

New Findings from Poland

Chromosome Damage in Human Leukocytes

Chromosome Changes Not Accidental

Among the many still-disputed biological effects of fluoridation is the extent to which the procedure can create defects or aberrations in chromosomes, the delicate genetic code material controlling cell reproduction. Some investigators—notably and primarily those who advocate fluoridation—claim fluoride, especially at low concentration, has no significant adverse chromosomal effects on mammalian cells (e.g. G. R. Martin et al., *Mutat. Res.*, 66:159-167, 1979). On the other hand, other researchers, using criteria designed to detect some of the less obvious changes, do find evidence of definite damage to chromosomes in the cells of plants as well as animals (see *NFNews*, July-Sept. 1976; also Ch. 13 of *Fluoridation: The Great Dilemma*, Coronado Press, 1978).

With respect to human cells, fluoride has been reported to produce no significant aberrations during metaphase in the chromosomes of blood leukocyte cultures, even at a concentration as high as 19 ppm (R. Slacik-Erben and G. Obe, *Mutat. Res.*, 37:253-266, 1976). Other, more recent research, however, challenges this claim. In an article published in 1978 in *Genetica Polonica* (Vol. 19, No. 3, pp. 353-358), researchers Danuta Jachimczak and Bogumila Skotarczak of the Institute of Biostructure at the Pomeranian Medical Academy, Szczecin, Poland, record observing marked chromosomal alterations during metaphase from the addition of fluoride (and also lead) ions to human leukocyte cell cultures.

For their studies, these workers used peripheral blood samples from male donors at the Medical Academy. Leukocyte cell cultures from the blood of each donor were conducted for 96 hours, with the fluoride, lead, and control treatments taking place 24 hours before the completion of each culture. The cells were then subjected to hypotonic shock, fixed with methanol, and the chromosome preparations stained. Photographic analysis and classification of metaphase aberrations were made according to standard procedures.

Fluoride ion concentrations (from sodium fluoride) of 0.6, 6.0, and 60 ppm and lead ion concentrations (from lead acetate) of 2.1 and 210 ppm were used in the cell cultures. Controls were treated similarly except for the absence of the fluoride and lead salts. The chromosome findings are summarized in the following table:

Chromosome Aberrations in Human Leukocyte Cultures

Treatment and concentration	Number of cell metaphases analyzed	Percent with aberrations	Aberrations per cell metaphase
Fluoride			
3.15x10 ⁻³ M (60ppm)	35	74.3	2.94*
3.15x10 ⁻⁴ M (6.0 ppm)	203	39.4	0.51*
3.15x10 ⁻⁵ M (0.6 ppm)	196	40.3	0.69*
Lead			
1x10 ⁻³ M (210 ppm)	291	39.9	0.79
1x10 ⁻⁵ M (2.1 ppm)	112	51.8	0.94
Control (no F ⁻ or Pb ⁺⁺)	205	7.3	0.09

*Corrected figures calculated from the data reported.

Observed chromosomal aberrations included structural anomalies involving both chromatid and isochromatid gaps and breaks, acentric fragments, aneuploids, and polyploids. With fluoride the effects were most pronounced at the highest concentration employed (60 ppm), but even at the lowest concentration (0.6 ppm) they were still significantly greater than in the controls without any fluoride added. Lead ions, on the other hand, did not show this concentration dependence, the frequency of aberrations being greater at the lower concentration (2.1 ppm) than at the higher one (210 ppm).

Commenting on the results, the authors point out that the cultures containing 60 ppm fluoride yielded "extremely few mitoses suitable for the analysis." They suggest that "this concentration is likely to be poisonous to the cells, since the number of obtained chromosome aberrations is high and markedly exceed[s] the number of aberrations found in both lower concentrations." They also note that while there was no significant difference in the extent of aberrations at the 6.0 and 0.6 ppm fluoride concentrations, the difference between the effects at these concentrations and the controls was highly significant ($p = 0.001$).

The authors conclude by calling attention to the fact that the 0.6 ppm fluoride concentration being used in the drinking water of Szczecin for the prevention of dental caries is the same as that "of the present experiments [which] show that the changes occurring in the chromosomes were not accidental."

[Not yet explained is why these workers found such clear evidence of low-concentration fluoride effects on human leukocyte chromosomes, whereas Slacik-Erben and Obe (see above) apparently did not. Conceivably the reason may lie in the longer culture time before treatment in the present study, although other factors are probably involved too.]

Annapolis

Fluoride Spill Kept Secret

On Sunday, November 11, 1979 at 3:30 p.m., an Annapolis city public works employee opened a valve on a large tank of hydrofluosilic acid to refill a control chemical feeder that introduces the acid, at specified amounts, into the water system. The employee left the room without turning off the valve. Next morning at 8:30 the mistake was discovered and reported to the plant supervisor.

The supervisor did not recognize the seriousness of the situation when he learned that about 1000 gallons of the acid had been spilled into the water supply, according to the director of the city's public works.

On Tuesday, November 13, eight kidney patients became ill while receiving dialysis treatment at the Bio-Medical Applications Clinic of Annapolis. The treatments were halted when patients showed symptoms of distress, chest pains, vomiting, nausea and itching. The patients were sent home. One, Donald Konrad, became ill in the evening and while being transported by ambulance to North Arundel Hospital suffered a cardiac arrest, but revived. Another, Lawrence Blake, at home in Annapolis, was found dead by his wife at 1:30 a.m.

Doug Struck, a reporter for the *Baltimore Sun*, in a November 28 story told how the news of the spill became public:

"Health officials only learned of the fluoride problem in investigating the unexplained illnesses of eight patients who underwent kidney dialysis at an Annapolis clinic November 13.

"Even though state and county health officials had learned of the spill nine days after it occurred, no public announcement was made and the Annapolis City Council was not told of the situation for six more days, according to accounts from officials involved.

