Fluoride is a poisonous drug, and we need to keep it out of our drinking water.

"I can think of no better way to destroy a nation then to spread toxic substances far and wide." David Kennedy, DDS, 2013, Executive Director, Producer of "Fluoridegate, An American Tragedy", Past president International Association of Oral Medicine and Toxicology.

On the back of a tube of fluoridated toothpaste there is a warning.

"Warning: Keep out of reach of children under 6 years of age. If you accidentally swallow more than used for brushing, seek professional or contact a poison control center immediately." No wonder the warning on the toothpaste tube is so dramatic. The same potent chemical that is used to enrich uranium for nuclear weapons, to prepare Sarin nerve gas, and to wrestle molten steel and aluminum from the earth's ore is what we give to our children first thing in the morning and last thing at night, flavored with peppermint, strawberry, or bubble gum.

Christopher Bryso, "The Fluoride Deception"

Water fluoridation is morally wrong! We're not giving people informed consent. Fluoride is a hazardous waste in the public water supply, but it's an inexpensive way for industry to dispose of their waste product.

Don't blame the dentists. They were taught in school that fluoride is good for teeth, but few realize the history of the origination of the idea of putting fluoride in our drinking water and the lack of scientifically conclusive safety studies to support such a process. Dentists are unaware that much of the fluoride added to drinking water today in the United States is actually an industrial waste prouct of the aluminum and fertilizer industries.

"The Fluoride Deception"

It was not until 1916 that two dentists, G.V. Black ("the father of modern dentistry") and F.S. McKay noted tooth deformities, which they referred to as "mottled teeth", exhibited as chalky-white areas, and in more advanced cases, the teeth exhibited yellow, brown, and black stains. ScientistsS determined in 1931 that fluoride in the drinking water was the cause of this dental mottling, as areas that experienced this problem had high fluoride levels in their drinking water. Dr. Trendley Dean of the United States Public Health Service carried out a series of investigations and demonstrated that dental mottling (now referred to as fluorosis) of permanent teeth of children could be attributed to fluoride concentrations in the water at a level slightly below 1 part per million. In 1937, Dr. Dean

published his findings demonstrating that as fluoride levels increased above 1 part per million, so did the incidence and severity of dental fluorosis.

In 1984, the EPA sponsored a study at the UT Health Science Center Dental School in San Antonio and discovered that children from areas with 1.0-1.4 ppm fluoride in the water had a dental fluorosis rate 30-35%, higher than children with only 0.3-0.4 ppm fluoride in their drinking water. These investigations were published in the "Journal of the American Dental Association."

However, such a disruption to the teeth and the jaw is just an indication of a much more severe medical problem...systemic skeletal fluorosis, which is occurring in the bones and cartilage elsewhere in the body.

Exemplary studies:

1. In 1973, Drs. Singh and Jolly, internationally recognized experts on the clinical effects of fluoride on bone, pointed out that early symptoms of fluoride-induced damage to bones and cartilage start with vague pains noted most frequently in the small joints of the spine. These local areas may be misdiagnosed as rheumatoid or osteoarthritis. In later stages, there is an obvious stiffness of the spine with limitation of movements, and development of "kyphosis" (hunch back).

2. In 1978, Yale University researchers Dr. J. A. Albright and colleagues reported at the American Orthopedics Research Society that a 1 ppm water concentrate of fluoride decreases bone strength and elasticity, leading to osteoporosis.

3. In 1990, Dr. Steven Jacobsen and co- workers found a link between the rate of hip fractures among U.S women 65 years and older and the amount of fluoridation in their community.This study examined the records of 541,985 cases of osteoporosis and was published in the "Journal of the American Medical Association". A Utah study , also published in the "Journal of the American Medical Association", reported a fluoridation- linked 41% increase in hip fracture rate among men 65 years of age and older and a 27% increase in hip fracture rate among women 65 years of age. (JAMA 1992)

We have all heard throughout our lives that fluoride helps prevent cavities, whether in toothpaste commercials or why some communities fluoridate their water supply. What is not mentioned is that fluoride is extremely toxic:

1. Fluoride is listed as a lethal poison in both the "Merck Manual" and "The Pharmacological Basis of Therapeutics".

2. In the "Clinical toxicology of Commercial Products", fluoride's relative toxicity is listed as more toxic than lead and slightly less toxic than arsenic and is referred to as a "protoplasmic poison".

