

Dr. Thomas D. Wais, D.D.S., P.C.
9188 E. San Salvador Drive
Suite 102
Scottsdale, AZ 85258

May 10, 2008

Dear Dr. Wais,

In December, 2004, I made my initial visit to your office. The reason for my visit was that, over the years, I had experienced some on and off joint pain in my left jaw joint as well as a fairly consistent history of muscle contraction headaches. I suspected that the root cause of the jaw joint pain and muscle contraction headaches had something to do with the dental work I had undergone over the years. In short, several people had told me that what I perceived to be TMJ pain could be causing the pain and discomfort I was experiencing in my jaw joint and could also be the cause of the muscle contraction headaches. In our initial meeting, we discussed my dental issues and symptoms and you explained how you would go about fixing the problems that I was experiencing.

We began the treatment shortly thereafter, and I think it is safe to say from both of our standpoints that things did not go as well as we expected or hoped. You have commented in the past that we were able to get me pretty "comfortable" in the MAGO that you use to "get the joint home." That is not my recollection at all and it is not accurate. I was only able to wear the MAGO when my bite was comfortable in it and this seldom lasted more than 24 hours. Many, many times I can remember wearing it home after a visit to your office and being very uncomfortable by bedtime and not being able to wear it overnight. On many of these occasions I would call you and you would instruct me not to wear it if it was causing that much discomfort. Despite our difficulties with the MAGO, I was able to keep it in on an on-and-off basis long enough for us to discover that apparently my lower back right molar, I believe it is tooth number 31, seemed much too high in relation to the other teeth. We both suspected that this tooth and its relationship to the others in my mouth was likely causing much of the difficulty I was experiencing. And this made a great deal of sense to me. This is also where I have my first problem with the treatment that I subsequently received from you. Your website as well as the OBI website states that "OBI dentists are uniquely trained to accurately diagnose problems with the chewing system and **provide the most conservative dental therapies necessary** to correct underlying causes of tooth wear, not just the symptoms." If that were the case, it seems to me the most conservative treatment at that point in time would have been to simply replace that crown to a corrected size and height and see if that didn't alleviate my symptoms. That would have been conservative and could very well have solved the muscle contraction problems, if that tooth indeed was the culprit. But we will never know because you were intent on doing a full mouth restoration.

I don't think it would be productive at this point in time to recount the struggles and difficulty we both experienced throughout my treatment. The mere fact that I visited your office approximately 200 times in a little over three years, even though I only live in Arizona seven

months out of the year, speaks for itself. The bottom line is that the treatment failed, and it failed miserably. When I first came to you, I had the kind of discomfort that required me to take Fioricet once or twice a day every 10 days or so. Now I am taking drugs 24 hours a day, seven days a week, in order to calm down jaw, neck, shoulder and upper back muscles and relieve jaw joint pain. By my count, during your treatment of me, you have prescribed five different muscle relaxer drugs and one anti-inflammatory drug in order to relieve the pain and muscle discomfort caused by the treatment: Amoxil, Flexeril, Valium, Klonipin, Soma Compound and Soma.

In addition, as you know I have had some difficulty adapting to the new teeth in terms of talking and chewing. Quite often when speaking, or sometimes just randomly, my eye teeth will bang into each other. Once, as you know, while chewing I inadvertently sheered the upper right eye tooth almost in half, vertically. I also have difficulty enunciating words that were never a problem in the past. It seems that words with an "s" in them cause me difficulty and almost result in something sounding like a slight lisp. I am convinced these problems are a result of the "bite scheme" that you created by the restoration. I'm not quite sure if it's the length of certain teeth, their shapes, or both, but something has definitely changed for the worse.

I would also like to point out that I did everything you suggested during my treatment that you felt might aid us in achieving a better outcome. I was cooperative when it came to participating in Sam Queen's program which included blood chemistry evaluation and taking a myriad of supplements. I also, at your suggestion, saw a physical therapist to explore any stand-alone issues with my neck, saw a hypnotherapist, and am now seeing a doctor who specializes in cranial-facial osteopathy. To date, none of these therapies have made an improvement. As you know, I've also had a CT scan and MRI of the jaw and facial areas and these tests showed no abnormalities. These results, or lack thereof, leave me with the conclusion that the problem is a dental problem and that it was made worse by the OBI dentistry that you practice.

Your website, and the OBI website, also lists several concerns and symptoms in which OBI dentistry may be of help to patients. When I came to you for treatment, I experienced several of the problems that are listed, including: headaches, painful neck muscles, jaw joint soreness or pain, and jaw popping or clicking or grating noises. Since treatment, my neck muscles are no longer episodically sore, they are always sore and aching. The jaw joint pain is also always there, thus the need for Klonipin every eight hours, day and night. In addition, the website lists two other issues that I didn't have before the treatment but I do now; a constantly shifting bite and upper back and shoulder pain. So contrary to the claims made on both websites, the treatment has made existing symptoms worse and created other problems that did not exist before the treatment.