" 'We didn't want to jeopardize the fluoridation program because it has been so good for children,' explained Charles M. Yost, a deputy to the county health officer. 'You have to wait until you're really sure there is a problem before you go out and panic people.' "

The spill, the worst ever reported for a large population, became the subject of investigation by health authorities. State Medical Examiner Dr. Homez Guard ruled that fluoride poisoning was linked to the death of 65-year-old Lawrence Blake. Health officials began searching hundreds of hospital records to find out if the high fluoride content of the water between November 11 and November 21 had produced any side effects.

George L. Waldbott, M.D., a practicing physician from Warren, Michigan and internationally known fluoride expert held interviews with over 100 persons who said they had been harmed. John Yiamouyiannis, Ph.D., biochemist

Governor's Task Force Report

Admits Safety in Question

Although it does not go so far as to recommend termination of fluoridation, a new report issued on December 12, 1979, by Michigan Governor William G. Milliken's special Task Force on Fluorides stands in marked contrast to two other recent official state reports which had concluded that there is no danger of "any adverse health effects" from increased fluoride intake resulting from fluoridation (see *NFNews*, July-Sept. 1978). The new report frankly acknowledges that more harm than mild dental mottling may be occurring from present levels of fluoride intake stemming from fluoridation, that much more careful monitoring of the situation is urgently called for, and that some persons might be well advised to use nonfluoridated drinking water.

Such, in essence, is the gist of the 81-page report of the nine-member Task Force headed by Dr. William C. Taylor, Professor of Civil Engineering at Michigan State University in East Lansing and Science Advisor to Governor Milliken. Others on the panel included scientists with specialties in water research, disease control, dentistry, epidemiology, pharmacology, nutrition, neurology, and mineral metabolism.

Even though it made extensive use of standard profluoridation source material, the Task Force did not neglect to consult various reports of adverse finding, including the recent Canadian National Research Council study on *Environmental Fluoride, 1977* (*NFNews*, Jan.-March and July-Sept. 1978). It also reviewed clinical evidence of reversible toxic health effects, such as that published by Dr. George L. Waldbott and others (see his book *Fluoridation: The Great Dilemma*, in collaboration with Professors Albert W. Burgstahler and H. Lewis McKinney, Coronado Press, 1978; cf. *NFNews*, Oct.-Dec. 1978; Jan.-March 1979).

Fluoridation Levels Too High?

In its Conclusions and Recommendations, the Task Force stated: "The current total daily intake of fluorides by adults in Michigan communities with fluoridated water is estimated to be from 2 mg to 5 mg." Continuing, it remarked: "Recognizing the trend of increasing intake of fluoride observed in the last 25 years, it is possible that the concentration of fluoride in artificially fluoridated water

and a leading authority on fluoride and its effects on people and the environment also conducted interviews.

The *Evening Capital*, an Annapolis daily newspaper, was the first to tell of the cover-up. Stories written by reporters Maryann Kryzanowicz, Gene Bisbee and Scott Flander, published November 28 and 29, described the effects of the fluoride on some of the 34,000 people and businesses served by the water supply and gave accounts of previous fluoride foul-ups.

● The State Environmental Health Service ordered the Coca-Cola and Pepsi-Cola bottling companies to destroy all soft drinks produced on November 11 and 12 because of high levels of fluoride found in tap-water used at the plants. Jon Crosby, a public affairs officer for the State Department of Health and Mental Hygiene, said Pepsi-Cola must destroy about 25,000 cases of soda and Coca-Cola officials must dispose of "an undetermined amount" of the product. William Brendle, general manager of the Annapolis Coca-Cola bottling plant, said the company will be going into area stores to collect any products that may have been bottled while city water was contaminated with excess fluoride. Officials at both plants are working with health authorities to determine how the suspected products will be destroyed.

"We're going to hold on to the suspicious products until the health department determines how to dispose of it," Brendle said.

A state health department official said the contaminated soft drinks could be dumped into the city's sewage system, and impurities would be filtered out at the waste treatment plant without posing another threat of contamination to the city water supply.

● A noted expert on fluoridation poisoning warned against eating any food, especially vegetables, that were cooked with the over-fluoridated water.

● Two pet stores in Annapolis reported massive fish kills in aquariums late last week, due to "unusual" acid levels in the water.

Docktor Pet Center at Parole Plaza reported several hundred goldfish and catfish, whose water is changed regularly, died last week and over the weekend.

Fish 'n Chips in Arundel Plaza also reported fish kills in four tanks late last week and over the weekend.

● The National Institute of Arthritis and Metabolic Diseases has recommended for ten years that fluoride be taken out of water used in artificial kidney machines. State officials in the Division of Licensing and Certification are now looking into making requirements that fluoride be taken out of the water before use in these machines.

(Continued on Page 3)

systems may require downward revision . . ."

While not accepting current scientific evidence of any association between fluoride and certain diseases like cancer, congenital malformations, and heart disease, the Task Force acknowledged: "Prolonged excessive fluoride intake can result in a variety of gastrointestinal and arthritic symptoms and eventually results in crippling skeletal fluorosis." The statement goes on to concede that these conditions "may occur in industrial settings and in persons with excessive thirst and kidney impairment who ingest or retain fluoridated water in greater amounts than normal." (Emphasis added.)

Nonfluoridated Water May Be Desirable

The report further states that "the effects of fluoride intake on persons with nutritional deficiencies has [sic!] not been well studied" and that "neither has the possible existence of preskeletal fluorosis in a small number of persons been adequately studied." It therefore recommends that "The Department of Public Health should continue to review the scientific literature on health effects of fluoride intake by the general population, as well as by specific subpopulations, to identify any non-dental health effects which might be associated with fluoride intake." (Original in italics.)

Finally, the report concludes: "There exists a possibility that a small portion of the population has an intolerance to fluoride at levels of intake obtained from food and waterborne fluoride." It therefore recommends that "The Department of Public Health should monitor reports of fluoride intolerance in Michigan as well as the scientific and medical literature on the topic. . . ."