In a letter responding to questions of safety dated November16, 2000, Robert Thurnau, chief of the treatment technology evaluation branch for the Environmental Protection Agency states: "To answer your first question on whether we have in our possession empirical scientific data on the effects of fluosilicic acid or sodium silicofluoride on health and behaviour, our answer is no. Health effects research is primarily conducted by our National Health and Environmental Effects Research Laboratory. We have contacted our colleagues there and they report that with the exception of some acute toxicity data, they were unable to find any information on the effects of silicofluorides on health and behavior."

In addition to the lack of scientific studies to prove that fluoride is safe for people to ingest, worldwide studies have proven that adding fluoride to the drinking water is not all that effective in reducing or preventing tooth decay.

1. The largest study of tooth decay in North America was done in 1986-1987 by the world's greatest proponnents of drinking water fluoridation, the National Institute of Dental Research, who has lobbied continuously for the last 50 years for total drinking water fluoridation in the United States. In this study, 39,000 children between the ages of 5 to 17 from 84 cities were surveyed. Three types of communities were selected for study; fluoridated, partially fluoridated, and unfluoridated. No statistically significant difference was found in decayed, missing and filled permanent teeth.

2. Dr. Eugene Zimmerman (my oral pathology professor in dental school) and co- workers from the National Institute of Dental Research reported on a 10-year study of Bartlett, Texas (8 ppm fluoride) and Cameron, Texas (0.4 ppm fluoride). Their report, published in a 1955 issue of the "Journal of the American Dental Association", noted that the incidence of tooth decay was "examined statistically and no significant difference was found between the Bartlett and Cameron residents." Dr. Zimmerman also told me many years ago about his experience in the early 50's with using topical fluoride on children of migratory farm workers in Texas.These were children who usually didn't see a dentist, and usually had numerous decayed teeth. The experiments were for topical use only Dr. Zimmerman said, as fluoride was not envisioned at that time for use by everyone, only on patients with rampant decay.

Tooth decay is known to be an infection of the tooth caused by the bacteria streptococcus mutans. Tooth decay has declined throughout the U.S. since the 1940's both in fluoridated and non fluoridated areas. Decay varies with nutrition. parental education, family income, oral bacteria, oral

hygiene and several other factors. Consequently, dental disease will vary from from one community to another. Therefore, accurate comparison of decay rates must be adjusted for these confounding factors.

Topical use use of fluoride gels, toothpastes, etc may be of some benefit because the fluoride will kill bacteria. After all, the first commercial uses of fluoride were as an insecticide (1896 patent) and in rat poison (1921 patent).

Actually, in an article in the July 2000 isuue of the "Journal of the American Dental Association", John Featherstone M.Sc, PhD states that "Fluoride, the key agent in battling caries, works primarily via topical mechanisms..." In spite of such a possibilty, I feel there are safer ways to kill bacteria in the mouth and > have been fluoride free in my practice for 35 years.

Other reasons to avoid fluoride:

- Fluoride is not an essential nutrient. No biological process in animals or humans has been shown to depend on it. On the contrary, it is known that fluoride can interfere with many important biological processes and vital cellular constituents and enzymes. (IAOMT) +41% of all American children aged 12-15 are now impacted with some form of dental fluorosis (CDC 2010)
- The chemicals used to fluoridate water are largely hazardous by products of the fertilizer industry.(IAOMT)
- There are now 24 studies that show a relationship between water fluoridation and reduced IQ in children.(IAOMT)
- A recent U.S. study found no relationship between the amount of fluoride a child ingested and level of tooth decay (Warren et al., 2009)
- Once fluoride is added to water, there is no way to control who gets the drug or how much is ingested.(IAOMT)
- Certain subgroups are particularly affected by fluoridation. People vary considerably in their sensitivity to any toxic substance, including fluoride. Infants, the elderly, diabetics, those with poor nutrition (e.g. low calcium and low iodine), and those with kidney disease are especially vulnerable to specific adverse effects of fluoride.(IAOMT)

Twenty five countries, representing 98% of Europe's population, all reject fluoridation, some with outright bans on it's use. Using water as a vehicle to medicate the public is morally wrong, in most countries, except the United States.