Artificial Water Fluoridation & Infant Health Risks

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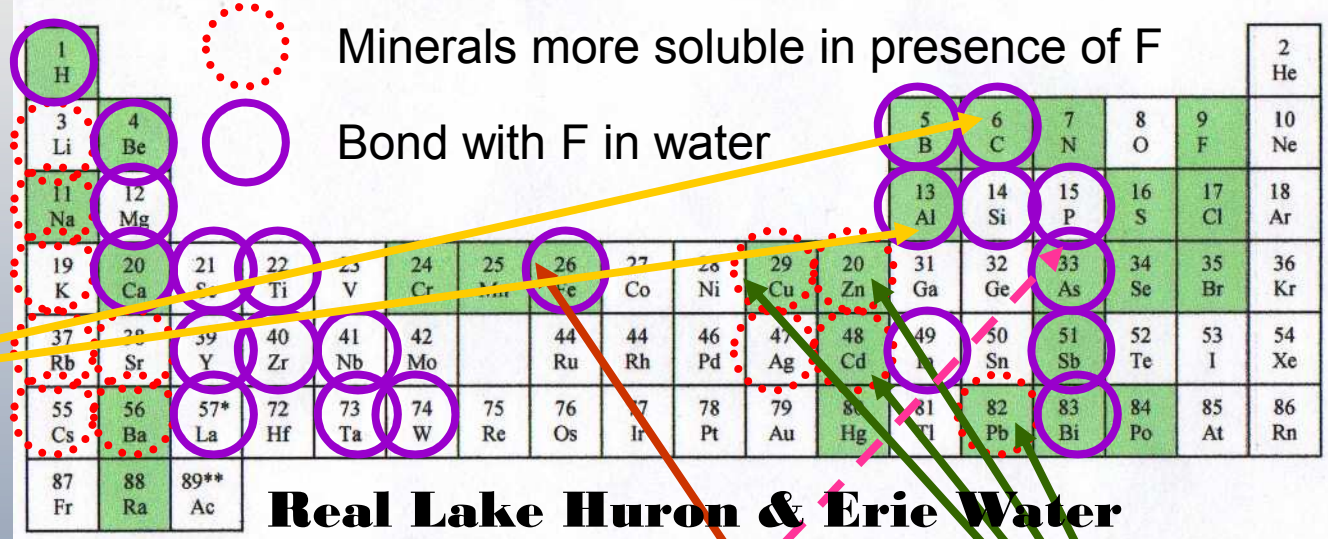
Combines with aluminum & carbon molecules to form toxic compounds

