



## Latent infections

**L**atent infections are infections that lie dormant, are difficult to observe directly or are present only as a potential. Conventional medicine has long maintained that there's no such thing, and refers to 'opportunistic infections' instead.

Yet, tuberculosis may be present for years and only become active when there is, say, poor nutrition or low immunity (*Nature*, 2000, 406: 735-8). There's also latent malaria and latent syphilis, where infection is present, but without symptoms. In latent tetany, symptoms are only elicited by specific stimuli. There are also some 20 million people in the industrialized nations who have latent infection with the herpes genitalis virus. Other infections—such as Creutzfeld-Jakob disease (CJD), cytomegalovirus (CMV), Epstein-Barr virus (EBV), hepatitis B, herpes simplex virus (HSV), varicella zoster virus (VZV) and adenovirus-36, to mention but a few—are able to remain asymptomatic in the body for a very long time.

But how can infections have no symptoms? Asked another way, how are some infectious agents able to elude the body's immune-response mechanisms? Some pathogens produce carrier cells that can sneak into the body unrecognized and, thus, are not destroyed by immune-system T cells, while others choose to infect cells in sites, such as the brain or nerves, from which the immune system is restricted.

### Your troublesome mouth

A favoured port of entry for these infectious agents is the mouth, through which a variety of bacteria, moulds and viruses find their way into the body. Indeed, the mouth remains, throughout life, the most vulnerable opening to adverse outside influences. And susceptibility to latent infections appears to be significantly increased if you have mercury (amalgam), tin, vanadium or nickel in your mouth, especially together with the presence of gold.

Latent infections also lie at the root of a number of serious chronic diseases that are dependent upon the immunological response, including progressive multifocal leucoencephalopathy, a rapidly progressing neuromuscular disease, and subacute sclerosing panencephalitis, a rare progressive brain disorder caused by an abnormal immune response to the measles virus. In fact, the latter is thought to be triggered, in some cases, by the MMR vaccine (*Latent Virus Infections*, online at: [http://virology-online.com/general/latent\\_virus\\_infections.htm%202007.08.30](http://virology-online.com/general/latent_virus_infections.htm%202007.08.30)>).

With bacteria and moulds, specific factors can promote latent infections and its subsequent, related diseases. Certain chemicals and heavy metals can pave the way for latent infections and their consequences; for example, *Chlamydomydia pneumoniae* can trigger arteriosclerosis after latent infection gets into endothelial cells (*N Engl J Med*, 1999; 340: 115-26; *Japn Med News*, 2005; 425: 25-32).

When moulds or bacteria invade cells such as

leucocytes, lymphocytes and macrophages, the immune response is decreased, which could then trigger an autoimmune disease (Kobayashi T. *New Era of Individual Cancer Prevention and Treatment*. Japan: Self-published, 2006: 170-1; *J Integrative Med*, 1998; 2: 4-5).

Periodontal (gum) disease has been associated with a fourfold increased risk of premature birth, a nearly threefold higher risk of low birth weight, and a fivefold increased risk of preterm low birth weight (*J Periodontol*, 2003, 74: 1764-70).

When aerobic (requiring oxygen to live) bacteria take up residence in the body as a latent infection, the mitochondria in the cells are affected, which can lead to hormonal imbalances and impair energy metabolism, as your cells 'breathe' through their mitochondria (*PLoS Med*, 2005; 2: e233).

Apart from latent infections, there may be other pathological burdens on the gums and mouth that can have asymptomatic, insidious effects on the whole organism:

- ◆ heavy-metal deposits in the teeth and at their roots
- ◆ decomposition of bone around transplants
- ◆ displaced teeth
- ◆ incomplete root-canal fillings
- ◆ cysts and root granulomas (chronic root inflammation)
- ◆ loosened maxillofacial bones associated with exposure to pesticides and related toxic substances
- ◆ foreign matter such as embedded pieces of metal, or remnants of roots left behind after extraction
- ◆ conditions of the maxillary sinuses and the temporomandibular joints.

So, when investigating 'silent' infections, it pays to start with the mouth.

The first step in such investigations is an evaluation by questionnaire and a panoramic dental x-ray (taken not more than three months ago) by a dental surgeon who is also a clinical ecologist. Each of these is then analyzed for individual risk factors and followed by a specific line of investigation using the most up-to-date diagnostic tools.

This often leads to success where all else has failed.

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## Mystery symptoms

The following difficult-to-diagnose symptoms may, in fact, indicate the presence of a latent infection:

- ◆ poor memory and concentration
- ◆ exhaustion, reduced efficiency, decreased vitality
- ◆ poor quality of sleep despite ongoing fatigue
- ◆ gastrointestinal problems
- ◆ palpitations or panic attacks
- ◆ increased sensitivity to pain or temperature changes
- ◆ loss of libido.