

Science Policy Journal Gives Detailed Account

In November 1979, a highly qualified ten-member inter-disciplinary advisory committee to the Ministry of the Environment in Quebec Province, Canada, submitted a comprehensive report on "Fluorides, Fluoridation, and Environmental Quality" which, on the basis of a careful study of available data, recommended that "water fluoridation be suspended indefinitely." (For story, see *National Fluoridation News*, Jan.-March 1981).

Now, according to an article in the June 1982 issue of *Science and Public Policy* (pp. 130-142), "that recommendation has been accepted pending legislative change." This prestigious bimonthly journal, published in London, England, by the non-profit Science Policy Foundation, includes many distinguished scientists and leading personages among its honorary fellows and advisory board members. In the present article, Dr. J. B. Bundock, chairman of the Quebec Advisory Committee on Fluoridation, J. R. Graham, a well-known Minnesota anti-fluoridation attorney, and Dr. P. J. Morin, one of the scientist members of the Committee, recount how the report came about and present its principal findings and conclusions.

They also point out that at the present time the Quebec Provincial Government's "Bill 88," which in June 1975 ordered fluoridation in all municipalities, "is not enforced in Quebec." Moreover, they note that

"The members of the Committee were disturbed to find that the evidence of cancer causation by water fluoridation had to be brought before a court of law before a proper confrontation of data and scientists could be made."

all financial assistance to communities for fluoridation "has recently been suspended."

Included in the article are many details of the findings and recommendations of the Committee report. Among these are various problems arising from the continued growth of industrial fluoride emissions; the considerable increase in the fluoride content of commercial food products, especially those prepared with fluoridated water; the adverse effects of fluoride pollution on the quality of plants, animals, soils, water, and air; the symptoms and nature of chronic fluorosis from such sources in animals and man; the highly dubious character of most anticaries claims for fluoridation; mounting evidence for fluoride damage to chromosomes, reflected, for example, in elevated incidence rates of Down's syndrome births (mongolism) in fluoridated communities; significant increases in cancer death rates in major U.S. cities following the start of fluoridation; and unrefuted medical reports of serious human intolerance to fluoridated water.

Besides expanding and commenting on these items, the article reveals the Committee's deep concern about the manner in which such inimical findings have been treated by most dental and public health officials. For example, "the members of the Committee were disturbed to find that the evidence of cancer causation [or increase] by water fluoridation had to be brought before a court of law before a proper confrontation of data and scientists could be made. They were also worried when they noted that although the presiding jurist in Pittsburg[h] found the evidence clear and convincing, there has not been, as one would have expected, a re-evaluation of the situation by various bodies and agencies having endorsed water fluoridation and fluoride preparations in general. To the members of the Committee, the inference would be that this is because such organizations are not publicly accountable."

Appearing as the conclusion to a major article in such a respected journal as *Science and Public Policy*, these are indeed sobering reflections with ominous implications!

Something in the Wind

Too Much Fluoride Acknowledged

For years critics have warned that fluoridation of drinking water causes excessive, toxic levels of fluoride intake through incorporation in food and beverages as well as the water. Now, as mentioned by Myrtle Sapora in her article on "The Fluoridation Controversy" (page 2), a recent issue of the weekly journal *Science* (2 July 1982, pp. 26-30) carried a feature article on "Fluorides and the Changing Prevalence of Dental Caries" which acknowledged that present levels of fluoride in fluoridation are producing more than twice as much dental fluorosis (28 vs. 12 percent) as originally expected, and therefore "the optimum concentration of fluoride in community water supplies needs to be reassessed."

Prepared by Dr. Dennis H. Leverett, chairman of the Department of Community Dentistry, Eastman Dental Center, Rochester, N.Y., this article obviously represents an "authoritative" viewpoint on the questions it addresses. It begins by acknowledging that refined sugar is the primary cause of tooth decay. In the author's words: "availability of sucrose in the diet is clearly the key factor in dental caries initiation."

He points out, for example, that when sugar con-

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"You Don't Suppose the Light at the End of the Fluoridation Tunnel Has Blown It's Fuse?"



The WHO-IARC Monograph 27 (1982) Cover-Up of the Water Fluoridation-Cancer Link

A Brief Preliminary General Statement

By Dean Burk



Dean Burk is an internationally-known author, editor, researcher and contributor to numerous technical journals. His many achievements and honors are given in *Who's Who in America* and *Who's Who in the World*.

Monograph 27 of the International Agency for Research on Cancer (IARC), of the World Health Organization (WHO), was issued in April 1982 under the title of "Evaluation of the Carcinogenic Risk of Chemicals to Humans," following upon a meeting of an IARC Working Group in Lyon, France, on February 10-17, 1981. Copies have recently become available in London at the Chester Beatty Cancer Research Institute, and so far away as Melbourne, Australia, at the Anti-Fluoridation Association of Victoria. Printed in an edition of 4000 copies, individual copies may be obtained from the WHO Distribution and Sales Service, 20 Avenue Appia, 1211 Geneva, Switzerland, for twenty-five dollars (ca. £15).

The sections of Monograph 27 specifically devoted to fluorides and fluoridation (as distinguished from "Some Aromatic Amines, Anthraquinones and Nitroso Compounds") comprise (1) "Inorganic Fluorides Used in Drinking Water and Dental Preparations" (pp. 237-270); (2) "Biological Data Relevant to the Evaluation of Carcinogenic Risk to Humans" (pp. 271-303), including (a) "Carcinogenicity Studies in Animals" (p. 271), (b) "Other Relevant Biological Data" (pp. 272-278), and (c) "Case Reports and Epidemiological Studies of Carcinogenicity in Humans" (pp. 279-287), followed by "Table 16. Summary of Epidemiological Studies Considered" (pp. 288-291), "Summary of Data Reported and Evaluation" (p. 292), and "References" (pp. 293-303).