CH4 + F = THMs
PAC + F = AlFx

Minerals more soluble in presence of F

Bond with F in water



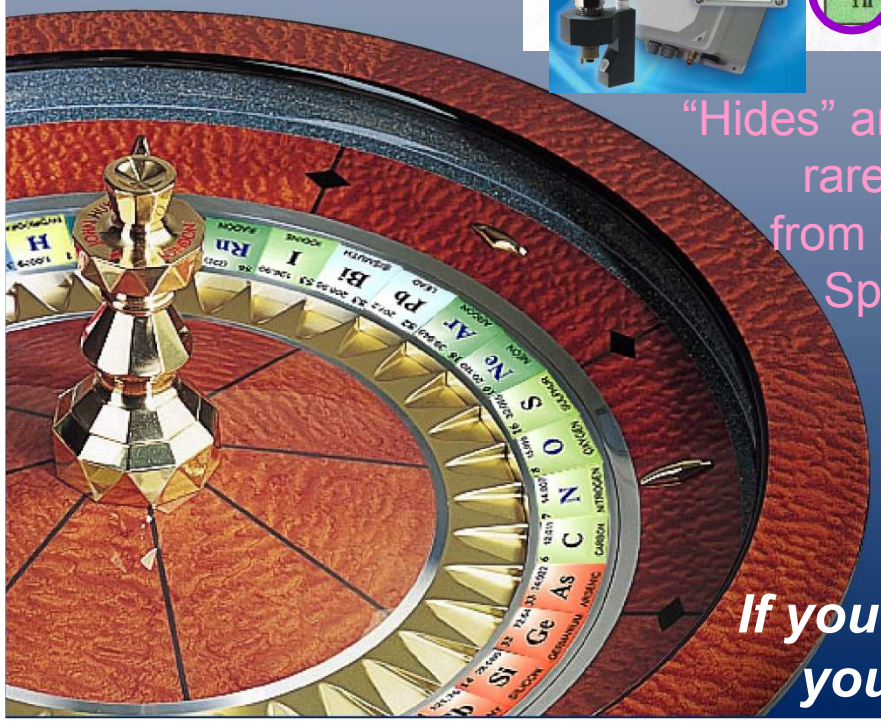
Real Lake Huron & Erie Water

Municipal & Residential

"Hides" arsenic, uranium, rare earth elements from detection by Ion Specific Electrode

Corrodes pipes & fixtures made of copper, zinc, lead, cadmium

Oxidizes iron pipes



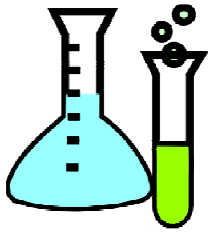
If you're not monitoring at the residential tap, you're gambling with the Periodic Table.

Water Fluoridation Increases Toxic Elements in Municipal Water

mg/L or ppm	Infant Humans Adequate Intake	Protection Aquatic Species	Ontario Drinking Water Standards	MOE MISA
Fluoride*	0.0128	0.12	1.50	10.0
Lead*	None	0.001	0.010	2.0
Cadmium*	None	0.000017	0.005	0.7
Arsenic*	ND	0.005	0.010	1.0
Uranium & Decay Prod.	None	NA	0.02 (as U)	NA

1. Added from municipal and industrial sources
2. Infrastructure corrosion products of AWF
3. Contaminants in HFSA

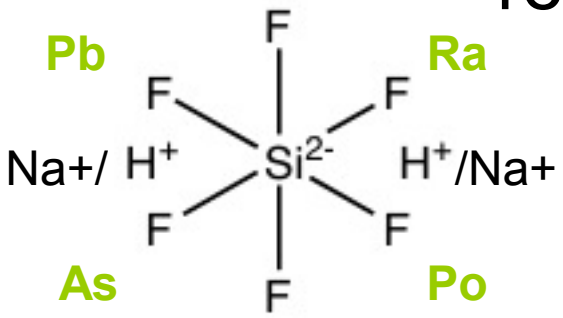
*Both contaminant of HSFA + corrosion product



Guilty By Dissociation

Those who claim that contaminants in fluorosilicates (ex. arsenic, lead & uranium decay products like radium, polonium, radon) are not a health concern because of the "*100% dissociation in water*" argument would **FAIL** high-school Chemistry.

In ***real water***, they become free ions or charged complexes with little or no reduction in overall toxicity.



Hexafluorosilicic Acid

+

Pure Water
(under ideal conditions)