"In the interim, information on domestic processes for defluoridation should be made available to medical practitioners and others who believe their patients or themselves to be suffering symptoms of fluoride intolerance. Additionally, information and assistance should be provided to community water authorities who wish to establish a location for a non-artificially fluoridated source of water for individuals who choose, for medical or other reasons, not to drink fluoridated water." (Original in italics.)

National

FLUORIDATION NEWS

ROUTE 1, GRAVETTE, ARKANSAS 72736
Telephone: 501 787-6648

A general and scientific information medium about fluoridation, national and international. Published in the interest of all organizations and individuals concerned with keeping our drinking water free of chemicals not needed for purification.

Published Quarterly

U.S. Subscription rate: \$2.00 one year; \$3.50 two years.
Canada (U.S. Funds) \$2.00 one year; \$3.50 two years.
Foreign (U.S. Funds) \$2.50 one year; \$4.50 two years.

Quantity rates: 10 copies \$1.50; 50 copies \$6.00;
100 copies \$10.00; 300 copies \$27.00; 500 copies \$45.00.
(Quantity orders add 50 cents for postage and handling.)

Ethel H. Fabian Editor and Publisher

Medical Advisory Board

Vincent E. Maroney, M.D., Brooklyn, N.Y.; Philip E. Zanfagna, M.D., Lawrence, Mass.; Harvey T. Petroborg, M.D., Aitkin, Minn.

Dental Advisory Board

John E. Water, D.D.S., Hemet, Calif.; Barnet Winter, D.D.S., Beacon, N.Y.; Leslie A. Russell, D.M.D., Newtonville, Mass.; Casimir R. Sheft, D.D.S., Passaic, N.J.

Legal Advisory Board

John R. Auchter, Springfield, Mass.; G. S. Williams, Farmingdale, Me.; John Remington Graham, St. Paul, Minn.

Corresponding Editors

Dr. Earl G. Hallonquist, New Westminster, British Columbia, Industrial Research Scientist; Prof. James B. Patrick, Chairman, Dept. of Chemistry, Mary Baldwin College, Staunton, Va.; W. T. Schrenk, Ph.D., Rolla, Mo., Chemist; A. W. Laubengayer, Ph.D., Professor Emeritus of Chemistry, Cornell University, Ithaca, N.Y.; Len Greenall, Surrey, B.C., Canada; Albert Schatz, Ph.D., Philadelphia, Pa.

"Fletcher says fluoridation is absolutely undebatable but he has found it to be terribly controversial."



Letters to the Editor

Repeal Fluoridation Appropriation

To National Fluoridation News:

It is just such incidents as the death of a man from fluoride, due to the irresponsibility of the water department in Annapolis, Md., that compel "we the people" to be so concerned about the use of such a potent drug on a mass basis, and about a Congress that would vote \$6,200,000 to promote this. Worse, part of the money is being used to fluoridate rural school children with 5 ppm — 1/3 of what killed this man.

This victim could easily have been you or one of your colleagues, you trusting the hospital to save your life and the hospital trusting a water department employee never to make a mistake. If people overdose on their own, at least it is their own responsibility. They are not killing others.

In my opinion, fluoridation is the most stupid health measure ever promoted. It is even worse than the swine flu fiasco. At least they had enough sense to stop that.

Our government should seriously consider repealing that section of the Labor HEW bill that appropriates money for such a potentially disastrous program.

Isabel Jansen, R.N.
Antigo, Wisconsin

Let us expose to public scrutiny and defeat, the threat of *Regional Government* and Fluoridation to our Heritage of Freedom under God.

Mrs. Eloise Dyer
Newton, Massachusetts

Dentistry School Founder Disillusioned

To National Fluoridation News:

As the founder of the school of dentistry at Fairleigh Dickinson University, I had accepted fluoridation as most Americans do. Then, by chance, I read that water for kidney machines has to be defluoridated. Being prone to kidney ailments, I began to read on the subject. By the time I was through I was astounded at two things:

1. There hasn't been one experiment to prove the efficacy of fluoridation. All the supposed "experiments" show is that fluorides delay the eruption of second teeth. Once the permanent teeth are in, the rate of dental decay is the same for both fluoridated and nonfluoridated groups.
2. The avalanche of studies showing the deleterious side-effects of fluorides is beyond belief.

Fluoridation is the greatest hoax foisted upon the American people. Two groups profit: the companies that sell the fluorides and equipment; the sugar people who sell the idea that you can eat all the sugar you want if the water is fluoridated.

Fortunately, there is an all-inclusive book by George L. Waldbott, M.D. (Coronado Press, Lawrence, Kansas 66044). It's not an easy book to read in view of the scores of medical cases cited, but everyone should read it.

You cannot ask doctors or dentists for their opinion because they follow the distorted Public Health Service and the American Dental Association as my own dental school faculty does. It's parroting without reading.

Peter Sammartino, President Emeritus
Fairleigh Dickinson University
Rutherford, New Jersey

Public Impressed by Cases of Poisoning

To National Fluoridation News:

We find your excellent paper a great help in our struggle against fluoridation in Australia. You no doubt know that we are the most heavily fluoridated country in the world with our population of 14 million 80% fluoridated. We are famous neither for our good teeth nor our good health, but at last the public seems to be impressed by the cases of poisoning which are coming to light now and also by the number of overseas towns, states and countries which are getting rid of fluoridation. We are not much helped by the fact that our newspapers, T.V. and radio are on the whole owned by only four companies, who are very cautious about speaking out against fluoridation.

Mrs. Elizabeth Smythe
Sydney, Australia

Truth Fights Fluoridation

Australian advocates of safe drinking water had found it almost impossible to get their articles and letters to the editor printed in hometown newspapers until *Truth*, a Melbourne weekly tabloid with a circulation of around 300,000 began publishing stories written by Phil Ackman telling of cases of fluoride poisoning. The result of Mr. Ackman's reporting inspired a group of concerned Australians to finance a large ad to run in the Melbourne Age on November 20, 1979 so that its readers would be informed about fluoride. The copy of the ad read:

"The following named persons, concerned citizens of Australia, support the tenacity of reporter Phil Ackman together with the responsibility displayed by the editor of *Truth* newspaper in bringing to the Australian public the disturbing evidence on the dangers of fluoride and fluoridation.