Table 16 and the References are grossly incomplete with respect to the positive fluoridation-cancer link for the period after 1977, and are clearly selected with obvious great bias, and fail to consider a vast body of recent pertinent scientific evidence rather widely known to workers in the field, many of whom have participated personally in the extensive public Hearings held and published by various U.S. Congressional House and Senate Subcommittee reports (e.g., Fountain House report published early 1978, 560 pp.); various International Symposia; four legal Court cases (Pittsburgh, Pennsylvania, 1978; Alton, Illinois, 1980; Houston, Texas, 1980-1982; Edinburgh, Scotland (1980-1982), all yielding a total of some 25,000 pages of testimony, most of which has been available by purchase or otherwise, at costs trivial in comparison with those involved in producing Monograph 27. In all these Court cases, the testimony was taken under oath with extensive cross-examination. In the decisions already available, in the

first three-named Trial Courts, the artificial fluoridation-human cancer link (association) was supported either totally or by preponderance of evidence.

In addition, the Province of Quebec, after extensive investigation over a period of years, has since 1979 instituted a moratorium on any further public water fluoridation in that Province, and has more recently curtailed or eliminated any Provincial funds for a small pre-existing fluoridation of some 13 per cent of the Provincial population, these actions being taken largely on the basis of health and cancer risk increases. South Africa has essentially followed suit. In 1976 the Dutch Government by Royal Decree, following Parliamentary consideration and earlier Supreme Court action, banned all public water fluoridation in Holland, the final action having been based largely upon the demonstrated increase of cancer risk.

In spite of the foregoing government and Court actions, and others not listed herewith, IARC Monograph 27 offered as its final conclusion (p. 292):

"When proper account was taken of the differences among population units, in demographic composition, and in some cases also in their degree of industrialization and other social factors, none of the studies provided any evidence that an increased level of fluoride in water was associated with an increase in cancer mortality" (emphasis added).

The assertions made in all of the lines of this conclusion have been refuted as untrue many times in the Hearings, Symposia, and government reports cited in the third and fourth paragraphs of this brief general statement, for full details of which the IARC Working Group must be referred. The herewith exposed cover-up attempted in IARC Monograph 27 indicates that this Monograph is aimed mainly at the uninitiated and unsophisticated readers rather outside the field, and at ostensibly innocent and uninformed legislative, administrative, and bureaucratic personnel.

On p. 12 in the Preamble of Monograph 27, it is stated that, "The IARC Monographs are recognized as an authoritative source of information on the carcinogenicity of environmental chemicals." It would appear, however, that Monograph 27 constitutes a regrettable exception to this claim of authoritativeness in the matter of the fluoridation-cancer link in humans. It would also appear that the WHO would be well-advised to revise its Working Group staff to include more investigators working directly in this field. In any event, caveat vendor as well as caveat emptor, as Cicero intimated long ago.

Postscript:

IARC Monograph 27 follows in the tradition set by the Royal College of Physicians in its January 1976 Report, "Fluoride, Teeth and Health" (Pitman Medical Publishing Co., Turnbridge Wells) that wilfully omitted consideration of the first published reports on the artificial fluoridation-human cancer link, which had indeed been made available to it. A fairly complete history of this suppression has been often documented over the years since then by the National Anti-Fluoridation Campaign and very recently recapitulated in its Circular 2760/3 (Aug. 30, 1982).



Albert Schatz, Ph.D.,

At the age of 23, Dr. Schatz discovered the antibiotic streptomycin. This compound was the first effective drug for the treatment of human tuberculosis. Because of this and other outstanding scientific contributions in agriculture and human health, Dr. Schatz has been awarded honorary degrees and titles from five Latin American Universities. Dr. Schatz lived in Chile three years, from 1962 to 1965. During that time, he served as a Professor at the University of Chile.

This is not a book review. No book review could, in the short space that is available, even begin to do justice to Glen Walker's book. I can therefore only comment on it. My comments follow.

Cheating in science has become an increasingly serious problem. This cheating occurs in different ways. Some scientists, for example, publish research reports in which they present only those experimental data that support whatever conclusion they want to justify. Other scientists change their data to suit their needs, or simply make up data out of thin air. In the latter case, they don't bother to do experiments.

Thus, there is fraud in science. This fraud has been shown to occur in some of the most reputable laboratories and institutions, and has been published in some of the most reputable scientific and professional journals. Common sense tells us that the fraud which has been uncovered is only the proverbial tip of the iceberg. None-the-less, the scientific establishment naively assumes that such fraud occurs only in isolated instances and is therefore not widespread. Scientists also believe that research has a built-in mechanism for self-correction because researchers can check on what is published and in that way uncover errors. Then, it is assumed, truth will out.

Glen Walker's book shows that that is true in the case of fluoridation. But fluoridation still continues, even though it is a scientific fraud. Indeed, fluoridation is the greatest and potentially the most dangerous medical hoax not only of the present century but of all time. In other words, it is the greatest fraud that has ever been perpetrated and it has been perpetrated on more people than any other fraud has. Moreover, despite the overwhelming evidence that Glen Walker presents to justify the conclusion that fluoridation is a fraud, the fraud goes on. So, in this

FLUORIDATION POISON ON TAP

By Glen S. R. Walker

Comments by Dr. Albert Schatz

Limited number of copies available from National Fluoridation News for \$14.00.

case, the self-correcting mechanism that has been built into science has operated. People like Walker have revealed the fraud. But the fraud continues to be perpetrated.

The reason for this sad state of affairs is that in the case of fluoridation truth is a matter of arbitrary definition. As far as many so-called authorities are concerned, truth in fluoridation has absolutely nothing to do with scientific facts.

This situation exists for several reasons. For example, certain individuals in high positions of responsibility in the public health field originally committed themselves to fluoridation before the facts were available that would prove them wrong. Then, because they were authorities, they could not admit they were wrong because they would lose face. If those who followed them cried out that "the king is naked," they would have been thrown out of the establishment. So, they went along with the fraud and helped perpetuate it in order to "go up the ladder." Others perpetuated the fraud because it was profitable for them to do so. In one way or another, they made a lot of money from fluoridation.

