

## Chapter 10

### The results of WF in countries following 70 years of fluoridation

The countries that initially became partly or nearly wholly fluoridated, following America's example, were English speaking countries; New Zealand, Australia, England, Ireland, and Canada but other countries soon followed such as; Finland, The Netherlands, Switzerland, Sweden and Spain. Many countries rejected water fluoridation from the outset, such as Austria, Belgium, France, Hungary, Norway, Iceland and Italy. Many countries started WF and then stopped, these have been;

West Germany (1952 – 1971)

East Germany (1959 –1990)

Sweden (1952 – 1971)

Netherlands (1953 – 1973/6)

Czechoslovakia (1955 – 1990)

Soviet Union (1960 – 1990)

Finland (1959 -1993)

Switzerland (1963 - 2003)

Japan (1984 -2014)

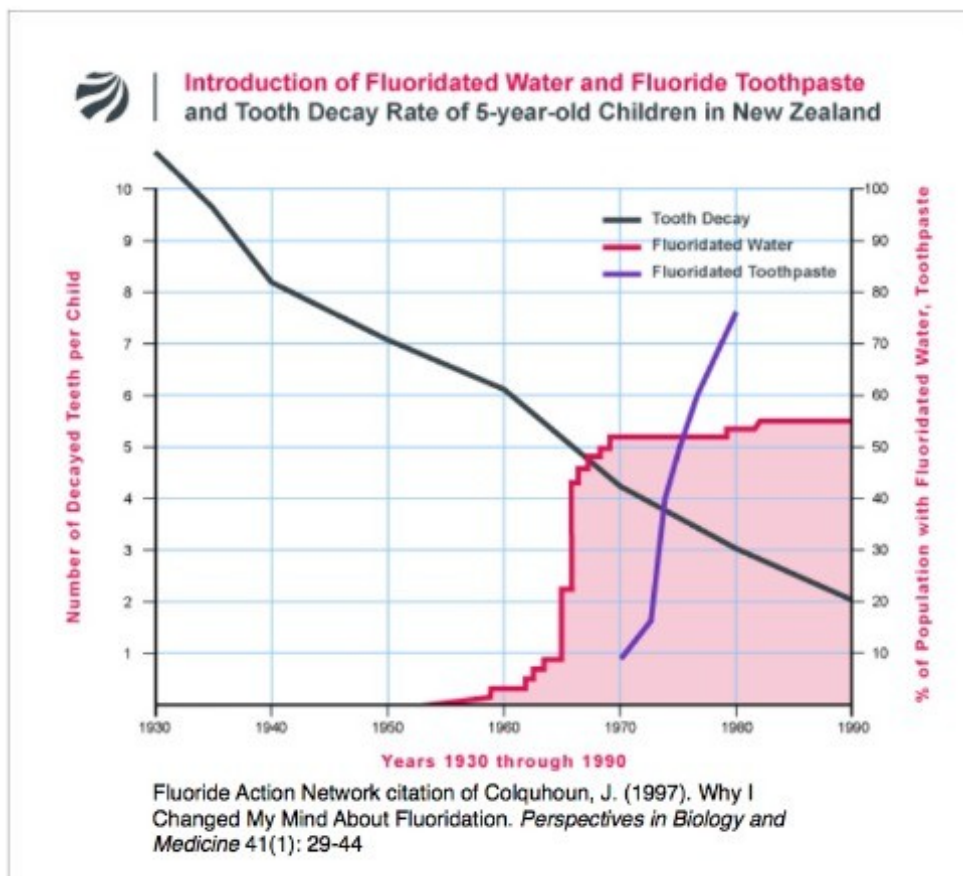
Israel (1984 – 2014, in 2016 again began the practice)

After 70 years of water fluoridation, it is now possible to look at the dental data and health data of fluoridating countries.

#### **New Zealand**

The use of water fluoridation first began in Hastings, New Zealand in 1951, as a 'trial' an 'experiment'. A 'Commission of Enquiry', was held on water fluoridation, in 1957, after which its use rapidly expanded in the mid 1960s, starting with Auckland in 1966. New Zealand now has fluoridated water supplied to half of the population.

John Colquhoun DDS. PhD., former Principal Dental Officer for Auckland and former fluoridation advocate, researched dental decay, firstly in New Zealand and subsequently while travelling the world. He finally came to the conclusion that, good teeth resulted from better food sources and that it had nothing to do with fluoridated toothpaste or fluoridated water. His graph below shows that rampant dental decay has steadily declined at the same rate since the 1930s, long before the introduction of fluoridated water or the use of fluoridated toothpaste and fluoridated dental products. Children's dental decay rates declined at a steady and consistent rate from the 1930s to the 1990s.



Dr Colquhoun was alarmed at the harm done from fluoride use – dental fluorosis and harm to other parts of the body; bone cancer, osteoporosis, hip fractures, impaired kidney function, irreversible lowered IQ and reversible neuromuscular and gastro-intestinal damage, that he wrote an article, in 1997, called, “Why I changed my mind about Water Fluoridation”.

In the mid – 1900s, Dr Weston Price, who founded the research arm of dentistry, discovered that the Maori population in New Zealand had excellent teeth, with a decay rate of less than 1 in 2000 teeth. This corresponds approximately to fewer than one person in 62 having dental decay, or less than 2% of the Maori population, and without the use of fluoridated toothpaste.

