



EUROHEALTH[®]
Guiding You to Good Health



NoPlaque™ - For Total Oral Hygiene™

Fact Sheet for Health Professionals (rev. 2016-11-10)

COMPOSITION	Active Ingredients: Protein- and Mucopolysaccharide isolates of marine origin complemented with Vitamin C, Silica (Equisetum Arvense L.), Grape seed extract, Vitamin E, Vitamins B1, B2, B6, B12, Folic Acid and Niacin, Coenzyme Q10, Beta-Carotene, Vitamin A, Selenium, Calcium, Zink, Vitamin H, Vitamin D3.
INDICATIONS	For preventing and removing plaque/calculus, promoting less tooth decay (cavities/caries) and promoting good breath.
DOSAGE FORM	400mg tablets
TOXICITY	In recommended dosages none of the components in NoPlaque™ have shown any toxicity. All components have been used historically for treatment of various medical conditions. Most have a Monogram and/or a Drug Master File number.
SIDE EFFECTS	In recommended dosages NO negative side effects have been reported. Allergic people should verify that they are not allergic to any of the listed components. NoPlaque™ contains components from natural products only. They are all individually tested since years and have been used for other medical purposes for long, treating many different afflictions. It is the combination effects of the ingredients in NoPlaque™ that is unique – by combining the various components in appropriate ratios one has arrived at products with strong synergistic effects – within them and between them. There is NO contraindication using NoPlaque™ and there are NO negative side-effects whatsoever. NoPlaque™ can - and should - be used together with any and all other natural products, prescription drugs, foodstuffs or in combination with any traditional treatment of Periodontitis.
SUGGESTED USAGE	For two months take two (2) tablets in the morning and two (2) tablets at bedtime with some water. For the next one (1) or two (2) months, depending on the severity of remaining plaque build-up, take one (1) tablet in the morning and one (1) tablet at bedtime. Repeat procedure twice a year, or more often if necessary (smokers, tea, coffee and red wine drinkers, etc.).
AVAILABILITY	120 tablets to a package (in tamper-proof blisters, 30 tabs/blister)
MODE OF ACTION	Components change the biochemical conditions for plaque/calculus formation and dissolution. It is believed that the ingredients also affect the “Biofilms” in a positive way, making it difficult for the plaque to adhere to the tooth surface and other surfaces in the oral cavity, as well as possibly in other parts of the body where plaque build-up is detrimental (e.g. in the arteries, etc. See below).
RESEARCH REPORTS	Research has shown that plaque must be controlled in order to combat gum disease and periodontal disease. Furthermore, by reducing plaque, dental decay can be kept to a minimum . Couple a lifetime of good plaque control and total oral hygiene and dental decay becomes almost nonexistent. Reduced plaque also has very pronounced positive effect on plaque build-up in the arteries , with beneficial consequences on cardiovascular disease and heart attacks as well as on diseases states and health status in general. Total Oral Hygiene means good Total Health! (See below)

STAGE 1: WHAT IS PLAQUE?

Plaque is a clear, sticky film, an invisible layer of microorganisms growing in colonies, which adheres to the surfaces of teeth, gum tissues, dental restorations, and even the tongue – and then further “into” the body: the arteries, the heart, etc.. It is so adherent, that it can not be washed or rinsed off, but must be mechanically removed.



Plaque contains a variety of bacteria, some also producing strong acids, that can cause dental decay (cavities/caries) by dissolving the minerals that make up the tooth enamel (tiny holes appear that get bigger and bigger until there is a cavity), contribute to calculus (tartar) formation, and initiate the **inflammatory response** associated with periodontal disease, some producing dangerous and poisonous toxins.

There are different stages of plaque formation: The first stage is the **Pellicle Formation**, subdivided in turn into four stages:

1. The surfaces are bathed with salivary fluids
2. Salivary Glycoproteins (positively and negatively charged) adsorb to the surfaces.
3. This probably occurs due to ionic interaction.
4. The Glycoproteins lose their solubility
5. The Glycoproteins become altered by the action of the bacterial enzymes

The next stage is the **Bacterial Colonization**. At this stage the bacteria borne in the saliva are brought in contact with the organic dental pellicle, either physically or more often through some type of chemically complicated interaction. Protein molecules on the bacterial cell surfaces recognize and link to the pellicle glycoproteins – and plaque is formed!

The Final stage is the **Maturation of Plaque**. As plaque matures it increases in mass and thickness. Its microbiological composition also changes. Mature plaque is potentially more pathogenic.

WHAT IS THE CHEMICAL COMPOSITION OF PLAQUE?

Plaque is composed of glycoproteins from the saliva, various bacteria and bacterial metabolism products and minerals and their ions.

