

THE AUSTRALIAN FLUORIDATION NEWS



ARTIFICIAL FLUORIDATION
IS WATER POLLUTION

www.fluoridationnews.com

afavaust@gmail.com

G.P.O. Box 935,

Melbourne, Vic., 3001

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THE "EFFECTIVENESS" OF WATER FLUORIDATION

by the

NATIONAL HEALTH AND MEDICAL RESEARCH COUNCIL (N.H. and M.R.C.)
WORKING GROUP, MARCH, 1991

Here we have another N.H. and M.R.C. Report struggling to maintain some scientific credibility and protecting fluoridation as a safe and effective process.

The N.H. and M.R.C. have been endorsing fluoridation since 1953 when, without any proper medical or dental studies, they promoted fluoridation as the wonder drug to stop tooth decay, but without any evidence of its medical safety.

Committee after committee have exhibited staunch solidarity on fluoridation decisions. They have relentlessly pumped out supporting literature to protect fluoridation and reject any data or criticism that questioned its safety and effectiveness.

"... rejected any data or criticism that questioned fluoridation safety or effectiveness."

NO PERSON WITH DIFFERING VIEWS ON FLUORIDATION HAS EVER BEEN APPOINTED TO ONE OF THEIR COMMITTEES OVER THE PAST 38 YEARS.

This in itself is sufficient to question the scientific honesty of the N.H. and M.R.C. and suggests a fear of having to face up to world scientific evidence about fluoridation that will finally question their organisation's credibility.

Discussing a world fluoridation study that showed the danger of fluoridation and the N.H. and M.R.C. attitude to such studies, the book *Fluoridation — Poison on Tap*, page 160 makes this observation —

"... the promoters of artificial fluoridation had simply ignored it and pretended no such work existed.

Unfortunately we must conclude that the N.H. and M.R.C. also pretend it did not exist."

"... excellent quality of children's teeth throughout the world in non-fluoridated communities ..."

This latest N.H. and M.R.C. Committee was appointed to examine data in a 7 page Submission, 28 January 1990 by Doctors Diesendorf PhD, P.R.N. Sutton D.D.Sc. (Melb.) L.D.S. (Vic.) Senior Research Fellow, Department of Oral Medicine and Surgery, Dental School, University of Melbourne, and John Colquhoun B.Sc. PhD, University of Auckland, New Zealand, relating to the excellent quality of children's teeth throughout the world in non-fluoridated communities and comparing them with those living in compulsory artificially fluoridated cities.

It took a 130 page Report to answer a 7 page submission!

Anyone with only a cursory knowledge of fluoridation would know this to be a very simple inquiry and almost an immediate way of establishing data from non-fluoridated areas, not only in Australia (Brisbane etc.) but world-wide.

The Committee stated page 13:

"... it was decided that the Working Group would concentrate its attention primarily on matters raised in the Submission". (by Diesendorf, Sutton, Colquhoun).

Nowhere in the Report is there data from all the Western European scientifically advanced countries where no fluoridation exists, where it has been tried, banned, disallowed by law and in other places never been considered.

Nowhere is there any scientific dental data about these important countries.

Nowhere is there any evidence in their Report on why these countries banned fluoridation.

Nowhere can the N.H. and M.R.C. show that these non-fluoridated communities suffer from rampant tooth decay because they do not drink fluoridated water. That is what the Committee implied throughout their Report.

The thrust of the Report is quite obviously planned to protect fluoridation and fill pages with what is nothing more than fluoridation sales propaganda.

"... the Report is quite obviously planned to protect fluoridation ..."

ing more than fluoridation sales propaganda.

It is scientifically, and indeed publicly regrettable that no investigation was attempted in order to correlate exactly the difference in children's teeth world-wide with and without fluoridation which would show the overall value, if any, of the fluoridation process when comparing the non-fluoridated areas and their populations.

The Committee made great use of Trendley Dean as the scientific foundation for fluoridation, also the first experiments on the U.S. people in Grand Rapids and Muskegon, U.S.A.

Trendley Dean's early mottled teeth sales pitch is the foundation on which fluoridation was founded.

Dean declared that mottled teeth caused by fluoride in the drinking water supplies were so excellent everyone should drink fluoridated water.

Nobody seemed interested to do anything but accept Dean's fluoride sales prognosis which has been the most quoted claim since the first artificial fluoridation plant in 1945.

EDITORIAL

Government Fluoride Medicine Without Responsibility or Accountability

The U.S. Wild West Guaranteed Cure-all Snake Oil Elixirs Revisited

The fluoridated time bomb ticks away noticed and unnoticed, an excuse that does nothing to defuse what science has known about fluorides since the beginning of the 20th century.

