Input to Feb. 05, 2019 CWC Meeting

Water Fluoridation – A Concern

Chris Gupta P. Eng

Deception

- Fluoridation schemes are dishonest and misleading as they don't inform
 the residents that the chemical to fluoridate their water is an industrial
 toxin such as Hydrofluorosilcic Acid (HFSA)*.
- Constituents think, and/or are led to believe, that the fluoride used will be pharmaceutical grade like what the dentists use. It is illegal for dentists to use HFSA and to use in toothpastes.
- Clearly no one in their right mind will knowingly vote to agree on adding traces of lead, arsenic, mercury etc. as found in HFSA to their municipal drinking water!
- The above violates Ontario's Safe Drinking Water Act of 2002, which states, Dilution is no defense for adding a contaminant to drinking water.
 - *Being a waste product, HFSA does not meet Good Manufacturing Practices (GMP).

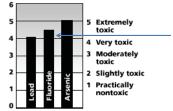
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More Deception

- We are often told by Fluoridation Proponents that this industrial toxin disassociates into pharmaceutical grade fluoride once it is put in water as if traces of lead, arsenic, mercury etc. just disappear!
- This is like saying that road salt becomes pharmaceutical grade salt once mixed in cooking water!

Fluoride is a known toxin

In fact Fluoride is more toxic than lead.



 Based on LD50 data from Robert E. Gosselin et al, Clinical Toxicology of Commercial Products 5th ed., 1984. In fact Fluoride is more toxic than lead.

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Question

- Would the city recklessly add 0.7 parts per million of lead to the drinking water as it does Fluoride?
- Of course not.

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Ethical Dentists

- The following critic is not aimed at all dentists.
- Most dentists are doing what they have been fed by the various dental associations and public health units.
- With a few exceptions many are afraid to speak out as they are under the threat disciplinary action from their dental associations.

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Toxic Health Effects

- Even though Fluoride is a known toxin, we've also been told it's essential for healthy teeth.
- Are we to take it that something more toxic than lead has just one effect.
 - Dental fluorosis.
- This is not simply cosmetic: It is damage to the protective enamel of the teeth requiring expensive cosmetic surgeries to repair...

Fluoridated Vs Non Fluoridates areas

- Teeth are not falling out in non fluoridated areas as we are lead to believe.
- 62% of Canada is not Fluoridated!
- 99% of Europe is not Fluoridated.
- Their teeth are as good if not better. (See appendix)

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Follow the Money

- It is a well known fact that fluoridated areas have much higher dental Fluorosis. A pathological condition which clearly is damage to the teeth requiring profitable and expensive cosmetic surgeries to repair...
- Fluoridated areas require more dental visits.

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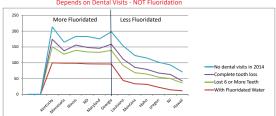
Again it's all about the Money

- According to CDC database:
- Fluoridated areas have more dental visits.
- Cavity repair is cheap = \$120
- Fluorosis repair is expensive:
 - Micro-abrasion plus bleaching (\$1000/treatment)
 - Additional composite fillings (+\$1000)
 - Porcelain veneers (\$15,000/case)

Tooth loss comparison and fluoridation rates from the CDC's own data

 CDC data 2014
 Kentucky
 Minnesota
 Illinois
 NP
 Maryland
 Georgia
 Louisiana
 Indicator
 Indicator
 Non report
 <

both Loss in Adults 65+ Due to Decay and Gum Diseas



Example

- Pre-school children's tooth decay rates nearly doubled after fluoridation became Kentucky law.
- In 1987, 28% of Kentucky preschoolers developed cavities. That number increased to 47% in 2001, according to the July/August 2003 journal, "Pediatric Dentistry." https://tinyurl.com/kqmmqv5
- In addition to tooth decay we know that there will be more fluorosis.

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Follow The Money

- TOTAL COST TO TREAT DENTAL FLUOROSIS in London Ont. over the next 40 years = \$41.5 million.
- See attached work up by Hardy Limeback, BSc, DDS, PhD, retired head of Preventive Dentistry, University of Toronto Faculty of Dentistry

 And this does not include the cost of water fluoridation!

Costs

- Nor are all the health costs form fluoride toxicity. Some of these can be very high like loss of IQ from neurotoxins such as fluoride and lead.
- Clearly their ridiculous pleas to protect teeth is all about the money and has little to do with teeth!

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Water Fluoridation is Profitable

- The waste companies get to dispose their toxins with a profit to boot!
- The dentists get more business.
- They both lobby the authorities to do their bidding.
- Is it any wonder that they love water Fluoridation?

Conclusion

- Health Canada has no safety studies on water Fluoridation Chemicals.
- Health Canada & MOH can't account for fluoride from all sources and have no clue of the health of the recipients.
- They deliberately confuse water level/concentrations with dose which clearly are not one and the same.
- They call tooth damage "alteration of the appearance".