Unfortunately, by 2006, after interacting more closely with westerns and their lifestyle, over 60% of Maori children of about the age of 12yrs, had some decay in both fluoridated and non-fluoridated areas.

As of 2009, according to the MoH oral Health Survey in New Zealand, where half of the population drink artificially fluoridated water and most of the population use fluoridated toothpaste,

“...41% of New Zealand children have some form of dental fluorosis.”

In July 2016, Dr Ron Beaglehole, Principal Dental Officer for Nelson and Marlborough DHB, said:

“Each year 25,000 New Zealand children under the age of 12 (years old) have rotten teeth extracted.”

On Friday, 18 March 2022, a press release from Fluoride Free New Zealand revealed the following information:

“The revelation that fluoridation levels in Wellington & Upper Hutt water supplies have been below, and often well below, ‘recommended’ levels, yet tooth decay rates have been unaffected, confirms that water fluoridation does not reduce tooth decay.”

“Parents can be reassured that the drop in fluoridation levels has not caused their child to have tooth decay. The percentage of Wellington five-year-olds receiving ‘fluoridated’ water who have no dental decay was the same in 2020 as it was in 2015 (around 70%). So, the reduced levels made no difference whatsoever.”

*Moreover, the percentage of un-fluoridated children with no dental decay increased from 68% to 83% over the same time, outstripping the fluoridated children.”*

As regards to the general health of New Zealanders, in 2009, they had the highest rate of suicide, out of 11 countries; Netherlands, UK, Australia, Switzerland, Norway, New Zealand, Germany, France, Sweden, Canada and the US; studied by the ‘Organisation for Economic Cooperation and Development (OECD). And Declan Waugh, in his report of 2012, discovered that New Zealand had the highest rate of Sudden Infant Death Syndrome (SIDS) compared to EU countries which are un-fluoridated, and had the highest rate of obesity; and the highest rate of musculoskeletal diseases as well as ischaemic heart disease.

The NZ Ministry of Health data in 2015, found that cancer was the biggest killer by far. This disease accounted for nearly one third of all deaths recorded, and disproportionately killed men. The next killers were ischaemic heart disease, cardiovascular disease and chronic lower respiratory disease.

## **Australia**

In Australia, the first community water fluoridation programme began in 1953, in Beaconsfield, Tasmania followed by Yuss, New South Wales in 1956. Most large Australian cities have fluoridated their water since the 1960s and 1970s. Areas differ; from 70 to 100% of the population receiving this water but overall, approximately two thirds of the population live in areas that are fluoridated with most people using fluoridated toothpaste, (approximately 80-90%).

In Australia, one in two children has tooth decay. Decay rates have increased more than 50% since 1996. (1)

Australia’s Health Care Report of 2017/18 concluded that two in three people were overweight or obese, with dementia being the leading cause of death. The health report of 2018, reported that it is estimated that 1 in 2 (50%) of Australians have at least one of eight selected common chronic conditions: arthritis, asthma, back pain and problems, cancer, cardiovascular disease, chronic obstructive pulmonary disease, diabetes, and mental health conditions.

## **United Kingdom**

In the United Kingdom, only 10% of the population in England, receives artificially fluoridated water. These areas are mostly in the north of England, with a large part of the West Midlands that includes Birmingham, and a small part of East Anglia. See Appendix 15 for a map. It all began in 1964, with Birmingham.

There are no fluoridation schemes in Scotland, Wales or Northern Ireland.

Sir Paul Beresford, Chairman of the All-party Parliamentary Group on Dentistry and supporter of WF, said on the 8<sup>th</sup> February 2016, that in England,

*“childrens’ teeth are good..... between 2008 and 2012, the numbers of five-year-old children, who showed signs of decay fell by approximately 10%... overall levels of oral health in five-year-olds is better than it has ever been, with 72% of five-year-old children in England (being) decay free”.*

In other words, over a quarter, which means 28% of five-year-olds in England, have tooth decay.

However, in fluoridated Birmingham, and the West Midlands, fluoridated since 1964, it was reported in 2016, that the average number of extracted or filled teeth was 17% higher than the national average. And there was also a 300% rise in children under the age of 10 being admitted to hospital for teeth extraction over the previous five years.

In 2017, NHS data obtained from the Faculty of Dental Surgery at the Royal College of Surgeons (RCS) showed that, in Birmingham, the number of teeth extracted in hospital increased by 24% from 2006-07 to 2014-15 and then by sevenfold between 2010-11 to 2014-15.

In November 2017, Jonathan Walker wrote in the Birmingham Mail that:

*“More than a quarter of Birmingham five-year-olds suffer from tooth decay, and the figure is higher in the city than in many parts of the country. The problem was highlighted by Birmingham MP Steve McCabe (Lab Selly Oak). He said in the House of Commons that: In Birmingham, 29% of five-year-olds suffer from tooth decay, which is significantly higher than the national average... five-year-olds in Birmingham are three and a half times more likely to suffer tooth decay than those in the south-west of Surrey...”*

Also revealed was the fact that:

*“Hospital admissions related to tooth decay for those under the age of 18 in Birmingham have almost doubled in the past four years.”*

Figures dating back to 2009, show that one in 11 people in the West Midlands have no natural teeth left.