Throughout this difficult process, you have at times speculated that the reason we weren't making progress was: mercury poisoning, the presence of pesticides, my Achilles tendon injury, a cold that I had, neck issues, and, most recently, exposure to plastics. You also suggested I get my Testosterone levels checked as they can have an effect on jaw joint function. These are all red herrings. They are nothing more than an attempt to obfuscate the fact that you put me in an extremely vertical bite scheme that you knew, or should have known, had little to no chance of making me better. The inescapable fact is that my existing symptoms worsened and now

symptoms appeared after you replaced my original crowns and put me into the OBI bite scheme.

I also question why you believed that I would be a good candidate for OBI dentistry to begin with. You first put me into a MAGO to ostensibly "get my joint home" without any diagnostic evidence whatsoever that it wasn't home to begin with. You just made the automatic assumption that it wasn't home, which I think was a faulty judgment. You have since admitted, after seeing my MRI, that all of my pain and difficulty are musculature in nature. Secondly, one would think that my initial complaints of a 20-year history of muscle contraction problems in my jaw and neck would have given you some pause before proceeding with what I consider a fairly radical treatment. Changing one's bite to a considerably more vertical scheme with teeth that are longer and shaped quite differently than normal is bound to create or make worse muscle contraction problems. I think common sense would dictate that conclusion. The bottom line is this: When more than 200 visits result in more and increased pain symptoms, I think it is pretty clear that what was promised was not delivered.

Until recently, I was a bit confused as to why I would be having so many problems since the restoration and why the symptoms were actually getting worse instead of subsiding. I have since learned, based upon my original models and the models completed immediately after the restoration, that my upper teeth were increased in length from 9.3 millimeters to 12.0 millimeters. At the same time, my lower teeth were increased in length from 7.2 to 8.1 millimeters. Taken together, this represents a 39.2% increase in the length of my front teeth. I have also learned that my other post-restoration teeth are abnormal in terms of length, size, shape and thickness. Three separate dental professionals who have seen either my teeth or post-restoration models of my teeth have described them as "unhuman." There has never been a time in the past 2 years when my bite was "stable" for more than two days. Most of the time it had shifted by the next morning after an adjustment. Knowing what I know now, it is little wonder that I have been in considerable discomfort for this entire period. I really don't know how one could reasonably expect a good result when you are taking a patient with past muscle contraction issues and introducing a new occlusion structure and scheme that is that radical to anything I had in the past.

I have spent approximately \$70,000 for the treatment I received from you. I have already spent over \$6,000 for a diagnosis as to what has gone wrong and what will be required to fix the situation. In addition, the estimated costs to me to redo and correct the treatment I received from you will cost me an estimated \$121,000. This amount includes lab fees, design and fabrication of new prototype restorations, and the restoration of 28 final teeth. It does not include further gum surgery that will be required to make room for teeth in the back where you have equilibrated teeth to the point that there is nothing left to attach future restorations. That cost has been estimated at another \$10,000 to 15,000. It also does not include the thousands of dollars I have spent with various therapists and doctors in an effort to lessen the pain and discomfort your treatment has caused. All in all, I will have well over \$200,000 invested in dental procedures that likely could have been avoided if you had simply replaced the crown on tooth number 31 rather than seeing dollar signs and insisting that a full mouth restoration using your OBI dentistry theories was the only thing that would solve my problems.

Now I'll give you an update on what has happened since I stopped seeing you and started receiving dental care from Dr. Chal. In late February I spent two days in his office while he ground out the ridiculous OBI teeth you put in. He replaced them with rather flat temporaries similar to the size and shape I had before you began treating me. In late March I had extensive crown heightening gum surgery. Two weeks ago Dr. Chal put in another set of temporaries once the gums had healed. With teeth that are similar to what I started with and with my mouth open about the same amount that it did back before you started treatment, I am 95% better. After a new "lab set" of temporaries is installed on the 21st, we anticipate putting in the final restorations late next fall sometime. Daily adjustments are no longer necessary and, in fact, I can go indefinitely now without an adjustment and my neck and upper back are comfortable. You see, the proof is in the results. Your treatment made me much worse. Conventional, responsible treatment solved my problems.

Here's where we are: I am requesting, by this letter, a refund/settlement from you of all the monies paid by me to you for "dental care" to settle any and all claims that I may have against you and your practice. If this is not acceptable to you, I will pursue any and all legal remedies available to me in order to recoup the money this has cost me and will cost me as well as the unnecessary pain and suffering your treatment has caused. I will also file a complaint with the Arizona Board of Dentistry. You can also rest assured that I will make it my life's work to make sure that anyone I ever come into contact with in this area knows what I have gone through as a result of your malpractice. And before you have your attorney send me a letter warning me not to slander you or your practice, don't bother; all I have to do is tell the truth about the care provided and the resulting problems that occurred.

In addition, I am demanding that you take my picture off your website within 48 hours of receipt of this letter. To have my picture on your site, implying that I am a happy patient and an example of your successful dental technique and work is nothing short of deliberate fraud.

Sincerely,

Robin E. Bertsch

Sent via Certified Mail: Return Receipt Requested

cc Greg Michaels, Esq.