Glen Walker has impeccable scientific credentials, and has been concerned about fluoride toxicity for many years. His book is a well-documented, scholarly exposure of the fraud that fluoridation is. His book should be required reading for all undergraduate and graduate students who major in science in our colleges and universities. Indeed, these institutions should give a course in scientific fraud that would be available to all students, and Glen Walker's book should be used as the basic text.

His book is concerned largely with one particular fluoridation fraud; that is, an official government report in Australia that was prepared by three individuals who committed the following errors,

Glen S. R. Walker, F.I.M.F.,
E.M.E.C.S., M.A.E.S.

Chairman of the Freedom From Fluoridation Federation of Australia, and of the Anti-Fluoridation Association of Victoria. The Author's experience with fluorides covers over forty years from when the chemical was first used in electrochemical formulations, and he remembers the hazards and dangers in using fluoride chemicals, and the extreme caution in handling them.



omissions, etc. —

1. Alterations to original texts.
2. The suppression of unfavorable evidence.
3. Obviously false statements and conclusions.
4. Use of outdated and repudiated data.
5. Plagiarism of significant portions of the text.
6. Misleading references and statements.
7. Many wrong references.
8. Given dates later than original work.
9. Ignorance of the subject under review.
10. Double standards applied in choice of reference material.
11. Biased selection of evidence from reference material, and
12. Careless and shoddy editing.

The famous French physiologist Claude Bernard wrote: "When you meet with a fact that is opposed to a theory, you must adhere to the fact and abandon the theory even though the theory is associated with the names of well-known authorities." In fluoridation, this dictum is turned upside down. What the pro-fluoridationists preach (and practice) is the very opposite. They say: "When you meet with a fact (in fluoridation) which is opposed to the theory (that fluoridation is safe and effective), you must adhere to the theory and abandon the fact if you want to be accepted by the authorities so you can get ahead."

Glen Walker's book is an outstanding contribution to true science, and to truth in general, as well as to human dignity and integrity. It reveals fluoridation as a perversion and prostitution of science. History will validate Glen Walker and honor him for his contribution. It is a privilege and pleasure for me to make these comments about Glen Walker's book. It is a book that every anti-fluoridationist should have in his armamentarium.

The Fluoridation Controversy

You can't taste it or smell it. In fact, many people don't know it's there — but everyone who uses a public water supply in the state of Illinois is getting an indiscriminate dose of a prescription drug (fluoride) every day, regardless of choice, age, or physical condition. The term 'controlled fluoridation' is a misnomer because the dosage depends upon the amount of water consumed. For reasons of ill-health or strenuous physical activity, some people drink many times the 'normal' amount.

Fluoride is classified as a dangerous drug by the F.D.A., yet in 1967 it was prescribed (and made mandatory) by the Illinois state legislature, an alarming departure from accepted medical practice. It is dispensed by a water-works employee, a clear violation of state and federal pharmacy laws. At the recommended level of one part per million (1 ppm) each quart of water contains 1 mg fluoride. The side effects of this dosage are listed in the U.S. Pharmacopeia. In hot climates, only 0.6 ppm is allowed because it is thought that people drink more water there. This seems to indicate a very small margin of safety. Actually the safety factor is zero because people are being harmed at the prescribed dosage. Fluoride is similar to lead and arsenic in its ability to cause chronic poisoning from the ingestion of minute amounts over a period of time. It accumulates not only in the teeth but in the soft tissues as well.

We who oppose fluoridation do not seek to prevent others from taking fluoride if they choose. It may be purchased in tablet form at minimal cost. Taken in this manner the dose is carefully regulated under a doctor's direction, it is used only for a limited time, and may be withdrawn if ill effects occur. The concept of using the public water supply for mass medication is irresponsible, and is repugnant to those who value their freedom of choice. It is another instance where technological zeal outran caution and common sense.

Some people have tried to boil away the fluoride. This is a dangerous practice because the fluoride concentrates on boiling. Many who have suffered ill effects are buying bottled water which they can ill-afford. The symptoms of fluoride poisoning are many and varied because fluoride is an enzyme poison and enzymes affect every body function. Included are such familiar complaints as gastro-intestinal disturbances, arthritis-like pain, urinary tract irritation, headache, skin rash, loss of mental acuity, weakness, etc. When these symptoms are caused by fluoride, doctors have diagnosed and treated them by having the patient use only fluoride-free water for drinking and cooking. Double-blind tests have often been used to further verify the diagnosis. One irreversible symptom is mottled teeth, characterized by chalky white, yellow or brown spots on the enamel. This develops in children, as the teeth are forming.

Fluoride has been promoted as the great American cure for the toothache. Actually it is one of our serious environmental headaches. Industrial pollution of air, water, and vegetation has resulted in payment of

many millions of dollars for fluoride damage to livestock, crops, fish hatcheries and humans. A report from the Stanford Univ. Workshop on Pollution stated, "Fluorides in both gaseous and particulate forms can cause serious problems even in extremely low concentrations, a few parts per billion. The problem is complicated by the existence of other environmental sources of fluoride, most notably fluoridated water at 1 part per million." Many tons of this indestructible poison are being added daily to water systems all over the country thus further polluting our lakes, rivers and coastal waters.

Fluoridation was 'made in America' and for the most part has stayed in America. Few other countries have adopted it because their professional people have had free and open discussion on both sides of the issue and have advised against it. In the U.S. it was declared "undebatable" from its inception.

In February, 1982, in Madison County Circuit Court, the Illinois statewide mandatory fluoridation law was declared unconstitutional — the first such state law in the U.S. to be overturned in the courts.