"Fluoride Poisons Queensland Proserpine Children" - *Truth* 10/29/79

Dental Doctor discovered high percentage of Proserpine children with fluorosis (fluoride poisoning).

"Fluoride Poisons Melbourne Children" - *Truth* 10/27/79

Melbourne dental doctor finds high percentage of fluorosis in his Collins Street practice.

"Fluoride Tablets Kill Baby Boy" - *Truth* 11/3/79

Brisbane baby dies after swallowing fluoride tablets.

"School Boy Victimized in School Dental Clinic" - *Truth* 11/10/79

Mother of boy claims victimization because she is opposed to the application of fluoride gel on her son's teeth.

543 names were listed on the lower two thirds of the ad.

Mr. Ackman authored another story in *Truth* on December 8, 1979. Excerpts from the article:
Millions of Australians are risking an overdose by taking fluoride tablets in cities and towns where the water supply is fluoridated. And pregnant women are in more danger than anyone.

This is the opinion of the Australian Dental Association which has warned the 10 million Australians living in fluoridated areas not to take fluoride tablets.

Rapping Australia's pharmaceutical industry, the Dental Association's fluoride committee chairman, Dr. Gavin Oakley said: "All chemists should know that particular kind of drug shouldn't be available in fluoridated areas.

"It shouldn't be sold to people. Drug manufacturers should—if they're going to put fluoride tablets on the shelves—have a big notice saying 'Not to be taken in fluoride areas.'"

Dr. Oakley's warning follows a *Truth* finding that at least five brands of fluoride tablets are on sale throughout fluoridated Melbourne. Directions on the packets single out pregnant women for the largest recommended dosage levels. Two of the brands—both readily available in Melbourne—recommend pregnant women should take 1½ tablets daily. None of the labels warns they should not be taken in fluoride areas.

Dr. Oakley, who led the drive to fluoridate Melbourne, said he would not advise pregnant women to take fluoride tablets. He said, "What happens in the case of pregnant mothers is very complex and people who took fluoride tablets and also drank fluoridated water were getting twice the recommended dose."

He warned they would be increasing the risk of developing mottling of the teeth which most experts say is the first symptom of fluoride poisoning.

Dr. Oakley said, "I would advise that parents in fluoridated areas should no longer give their children fluoride tablets. For the overall safety situation they shouldn't."

Regional Government and Fluoridation

To National Fluoridation News:

On March 27, 1969, former President Nixon divided the United States into ten Federal Regions, and assigned a capitol for each Region, under the President's Order 11647. It was later discovered that this Order had been set up incorrectly, and was *unconstitutional*. On July 20, 1979, (10 years later), President Carter issued Executive Orders 12148 and 12149, replacing President Nixon's Order, and establishing with all necessary authority, the powerful enforcement arm of *Regional Government*.

In *Regional Government*, groups of ten Administrators, ten Directors, etc., are appointed to supervise these ten Regions. Please note that these Regional Governors are *appointive* officers, selected by the Federal Government. They are not *elective* officials, chosen by the people, or elected by the voters in accordance with our Constitution which provides: "The PEOPLE alone shall institute Government."

There are also ten Regional Directors of Nationwide Fluoridation. Unfortunately, this Nationwide Fluoridation Program is being used as a cover-up to put *Regional Government* into operation. This Billion-Dollar Boondoggle is using the taxpayers' money to take their Government away from them, but with such incredible secrecy that the people will know nothing about this until it has become a fact, and then too late to prevent the destruction of our Republic.

For the past thirty years, our Government has expended billions of tax dollars in the aggressive promotion of artificial fluoridation.

Good News and Bad News in New Bedford

New Bedford, Massachusetts voters held a second referendum on fluoridation on November 6, 1979 with the following results:

Opposed to fluoridation	20,181
Continue fluoridation	9,912

Voters were asked whether they wanted fluoridation to continue. Fluoride was first put into the water system in February 1978, and that action has meant controversy and court cases ever since.

The *Standard-Times* of New Bedford had this to say about the victory: "Mayor John A. Markey, reacting to the overwhelming victory of fluoride opponents in yesterday's referendum, said today he is ordering an end to the fluoridation of the city's water supply.

"Markey said he is notifying the Water Department to stop putting fluoride in the water, and expects an end to fluoride in 'two or three days. Whatever is in the tank now will be the end of it. As soon as that's gone, that will be it,' he said.

"Ronald A. J. DeMello, head of Citizens Rights and State

Health, Inc., said he was 'excited, ecstatic' with the vote. 'The people of New Bedford have spoken loudly and clearly. They do not desire to have fluoridation in their water supply. The vote is wonderful — it shows what can be done if you educate the people properly,' DeMello said.

Bad News. New Bedford Standard Times, Nov. 12, 1979

"New Bedford cannot stop fluoridating its water despite what voters decided in Tuesday's election.

"Mayor John A. Markey said yesterday a court order keeps fluoride in the water, while a Superior Court judge hears a challenge to the legality of the referendum question on the Tuesday ballot.

"The constitutionality of the fluoridation referendum has been challenged by the Massachusetts Dental Society and 16 New Bedford residents. On Oct. 26, the group lost its bid to halt the referendum. Five days later, however, Judge Joseph D. Clancy ruled that the city could not stop fluoridation while a dental society lawsuit is pending.

"The state Legislature and the governor this past summer signed the special act permitting the referendum."

Dutch Doctor Describes Hazards of Fluoridated Water

H. C. Moolenburgh, M.D., tells of symptoms, case histories, and warns of poison at large

Dear Editor,

I was really shocked about the \$6,200,000 appropriation for the promotion of fluoridation, and yet perhaps here comes a big chance. I read in your last *Fluoridation News* that many small towns are expected to introduce fluoridation out of pure ignorance. Now this is my advice: You should carefully select a town that is introducing fluoridation and set up an independent medical research group in that town. See to it that no one from the fluoridation lobby worms his way into your research group, and make sure that your group consists of people with absolute integrity. This will not be so easy as it sounds, since fluoridation people have been known to masquerade as opponents and thus play havoc with your plans.