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Conclusion (Con't)

- The fact is that the vast number of countries and jurisdictions in our world don't put toxins into their water systems at uncontrolled doses and dosages, without informed consent, and without any form of ongoing monitoring or follow-up. Dr. Robert C Dickson, MD, CCFP, FCFP
- As conscientious, moral and ethical Councilors it is incumbent upon you, as the ultimate decision makers, to protect the health and well being of the residents
- You were elected to Serve And Protect. It behooves you to stop this fraudulent practice like most of the world has done.

- · "Where is the physician who will impose a lifelong prescription for an untested potentially toxic substance, without proven clinical benefit, on a patient he/she has never met, interviewed or examined?
- Such dubious behavior would extract appropriate censure from the licensing authority of the physician involved, on the basis that it is unscientific, unscrupulous, unethical, and therefore unacceptable.

~Dr. Neville Wilson

Appendix

- Fluoride-Efficacy
- · The Cost Of Fluoridation In London

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Is Water Fluoridation Effective?

a reduction of only one-half cavity per child. Low end estimates find no significant reduction at all. Children aged 6-17 average 2.1 cavities in their permanent teeth¹

- Cochrane Collaboration² (2015): 26% (**0.5 cavity per child**)
 CDC³ (2018): 25% (**0.5 cavity per child**)
 lowa Fluoride Study⁴ (2018): **No significant reduction**

- World Health Organization data⁵ (2005): No evidence of fluoridation's effectiveness

There is already a consensus including CDC, Cochrane Collaboration, the Iowa Fluoride Study $and \ others \ that \ fluoride's \ effectiveness \ in \ preventing \ cavities \ is \ mainly \ topical \ (not \ swallowed).$

The Cochrane Collaboration is considered the gold standard of evaluating effectiveness. It said the cavity reduction referenced above was "based predominantly on old studies and may not be applicable today.

"Over 97% of the 155 studies were at a high risk of bias, which reduces the overall quality of the results...

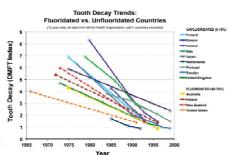
We did not identify any evidence... to determine the effectiveness of water fluoridation for preventing caries
in adults... There is insufficient evidence to determine whether water fluoridation results in a change in disparities in caries levels across socio-economic status.

The lowa Fluoride Study (IFS), funded by the National Institutes of Health, is the most comprehensive, ongoing research project in the U.S., the only one measuring all sources of fluoride ingestion. The 2018 study from IFS referenced above found no significant correlation between ingested fluoride and cavity reduction, further validating a 2009 study⁶ from IFS that stated:

achieving a caries-free status may have relatively little to do with fluoride intake (emphasis in the original) ... recommending an 'optimal' fluoride intake is problematic.

Finally, World Health Organization data show cavity rates in children (age 12) have dropped as much in nations that don't fluoridate (darker solid lines) as in nations that do (red/yellow dotted lines). (See graph)

- - FLUORIDEALERT.ORG





THE COST OF FLUORIDATION IN LONDON, ONTARIO- is it worth it?

The City of London claims it only cost \$82,457 in 2017 to fluoridate London. (email from Dan Huggins, Thursday, March 15, 2017, 11.38 a.m.)

This is JUST the cost of fluoridation chemicals (a cheap industrial waste product called hydrofluosilicic acid, or HFSA). It does not include the cost of other chemicals added because HFSA is used, F testing, record keeping and reporting, extra hazmat precautions and training, F equipment maintenance, upgrades & replacement, fluoridation promotion, added liability insurance and legal fees, holding fluoridation plebiscites, dealing with HFSA spills and fluoridation overfeeds.

A realistic estimate of the $\it direct$ cost to fluoridate London is \$0.3 M/yr = (\$0.3M/yr X 40 years = \$12 million.

Fluoridation promoters never consider the cost to families that avoid fluoride because of sensitivities, the cost of treating objectionable fluorosis, or the costs of treating other fluoride-related health problems.

The cost of treating dental fluorosis in London

London has about 384,000 people. Over the next 40 years there will be 5 cohorts of children of tooth forming age (birth to age 8), or about 250,000 children exposed to added fluoride in the drinking water.

1 in 10 =25,000 children will have objectionable dental fluorosis and will likely want it treated cosmetically if 15,000 have micro-abrasion plus bleaching (\$1000/treatment) = \$15 M if 9,500 have additional composite fillings (+\$1000) = \$19 M if 500 (only 0.2% of all the children) have porcelain veneers (\$15,000/case) = \$7.5 M

TOTAL COST TO TREAT DENTAL FLUOROSIS over the next 40 years = \$41.5 million

Total fluoridation costs (related to teeth only) = \$53.5 million.

Dental expenses expected to be saved related to dental cavities prevented. Fluoridation has to be maintained for about 40 years to save one tooth per person from a filling (https://www.ncbi.nlm.nih.gov/pubmed/23456704) 384,000 persons in London X 1 filling (\$120/filling) per person = \$46.1 million

THERE ARE NO COST SAVINGS TO FLUORIDATE

Hardy Limeback, BSc, DDS, PhD, retired head of Preventive Dentistry, University of Toronto Faculty of Dentistry