PLAQUE FORMS QUICKLY

Plaque forms again soon after it is removed and effective plaque control will keep it to a minimum. It takes approx. 21 days for plaque to completely mature. That's why you are encouraged to brush your teeth and rinse your mouth 4-5 times a day, plus daily flossing, to prevent plaque from maturing into calculus/tartar.

IN REGARDS TO PLAQUE NO ONE IS CREATED EQUAL – NOT EVEN THE SAME MOUTH!

The rate plaque forms and what it's made of, varies from individual to individual. **In fact, it varies in different parts of the same mouth.** Studies have shown that plaque affects each of us differently – some are more susceptible to the bacterial components in the plaque than others. That explains why individuals have different healing responses to periodontal treatment.

WHAT'S THE FIRST SIGN OF A PLAQUE ATTACK?

A frequent warning sign is when the edge of the gums next to the teeth, become reddened and inflamed, and bleed when touched. This early stage is known as **Gingivitis** and takes three weeks to form when all oral hygiene measures are suspended. Gingivitis is a **reversible condition**. With diligent flossing and tooth brushing, Gingivitis usually disappears. Left untreated, it can progress into **periodontal disease**. Periodontal disease is defined as the formation of pockets (loss of gum attachment to the teeth) and the loss of bone that supports the teeth. Periodontal disease is a **chronic disease** that can result in tooth loss. In fact, **periodontal disease is the main reason adults have teeth removed, as well as many other serious disease like heart attacks, Cancer and many other (inflammatory) diseases!**



STAGE 2: WHAT IS CALCULUS/TARTAR?

In some individuals, calculus forms in spite of the best oral hygiene. So what is it? Calculus is a hardened substance that comes from a combination of **minerals in the saliva** and from the **dead plaque bacterial cells – it is mineralized plaque**. Together, they precipitate a crusty deposit that, once mineralized, can grow quickly. When looked at under a microscope, calculus has all the resemblances of a coral reef, and a similar number of hiding places for bacteria to hide. Left on the teeth long enough, calculus begins to irritate the gum. The gums can swell, become ulcerated and bleed, and eventually get progressively worse, forming pockets.

There are two types of calculus! **Supragingival** calculus is the hard deposit **on top of the teeth**, the kind we can see and feel. The minerals come from the saliva, and it is usually whitish in color. **Subgingival** calculus forms **below the gums**. The minerals come from sulcular fluids and it is usually black in color. It is just as hard and adherent, however, it is of a greater concern, because it forms **within the pockets**. This allows the bacteria to congregate in greater numbers undetected. It is necessary to also remove the subgingival plaque, because it causes even more periodontal tissue breakdown than the supragingival plaque.

Some people never form calculus while others form it in varying amounts and at varying speeds. Some individuals notice it days after a professional dental cleaning, while others hardly form any even months later. The rate of calculus formation **is not** an indicator of the amount and severity of periodontal disease, nor does it indicate that an individual will ever get it.

HOW FREQUENTLY SHOULD PLAQUE AND CALCULUS BE REMOVED?

Periodic removal of plaque and calculus is the best way to control periodontal disease. At these times, the dentist/hygienist can examine the periodontal tissues to determine if new pockets have formed, or previously diagnosed pockets have gotten worse. The frequencies of these periodontal examinations are best determined by the dental professional treating you. However, these days you do not have to expose yourself to the barbaric methods of cleaning your teeth from plaque/calculus/tartar used for hundreds of years – “hammer and chisel” – normally referred to as “scaling”. This process is hard, painful – and expensive and is seldom covered by insurances, private or in socialized medicine systems. It involves a lot of force, surgical instruments and often local anesthesia. A visit to the dentist's office is a must, as well as time off from work and traveling. **A lot of worrying before and a lot of pain after come with the territory!**

If established, that you have a plaque/calculus/tartar problem, all you have to do is to take “a small little pill”! (See “**WHAT IS NoPlaque™?**” below.) **Bad oral hygiene**, causing any stage of gum/periodontal disease, also generally **causes bad breath** during all the stages, in fact **bad breath can be the first sign of poor dental status**. The bacteria in plaque produce large amounts of odorous sulfur compounds. Bad breath can additionally be caused by smoking and food/diet habits as well as by medical conditions and treatment.

STAGE 3: GINGIVITIS/GUM DISEASE

It is estimated that almost half of the adult population in the Western World exhibit some form of gingival bleeding. **If left untreated Gingivitis can lead to periodontal disease**, affecting the teeth, the tissue and the bone structures. The plaque has developed into calculus/tartar and is now affecting the gums they become inflamed. The gums redden, swell and bleed easily. There is usually no or little discomfort. **The most common cause of Gingivitis is inadequate oral hygiene. Gingivitis is reversible with good total oral hygiene complemented with professional treatment.**



STAGE 4: PERIODONTITIS/PERIODONTAL DISEASE

Untreated Gingivitis can advance to Periodontitis. Now the problems move “beneath the surface”! Toxins produced by the bacteria, irritate the gum, and stimulate a chronic inflammatory response, and finally the tissue and bone structures supporting the teeth break down and are destroyed. **Gums separate from the teeth, forming pockets, which become infected.** The deterioration progresses and finally large portions of the gum are lost, as well as the bone structure and the teeth fall out or have to be removed.