Therefore, we see that fluoridating the water supply of Birmingham and the West Midlands has not helped to reduce tooth decay. And another concern is that, the health of the population has been compromised, as shown from the examples below;

- Dentist Tony Lees, who lived and worked in Birmingham, also came to realise the dangers of fluoride after the death of his mother from a hip fracture. His mother's consultant had observed a higher frequency of hip fractures in fluoridated areas around Birmingham, compared to non-fluoridated areas, and this observation prompted Tony to do his own research. It was a personal awakening for him on the dangers of the controversial practice. Tony Lees believes that fluoride should be banned from toothpaste and water. (2)

- In 2003, West Midlands topped the UK's 'obesity list', with 22% of the population classed as clinically obese. Doctors are concerned that pregnant mothers ingesting fluoride from drinking water are predisposing their offspring to obesity. (3)

- Dr Barry Durrant-Peatfield, a thyroid specialist, believes that fluoride is partially to blame for the high incidence of under-active thyroid problems (hypothyroidism) in Birmingham, and Prof. Stephen Peckham confirmed this fact in his report of 2015.

- Dr Peter Mansfield, former President of the National Pure Water Association (NPWA), tested over 200 volunteers in the West Midlands for levels of fluoride in their urine, and found that 60% of them were ingesting up to four times the amount of fluoride considered by the government to be safe. (4)

The town of Bedford, in England, was a fluoridated area from 1972 to 2009. Fluoridation stopped in Bedford in September 2009, because of concerns over the fluoridation equipment and the town has remained un-fluoridated. The Bedford Brickwork company stopped production in 2008, after 100 years, so ending the production of toxic fumes across the town and across Bedfordshire, fluoride being one of the toxic fumes.

Children's dental health remained the same in Bedford, before and after these changes as reported by Public Health England (PHE) in 2015. PHE stated the following,

*"The data showed that there was no statistically significant change in the number of children with tooth decay or the severity of tooth decay between 2008 and 2015."*

However, in 2012, Professor Stephen Peckham looked at the tooth data for Bedford and found an improvement after fluoridation ceased. In 2012, the dmft (decayed, missing and filled teeth) for 5 years-olds in Bedford was 0.83, compared to 1.21 in 2003/4. And 75% of children were caries free in 2012, compared to 65% in 2003/4.

Even more important, it was noted, that there was a significant rise in educational standards in Bedford, once fluoridation ceased.

Prior to 2008, during water fluoridation, Bedford town schools were rated low by Ofsted and on 13<sup>th</sup> January 2008, the local paper, 'Bedfordshire on Sunday' stated, the following,

*"Schools tables published by the Government on Thursday show that Bedfordshire contains the 15 worst upper schools."*

However, educational standards began to improve after fluoridation stopped, so much so that, on 7<sup>th</sup> February 2019, the 'Bedfordshire Times & Citizen' was able to report, the following:

*"Toddlers in Bedford are showing slightly higher development than the national average, a Public health England investigation has revealed."*

And by November 20<sup>th</sup>, 2020, the same local newspaper reported,

*"Bedfordshire is one of the best places to live when it comes to schools... and has been ranked in the top five places... with outstanding Ofsted ratings."*

Of course this could be due to many other factors as well.

**Paul Hindess, a UK resident, explains his personal experience prior to 2009.**

*"I grew up in an un-fluoridated area of the UK and enjoyed excellent health throughout my childhood. When I attended university in Coventry and later when I lived in Bedford my health in general was mysteriously poor. After years of investigation (seeing many doctors and doing much research of my own) I eventually discovered the cause – both Coventry and Bedford were fluoridated. I now drink only bottled water (a begrudged expense) as I still live in Bedford, but at least I have seen a return to my previous good health. I*

*sincerely hope fluoridation of public water supplies is abandoned imminently. Its severe cumulative toxic effects are quickly discovered with only brief research”*

## **Ireland**

Northern Ireland has no water fluoridation however, Southern Ireland, called the Republic of Ireland, has been over 67% fluoridated, since 1964.

Ireland, with two-thirds of the population drinking fluoridated water, ranked sixth in Europe for tooth decay behind un-fluoridated countries, said Barry Groves in his book, 'Fluoride Drinking Ourselves to Death', published in 2001, Page 223.

Dental surgeon, Donald McAuley, from Dublin, wrote in the British Medical Journal:

*“Fifty per cent of our population has dental fluorosis [in Southern Ireland]. I see patients daily in my surgery who are damaged by fluoride. They do not smile, they are teased at school, and they are traumatised by having ‘rotten’ teeth.”* (5)

When comparing health between un-fluoridated Northern Ireland and fluoridated Southern Ireland (the Republic of Ireland) after 50 years, the conclusion is stark. In 2012-13 the Republic of Ireland had the 'sickest population in Europe' says Declan Waugh, including poorer teeth. (6)

In an article by Adrienne Murphy on February 27<sup>th</sup> 2013 published in Hot Press (Dublin), Declan Waugh is quoted as saying:

*“The disease burden of this country has gone through the roof. The Republic of Ireland, (fluoridated Southern Ireland), has the:*