Testimony included that of Dr. Dean Burk, a cancer researcher, whose accomplishments are listed in Who's Who in America and Who's Who in the World, and Dr. John Yiamouyiannis, another highly qualified

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scientist. They explained their epidemiological studies which show that in cities with fluoridation there is a greater increase in the incidence of cancer. Dr. Aly Mohamed, Biologist, Univ. of Missouri, testified that low level fluoride can cause cancer and chromosome damage in laboratory plants and animals. (Chromosome damage is associated with mongolism. A study done in 1959 [Rapaport] found it to be more prevalent where the water contains fluoride. He noted that many mongoloid children have mottled teeth, evidence of fluoride intolerance). Dr. George L. Waldbott, a distinguished pioneer in the study of allergic diseases, testified about clinical research on fluoridation. (Above references upon request. Please include a long, stamped envelope).

The defendants in the Illinois lawsuit (the Dept. of Public Health and the Environmental Protection Agency, aided by dental officials) did their best to refute the above evidence. They failed, but will not accept defeat. They are appealing the case to the Illinois Supreme Court. (The Pennsylvania case is also on appeal.) Why are they so tenacious in their defense of fluoridation in view of the enormous body of evidence against it? That is a question which they

By Myrtle K. Sapora

Member of the Illinois Pure Water Committee with a long time interest in the fluoridation question.

should be called upon to answer. It should be noted, however, that the most fanatic advocates of fluoridation have devoted their professional careers to promoting this program — and have used ridicule to try to intimidate both scientists and laymen who oppose it. They are now in an unenviable position, but as the philosopher Alexander Pope said, "A man should never be ashamed to own he has been wrong, which is but saying in other words that he is wiser today than he was yesterday."

No one is infallible. A true scientist does not claim to be. Along with the many great triumphs in medical history, there have always been tragic blunders, i.e., in recent years, the swine flu vaccine, thalidomide, DES, etc. What is absolutely intolerable is to deny the error and compound the tragedy. To continue to push fluoridation can be considered public health malpractice. This is a serious matter and everyone needs to learn more about it. There have been many books written on fluoridation; two of the latest ones are by Drs. Waldbott, Burgstahler and McKinney and by Anne-Lise Gotzsche.

An article in *Science*, July 2, 1982, states that we may be approaching a "critical mass" of fluoride in the environment caused by water fluoridation, foods processed in fluoridated water, fluoride supplements, mouth rinses, toothpastes, etc. (The author did not mention that in many areas, fluoride air pollution is a serious problem). He said that dental fluorosis (tooth mottling) has more than doubled in recent years, but "for the most part" is discernible only by dentists. (The statement "for the most part" is of no comfort to the others who may have disfiguring spots on their teeth.) The article calls for a reassessment of our total fluoride exposure and a reevaluation of accepted standards for fluoride use.

The author of the *Science* article says that fluoride is responsible for a great reduction in tooth decay, yet he reports that in some communities, without fluoridation, there has been as much as a 60% reduction in tooth decay in recent years. (It is clear that fluoridation is not necessary for dental health. It is possible that more people are becoming knowledgeable about good nutrition and have reduced sugar consumption.)

Despite the above report in this prestigious scientific journal, there has been no retreat on the fluoridation front. The 'big brass' (various dental organizations) have been called in to try to defend fluoridation before the Supreme Court. There are many dentists, however, who are 'conscientious objectors' in the battle for fluoridation.

The Illinois Pure Water committee filed its lawsuit 14 years ago — a 'David' citizens' group against a 'Goliath' bureaucracy.

If the landmark decision against fluoridation is upheld in the Illinois Supreme Court, it would help to bring an end to the fluoridation fiasco throughout the United States.

FLUORIDATION — Not Manna from Heaven but Waste Hydrofluosilicic Acid from Fertilizer Companies

By Gladys Caldwell



Gladys Caldwell, wife of a retired industrial chemist, is a veteran fluoride reporter who lives in La Crescenta, California. She is co-author of "Fluoridation and Truth Decay" with Philip E. Zanfagna, MD., and has been a long time contributor to National Fluoridation News.

For decades fluoride-deficient water has been blamed for the high incidence of tooth decay. In what has cost the taxpayers billions of dollars for promotion, fluoride has been presented as the missing link in the chain of minerals essential for healthy teeth and bones. Ask a dentist about fluoridation and you are likely to receive one of the tens of millions of Fluoridation Facts folders with their self-serving false Answers to Criticisms of Fluoridation. They are published by the Department of Health, Education and Welfare (now the Department of Health and Human Services (DHHS)). The cover lists endorsements by the most prestigious medical, dental, public health, and scientific organizations.

AMA and ADA Had Issued Warnings

There is no mention that the journals of the American Medical Association and the American Dental Association had issued grave warnings just a month before fluoridation of the first city (Grand Rapids, Mich.), that fluoridated water could result in mass poisonings.¹

School dentists and nurses teach children from kindergarten on up that fluoridation is a way of life. Costly films and training aids are supplied by Procter & Gamble, manufacturers of Crest. In exchange the ADA conferred its Seal of Approval only on Crest. A controlled press publishes releases from the endorsers with rarely a Letter to the Editor in rebuttal. Alert children spotted the Procter & Gamble label on the tapes.

Fluoride Proclaimed Safe as Mother's Milk

Fluoridation has been accepted as the impossible dream come true. Fluoride is hailed as a newly discovered nutrient, just like calcium and vitamin C. With the scientific expertise of the old carnival medicinemen, public health officials proclaimed that at 1 part per million (which they called just a drop in the bucket), every child would get the proper dose, which they set at 1 milligram per day, and promised them benefits of 65% fewer cavities. Even with costly new buildings for equipment and storage, and trained operators required to fluoridate all drinking water, they claim that it costs only the price of an ice cream cone per person per year. Gradually fluoridated toothpaste, school fluoride mouth rinses, and costly topical applications by the dentists were recommended as "boosters" with the understanding that nothing takes the place of fluoride in the water.