As soon as fluoridation starts, check carefully to see if it has indeed started. I know of several instances where the authorities said that fluoridation had started just to provoke people into complaining and then laughing them to scorn.

The first thing we saw in Amsterdam was a flood of small white ulcers in the mouth, called stomatitis aphthosa. This need not be the case. Every water supply is different and fluoride opens the door to other pollutants and thus the thing you see may be a combination, caused indeed by fluoridation, but not only caused by fluoride.

Three gastrointestinal cases

In the weeks after that we saw a lot of complaints, and some of those cases I will describe here just as I did at the Symposium on October 3rd in Pretoria. (See *NFN*, July-Oct. 1979.)

First, we saw people with gastrointestinal complaints. I mention three cases:

A. A sixty-year-old doctor of our research group looked very white and gloomy. We asked him if he did not feel well, and he confessed he had a slowly increasing pain in his abdomen during some months and that he was afraid he had cancer. One of us, more as a joke, said: "Tom, fluoridated water!" He replied, "Stuff and nonsense. That does not happen to me." (We were still in the stage that the doctors only half-believed there were side-effects at all.) I said, "Just you try taking nonfluoridated water, Tom!" He tried and was healed in three days. But a week later his complaints suddenly returned. He did not understand why until he discovered that coffee made with fluoridated water which he drank during a delivery was the culprit. (In Holland many women have their babies delivered at home attended by the local family physician.) His complaints never returned.

B. A five-week-old baby started crying and cried on and on, day and night. It was taken to the hospital where nothing could be found wrong with the child. It went on crying after returning home and was in pain from something. After some weeks, when the parents were frantic with despair, I suggested nonfluoridated water. (This baby was not in my practice, and the parents only heard about our research when the illness of the child had continued for several weeks.) With nonfluoridated water in the bottle the baby changed overnight to a sweet, contented child, and stayed that way.

C. A fourteen-year-old girl in my practice got colicky pains in her stomach. They were so bad that she could not go to school. I suggested nonfluoridated water and had some difficulty persuading the parents what nonfluoridated water was, since they had not known that their water supplies were being doctored during the last two weeks. The girl immediately had no more pain, but on a Sunday morning it suddenly came back. The father said, "Not fluoridation water after all." I said, "Think carefully." Suddenly he began to laugh and said, "You're right, doc, I remember bringing up the tea this morning and making it with tap water."

In the second place we encountered respiratory complaints.

Here is a case history. A boy, Michael, two weeks old was taken to the doctor because his breathing was not right. The mother had three older children. She said, "His breathing is different from the other ones. It is labored."

Neither the doctor nor the specialist could find anything wrong. The breathing grew steadily worse. As I am very interested in allergy, this boy was brought to me when he was five months old. Here was typical asthmatic breathing, and the child was not so bright and kicking as might be expected from a healthy baby. He looked a little bit drowsy. I suggested nonfluoridated water in the bottle to begin with, and in three days time the child was healed. The complaints never came back. I personally demonstrated this case for the Committee of Health during a hearing about fluoridation at the Municipal Council of Haarlem. The boy is now 11 years old and absolutely healthy.

Old allergic complaints return with fluoride

Generally speaking, allergic children showed a tendency to fall back into old allergic complaints or to show severe worsening of still existing complaints when using fluoridated water.

For instance, there was a ten-month-old boy in my own practice who had been healed from getting allergic eczema by changing the cows' milk in the bottle for soy milk. Three days after the introduction of fluoridation the eczema was back all over the skin (without cows' milk!) and only healed after tap water had been thrown out. This case was demonstrated by me at a press conference just prior to the vote on fluoridation in the city of The Hague.

Apart from skin troubles, gastrointestinal complaints, and respiratory illnesses, other troubles of these first months of fluoridation were headache, excessive thirst, and a general feeling of being unwell and difficulty in concentration. The problem with all these complaints is that they are so



Dr. Hans C. Moolenburgh, a family physician, was born in the thousand-year-old city of Haarlem, Holland, on June 28, 1925. His father was a famous public prosecutor who later became Director General of the Dutch police forces.

Dr. Moolenburgh lived through five years of German occupation and had some narrow escapes from being caught in razzias (raids) for slave labor in Germany.

His medical studies started in 1943, but because Dutch universities were closed, he had to study underground. He said: "This sort of thing was well organized by brave university professors and students who risked their necks for this insubordination." He finished his medical studies at Leyden University in 1952 and after spending just over a year in military service, he became a family physician in Haarlem. He said, "I am still here after 27 years of practice, which is rather fun as I see the babies I helped come into this world having babies of their own, which makes me a sort of grandfather in my own practice."

He continued: "In 1968, when they wanted to fluoridate Haarlem, I became involved in the fluoridation battle. At first only in my own city where we turned the tide, but later I became chairman of the Foundation for the Protection of Personal Integritty. This was one of the two foundations that fought fluoridation. We won the battle for the whole of our country in 1976 and thanks are due to a TV presentation by Dr. Dean Burk about two weeks before our House of Commons had to vote on this question."

During the fluoridation period Dr. Moolenburgh was chairman of a group of biologists and family physicians who looked into the side effects of fluoridation. He wrote a book about fluoridation which helped citizens to familiarize themselves with the facts they had not been told.

He added: "I have been married to my wife, Ann, for 28 years and am still in love with her. We have five children. The eldest is a doctor in a mission hospital in Lesotho, the second one will be a doctor in January, the third is in his fourth year of medical studies. My daughter is studying to be a nurse. One boy, eleven, is still at home."

common and can be caused by such a variety of other influences that you will not recognize them during your consulting hour as being caused by fluoridation unless you know that this can be the case. In an industrialized society, general health is not good and vague complaints abound during a crowded consulting hour. Fluoridation victims can very easily be missed, especially so when the leading medical journals have told doctors that side effects are only a fairy tale. And yet, when you recognize these complaints, you can heal these patients in a couple of days with nonfluoridated water, and you can be proud that you made a correct diagnosis and effected a real healing.