=

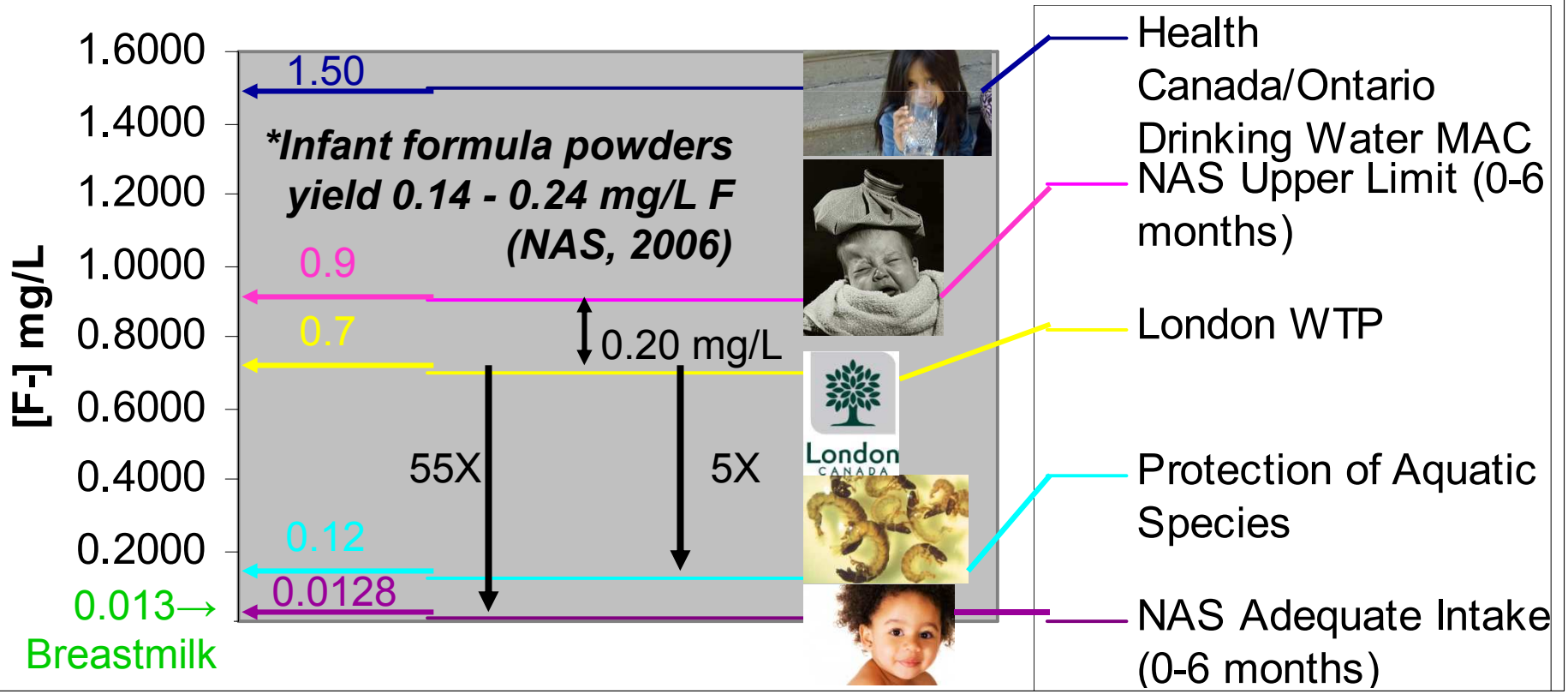
Water with Dissolved Ions & Complexes

The US EPA admitted to Congress in 2001 that "We *cannot confirm with any degree of certainty that HFSA dissociates in municipal water supplies*".