- *highest cancer incidence of all European countries, even as far as Russia*
- *the highest incidence of neurological illness*
- *the highest incidence of cardiovascular illnesses*
- *the highest incidence of diabetes*
- *the highest death rate from respiratory diseases (author's addition)*
- *and, since the 1970s, we had a tenfold increase per decade in autism.”*

Declan Waugh said:

*“We, [in Southern Ireland] have four and a half times the early onset of dementia in healthy adults aged between 39 and 59 than they have in Northern Ireland.”*

*“The south has twice the incidence of diabetes than they have in Northern Ireland... double the level of people suffering with depression... twice the number of Down's Syndrome.*

*In terms of numbers, as of 2013, comparing the South with the North:*

- *the mortality in the South from Diabetes is 470% higher than in the North*
- *the mortality from endocrine and metabolic disorders is 350% higher*
- *rheumatoid arthritis is 277% higher*
- *diseases of the musculoskeletal system are 228% higher*
- *onset dementia is 450% higher*
- *the incidence of Sudden Death Syndrome is 300% higher.”*

Declan concludes that:

*“There is no doubt in my mind that the record-breaking levels of sickness in Ireland are related to our water fluoridation. Other European countries either never started the practice, or gave it up decades ago.”*

## **Finland**

In Finland, researchers in the 1980s reported that people who lived 10 years in the country's one fluoridated city, Kuopio, had accumulated extremely high levels of fluoride in their bones – thousands of parts per million – especially osteoporosis sufferers and people with impaired kidney function. (7)

After this research was published, Finland stopped fluoridation altogether. (8)

Declan Waugh reported that, three months after Finland stopped fluoridation there would have been an improvement in general health.

## The Netherlands

The Netherlands' water was fluoridated in large parts of the country from 1960 to 1976.

It started in Holland, a region of The Netherlands, between 1953 and 1971, when there was a water fluoridation trial, but before the end of the trial much of Holland became fluoridated because their 'Water Supply Act' was worded in such a subtle way that their Minister of Health, on the advice of the Health Council, was able to give permission.

This action was supported by the professional association of dentists and the Dutch Society for the Promotion of Dentistry (NMT). However, many people began to oppose this forced practice as Holland was, after all, a free democratic society. To appease this tide of dissent, the government ordered that the 'minority' wanting fluoride-free water could obtain it from stand pipes, from water stations or from bottled water – this was thought to be a fair and reasonable solution. However, an official poll (NIPO) in Velsen, showed that 83% of the population were opposed to fluoridation and so were not the 'minority'. This was demonstrated by a never-ending line of people waiting to get free un-fluoridated water when Haarlem became fluoridated, and the same thing happened in Amsterdam, until strangely, there was added a lot of chlorine to their well water, making it unpleasant to drink. Despite this opposition, by June 1968, over 2.2 million people in The Netherlands were drinking fluoridated water.

Opposition continued and grew more forceful. Active campaigning groups, with petitions and information, saved The Hague from fluoridation on 12<sup>th</sup> June 1972. These same campaigning groups then initiated legal proceedings against the Council of Amsterdam, where water fluoridation had already been introduced. At the first trial, the Judge ruled that the Council had every right to fluoridate. However, after this ruling, campaigners took their case to the High Court and on 22<sup>nd</sup> June 1973, the High Court declared that WF was unauthorized and the Dutch authorities had no legal basis for adding chemicals to drinking water, if that chemical did not contribute to a sound water supply. The Judge ruled, that the measure (of WF) was "of such a drastic nature" that it did not fall under the 'Water Supply Act', and that the Dutch Parliament should make the decision. He further stated that, even if there was a majority vote in parliament for WF schemes, a new law would have to be made before WF could proceed. Because of this ruling, Tiel was fluoride-free by 20<sup>th</sup> January 1974. Other areas soon followed but it was not until the failed Parliamentary WF Bill on 27<sup>th</sup> April 1975, that the whole of The Netherlands became fluoride-free. (9)

It is interesting to note that the decision to start a WF trial in the Netherlands was taken by a small select group of people, consisting of town council administrators, medical doctors and dentists. The residents of the towns involved were not asked whether they approved as their consent was not requested. The people were simply informed through their local newspapers that a trial was going ahead on the 1<sup>st</sup> October 1952, and that Tiel was to be the fluoridated city at 1.0 ppm artificial F in the water, and Culemborg was the control as their natural water supply contained only 0.1 ppm F. Dentists continued to monitor children's teeth in Tiel and Culemborg for 16.5 years.

By 1971, the results of the trial were heralded a success with 66% reduction in tooth decay in Tiel, with no 'adverse side effects' reported. But soon it was discovered that teeth in fluoridated areas were slower to grow into the mouth. After this initial delay in tooth development, and by the time the children were 12 yrs-old, the decay rate in the two cities were virtually the same.

Regarding 'adverse side effects', there were 'side effects' such as heavier bones and a weight gain of two kilograms in the general population, later formerly acknowledged. But there were other 'side effects' too,

*"Mr Wansee, from Tiel, reported that his daughter and he himself had developed all sorts of complaints which started soon after the water fluoridation in Tiel began. They finally discovered that when they were on a family visit elsewhere, their complaints vanished.....for the last eighteen years they had been forced to fetch their drinking water from the pump station, where they could obtain water without fluoride".* (10)

Dr Hans Moolenburgh and his colleagues, living in Holland, were able to prove, by double blind trials, that fluoridated water could cause harm, rather quickly, and have an effect on every cell of the body.