CONSEQUENCES OF TOOTH-LOSS

To lose ones teeth has severe negative consequences on medical, physiological and psychological conditions. The jaw - and the whole head - is constructed to have a set of functioning teeth. When they fall out, the whole basic construction “collapses”. To keep ones own teeth is one of the most preventative positive and pronounced Anti-Aging “remedies” one can possibly find. Additionally we smile at the World with our teeth and they are **the first step in keeping the body healthy.** If you cannot chew your food properly your **digestion is severely impaired, with deficiencies as a result, and less fuel for our bodies.** If you cannot chew your food properly you tend to eat soft foods, not providing you with necessary nutrition, with different disease states as a result – including heart disease and diabetes.

PERIODONTITIS AND HEART DISEASE

Research has shown that the infection and inflammation caused by **Periodontitis increase the risk of coronary heart disease. Periodontitis is a significant predictor of cardiovascular disease.** German researchers have reported that dental infections and other chronic respiratory infections such as bronchitis more than double the risk of Cerebral Vascular Accident (stroke) and atherosclerosis. **The incident rate was 250% higher in people with poor dental health** (e.g. decay, Gingivitis, Periodontitis and other infections in the mouth). Also people with periodontal disease transmit other disease, e.g. AIDS, easier, due to a direct or indirect “blood contact”. Please also see the segment **Total Oral Hygiene™** at the end of this Fact Sheet for additional diseases, possibly caused by Periodontal disease.

“AN OUNCE OF PREVENTION IS WORTH A POUND OF CURE” – IN CASE OF PERIODONTAL DISEASE AND ITS SEVERE MEDICAL CONSEQUENCES – A TON OF CURE!

Everyone agrees, both in regards to dental and medical health, that **prevention is the best, safest, cheapest and least painful alternative.** However, even with the best prevention, eventually a cure may be necessary after a disease state has developed. And dental disease of any type is as unavoidable as medical disease. Some diseases are more “self-inflicted” than others, e.g. to a large extent dental disease, Cancer (smoking, diet, lifestyle) and other acquired diseases, while others are more epidemic in their nature and more difficult to prevent. If the ultimate end-point dentistry-wise is losing you teeth, even filling a hole (cavity/caries), scaling off plaque and calculus is preventative in their nature, as many other dental procedures. However, even prevention can be of different “natures” – effective and ineffective, harsh or gentle, safe or dangerous and so on. The way dentistry and total oral hygiene will be looked upon as a link to general medical health status will change drastically in the future, as well as the ways to look at its prevention and cure. With the arrival of **NoPlaque™** the **revolution has already started!**

WHAT IS NoPlaque™?

Until very recently few people even in their wildest dreams would think that the regular tablet taken systemically, could be a solution to the problem. The components are designed to positively change the biochemical conditions, so that the biofilms change in their composition, not allowing plaque to form and build up. From experience gained developing products for improving and strengthening (the structure of) the skin, strengthening teeth, scavenging heavy metals/mercury in the blood, making hair less “sticking/clinging, joints less sore repairing the cartilage, **one noticed improved oral conditions, less plaque/calculus build-up, and finally a gradual dissolution of already existing deposits!**

This research work has been ongoing since the late 1980's and **NoPlaque™** sees daylight well over a decade later-why?! Well, this is development of new types of raw-materials, formulations and dietary supplements/natural medicines at its best-and very typical: a lot of work is necessary, and it DOES take time, and especially as in this case the - and very unexpectedly so – effects on plaque were not the ones being studied or looked for! They actually started emerging, as people more and more and consistently frequently and voluntarily, reported their own positive findings on plaque/calculus prevention and dissolution!



Considering, to a large extent, the unsuccessful efforts made in the past to solve the problems with plaque and calculus formation as well as with gum/periodontal disease (Periodontitis) and to find simple, safe and effective treatments, it may be difficult to accept that natural substances could have a pronounced effect on these dental problems. **Recent research has proven that a number of substances from plants and animals of marine and of botanical origin have effect on both plaque and calculus formation as well as possibly indirectly on the most common dental issue, caries (see information on NoPlaque™). Furthermore it has been proven that a host of no less than 15 plants have a pronounced effect on Periodontitis, and to a certain extent even on herpes.**

DOES NoPlaque™ REALLY WORK?

