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The Alarming Local Anesthetics

by Raymond Francis

Here's a wakeup call for all Americans—local anesthetics are one of our major cancer risks! Local anesthetics are among the tens of thousands of man-made chemicals we have introduced into our environment. Many of these are known to be toxic and even carcinogenic.

Unfortunately, we know little about what each of these chemicals do in our bodies and have almost no understanding of how they all interact. Tragically our medical professionals, who are supposed to know better, are responsible for putting some of these chemicals, including local anesthetics, directly into our bodies. What we do know is cancer has become the leading cause of death for Americans ages 35 to 53, and in just a few years, according to the American Hospital Association, will become the leading cause of death for all Americans. We need to ask why this is happening.

New information on how local anesthetics metabolize in our bodies is genuinely alarming. This should be on the front page of every newspaper, but only handfuls of people are aware of it. Four years ago it was demonstrated that all the local anesthetics currently used in the U.S., including the most common one lidocaine, metabolize by breaking down into compounds called anilines.

Here's the problem. We have known for over a hundred years that aniline compounds cause cancer. Local anesthetics have always been thought to be safe because it was assumed that their molecules were excreted from the body unchanged. A study done 20 years ago recovered 10% of injected lidocaine completely unchanged in the urine. The molecules were coming out the same way they went in. This was seen as proof of safety. Unfortunately, no one bothered to ask where the other 90% was. Now we know!

In 1993, the FDA found that lidocaine breaks down into 2, 6-dimethylaniline when exposed to human tissue. This aniline compound is known to cause virtually every kind of cancer in animals and it does it more than 99% of the time. This is one powerful carcinogen! An analysis of World Health Organization data showed a correlation between human cancer and use of local anesthetics, most especially for breast cancer. In addition 2, 6-dimethylaniline is known to be toxic to both the heart and the brain.

Breast cancer is known to occur more often in women of higher socioeconomic status. People in the higher status get better medical and dental care and are more likely to experience greater exposure to local anesthetics. One study of cancer patients found that they all had undergone between 12 and 28 dental procedures that necessitated extensive exposure to local anesthetics. As a result of these new findings, the FDA now requires that all new pharmaceuticals containing local anesthetics must contain a cancer warning on the package insert. Unfortunately, existing products were not required to carry the warning. This is why most health professionals are still unaware of the dangers of these chemicals.

What to do? Work with your dentist and your doctor to minimize your exposure. Local anesthetics are often given just for convenience. Use these products only when absolutely necessary for major dental work, rather than for routine fillings. Use only the minimum dose necessary. A little pain in the dentist's chair is preferable to getting cancer. Some dentists now offer acupuncture as an alternative to local anesthetics. Other alternatives include electrical acupuncture and hypnosis. Many dentists are now using Demerol, a narcotic, which is injected directly into the gum in lieu of lidocaine or other aniline-based anesthetics. Demerol in a dose of 5 to 15 mg per site is usually sufficient for most procedures. Besides not being carcinogenic, it has the additional benefit of not causing numb lips.

There is an alternative system that has been in use for fifty years in Southern California. It's called the Hubbell technique. About two thirds of the oral surgeons in Southern California use this technique which incorporates oxygen, Demerol, and barbiturates like Brevital and Pentothal. None of these produce any carcinogenic anilines.

If local anesthetics cause cancer and if people in Southern California have been exposed to less of them than people in Northern California, do the people in Southern California have less cancer? The answer is yes. The people in Southern California have less of all kinds of cancer. Dr. Alfred Nickel, an oral surgeon, who initiated and leads the campaign to have these dangerous chemicals removed from the market told me in an interview that, "This may be the most significant factor in U.S. cancer mortality since 1930."

In conclusion, local anesthetics appear to be serious contributors to our out-of-control cancer epidemic. Avoid them as much as possible. And remember—you read it first in *Beyond Health News*.

Raymond Francis is an M.I.T.-trained scientist, a registered nutrition consultant, author of Never Be Sick Again and Never Be Fat Again, host of the Beyond Health Show, Chairman of the The Project to End Disease and an internationally recognized leader in the field of optimal health maintenance.

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