It is interesting that Dr Assenberg was surprised to find a lot of bronchitis among her patients when she worked for two years in Tiel, the fluoridated city. She was also surprised to find, in the sputum of her patients, an unusual mould. Years later, when she found out that Tiel was fluoridated, she concluded that

fluoride, by killing beneficial bacteria in the mouth, allowed moulds to proliferate and that it was these moulds that undermined the immune system of her patients, causing them to fall ill with bronchitis.

## Switzerland

In Switzerland, the only town fluoridated was Basel. It was fluoridated for 40 years but, after seeing no improvement in children's teeth compared to the rest of the country, water fluoridation came to an end in 2003.

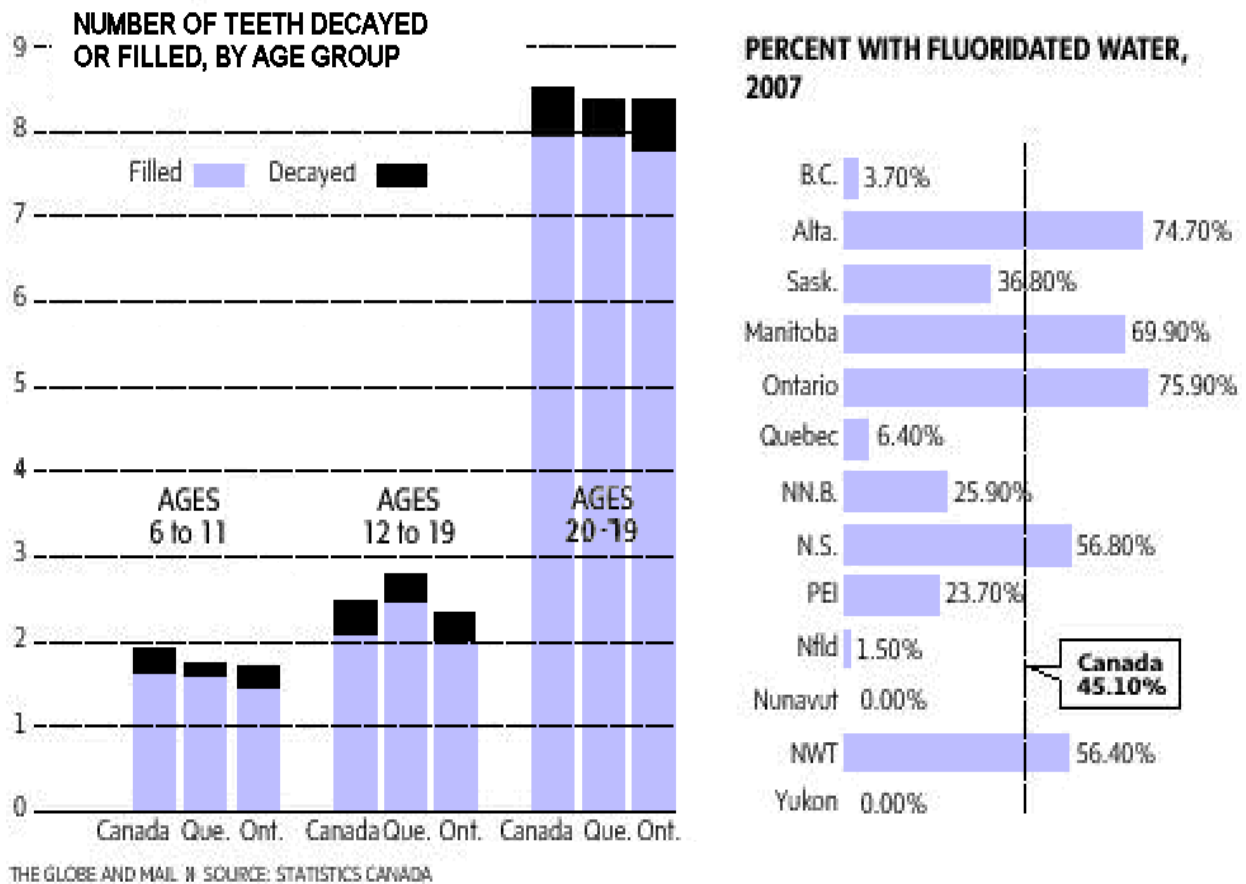
## Canada

In Canada, the first city to fluoridate its water supply in 1945, was Ontario and the practice became widespread but since then about 30 Canadian municipalities have banned fluoride, Waterloo being one of these, while Calgary banned it in 2011 and reinstated it in 2021. At the present time (2023), about 39 - 45% of the Canadian population has access to fluoridated water. In 2008, the fluoridated areas reduced their fluoride maximum level down to 0.7 mg/L, on the grounds of minimizing the risk of dental fluorosis.