By 1980, only half the people in the United States had been led to fluoridated water and forced to drink it. The Center for Disease Control (CDC) blamed the dentists for poor salesmanship. A year ago the National Institute of Dental Research invited State Dental Directors to a two-day Symposium, where innovative schemes were proposed to get the other half of the nation fluoridated.² If implemented, it will cost taxpayers hundreds of millions of dollars.

Given any thought, to add a "nutrient" to hundreds of billions of gallons of water every day of the year would require projection of unlimited stockpiles at a very low cost. Curiously, the question as to the source of so much fluoride which would be required seldom comes up.

More Behind Fluoridation Than the Dentists

The first indication that there was more behind fluoridation than the dentists, appeared in an advertisement in a chemical trade journal in 1950, inserted by ALCOA (Aluminum Company of America).³ A hand is pictured holding a glass of water: FLUORIDATE YOUR WATER WITH CONFIDENCE - USE HIGH PURITY ALCOA SODIUM FLUORIDE. As the stockpiles of this waste fluoride began to mount, it drifted onto neighboring ranches where it poisoned crops, animals and humans. This resulted in troublesome, costly lawsuits.⁴ Other than for sale as rat poison and etching of glass there was no market for this waste sodium fluoride until Alcoa advertised it with the approval of the Public Health Service as a cavity deterrent in drinking water.

With the blessings of the Environmental Protection Agency, phosphate plants convert waste fluoride gas into transportable hydrofluosilicic acid and truck it across freeways to water companies and drinking water reservoirs.

Look, Mom, No Safety Factor

Drinking Water Standards for fluoride are set by the Environmental Protection Agency. One part per million is considered not only safe, but essential. Water with over two parts per million is condemned as unsafe to drink. Was it coincidence or connivance that the phosphate fertilizer companies could supply the only cost-effective fluoride for all the nation's drinking water?

For decades the future had looked bright for fertilizer sales. Farmers are permitted to market millions of tons of grain to Russia and other countries. Business was booming, and the source of fluoride for drinking water was the best kept secret of this polluted century, which is that fluoridation has nothing to do with dental health: it provides a solution to industry's fluoride pollution problem.

In 1982, farmers were hurting financially. Unable to afford both fertilizers and pesticides, they opted for more pesticides, hoping there would be a carry-over of nutrients from the previous applications.

Fertilizer Production Cutback Exposes Fluoridation Hoax

An unforeseen slump in the fertilizer business exposed the fact that fluoride used in fluoridation is not manna from heaven. It was up to the CDC to publicize a plausible rationale for fluoridation dependency on the phosphate fertilizer business. The *Wall Street Journal* published an AP dispatch: WAR AGAINST TOOTH DECAY FACES SETBACK AS SHORTAGE OF FLUORIDE CHEMICAL IS SEEN.⁵ The cutback was reported as if it were a national health disaster and misrepresented hydrofluosilicic acid as a by-product in the manufacture of fertilizer. Jack Jackson, CDC Health Advisor, warned that major cities were already feeling the pinch. In a reprehensible scare tactic, he predicted that a 20% reduction of fluoride in drinking water would result in 50% more dental disease.

The fact is that hydrofluosilicic acid is not a by-product, but a waste product, the disposal of which posed costly, almost insurmountable, difficulties until the fluoridation of public water supplies came to the rescue.

Drinking Water Used As Toxic Dump Site For Industry's Fluoride Waste

The Environmental Protection Agency is entrusted with setting and enforcing safe drinking water standards. The Food and Drug Administration has declared fluoride Not Generally Recognized as SAFE for food.⁶ EPA has, in effect, given industry a license to use our drinking water as a toxic dump site for industrial waste, at a cost of \$900 per ton. Hydrofluosilicic acid is so corrosive that many cities, including New York, Chicago, San Francisco, Boston, etc., neutralize it with sodium hydroxide depending upon the acidity of the water. For instance, New York City adds 10,000 tons of this acid annually. Boston adds 605 tons and also 3,500 tons of sodium hydroxide. The public is not told of the extra chemical and cost.

Are Teeth Better or Worse?

Throughout the past year, the public has been blitzed with fluoridation propaganda from all sides of the news media, apparently unaware that long-range studies now report a dramatic drop in child tooth decay. Results of a 20-year study at the Forsyth Dental Clinic in Boston showed a 50% reduction in tooth decay of school children in unfluoridated Dedham and Norwood, Massachusetts. (The children did not drink fluoridated water, fluoride rinses were not originally available, and fluoridated toothpaste manufacturers have failed to present any scientific evidence that the paste prevents tooth decay.)⁷

It has been only nine years, since November 13, 1973 that Dr. Carlton H. Williams, President of the American Dental Association, and Dr. David Wilson, M.D., Assistant Chancellor at the University of Mississippi, told an *Enquirer* reporter: A SCANDALOUS EPIDEMIC OF TOOTH DECAY IS SWEEPING AMERICA. "By the age of 15, a third of the average school child's teeth are decayed, filled, or missing. That includes the period in which all the research was being performed which now reports an overall reduction in children's tooth decay throughout the nation."⁸

Do We Need More or Fewer Dentists?

The National Institute of Dental Research, which has spent hundreds of millions of tax dollars on dubious fluoride research, reports 25 to 30% reduction in dental cavities in 49,000 school children who live in fluoridated and unfluoridated areas. The U.S. Department of Health and Health Services projects a 22% increase in the number of working dentists in the next few years. But dental schools are cutting back; Tufts Dental School plans to trim enrollment by 20% in the next few years.⁹

In New Discovery—Chemists Find Fluoride Does Interfere With Enzyme and DNA Systems

In any case, the prospect of a lifetime without drinking added toxic fluoride in our drinking water should be no cause for public mourning. People must recognize that there is no Tooth Fairy; that those entrusted with their health have perpetrated a criminal consumer fraud upon them, and that the cutback in fertilizer production may give them a chance for survival. In recently poorly publicized, lengthy court hearings in Pennsylvania and Illinois, at which leading proponent experts testified, judges ruled that there is a "strong link" between cancer and fluoridation, and that fluoridation is a "serious threat" to human health.¹⁰ Further alarming documentation is reported in the *Journal of the American Chemical Society*. New research shows fluoride has the capacity to disrupt normal hydrogen bonding and adversely interfere with our enzyme and DNA systems.¹¹