A clear scientific understanding, so obvious, it makes the fluoridation process an evil product of either or both commercialism or the forerunner of medical control of the human population.

Never in the history of the world has such an unwanted and dangerous medical process been so heavily promoted financially by government bureaucrats with the blessing of elected politicians, serving their Parliamentary term as "representatives of the people", a job they do so blatantly dishonestly, and completely foreign to our Constitution.

During the past 50 years the fluoridation lobby has infiltrated, by design, the teaching institutions, all kinds of civilian organisations, Political Parties, and from the heads of government comes their blessing of fluorides and fluoridation, all by way of a "single bloody-mindedness", disregarding not only "the will of the people", but also the Constitution of each Nation.

They represent in a very subservient manner the Fluoride Lobby, sometimes called the Fluoride Mafia of the U.S.A., the home and financial centre of fluoridation.

Their obvious policy is "we will blind them, (the naive politicians, dentists and doctors), with science". Yes they have blinded plenty with their outrageously bad science, for which real scientists are not proud.

One would think all environmental organisations and such-like would be "screaming mad" about such government chicanery with a commercialised medical and dental hoax.

Sadly, this is not the case and when examined one finds so many of these "holier than thou" organisations receive generous government grants of taxpayers' money.

The moral of course is "don't bite the hand that feeds", even though it retards honest action on behalf of its members.

Fluoridation is an ongoing repeat of the original American medicine man, with his pedalled snake oil elixirs sold with all the persistence of knowing the recipients would fall for his silky words of persuasion and so called medical expertise, all without any accountability.

Fluoridation is the present day snake oil elixir.

History shows that after a hundred years of taking advantage of the people, with "great elixirs and potents" chicanery can still be performed by the same kind of people.

It was reported that Mrs Kelly said "she would not even let Ned play with these kinds of people".

Maybe in the next one hundred years, films and TV will update by substituting fluoride for the snake oil elixir hoax.

Current scientific dental literature illustrates by proper research that, contrary to Dean's claims, mottled teeth are not superior, they are inferior.

It is similar to the dentists claim that fluoride cures osteoporosis. This shatters Dean and his disciples false fluoridation foundation.

Somehow Dean has remained the great fluoridation guru, an untouchable, enshrined in the U.S. Health Departments sacred scriptures on how to force free people to drink poison-laced fluoridated water all their lives.

The first important evidence exposing the deceptive claims in the early U.S. public health experiments, was published in a book — *Fluoridation Errors and Omissions in Experimental Trials* by Philip R.N. Sutton, D.D.Sc. (Melb.) L.D.S. (Vic) Senior Research Fellow Department of Oral Medicine and Surgery, Dental School, University of Melbourne, Melbourne University Press 1959.

The precise data compiled in that book still stands as a true account of the early fluoridation skullduggery.

Question: Why was there no reference of any kind to this important fluoridation publication?

It is interesting to read (page 92-93) the N.H. and M.R.C. rejection of animal studies,

"There will always be uncertainty associated with animal studies of carcinogenic risk."

"The major difference between the Inquiries is the openness of the A.C.T. Inquiry compared with the "closed doors" of the N.H. & M.R.C."

However, this year, 1991, the same N.H. and M.R.C. banned the use of urocanic acid in "cosmetics, sunscreens, etc." because **one** animal study suggested mice in multiple and variable treatments developed a higher yield of tumors. No data was supplied or published.

This was a "one-shot" kneejerk action compared with 40 years of fluoridation protection and argument, man hours, taxpayers' money, and rehashing all the old stories told over and over again, hoping the telling will some day be so enshrined in Government Archives and literature, it will be accepted as true science.

There are noticeable differences of conclusions between the Reports by Australian Capital Territory Legislative Council and the N.H. and M.R.C. The different conclusions, recommendations, and terms of reference are quite remarkable.

The N.H. and M.R.C. do not call for submissions from scientists or anyone else who questions fluoridation or publishes scientific books on the subject.

The description of the N.H. and M.R.C. already quoted seems to indicate their fear of facing current world-wide facts about children's teeth and the overstated benefits of fluoridation.

If you do not interview (in person or by correspondence) people from both sides of the debate, it is quite obvious the balance of bias is severely loaded against one side, and this is clearly distinguishable in the N.H. and M.R.C. report.

The A.C.T. Committee called for written submissions and interviewed many people. The Committee even travelled to Queensland to interview people and gain

". . . a "one-shot" kneejerk action compared with 40 years of fluoridation protection and argument."

local information on the subject.

Many days were employed interviewing people in the Assembly building at Canberra, where they also listened to submissions from interstate people and Dr John Colquhoun from New Zealand.