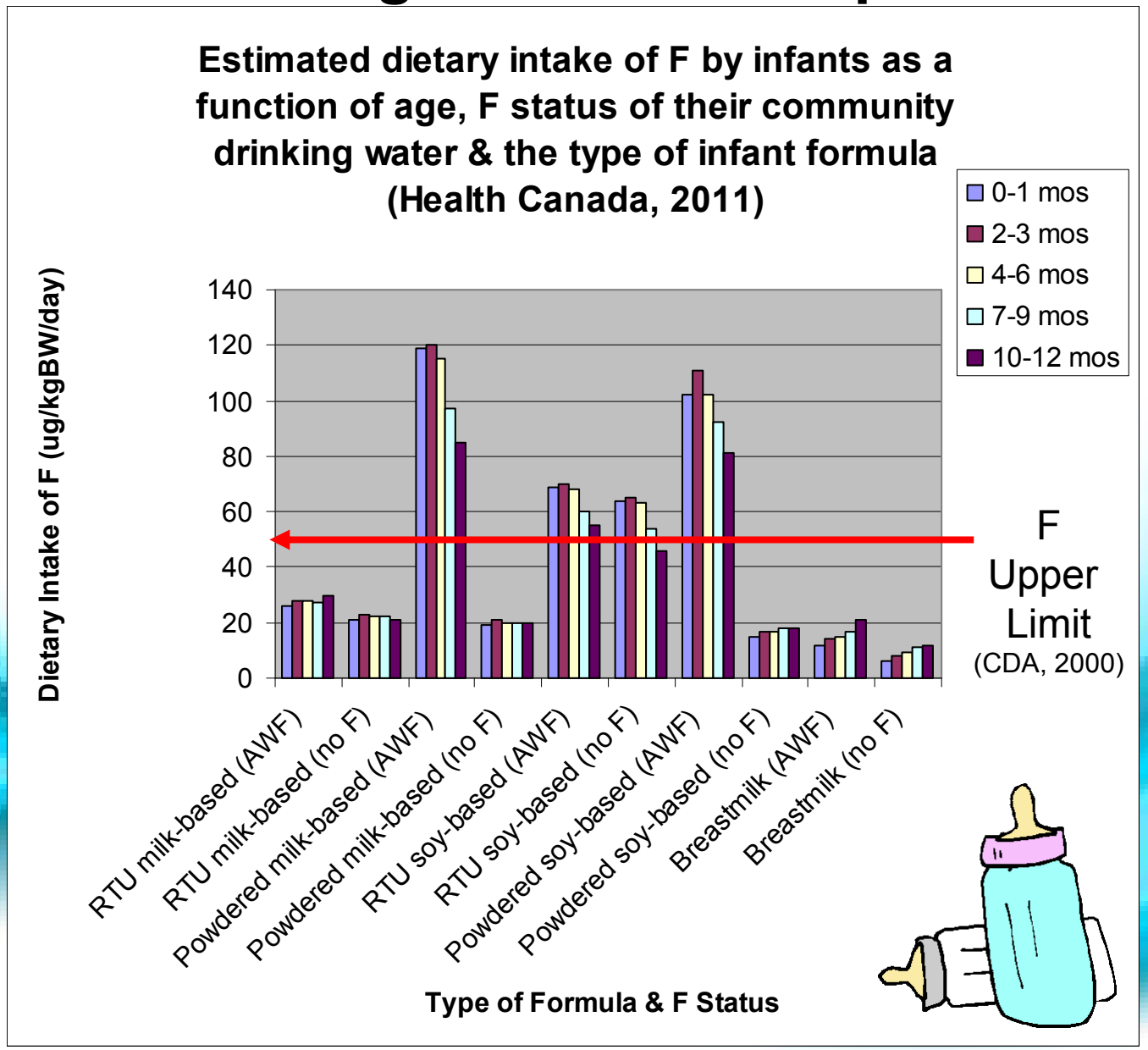
National Academy of Science Dietary Reference Intakes for F – far beyond Adequate, approaching Upper Limit

Fluoride Ion Concentration In Water vs Selected Standards & Guidelines

"Fluoride should not be added to infant formula." Codex Alimentarius (1981)

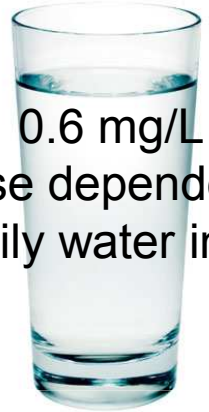


Powdered milk- and soy-based formulas overdose infants with F during critical developmental stages