Fluoride Overkill - Not Deficiency - A Major Health Problem

In *Science*, 2 July, 1982, D. H. Leverett, Chairman Department of Community Dentistry, Eastman Dental Center, Rochester, New York reports that there is an alarming increase in fluoride in our food chain since the start of fluoridation. Canned food and drink sold at the supermarkets are often made with fluoridated water, and fluoride fallout from factories is poisoning our vegetables and fruit. Forage on which farm animals feed is fluoride-contaminated, and so is the meat. Leverett reports we also swallow fluoride from toothpaste. Thus, he confirms the reports by Marier and Rose of the National Research Council, Canada, who report that fluoride is a bioaccumulator which is getting into our food chain in ever-increasing amounts. The claim that water is the only source of fluoride is exposed as fraudulent. The American Medical Association reports we ingest as much or more fluoride from food than water.¹² Dr. Leverett is on grants and understandably still recommends fluoridated water, toothpaste, mouthrinses, and applications by the dentist.

Quoting from some of my articles and book with the late Dr. Philip E. Zanfagna, *Fluoridation and Truth Decay*, I predicted: "The U. S. Government will stop spending hundreds of millions of dollars to promote fluoridation when industry has no more toxic waste fluoride to get rid of. Using our water supplies as a legal toxic dump site is the only profitable way they can dispose of this waste."

REFERENCES AND NOTES

- JAMA, September 18, 1943: "The sources of fluoride intoxication are drinking water containing 1 part per million or more fluoride—the very concentration in half of America's drinking water!"
- JADA, October, 1944: "We do know that the use of drinking water with as little as 1.2 parts per million fluoride will cause such developmental disturbances as osteosclerosis, spondylitis and osteopetrosis. . ."
- Proceedings of Conference October 27-28, 1980, Sponsored by National Caries Program, National Institute of Dental Research, Bethesda, Maryland U.S. DHHS, 161 pages.
- Published by Alcoa in the *Journal of American Water Works Association*, January 1950, Vol. 42, prior to endorsement of fluoridation by AMA or USPHS.
- Headline in Knoxville, Tennessee *Journal*, July 30, 1955: ALCOA SUED FOR NEARLY \$3 MILLION. 157 Blount County residents charged Alcoa with fluoride poisoning of farm animals and families.
- Prof. A. H. Mohamed and M. E. Chandler, Univ. of Missouri at Kansas City, report mice fed 1 part per million sodium fluoride in their drinking water (comparable to fluoridated city water), resulted in chromosome abnormalities in bone marrow and testes. *Chem. & Eng. News*, Sept. 20, 1976, FLUORIDE, Vol. 15, July 1982, pp. 110-118.
- Wall Street Journal*, June 29, 1982. This organ has lent its prestige to false promotion of fluoridation. The October 10, 1980 issue reported that dentists in La Canada, California find school children's teeth cavity-free, without mentioning this city is not fluoridated.
- FDA Federal Register lists fluoride as Not Generally Recognized as Safe. May 28, 1975. Without the added sodium hydroxide, Seattle's fluoridated water is causing over 100 million dollars in plumbing repairs and replacements (Kennedy Engineering Company, Tacoma, Wash.)
- AP Dispatch, Boston, April 30, 1981, *Houston Chronicle*, Dec. 9, 1981 FDA Letter to G. Caldwell—None of the manufacturers of fluoridated toothpastes have produced scientific evidence of effectiveness in preventing dental decay.
- National Enquirer*, November 13, 1973.
- Houston Chronicle*, May 1, 1981.
- Pennsylvania Case — Judge John P. Flaherty, Jr., on Nov. 16, 1978, ordered the West View Water Authority, Allegheny County, Pa. to stop adding fluoride to water it supplied to 27 North Hills and Ohio River communities. After lengthy hearings with experts on both sides Judge Flaherty said he was "compellingly convinced" of the fluoride-cancer link. There was no appeal on the basis of contrary evidence — only Judge Flaherty's jurisdiction to order cessation of fluoridation is holding up carrying out his decree. *National Fluoridation News*, Oct.-Dec. 1978.
- Illinois Case — Circuit Court Judge Ronald Niemann ruled (after 14 years delay in the courts) that fluoridation of water in Illinois is unconstitutional, and that "a risk exists of serious health hazards from fluoridated water." A.P. Dispatch, Chicago Tribune, Chicago Sun Times, Feb. 27, 1982.
- Journal of the American Chemical Society*, Jan. 1981, 103, 28-33. *Britain's New Scientist*, Jan. 22, 1981.
- American Medical Assn. pamphlet, 1976, House of Delegates - Efficacy and Safety of Fluoridation p. 10. Also book, *Environmental Fluoride 1977*, National Research Council, Canada, Rose and Marier Report, page 83 "adults in North America should assume a total fluoride intake of between 3.5 and 5.5 mgs. fluoride a day in fluoridated areas."

"The plain fact that fluorine is an insidious poison, harmful, toxic and cumulative in its effects, even when ingested in minimal amounts, will remain unchanged no matter how many times it will be repeated in print that fluoridation of the water supply is 'safe'."

Ludwik Gross, M.D., Former Chief of Cancer Research of the Veterans Administration, Bronx, N.Y.

National

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GEORGE L. WALDBOTT, M.D.

