

Time to Review Davenport's 60-Year-Old Fluoridation Agreement

Written by Todd McGreevy
Wednesday, 21 August 2013 09:46

*(**Publisher's note:** It's time for Davenport's city leaders to carefully and seriously review the requirements, terms, and benefits of a [60-year-old contract](#) that has resulted in the practice of medicating nearly the entire Scott County population with an industrial waste byproduct. The fluoridation of our water supply is happening without informed consent, and even if one wished to be medicated through the water supply, the current practice does not even use medical-grade materials. This issue is no longer fringe. Modern science points to the folly of fluoridation, much like science caught up with the folly of claiming the health benefits of cigarette smoking. What follows are the prepared remarks delivered by Joe Amato to the Davenport City Council Public Works Committee on July 17. The video of this presentation, and subsequent additional public comments, is online at RCReader.com/y/amato. (The [documents provided to the city council are here as a pdf](#).) Fluoride-Free Quad Cities has a meet-up at the Bettendorf Public Library on Tuesday, September 3, at 6:30 p.m.)*

Good evening. My name is Joe Amato. On behalf of the coalition Fluoride-Free Quad Cities, I would like to thank you for giving us this time to speak.

We are here tonight to present to you evidence that ingesting fluoride by drinking fluoridated water is definitely harmful and only insignificantly effective, and to request that you, as the responsible legal authority, pass an ordinance to cease fluoridating the public water supply.

We understand the city's legal department concluded in 2007 that the city "does not have jurisdiction over drinking-water quality and cannot stop fluoridation of the water by the Iowa American Water Company." This is mistaken.

Mr. Dennis Alt, environmental program supervisor and chief of the Water Supply Engineering Section of the [Iowa] DNR [Department of Natural Resources], confirmed: "There is no state law that requires public water systems provide fluoridation. The decision to fluoridate is a local option."

Iowa American Water Company [IAW] has its corporate policy on fluoridation posted on its Web site:

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“Q. Does American Water put fluoride in the water?

“A. Yes, in many systems. This is determined by local law. American Water and our subsidiaries do not put fluoride in water unless mandated by local law. American Water has a neutral stance on fluoride in water.”

Thus, the Davenport City Council is the authority for deciding whether or not we fluoridate our water. If the city council passes an ordinance directing Iowa American Water to cease fluoridating the water, that would be the end of it.

The first harm we wish to bring to your attention is dental fluorosis. Here is how it is defined and categorized by the Centers for Disease Control & Prevention, the CDC, and what it looks like:

“Dental fluorosis is a change in the appearance of the tooth's enamel. These changes can vary from barely noticeable white spots in mild forms to staining and pitting in the more severe forms. Dental fluorosis only occurs when younger children consume too much fluoride, from any source, over long periods when teeth are developing under the gums.

“Who develops dental fluorosis?

“Only children aged eight years and younger can develop dental fluorosis, because this is when permanent teeth are developing under the gums. Once the teeth erupt through the gums and are in the mouth, they can no longer develop fluorosis.”

So dental fluorosis only occurs when children under nine years old consume too much fluoride. Therefore, if a person has dental fluorosis, it is proof that they have ingested too much fluoride as a child.

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The CDC's latest national survey found that 41 percent of 12- to 15-year-olds had dental fluorosis. (This is not even counting another 20 percent deemed "questionable.") This is up 78 percent from the last survey and over an 18-year span. Forty-one percent of a generation will now spend the rest of their lives with teeth mottled by fluorosis, and the problem is only becoming more widespread.

The CDC has itself recognized since at least 1999 that "fluoride's predominant effect is post-eruptive and topical. ... Fluoride works after teeth have erupted." So drinking fluoride before age nine causes fluorosis in developing permanent teeth without effectively reducing dental caries, or cavities as most of us call them. Fluoride is only effective when applied directly to teeth. This has been known for the last 14 years. We have fluoridated toothpaste. Why are we still making our kids drink fluoride? Can we stop now?

Non-nursing infants are most vulnerable. The American Dental Association warned in 2006:

"Infants less than one year old may be getting more than the optimal amount of fluoride (which may increase their risk of enamel fluorosis) if their primary source of nutrition is powdered or liquid concentrate infant formula mixed with water containing fluoride. ... If using a product that needs to be reconstituted, parents and caregivers should consider using water that has no or low levels of fluoride."