Another difficulty with these fluoridation poisonings is that a certain percentage of the people will in due time adapt to the poison. This means that their bodies are in an uneasy equilibrium and that this equilibrium is disturbed the complaints will come back with a vengeance. How can this equilibrium be disturbed?

By an intercurrent other illness, or by a psychological upheaval, by severe exhaustion, and strangest of all, by leaving the fluoridated region. Suddenly withdrawing the fluoride gave withdrawal effects in some patients at least as severe as the primal effects of fluoridation. Fluoride acts for many people like a drug, a tranquilizer for instance, or a pain-killer. People accustomed to these drugs can also show severe withdrawal effects when suddenly ceasing medication. This is one of the things your research team should absolutely know. It took us a year before we understood these cases.

Arthritis-like complaints

There is one side-effect that comes much later and goes away much slower, and that is the arthritis-like complaints. They are mostly located in the lower part of the back and in the small finger joints. One lady, the wife of a KLM pilot, was nearly crippled with these complaints, and because even small amounts of fluoridated water were enough to keep

the illness going she eventually had to move to a nonfluoridated region. The arthritis shows itself after several months and takes several weeks of nonfluoridated water to subside. And here again the proof of the pudding is in the eating. There are lots of arthritis cases not caused by fluoridated water. If, as a doctor, you are not aware that such a thing is possible, you will never find it.

And of course, when you choose a town, you can right from the start control your whole experiment and confirm the findings of both Drs. Dean Burk and John Yiamouyannis in their cancer research and Isabel Jansen in her heart research. In short, turn the scales against your enemies by using their grants (and fluoridation) for your research. And see to it that some independent newspaper is in it from the start.

Double-blind tests

There is one thing I should like to add. As you know, we did research with the help of double blind cases. This was to prove our case, though, for me, clinical proof was enough. These people became quite ill during these double blind cases, and I felt the procedure was dubious from the standpoint of medical ethics.

Some of the cases were directed to the allergists in our group. These cases had been through double blind tests. It had been scientifically proved that fluoride caused the complaints. And yet our allergist said, "I cannot find an allergy!"

Low-grade poisoning

It was only after correspondence with Dr. Waldbott that this error in our research was detected and eliminated. What we were seeing was not allergy (a strange reaction of a certain individual from some compound), but low-grade poisoning. This is extremely important. When, during the hay fever season, the pollen concentration in the air increases a millionfold, only those allergic to pollen will begin to sneeze. With poisoning, you have a different proposition. When you slowly increase the concentration of the poison, more and more people will show side-effects until at last everybody will be ill (and the most sensitive will be dead).

And this is the case with fluoridation. Those people showing ill effects are the most sensitive ones in the population. They can be compared to the little birds that coal miners take with them into the mines. These birds are extremely sensitive to small amounts of mine gas. When the birds begin to suffer, the miners are warned of the danger. These people who have adverse reactions to fluoridated water (between 5% and 6% of the population) are like those little birds. They warn the population that there is a poison at large and that they should avoid it, or as can easily be done here, get the poison out!

H. C. Moolenburgh
Haarlem, Holland

Secret Spill

(Continued from Page 1)

● The leak into the Annapolis water system is not the first such leak in the country, although it is the worst and most widespread.

In October 1977, it was reported that eight times the recommended amount of fluoride had leaked into the water system in five towns served by the Marin County (Calif.) Municipal Water system. There were no deaths or illnesses attributed to the accident.

In April 1974, elementary school students in Stanly County, N.C. became ill within minutes of drinking orange juice mixed with water at the school, according to the Morbidity and Mortality Weekly Report, issued by the public health service on June 1, 1974.

It was learned that an extremely high amount of fluoride, which was routinely added to the water supply at the school, had flowed into the system when a pump malfunctioned. All 213 persons at the school experienced nausea.

The American Dental Association News, a staunch supporter of artificially fluoridated water, featured articles of the Annapolis fluoride overdose. In the December 10, 1979 issue the story was headlined "Excess fluoride in dialysate linked to patient's death. Drinking of fluoridated water not a factor." The opening paragraph in one of two stories in the December 24 issue read: "Baltimore—State medical examiners here said they fear the accidental discharge of fluoride in Annapolis and the related death of a kidney dialysis patient will be misused by opponents of fluoridation as indictment of its use in community water systems."

The spill did not receive media coverage. The Associated Press and United Press International carried the story and it was used mostly in eastern newspapers and TV stations, particularly in the Annapolis area.

Massachusetts Town Will Not Fluoridate

The Board of Health of Tewksbury has decided not to pursue fluoridation. Michael Daley, Chairman of the Board said, "We feel that sufficient numbers of people are not in favor of it."

The decision was made after months of debate whether fluoridation of water is a dental benefit, or harmful after long term consumption. The controversy also centered on the right of the individual to make his or her own choice.

Massachusetts health boards are empowered to order fluoridation under state statute, but health officials in Tewksbury as well as other Greater Lowell communities have been reluctant to act against the vocal public opposition.

Japanese Re-evaluate Fluoridation

The re-evaluation of fluoridation as a public health measure for the prevention of dental caries has been proposed recently by the Japan Housewives' Association and the Japan Consumers' Union. This proposal was scientifically supported by the Japanese Young Dentists' Federation, Committee for Judging Mottled Teeth and the Peoples' Movement for Surveillance on Drugs.

Excerpts from the proposal:

Recently, a dispute over the possibility of prevention of caries by fluoridation has been aroused in many countries. This dispute is growing into one of the grave social problems concerning the situation of medicare and of human rights of the peoples in the world.