Jan. 14, 1898 — July 17, 1982



George L. Waldbott, residing in Leonard, Michigan was a practicing physician in the State of Michigan since November 23, 1923, specializing in allergic diseases. He was a graduate of the University of Heidelberg, Germany, Medical School in 1921 and interned at Henry Ford Hospital, Detroit, 1923 to 1924. He was a member of the American Medical Association, Michigan State and Wayne County Medical Societies; a diplomate of the American Board of Internal Medicine since July 1, 1937; a diplomate of the specialty of allergy since April 19, 1941; co-founder and former president of the Michigan Allergy Society (1936); Fellow of the American College of Physicians; Fellow of the American College of Chest Physicians; Fellow of the Academy of Allergy; Fellow of the American College of Allergists; honorary member of the French and Spanish Allergy Societies.

He was founder and chief of allergy clinics in four Detroit hospitals: Grace, Harper and Children's Hospitals of Michigan, and the North End Clinic (now Sinai Hospital), Emeritus Physician in Allergy at Harper Hospital and Honorary Physician at Hutzel Hospital, Detroit; former President of the Michigan Branch of the American College of Chest Physicians; former Chairman of the Air Pollution Committee of the American College of Chest Physicians, and of the American Academy of Allergy.

Pioneer in Specialty of Allergy

Dr. Waldbott was one of the pioneers in the specialty of allergy. His extensive clinical research has appeared in more than 200 publications, many in American Medical Association journals. Early in his career, his original research on human anaphylaxis, published in a series of articles, has been responsible for saving numerous lives.

New Findings

He was first to report many new observations in his specialty. For example: to investigate the effect of tonsillectomy in allergic respiratory disease; to report allergy (asthma) due to local anesthetics; to call attention to the relationship of the thymus gland and lymphoid tissue to allergy; to describe allergic pneumonitis, among many other firsts.

His book on "Contact Dermatitis" (1953) in which he presented an original method of determining the source of the lesion by observing the pattern - termed a classic for many years to come - has been invaluable to physicians as well as to patients themselves in diagnosing the source of their ailment. He was contributing author of several other books pertaining to allergy.

His report in 1954 on the first fatality of human anaphylaxis from penicillin received editorial commendation in the Journal of the American Medical Association.

His Study of Fluoride

His experience with intolerance to drugs in his patients led him to the study of the effects of fluoride and of other environmental pollutants on the human body. A book of his entitled, "Health Effects of Environmental Pollutants," second edition, March 1978— one of the first on the subject— is being used as a textbook in universities here and abroad.

For the past 25 years, since 1955, he had been carrying out basic clinical research on how fluoride affects the human organism. His data have been

presented in more than 80 reports in some of the most important medical journals in the U.S.A. and abroad. These publications include two monographs, one entitled "Fluoride in Clinical Medicine," the other "Acute Fluoride Intoxication," an article entitled "Fluoride in Food," and another article "The Physiologic and Hygienic Aspects of the Absorption of Inorganic Fluorides, Comments on the Symposium," the last-mentioned of which appeared in an American Medical Association publication.

His most recent book "Fluoridation: The Great Dilemma," 1978, in collaboration with Professors A. W. Burgstahler and H. L. McKinney, is an encompassing presentation.

His studies on fluoride include the administration of test doses of fluoride to allergic and non-allergic individuals and to those suspected of being intolerant to fluoridated water. He studied cases of fluorosis in many places both here and abroad.

As founder of the International Society for Fluoride Research, the purpose of which is to investigate the biological effects of fluoride, and editor of its official journal FLUORIDE since its inception in 1968, Dr. Waldbott has made an invaluable contribution toward understanding how fluoride in water, air, food and pharmaceuticals affects humans, vegetation and animals, both wild and domestic.

Awards Received

Among awards, he received first prize for his exhibit on Occupational Allergy at the Congress of the European Academy of Allergy, The Hague, Holland (May 11, 1958), another first prize from the journal "Cutis" in collaboration with Dr. V. A. Cecillioni, in March 1972 (page 331), for his manuscript on Chizzola Maculae, the description of a skin lesion which is a diagnostic tool in chronic fluoride poisoning. He was presented with a distinguished "Award of Merit" by the Board of Regents of the American College of Allergists, March 30, 1977 in recognition of professional achievements, contributions to the medical literature, teaching on allergy and immunology and for more than 25 years service to patients and the profession of medicine, particularly in his field (of allergy)."

A Highlight

A comprehensive article in the Southern Medical Journal, March 1980 which includes case histories on the preskeletal phase of fluoride intoxication; presentation to his colleagues in October 1980 of a poster exhibit on "The Role of Fluoride in Clinical Medicine" (a condensation of his vast research on fluoride) at The Michigan Chapter of the College of Physicians at Sugar Loaf Mountain in Northern Michigan, and, in January 1981, in Atlanta at the Winter Session of the American Medical Association - constituted a highlight in his long and productive career.

A Tribute

Six years ago a group of his colleagues, associates, patients, relatives and longtime friends celebrated, at a banquet, his 50 years of caring for his patients. When it was his turn to speak, he was quick to assure this gathering that he loved his work and even though he was almost 80 years old, he had no intention of retiring. He was strong in mind and heart to the end and, although physically weakened, he attended patients at his office during the last week of his life.

Dr. Waldbott was dedicated to his profession as evidenced by his charming and warm office manner. He welcomed challenge, self-sacrifice and hard work.

Dr. Waldbott is survived by his wife, Edith, who was his constant help and companion in his work, two daughters, Edith Wadenstierna of Romeo, Michigan and Betsy Ramsey of Sweden, and four grandchildren.

News Briefs**Experts Cite Risks of Rinsing**

The United Press International News service carried a story on September 30, 1982 that fluoride mouth rinses used in hundreds of elementary and preschools across the country may cause discoloration in children's teeth. Dr. Stephen Wei, a professor in the University of Iowa's dental school and head of a fluoride research group said some children may be getting too much fluoride in their systems.

The Associated Press also ran an account from the same source. "Preschool children who drink fluoridated water and use fluoride mouth rinses risk having discolored teeth as adults because they tend to swallow the rinse, University of Iowa researchers say."