Most people are probably unaware of this caution. Two states have taken proactive measures on a statewide basis to warn their citizens. The Vermont Department of Health issued its warning not to give any fluoridated water to infants under 12 month of age in December 2006. New Hampshire passed a bill last year requiring water-consumer confidence reports to publish a warning. Rather than warning parents that we render the public water supply unsuitable for their babies, would it not be far better to stop contaminating the water?

The second harm relates to brain development. The Harvard School of Public Health just published a review in October 2012. The Harvard review validated the methodology and findings of 27 separate studies on fluoride neurotoxicity published over 22 years. Here are the key quotes from the review:

"Children in high-fluoride areas had significantly lower IQ scores than those who lived in

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low-fluoride areas.”

“A recent cross-sectional study based on individual-level measure of exposures suggested that low levels of water fluoride ... had significant negative associations with children’s intelligence.” (Davenport falls in the cited range.)

“The results suggest that fluoride may be a developmental neurotoxicant that affects brain development at exposures much below those that can cause toxicity in adults.”

There were more children in the lower-IQ ranges and fewer in the higher-IQ ranges in areas of higher fluoride concentration. This study found a mean IQ difference of 8 points.

We do need to point out that concentration isn’t the same as dosage. Dosage will vary with how much water one ingests. The more water one drinks, the greater the harm from fluoridation.

Our research has uncovered discrepancies between the public-policy pronouncements of several health organizations and the scientific findings within their organization or profession.

The American Dental Association reflexively defends water fluoridation against any challenges. Our suspected reasons, and their conflicts of interest on this issue, are spelled out in the binders.

We find it ironic that the EPA set fluoride standards for drinking water at a level higher than its own scientists are willing to drink. The EPA Headquarters scientists determine drinking a quart of water in Washington, DC, causes one to consume over 100 times the calculated safe reference dose.

You, like most people, probably assume that sodium fluoride, the compound used in toothpaste, is what is used to fluoridate water. It may have been, but now we are being fluoridated with hexafluorosilicic acid obtained from water-scrubbing fertilizer-factory smokestacks.

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The EPA Headquarters Union of Scientists opposes water fluoridation. They conclude:

"The implication for the general public of these calculations is clear. Recent, peer-reviewed toxicity data, when applied to EPA's standard method for controlling risks from toxic chemicals, require an immediate halt to the use of the nation's drinking-water reservoirs as disposal sites for the toxic waste of the phosphate-fertilizer industry."

Given the harms caused by fluoridated water, one would presume the benefits of fluoridation must be great indeed to outweigh such harm. This is not the case.

Let us, for the sake of argument, make the strongest documented case for water fluoridation. The 1987 National Institute of Dental Research (NIDR) survey found that the average Decayed, Missing and Filled [DMF] Surfaces were 21.5 percent higher in unfluoridated versus fluoridated areas. This sounds significant but isn't. In absolute terms, we're looking at a difference between 2.8 and 3.4 tooth surfaces – about one-half of one tooth surface. In terms of teeth rather than surfaces, the difference is less than one-tenth of one tooth. The figures of this study clearly show the lack of appreciable difference in DMF between fluoridated and unfluoridated areas.

The ADA warns:

"Dental decay can be expected to increase if water fluoridation in a community is discontinued for one year or more, even if topical products such as fluoride toothpaste and fluoride rinses are widely used."

Studies conducted in communities that ceased fluoridating water, including countrywide in Cuba, show that not only did dental decay not increase, but continued its decrease.

Finally, a quick examination of World Health Organization data reveals a similar worldwide decline in dental caries, or cavities, among both the countries that fluoridate and the majority that do not. The worldwide decline in dental caries cannot be attributed to water fluoridation.

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This decline continues even after fluoridation is ceased.

The Fairbanks, Alaska, city council found themselves in your current position in 2010. Fairbanks even fluoridated to the same concentration as Davenport. When they were asked to cease fluoridation, they formed a committee of four Ph.D.s, one MD, and one DDS who studied the science and took public comments for one year. The task force submitted its recommendation to cease fluoridation to the council. Less than two months later the city council passed an ordinance ceasing fluoridation. The research has been done. We ask that you use it to follow their example and free our residents from the harmful effects of drinking fluoride. Please cease fluoridating our water.

Thank you. This concludes this evening's presentation. I can remain to answer questions, or return at a time of your choosing after you have had a chance to review the provided information binders. For more information, we encourage the public to visit FluorideFreeQC.org and FluorideAlert.org.