

Disorders of the Mouth

Gallstones in the liver and gallbladder can be held responsible for most diseases of the mouth. The stones interfere with the digestion and absorption of food, which in turn forces waste products meant for elimination to remain in the intestinal tract. Bacterial infection (*thrush*) and viral infection (*herpes*) in the mouth arise only when waste decomposes and becomes a source of toxicity in the body. The trapped toxins constantly irritate parts of the gastro-intestinal lining (which begins in the mouth and ends in the anus) until inflammation or ulceration occurs. The damaged cell tissue 'invites' more microbes to the scene of the injury to help clean up of cellular debris. This is a normal phenomenon seen everywhere in nature whenever there is something that needs to be decomposed.

Bacteria never attack, that is, infect something that is as clean, vital and healthy as a fruit hanging on a tree. Only when the fruit becomes overripe or falls to the ground do bacteria begin their clean-up job. The moment bacteria begin to decompose food or flesh, toxins are generated. These toxins can be recognized by their unpleasant odor and acidic nature. If they are generated in the body, it is only natural that symptoms of illness begin to show up.

Thrush indicates the presence of large quantities of bacteria that have spread throughout the gastro-intestinal tract, including the mouth area. It shows up in the mouth because the mucous lining there is no longer resistant enough to keep its cells in good physical shape. Since the main part of the immune system is located in the mucous lining of the gastro-intestinal tract, thrush indicates a major weakness in the body's general immunity to disease.

Herpes, which is considered a viral disease, is similar to thrush, with the exception that, instead of bacteria attacking the cell exterior, viral materials attack the cell interior or nucleus. In both cases, the attackers target only weak and unhealthy cells, those that are already damaged or dysfunctional. Added to this dilemma, gallstones harbor plenty of bacteria and viruses, which escape the liver via the secreted bile and infect those parts of the body that have the least resistance to them.

Gallstones can lead to other problems in the mouth. They inhibit proper bile secretion, which in turn reduces appetite and secretion of saliva from the salivary glands in the mouth. Saliva is required to cleanse the mouth and keep its tissues soft and pliable. If there is not enough saliva present, destructive bacteria begin to invade the mouth cavity. This can lead to tooth decay and other tooth-related problems. But, once again, bacteria do not cause tooth decay; germs are attracted only to those areas in the mouth that are undernourished and toxic already.

A bitter taste in the mouth is caused by bile that has regurgitated into the stomach and, from there, into the mouth. This condition occurs because of major intestinal congestion. Instead of properly moving downward, parts of the intestinal content are backed up and bring gas and other irritating substances into the upper regions of the gastro-intestinal tract. Bile in the mouth drastically alters the pH-value (acid-alkalinity balance) of saliva, which impairs its cleansing properties and makes the mouth susceptible to infection.

A mouth ulcer in the lower lip indicates a simultaneous inflammatory process in the large intestine. Repeated occurrence of ulcers in either one of the corners of the mouth points to the presence of duodenal ulcers (see section on Disorders of the Stomach). Tongue ulcers, depending on their location, indicate inflammatory processes in corresponding areas of the alimentary canal, such as the stomach, small intestine, appendix or large intestine.