Fluoridation for the prevention of dental caries was initiated in the United States in 1945 and spread to other countries. However, in 1961, the Swedish High Court decided that water fluoridation was illegal and subsequently the pilot test of fluoridation in Sweden was discontinued. Later, in 1973 the Dutch High Court also made a decision of illegality of water fluoridation and all of the pilot tests at 15 places were discontinued by 1976.

West Germany, Belgium and Portugal once had pilot projects in one or more districts, but all of these have been discontinued. Only Finland and Switzerland still have one pilot test each. However, Austria, Italy, Spain and Greece never had a pilot program. Therefore, there is no water fluoridation in democratic countries in Europe with the exception of Britain and Ireland.

Editor's note: The Japanese proposal answered the resolution of the World Health Organization (WHO) which recommended fluoridation at its 22nd General Assembly in 1969.

Re-examination and statistical re-analysis of available data on the relation of fluoride and dental caries revealed the following facts:

- a) In Dean's original survey, dental fluorosis begins to increase at the level of 0.3 ppm of fluorine in drinking water. On the other hand, caries decreases in a linear dose-response relationship on a logarithmic scale. As there is no gap between effective and toxic levels of fluoride, there is no reason to establish the concept of "optimum" level of fluorine.
- b) Statistical analysis of data confirmed the various harmful effects of fluorine at the level of 1 ppm which is usually accepted as optimal.
 - i) Dean's original survey shows that seventeen percent of children suffer from mottled teeth, excluding questionable cases, at 1 ppm fluorine in drinking water.
 - ii) Evanston data, reported by Hill, reveal that fluoridation delays the eruption of permanent teeth.

- iii) Water fluoridation in New Zealand resulted in morphological changes in the teeth.
- iv) Newburgh-Kingston data by Schlesinger reveal delay in ossification and an increase in cortical defects of tubular bones.
- v) Water fluoridation in Basel, Switzerland, reported by Ritzel, resulted in a decrease in protein iodine (PBI) which corresponds to hypothyroidism.
- vi) The classical evidence of Down's syndrome raised by Rapaport and allergy by Waldbott and the recent report by Burk and Yiamouyannis on increase of cancer mortality in older groups should be considered.

From the above-cited facts the endorsement of WHO, that controlled fluoridation of drinking water at the optimal level produces no harmful effects, is proved to lose its ground

The local application of fluoride by mouth rinsing, painting or tooth paste is not yet confirmed on its effectiveness for prevention of dental caries by an adequate method, e.g., by a controlled study using the double blind method and also subtraction of the effect of swallowed fluorine

Fluoridation as a procedure for the prevention of caries was introduced in Japan at Yamashina district from 1952 to 1963 with the cooperation of the University of Kyoto. The evaluation of its result by the government was that neither negative nor positive proof had yet been obtained.

Stimulated by the recommendation of fluoridation by WHO in 1969, Niigata University tried to tempt the Niigata Water Supply Authorities to fluoridation. However, Mrs. Mitsue Tani of the Research Association on Foodstuffs in Niigata entertained a doubt on its safety and succeeded in stopping water fluoridation.

People ask for their rights

In 1971, two years after WHO's recommendation, a large amount of fluorosis among school children at Takarazuka City, near Kobe, was protested and the people rose to act for recovery of trampled rights and relief of injured health of children. At this time, the authorities in the field of oral hygiene unreasonably negated the causal relation between the mottled teeth observed and the fluoride in their drinking water.

Then young dentists stood up for the defense of children from mottled teeth, organizing themselves into the Young Dentist's Federation.

In 1975, just after WHO's second resolution on fluoridation, the Niigata University promoted mouth-rinsing by fluoride solution among the school children, obviously with the intent of conducting preparatory education on water fluoridation.

The fluoridationists expanded the fluoridation plan from

Niigata Prefecture to all districts of Japan. Thus analyzing the situation of fluoridation, it has been revealed what the true character of fluoridationists is and also what should be done for prevention of teeth caries based on the facts and scientific truth.

The fluoridationists in Japan have scarcely performed the survey and research on the effects of fluorides on the Japanese, but have built up their idea completely on the basis of data from foreign countries, especially from the U.S.A. and the resolution of the authoritative WHO, sometimes stressing only the favorable points and applying those formally to the Japanese living under the different environment and with the different biological properties.

Japan, which has many volcanos, has many districts of endemic fluorosis and a good many of the people living in these districts are exposed to the danger of fluorosis because of softness of water and consumption of green tea and seafoods containing a large amount of fluoride.

76% mottled teeth at 1 ppm

Recently, Fuji and Asano of the Department of Dentistry, University of Tohoku, collected 14 papers on the relation of the concentration of fluorine in drinking water in Japan to the incidence of mottled teeth at the lower level of fluorine in water: 30% at 0.1 ppm, 56% at 0.5 ppm and 76% at 1.0 ppm.

The report by the Experts Committee on mottled teeth in Takarazuka City recommends the new level of fluorine in drinking water below 0.4 or 0.5 ppm in place of the previously authorized level of 0.8 ppm in Japan. It can be mentioned that about 60% of mottled teeth is observed in this city even at the newly recommended level of fluoride. In December 1977, Dr. David E. Barmes, the chief of the Dental Health Unit of WHO, visited Takarazuka City and confirmed mottled teeth in several middle school children living in the area with the level of fluoride in drinking water below 0.5 ppm. Under such a situation, even mouth-rinsing with fluoride solution by the school children is nothing other than illegal human experimentation.

In November 1977, prompted by anxiety because of the seriousness of increasing caries and the spreading of fluoridation, over thirty consumers' and scientists' groups in Japan organized themselves in a Union of Healthy Teeth Promoting Groups against the fluoridationists. Their criticism was that fluoridation is not a prudent policy for the prevention of caries and that there are many other things left to do for the promotion of healthy teeth in children.

We ask the Members of the International Organization of Consumers' Unions to consider our proposal requesting the IOCU to have the International Committee re-evaluate fluoridation as a public health measure for the prevention of dental caries under the sponsorship of the IOCU.