We are now exposed to 5 times more F than in 1971

Dermal absorption
"sparkly" phlogopite
90,000 mg/kg F



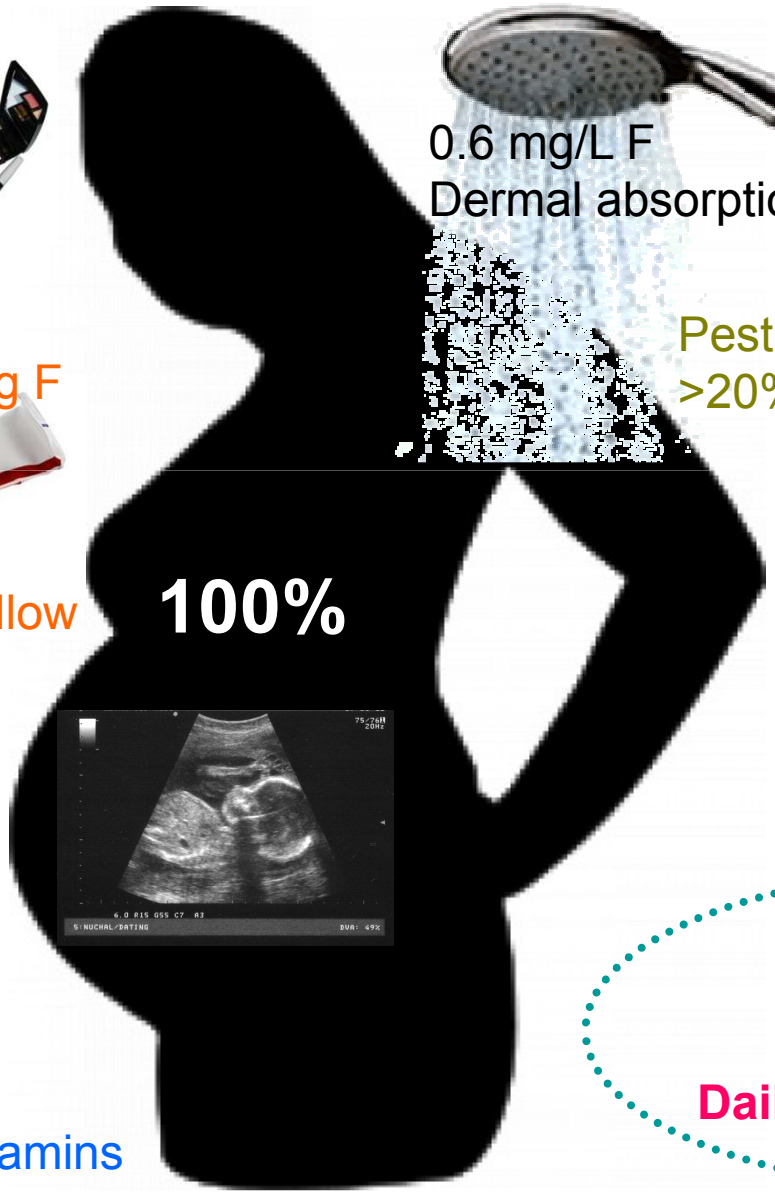
0.6 mg/L F
Dose dependent on
daily water intake

1,200 mg/kg F

Do not swallow

30,000-170,000 mg/kg F

No F *listed* in prenatal vitamins



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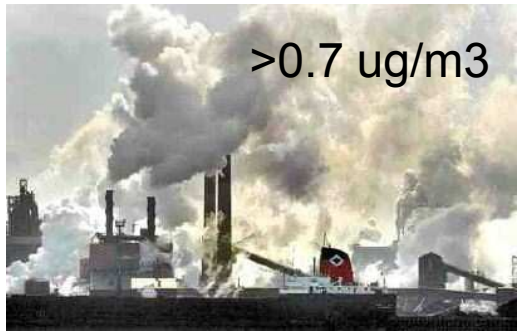

Pesticides, fertilizers, fumigants
>20% F-agricultural chemicals

Organic food >6 mg/kg F
Soil >2000 mg/kg F

Daily Toxic F Intake = 0.7 mg from ALL SOURCES

“Minorities” at risk of fluoride over-exposure

(National Research Council 1977/2006 - US Agency for Toxic Substances & Disease Registry 1993, US Environmental Protection Agency)

- Pregnant and lactating mothers, fetuses, young children
- Hypersensitive to fluoride [~1-5% of population]
- Elderly (over 65) [~12% of population] i.e. Baby Boomers
- Diabetics [~5-10% of population]
- Cardiovascular Disease [~5% of population]
- Renal Disease [~5% of population]
- Diets with essential vitamin and mineral insufficiencies such as:

  - calcium, magnesium [27-44% of the population]
  - iodine [~38% of world's population]
- Thyroid insufficiency [~5-10% of the population]

Between 98% - 129% of population *not including* ethnic minorities, pregnant & lactating mothers, unborn & newborn children.

Obvious in 3rd Generation due to cumulative DNA damage.

Cancer

Fractures

Conductive Hearing Loss

Dental Fluorosis = F Toxicity

Learning & Developmental Disorders

Preterm Labour

www.statcan.gc.ca

Infant & Childhood Obesity