The A.P. News release quoted Dr. Wei, head of the pedodontics department of the University, "Children 3 to 5 years old have not fully developed their swallowing reflexes. Studies at federally funded Head Start programs in Berkeley and Santa Clara, California, that use daily mouth rinses found that many of the children swallowed much or all the rinse rather than spitting it out."

Department of Health and Human Services officials who were contacted about the study said they did not know how many preschool children who are in the rinse program also live in communities with fluoridated water.

Michigan Preschool Children Exempt From Rinse Program

Bailus Walker, Jr., Ph.D., Director of the Department of Public Health, Lansing, Michigan, said in a letter July 7, 1982 to Dr. Charles Whitten of the Public Health Advisory Council of Detroit: "At the last meeting of the Public Health Advisory Council, members of the Michigan Pure Water Council presented information and concerns regarding the use of fluoride mouth rinses for preschoolers, particularly in some Michigan Head Start programs. After review and consultation with the Region V HHS consultant it was decided to issue a public health advisory recommending against this practice for preschoolers."

Wisconsin Dental Group Drops Lawsuit

The Wisconsin Dental Association has withdrawn its lawsuit against the State Department of Health and Social Services because Medicaid officials have revised statements originally questioning dentists' use of fluoride treatments on adults as reported in the Milwaukee Sentinel, July 2, 1982.

In May, Medicaid officials said they were trying to recover \$235,000 from Wisconsin dentists for fluoride treatments on adult welfare patients during the past two years. State officials had questioned the necessity of fluoride treatment for some adults.

Daniel Jehl, assistant administrator of the Division of Health said that only a few dentists were under investigation. "We are now going to assume the majority of fluoride treatments were warranted," Jehl said. "We will only focus on those on which we have a solid case."

Kenneth Rentmeester, administrator of the Division of Health said the department remained committed and was compelled by statute to seek to recoup payment where treatment could not be shown to be medically necessary.

Trounced in Mountain Grove by 4-1

Citizens of Mountain Grove, Wright County, Missouri, were asked on June 8, 1982 if they wanted fluoride in their drinking water. With a total of 891 votes cast, 716 voted NO and 175 voted Yes.

Too Much Fluoride Acknowledged

(Continued from page 1)

sumption was drastically curtailed in Europe during World War II, "sharp declines in dental caries" occurred "with subsequent reversal of the trend within 3 to 4 years after the end of the war." With "increased accessibility of sucrose in the diet" the prevalence of tooth decay showed a corresponding rise.

As a countermeasure, he goes on to claim "efficacy, cost-effectiveness, and safety" for fluoridation and fluoride products for dental use, but the evidence he cites is not very convincing. He admits that in recent years "there has been increasing evidence from several developed nations of a drop in the prevalence of dental caries which cannot be attributed directly to intentional fluoride use."

Even "in communities which do not have fluoridated water . . . caries reductions as high as 60 percent have been observed." Although he suggests that "other sources" of fluoride, as in food and fluoridated dentifrices are largely responsible, he offers little evidence in support of this view and fails to cite such studies as those of Tijnstra et al. (*Community Dentistry and Oral Epidemiology*, 6:227-230, 1978; cf. *Science News*, Sept. 1, 1979, p. 152; *NF News*, Aug.-Oct. 1979) showing negligible anticaries benefit from such sources.

Increased Dental Fluorosis

A further glaring omission is the author's failure to cite any of the now extensive and compelling findings of serious toxic effects of fluoridated water in man besides dental fluorosis. But here, too, he mistakenly asserts that dental "fluorosis, even at severe levels, is of no consequence to health" (emphasis added)! But he does acknowledge that there has been a significant increase in the prevalence of dental

fluorosis since the advent of fluoridation and the current widespread use of fluoride dental products.

Even in communities without fluoridated water supplies, fluoride supplements administered from shortly after birth (0.5 mg/day to the age of 3) have resulted in 63 percent of the children exhibiting dental

With such telling admissions in a world-renowned scientific journal, one can only wonder whether we are beginning to see a "graceful retreat" from fluoridation. Surely it seems there is something in the wind!

fluorosis by the time they were 7 to 12 years of age. "According to standards defined first by McClure and Dean, no fluorosis should have resulted from such supplementation."

Fluoride in the Food Chain

Fluoride increases in food and beverages as a result of fluoridation are also given critical attention. After reviewing various earlier studies showing such effects, the author singles out the recent investigations of Singer and Ophaug (*Pediatrics*, 63:460, 1979; *J. Dent. Res.*, 59:777, 1980) for special comment.

He notes that these workers "determined that the intake of fluoride in typical diets of infants between 2 and 6 months averaged about 0.1 mg per kilogram of body weight from foods processed in a community with fluoridated water. Diets consisting mainly of foods processed in communities without fluoridated water contained about one-tenth that amount of

fluoride. Since [dental] fluorosis can occur with a fluoride intake as low as 0.1 mg per kilogram of body weight per day, this finding suggests that the optimal intake may have been exceeded."

For 2-year-olds in several U.S. cities, these same researchers "found that the amount of fluoride, in milligrams per kilogram of body weight, ranged from 0.025 in a community with unfluoridated water to 0.049 in one with fluoridated water." These results are considered to be "more within the acceptable range." But it is clear that infants and very young children taking fluoride supplements appear to be at the greatest risk for developing dental fluorosis.

In typical proponent fashion, author Leverett concludes his review by urging that more research be conducted on the changing prevalence of dental caries and dental fluorosis, especially in relation to currently recommended levels of fluoridation and fluoride supplementation. At the same time, he reveals his concern about the already extensive data indicating these levels are too high and need to be reduced.

He therefore proposes that a "redefinition of standards" for fluoridation (to decrease recommended fluoride concentrations) is probably desirable and that "the dosage of fluoride supplements for infants in communities without fluoridated water needs to be reassessed in light of evidence regarding the fluoride content of formulas and baby foods."

With such telling admissions in a world-renowned scientific journal, one can only wonder whether we are beginning to see a "graceful retreat" from fluoridation. Surely it seems there is something in the wind!