The chart below shows that, in the provinces of Québec and Ontario, cavity rates are almost identical, yet Québec had a fluoridation rate of just 6.4% whereas Ontarians were fluoridated at just under 76% over the survey period. The populations of both provinces have comparable populations with equally good socio-economic lifestyles. Unpublished reports for British Columbia and Alberta show comparably similar data.

### Fluoride advantage not all that clear

Statistics Canada studied the dental health of more than 5,000 Canadians between 2007 and 2009. The cavity rates in Ontario, where fluoridation is widespread, were remarkably similar to those in Quebec, where fluoridation is uncommon.



The above chart is taken from Fluoridation-Free Ottawa website.

As for health, Canada has a high infant mortality rate and has the second highest rate of suicides when comparing all of the OECD countries, (nearly 40 countries) says the 2017 Commonwealth Fund Report. One in three Canadian adults (33.7%) lives with at least one of the following chronic diseases: cardiovascular disease (CVD), cancer; chronic respiratory disease (CRD), diabetes; mood and/or anxiety disorders. (11)

## USA

In the United States, 75% of the population have fluoride added to their water supplies, and fluoridated toothpaste is used by 95% of the population. The data below reveals that tooth health in America is poor.

*“Cavities occur in 65% of preschool children, 65% of poor six to eight-year-olds and 12 to 15-year-olds have cavities in their primary and permanent teeth respectively.” (12)*

*“...17-year-olds have an average of 11 decayed surfaces. Blacks and poverty populations have 2x and American Indians (who have been 100% fluoridated for 50 years) have 4x this decay.” (13)*

*“...25% of adults have 11 or 12 decayed teeth.”*

*“...44-year-olds have an average of 30 decayed surfaces.*

*“...43% of all Americans over 65 have no natural teeth.*

*“The prevalence of paediatric caries in the United States has remained consistent for the past three decades... there has been little improvement in preventing caries initiation.” (14)*

According to ‘Healthy People’, Feb 10<sup>th</sup>, 2020, America’s poorest children suffer high tooth decay rates, double that of non-poor children, while 66% of 6 to 9 year-olds and 60% of 13 to 15 year-olds from the lowest income families experience tooth decay compared with 33% of non-poor.

*“Seventy-five years of water fluoridation (and fluoridated toothpaste) has failed to narrow oral health disparities between the haves and have-nots. Cavities are linked to poverty, malnutrition... not to fluoride deficiency... fluoridation is a failed dental health programme,” says Prof Paul Connett, Director of Fluoride Action Network (FAN). (15)*

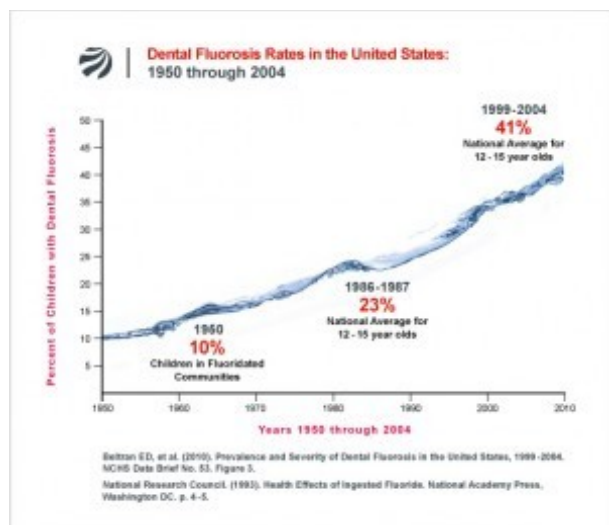
*“In the USA, dental caries is the most common un-met health need of children,”*

stated the US Public Health Service in 2000. (16)

*“In the USA, untreated caries has not shown improvement over the past 20 years.” (17)*

The appearance of dental fluorosis has been increasing among American children since the introduction of fluoride into the US.

Dental fluorosis rates in American children increased to 41% by 2004 – see graphs below.