Although the results from major long term, double blind, crossover clinical studies are not available as of yet, it has already been shown that **NoPlaque™** has a pronounced positive effect on most people with plaque/calculus build-up. In conducted pilot studies the results have been spectacularly positive, proven by consumers' appreciation! As indicated, some people do everything right and still end up with problems of whatever sort it may be, but it is estimated that 90-95% of people taking **NoPlaque™** will experience anything from a positive effect to a complete success removing their plaque – and keeping it a way long term! This should be compared to a frequent 33% level of efficacy, arrived at in clinical studies on many pharmaceuticals/drugs – and they still have been allowed to be registered as prescription drugs, also considering, typically, all their negative side effects!

WHAT CAN YOU DO TO IMPROVE YOUR TOTAL ORAL HYGIENE?

Of course “preventative” oral hygiene is the best way to avoid future deterioration: eat the right types of food, avoid coffee, tea and other staining substances, smoking, sugary foods etc. But even having poor food, drink and lifestyle habits, one can **compensate this with Good Total Oral Hygiene:**

- Rinse your mouth with water VERY often (at least after every intake of any sweet drink or sugary foodstuff)
- Brush your mouth 3-5 times a day, at least after every meal
- Floss morning and night / Scrape your tongue daily
- Drink a lot of water / Chew Sugarless Gum
- Use a Saliva Stimulant (**Salix®**) if your are low on producing your own saliva
- Use an effective and safe Natural Remedy to dissolve existing plaque/calculus and to prevent new plaque/calculus to form (**NoPlaque™**)
- Use an effective, safe and Natural treatment for removing heavy metals (e.g. mercury from amalgam) from the blod, working as an Immune Defense Enhancer (**Alkyrol®**) and preferably have your amalgam fillings replaced with less toxic filling material!
- Have regular in-home check ups of teeth and gums
- Be aware of Warning signs (bad taste or breath, red, swollen, tender or bleeding gums, loose, sensitive teeth, pains, pus , plaque/calculus)
- Have regular check-ups

STORAGE Store at or below 20° C in sealed containers in a dry place.

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Total Oral Hygiene™

An All-Natural Professional Strength Program for Improved Total Health

"A person with a healthy mouth will live ten years longer." (Mayo brothers, 1910)

Periodontal Disease invariably leads to impaired general (systemic) health conditions and shortened lifespan.

Periodontal Disease - the most underestimated, underrated and overlooked cause of degenerative general health conditions.

Attitude from individuals as well as from professionals (Dentists AND Doctors) is at best blasé!

At worst, everyone tries to actively hide it! (Only veterinarians seem to be tuned in to the general/systemic health consequences of Periodontal Disease in animals!)

Periodontal Disease is silent, hidden – can't really be seen AND does NOT hurt – until it is all too late!

Periodontal Disease is NOT something separate from the body
it is a very, very integral part of the body and its total health systems.

Periodontal Disease is NO LONGER only bad breath, bleeding gums and tooth loss.

Periodontal Disease IS Infection/Inflammation - the more serious Periodontal Disease the more serious Infection/Inflammation!

Even moderate Periodontal Disease means teeth have infected and inflames tissue wrapped around them,

leaking 400 types of damaging (oral) microorganisms into the body.

One gram (1/28th of an ounce) of plaque contains trillions of dangerous/killing microorganisms.

Periodontal disease - who will take the responsibility to cure it - The Dentist or the Doctor? Or both?

Or maybe the main responsibility lies with - YOU! (YES, IT DOES!)

Periodontal Disease, poor Dental Conditions and a weak Immune System causes diseases like:

* Heart Attacks * Stroke * Thrombosis * Cardiovascular Disease incl. Arteriosclerosis * Rheumatic diseases incl. Arthritis

* Diabetes * Lung-disease * Several other Chronic Diseases, including diseases like Alzheimer's and Cancer.

In excess of 70% of the population over 30 years of age and 90% in the over-55 age group

(some experts claim as much as 90% of the total population!),

has some degree of Periodontal Disease - the disease sharply progressing with age!

(according to the US National Institute of Dental Research)

Periodontal Disease may have the best potential for cure through Prevention and good oral/dental hygiene and every-day procedures.

In case of Periodontal Disease an ounce of Prevention may not only be worth a pound of Cure, but a ton of Cure, considering its negative effects on total General/Systemic Health!

What are you waiting for?

Take charge of your future oral and general/systemic health yourself! Start healthy oral/dental every-day preventative and corrective procedures today! It is simple, cheap, and painless – and feels good.

Periodontal Disease produces substances, modified in the liver to C-Reactive Proteins (CRP), which cause clotting and may be as serious a threat to health and to an abrupt shortening of life span as high chole