The Word is No in Jersey City

"Health agency to spread word on fluoridation" was the headline in the Jersey Journal of August 31, 1979. The Hudson Health Systems Agency didn't spread the word very well because four of the five New Jersey municipalities voting in the November 6, 1979 election said No. Only Hoboken said Yes, by a mere 22 votes.

The results:

	NO	YES
East Hanover	1,198	817
Hoboken	2,028	2,050
Jersey City	12,699	11,293
Lyndhurst	3,422	1,457
West Caldwell	1,436	1,104

The Jersey City fluoride experience began in September 1973. The City Council brought up the fluoridation question in the form of a resolution, rather than an ordinance, which meant no public hearing would be necessary. The Council voted 8-1 to fluoridate. The nearby communities of Hoboken, Lyndhurst, Montville, North Arlington and West Caldwell which purchased their water supplies from Jersey City had no voice in the decision. Montville and North Arlington arranged to buy their water from other sources to avoid fluoridation.

Installation problems delayed the flow of fluoride in the water system until December 1974. In 1978 a group of senior citizens presented a petition to the Council asking that fluoridation be discontinued because of its deleterious effect on their health. The senior citizens later proved to be a formidable political force.

Public Hearing

A public hearing was held September 12, 1978. The administrator of the N.J. Dental Health Department, the President of the Hudson County Dental Association, the health officer of Jersey City, the chairman of Citizens for Better Dental Health and several representatives of the N.J. Dental Association all spoke highly of the safety and benefits of fluoridation.

John Yiamouyannis, Ph. D., Science director of the National Health Federation, Casimir R. Sheft, D.D.S., President of the N.J. Citizens Opposing Forced Fluoridation, two members of COFF and several Jersey City citizens told of the hazards and folly of fluoridation.

Council's Decision

The testimony lasted well over six hours and when it ended the Council voted to stop fluoridation immediately with a proviso that a non-binding referendum be held in the November election. The Council's decision came too late for the November 1978 election so the question was postponed until the November 1979 balloting.

High Pressure Campaign Begins

The promoters planned a year long campaign. The Hudson Health Systems Agency, an arm of H.E.W., moved in with paid workers and recruited others to raise funds. According to reports Colgate-Palmolive Co., which is located in Jersey City, gave \$20,000. In addition the NJPHS gave the New Jersey Council of Dental Health \$15,200 to promote fluoridation throughout the state and it is assumed part of this grant was used in Jersey City. The New Jersey and Hudson County Dental Associations each gave \$5,000. In the spring the Hudson HSA established a task force to coordinate a city-wide public educational program. A speakers' bureau training committee was organized and in September and October members of the speakers' bureau addressed community, civic and professional groups on the safety of fluoridated water. Speakers included Jersey City dentists, college professors, consumers and HHS board members.

COFF Prepared Fliers and Ads

Lacking the financial, political and press support available to the promoters, the COFF felt the odds were against them. They prepared fliers for distribution throughout the city by neighborhood groups and ran four quarter page ads in the two Jersey City newspapers featuring a letter written to the Mayor of Auckland, New Zealand, by Judge John P. Flaherty, Jr. of the Common Pleas Court of Allegheny County, Pennsylvania, in which Judge Flaherty wrote: "In my view the evidence is quite convincing that the addition of sodium fluoride to the public water supply at one part per million is extremely deleterious to the human body, and, a review of the evidence will disclose that there was no convincing evidence to the contrary. Since my decision, I have received hundreds of letters, quite a few of which have been sent by physicians and dentists, all concurring with my decision." COFF also had the expertise of John Yiamouyannis who appeared on two New York City radio programs.

Kansas City, Missouri, Will Vote Again

Fluoridation is again showing its hydra head in Kansas City. On September 13, 1979 the City Council by 12-2 voted to reinstate fluoridation of the city's water supply which had been discontinued since 1964 after a two-year trial when the question was brought to a public vote and lost by about 5,000 votes.

Councilman Emanuel Cleaver, sponsor of the ordinance, said, "We have an obligation to do what is best for our children." He pointed out that cost is no argument against fluoridation. The city still has the equipment from the 1960 trial which would require about \$30,000 in renovation - and

Two Vermont Towns Vote Against Fluoridation

Wallingford

Wallingford residents voted two to one on July 25, 1979 against fluoridation of the local water supply, reaffirming a vote earlier this year. The vote was 75 to 33.

Judy Kennedy, president of the Wallingford PTA and mother of six children, headed a petition drive aimed at reversing the vote against fluoridation in early May.

The major objections to fluoridation voiced during the vigorous half-hour discussion which preceded the secret ballot were concern over the possible health hazards involved and infringement of individual rights.

St. Albans

At the town meeting in St. Albans on March 13, the residents rejected fluoridation by a vote of 876 No to 733 Yes.

Wisner, Nebraska

"The nation's democracy spoke out loud and clear in this community of 1,300 as Wisner voters soundly defeated the fluoridation issue. In the controversy over the past seven months, citizens claimed their rights were violated by not being given the opportunity to vote on the matter. That right was exercised Tuesday, November 13, and the democratic society lives on," reported the Wisner News-Chronicle on November 15, 1979. 298 were opposed to fluoridation and 145 were not.

In April the city council approved an ordinance to fluoridate the city's water supply so that federal funding could be applied for.

A local committee organized by Coleen Eddington, obtained signatures on an initiative petition circulated around the community.

Tuesday's vote marked the second time in the past five years that Wisner voters have defeated fluoridation. In November of 1974 the vote was 279 to 149.

the annual chemical cost is a modest \$50,000.

A drive was immediately launched to obtain more than the 12,627 valid signatures of registered voters on a petition to place the matter of fluoridation on the ballot.

Dr. Allen C. McCone, a veterinarian, and Executive Director of the Safe Water Foundation of Kansas City, delivered more signatures of registered voters than needed to the City Clerk on November 13.

The City Council has not as yet set the date for the referendum, but Dr. McCone thinks it will probably be in August or November 1980.