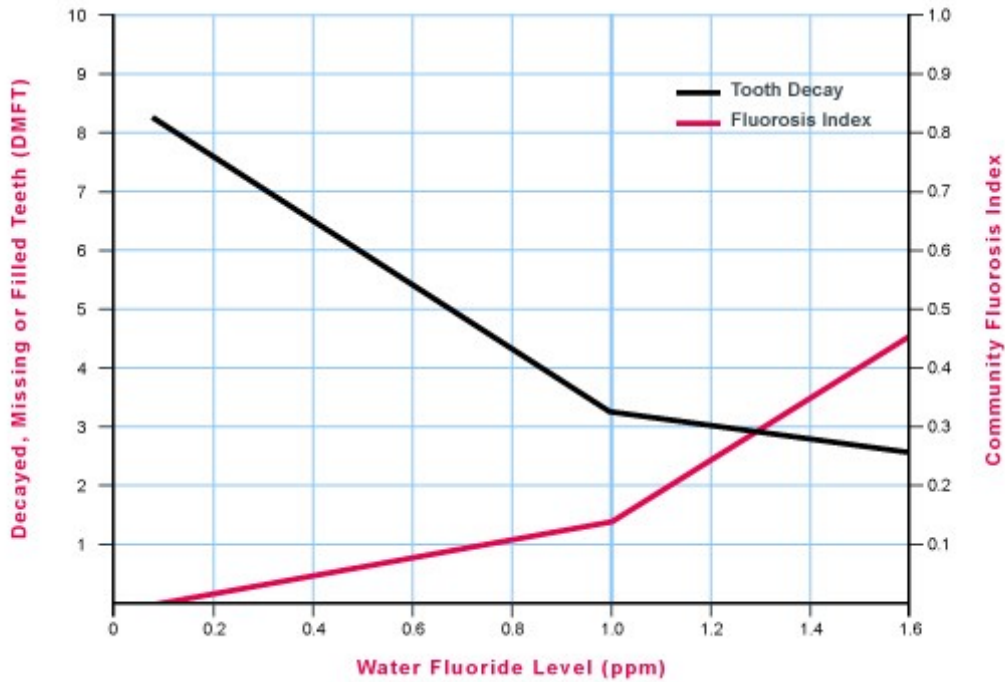




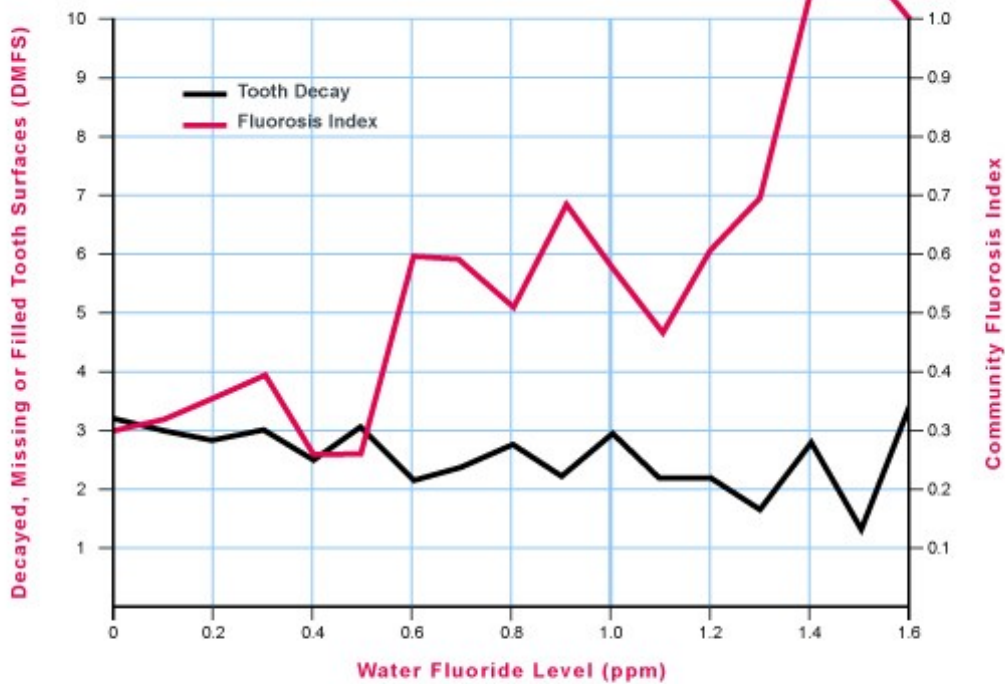
## Fluoridation, Tooth Decay, and Dental Fluorosis

What was predicted vs. what has actually occurred

### What was predicted in 1950\*



### What has actually occurred\*\*



\*Hodge HC. (1950). The concentration of fluorides in drinking water to give the point of minimum caries with maximum safety. *Journal of the American Dental Association* 40:436-39.

\*\*Heller KE, et al (1997). Dental caries and dental fluorosis at varying water fluoride concentrations. *Journal of Public Health Dentistry* 57:136-143, Figures 1 & 2.

The rate of dental fluorosis has continued to increase year by year.

Analysis of government data (NHANES 2011–2012) found that 65% of American children now have some degree of dental fluorosis. The survey found the objectionable degree of dental fluorosis, termed 'moderate' and 'severe', in 30.4% of children aged 12 to 15. This was an 8-fold increase from the previous national survey in 1999 - 2004 that found 3.7% affected. In other words, dental fluorosis has increased by 800% in just the last 60 years. (18)

Chris Neurath, DDS, said:

*"Although we were not able to determine what specific sources of fluoride caused these large increases of fluorosis, likely contributors include increases in water fluoridation, especially when used for mixing infant formula, and swallowed fluoride toothpaste."* (Author's bold).

Dr Tennant in his book, 'Healing is Voltage', states that:

*"Up to 90% of the American population has undiagnosed hypothyroidism. This epidemic is causing havoc with mental and physical health... The primary cause is fluoride in our water, and dental products and lack of iodine... Thus, we are treating almost an entire population with a therapy known since 1926 to shut down thyroid function."*

The US population has extensive fluoride exposure and has the highest rate of vaccinations. Many of these vaccines contain additive (adjuvants) such as aluminium or mercury. The synergistic effect from these combinations would create unfortunate outcomes in health, as is shown from the following statistics.

