these fillings emit
17 mercury vapor all the time.

18 Now, my dental colleagues there
19 tell you that the amount coming off is
20 very small. They like to use the word
21 "minuscule" and they like to use the word
22 "very small." In science when you talk
23 about toxins, you must talk about
24 specific amounts, because "very small"
25 and "minuscule" don't really mean

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2 anything. If I told you that there's a
3 small amount or a minuscule amount of
4 dioxin in the food you're eating, I think
5 you would understand that's still of
6 concern. Or lead, if you -- well, let me
7 give you a good example, an analogy that
8 makes it easier even to understand. If
9 you were stopped by a policeman for
10 speeding and you asked, How fast was I
11 going, and he said, Well, you were going
12 a little over the speed limit.

13 But how fast was I going?

14 You were going a little over
15 the speed limit.

16 You see, unless you have a
17 measurable amount, you can't know how
18 much you were speeding. So the same
19 thing is true with mercury coming off
20 fillings. A scientific organization --
21 or at least they say they're a scientific
22 organization -- like the dental
23 profession that never tells you the
24 specific amounts, but always puts it in
25 terms that make it sound as though it

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2 doesn't mean anything, it's
3 insignificant, to me is unprofessional
4 and doesn't tell you the actual truth
5 about the matter.

6 Part of my testimony was to
7 read through part of a letter that I
8 received from James Love. You have a
9 copy of it. He is associated with the
10 International Academy of Oral Medicine
11 and Toxicology, and there's a particular
12 issue that he talks about that I think
13 would be helpful that you understand.
14 His letter is rather long, so I only
15 highlighted significant areas, and I'll
16 reduce it to about a third of its length.

17 First of all, he says, "Thank
18 you for considering my testimony, which I
19 offer in this statement." He says, "I am
20 an attorney licensed to practice in
21 Oklahoma and California." He said,
22 "Several years ago, I agreed to serve as
23 lead counsel for David Barnes, a dentist
24 who was profoundly injured by his
25 occupational exposure to mercury

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2 fillings. A lawsuit was filed against

3 Kerr Corporation, America's largest

4 manufacturer of dental fillings,"

5 including amalgam, of course.

6 "Dr. Barnes used Kerr's mercury filling

7 products in his practice," and he

8 demonstrated that he was exposed to it in

9 several ways to the Court.

10 "Kerr took the position that

11 Barnes had been adequately warned of

12 mercury's dangers through its material

13 safety data sheets that are distributed

14 with the products. Barnes argued that

15 the warnings were not adequate because

16 they addressed only the dangers of

17 mercury, but made no reference to the

18 mixed filling material."

19 COUNCILWOMAN BROWN:

20 Mr. Gilbert, forgive me for intruding on

21 your testimony. We do have another

22 hearing. So I need you to help us honor

23 this clock and move to the back end, last

24 paragraph of your testimony, because we

25 are now under the gun of the clock.

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2 DR. GILBERT: Okay.

3 Essentially what came out of this court
4 issue is that the warnings that are
5 supplied with amalgam -- and Freya Koss
6 read you them -- apply to the mixed
7 amalgam as well as the mercury, and in
8 the State of Pennsylvania, as well as
9 many other states, there is a law that
10 says -- it's the law of what's called the
11 Learned Intermediary -- that a
12 manufacturer no longer is responsible for
13 passing the warnings on to patients.
14 This has to do with dentists in the
15 healthcare --

16 COUNCILWOMAN BROWN: Let me ask
17 you this question, because our last
18 hearing that we had a year ago dealt with
19 all the issues around research and the
20 like. What I need to know today is this:
21 Do you approve or disapprove of the
22 brochure that has come before this
23 Committee? That's what we need to know.

24 DR. GILBERT: I approve of the
25 brochure, but I think -- not I think. I

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2 am convinced that the information that's
3 in an MSDS about amalgam needs to be
4 incorporated into the brochure, and
5 without that information, the patient is
6 not getting enough information to make a
7 truly informed decision.

8 Thank you.

9 COUNCILWOMAN BROWN: Okay,
10 then. We thank you very, very much for
11 your testimony.

12 Anyone else to testify
13 specifically on your view with regards to
14 the brochure that is before this body
15 this afternoon?

16 (No response.)

17 COUNCILWOMAN BROWN: Madam
18 Chair Lady?

19 COUNCILWOMAN TASC0: Oh, yes.

20 COUNCILWOMAN BROWN: Madam
21 Chair, I offer up one amendment to this
22 bill.

23 COUNCILWOMAN TASC0: Sure.

24 COUNCILWOMAN BROWN: And the
25 amendment has been circulated.

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2 COUNCILWOMAN TASC0: I have to
3 close the hearing.

4 We'll now close the hearing and
5 go into the public meeting.

6 The Chair recognizes
7 Councilwoman Brown for amendment to Bill
8 090124.

9 COUNCILWOMAN BROWN: Yes, Madam
10 Chair.

11 COUNCILWOMAN TASC0: Can you
12 explain it, please?

13 COUNCILWOMAN BROWN: Yes. I do
14 offer an amendment to Bill No. 090124,
15 and essentially it says that once we act
16 on this measure today, that the brochure
17 will indeed be approved and not require
18 the brochure to circle back to this
19 Committee.

20 COUNCILWOMAN TASC0: All in
21 favor of the amendment?

22 (Aye.)

23 COUNCILWOMAN TASC0: Any
24 opposition?

25 (No response.)

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2 COUNCILWOMAN TASC0: There
3 being none, the amendment is approved.

4 The Chair recognizes
5 Councilwoman Brown for a motion to move
6 Bill 090124 out of Committee.

7 COUNCILWOMAN BROWN: Thank you,
8 Madam Chair. I do move that Bill No.
9 090124 be moved out of Committee, as
10 amended, with a favorable recommendation
11 and further move that the rules of
12 Council be suspended so as to permit
13 first reading at our next scheduled
14 session of City Council.

15 (Duly seconded.)

16 COUNCILWOMAN TASC0: It has
17 been moved and seconded that Bill 090124
18 be reported out of Committee with a
19 favorable recommendation and a
20 recommendation that the rules of Council
21 be suspended so as to have its first
22 reading at Council's next session.

23 All in favor will say aye.

24 (Aye.)

25 COUNCILWOMAN TASC0: Is there

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2 any opposition?

3 (No response.)

4 COUNCILWOMAN TASC0: There

5 being none, the motion is carried. The

6 bill is reported out of Committee. And

7 unless there's any other business, this

8 Committee is called to adjourn.

9 Thank you.

10 (Committee on Public Health and

11 Human Services concluded at 2:30 p.m.)

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CERTIFICATE

I HEREBY CERTIFY that the
proceedings, evidence and objections are
contained fully and accurately in the
stenographic notes taken by me upon the
foregoing matter on April 16, 2009, and that
this is a true and correct transcript of same.

MICHELE L. MURPHY
RPR-Notary Public

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