The National Institute of Health found that of 17 high-income countries studied, the United States in 2013 had the highest or near highest prevalence of obesity, heart and lung disease and homicides. For decades, the United States has experienced the highest infant mortality rate of high-income countries and ranks poorly on other birth outcomes, such as low birth weight. American children are less likely to live to age five than children in other high-income countries. (19)

A more recent study published on 20th Jan 2020, concerning health care in the US by Roosa Tikkanen and Melinda K. Akrams confirmed the above data. The authors used health data from 'Organisation for Economic Cooperation and Development' (OECD). Their study was titled, 'US Health Care from a Global Perspective 2019. Higher Spending, Worse Outcomes', and compared 11 nations; Netherlands, UK, Australia, Switzerland, Norway, New Zealand, Germany, France, Sweden, Canada and the US; for spending on health and the resulting quality of life. They concluded that:

*"The US spends more on health care as a share of the economy – nearly twice as much as the average OECD country – yet has the lowest life expectancy and highest suicide rates among the 11 nations (overtaking New Zealand for suicide which was rated in 2009 as having the highest). The US has the highest chronic disease burden and an obesity rate that is two times higher than the OECD average."*

(Chronic disease burden is defined as adults aged 18 years or older who have been told by their doctor that they have two or more of the following chronic conditions: joint pain or arthritis, asthma or chronic lung disease, and diabetes, and includes heart attack or hypertension/high blood pressure).

One in five American adults has some form of arthritis, reports an article in American Medical News, 'Arthritis Rates Increase', 1<sup>st</sup> January 2008. (20)

Bill Bryson in his book, 'The Body', which was published in 2013, states the following:

*"America comes just 31st in global rankings of life expectancy, despite their generous spending on health generally."*

Alix Mayer MBA, who serves on the board of Children's Health Defence, wrote in 2020 that:

*"Fifty-four percent of children and young adults in the US have chronic illnesses that lead to a life-long pharmaceutical prescription."*

Dr Thomas Cowan reported in 2018 that, in America, autism, learning difficulties, asthma and food allergies have exploded in their frequency and severity compared to a few decades ago. It is now common for families to have at least one member who is being treated for a chronic illness.

For example, approximately:

- 1 in 2.5 children has an allergy. (21)

- 1 in 6 children has a developmental disability. (22)
- 1 in 9 children has attention-deficit/hyperactivity disorder (ADHD). (23)
- 1 in 11 children has asthma. (24)
- 1 in 13 children has severe food allergies. (25)
- 1 in 36 children has autism. (26)

Dr Cowan concludes that,

“These numbers represent a national emergency.”

**Alise Terpstra RNCP, a resident of the USA explains her personal experience below;**

*“I am one of the first generation to be fluoridated as I was born in Grand Rapids, Michigan in 1952. Like millions of Americans my age, I am now fluoride poisoned with bone damage, thyroid disease and kidneys that can no longer excrete fluoride properly. My siblings are also fluoride poisoned. We all had decayed teeth with numerous fillings, so it didn’t help us at all. Our kids have dental fluorosis and cavities, so it hasn’t helped them either. Stop this insanity before another generation gets poisoned.”*

See Appendix 10, for a letter, dated 2021, that points out the failure of many predictions regarding fluoridation.

When fluoridation is discontinued, studies from the early 2000s indicate that there is less tooth decay. When fluoridation was discontinued in communities from Canada, the former East Germany, Cuba and Finland, dental decay did not increase but actually decreased. (27)

All the results above show that Water Fluoridation has not proved to be successful.

Professor Paul Connett stated in a FAN, Press Release, 16<sup>th</sup> October 2020,

*“Drinking water with fluoride above 0.15ppm should no longer be considered safe”.*

To end this chapter, reference must be paid to the work of John Snow and the current push for WF in the UK.

Dr John Snow traced the source of a cholera outbreak in Soho, London, in 1854, to a water supply. By removing the handle of a water pump he stopped the outbreak. Snow’s findings led to fundamental changes in the water and waste systems of London. This, in turn, gave rise to a significant improvement in general public health around the world.

At the present time there is a push by the UK government to add fluoride to all of the countries water supply. MPs would be doing a great dis-service to John Snow’s contribution and memory should they continue to support the deliberate dumping of a lethal substance into the UK’s water supplies and compromise the health of the population.

Elaine Hollingworth, Director of Hippocrates Health Centre of Australia writes:

*“There are only three possible reasons for your representatives to permit your water to be poisoned with fluoride: ignorance, stupidity or corruption.”*

## Chapter 10 References

(1) (Ref: [www.sugarfreesmiles.com](http://www.sugarfreesmiles.com)).

(2) (Ref: The Times 2002).

(3) (Ref: Caroline Wheeler. ‘Tap water can make you fat’. Sunday mercury July 11, 2004).

(4) (Ref: <http://www.fluoride-journal.com/99-32-1/321-27.htm>).

(5) (Ref: Taken from George C. Glasser’s book, ‘Smile Please but don’t say ‘Cheese’. Page 14).

- (6) (Ref: Declan Waugh's two reports 'Human Toxicity, Environmental Impact and Legal Implications of Water Fluoridation', 2012; Public Health Investigation of Epidemiological data on Disease and Mortality in Ireland to Water Fluoridation and Fluoride Exposure, 2013).
- (7) (Ref: Alvares EM, et al 1980; Arnala I, et al 1985).
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- (9) (Source: Fluoride The Freedom Fight by Dr Hans Moolenburgh).
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