What is the difference in the final assessment of fluoridation?

The N.H. and M.R.C. recommends the continuation of fluoride at 1 ppm and the A.C.T. Committee recommends reducing that amount of fluoride by 50 percent to 0.5 ppm.

The major difference between the Inquiries is the openness of the A.C.T. Inquiry compared with the "closed doors" of the N.H. and M.R.C. Also, it was the first study by the Canberra Government, whereas N.H. and M.R.C. were concerned with the fluoridation endorsements their organisation is responsible for over the past 38 years.

The original N.H. and M.R.C. resolution on fluoridation

Continued page 3

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tion in 1953 set down terms for the introduction of fluoridation to community drinking water supplies in Australia, but after 38 years, they have not honoured those promises to the people of Australia or the Australian Government.

The Australian public pictures the N.H. and M.R.C. as a huge chemical, medical and dental laboratory where these "experts" work on original research on behalf of the Australian people, after which they produce scientific research data in reports to the Commonwealth Government.

This is not correct. The N.H. and M.R.C. has carried out no original laboratory research on fluoridation to prove its effectiveness and more importantly, its safety.

Has the N.H. and M.R.C. any scientific credibility?

When the Victorian Government Inquiry into Fluoridation called for Submissions in 1979, the N.H. and M.R.C. submitted their expert data on fluoridation in a bound submission.

At this point, one must consider that the Government, its Ministers, and politicians without exception, look to the N.H. and M.R.C. for the highest scientific, medical expertise in the country. This is its charter, to protect the Australian population.

The N.H. and M.R.C. produced one of their "expert" scientific documents to the Victorian Government Inquiry 1979-80, but not one reference was made to the N.H. and M.R.C. submission in the whole of the Victorian Government Report consisting of 450 pages.

"The N.H. & M.R.C. has carried out no original research on fluoridation to prove its effectiveness . . ."

Perhaps one reason was incorrect data such as claiming Burk & Yiamouyiannis did not allow for age, race, and sex in their study which the Victorian Government knew was not true, also details of cancer rates were also not true as warned by the Anti Cancer Council.

Again, quoting from the book *Fluoridation — Poison on Tap* page 157 states —

"Is it not stranger than fiction that such an organisation, the advisors to the Australian Government on fluoridation, do not even rate a mention in the Government Inquiry into a matter where they (the N.H. and M.R.C.) have the final word of recommendation to the Government, supposedly on sound scientific and medical grounds."

During 1978 when the N.H. and M.R.C. was making grand statements about fluoridation, the Anti-Fluoridation Association of Victoria wrote to their Executive Officer asking for answers to 26 straightforward questions.

With their usual attitude towards such questions, the Secretary of the Council wrote back as follows:

"With regard to the specific detailed questions contained in your letter, I am reluctant to allocate staff to undertake such an extensive compilation of data which you have requested. Furthermore the value of this approach is questionable. You will appreciate that particularly in the current economic stringencies staff members are very limited."

That would be a fairly representative type of answer one gets from the N.H. and M.R.C.

Without printing all the questions, but referring to the Secretary's statement about such an extensive compilation of data, it will interest readers to know the type of questions were:

"What original research has been done by your Council, what original research has been done by any other qualified group in Australia, what literature stating the cases against fluoridation is in your library, is your library open for inspection of your data on fluoridation? The Minister for Health states 'the National Health and Medical Research Council is continually updating their research into fluoridation'. Please supply your latest research data, both for and against fluoridation."

The above are examples of questions which "experts" would be able, and indeed should be able to answer readily, if they claim they know what they are talking about.

During the presentation of the latest Report, the N.H. and M.R.C. produced two Interim Reports which contain statements that affected our understanding of fluoridation, so on 13th November, 1989 we wrote to the Chairman of that Committee and asked if he would supply us with scientific data from which he assessed ". . . the results of several studies suggest that some deterioration is likely to occur". That related to a statement about what would happen if fluoridation was removed from Canberra's water supply.

No reply was ever received.

Putting aside all the usual selective material, the crunch comes when they try to establish medical standard dose rates.

They state in Table 24 that 1-2 ppm fluoride causes dental fluorosis, 8 ppm skeletal fluorosis, and that *20-50 mg per day is treatment for osteoporosis.*

What did the U.S. HHS 1991 study say about treatment of osteoporosis with fluorides?

"Well controlled studies have not demonstrated a beneficial effect of the use of high doses of fluoride in reducing osteoporosis and related bone fractures."

What the HHS said is accepted world-wide as correct; fluoride treatment for osteoporosis was not only unsuccessful but dangerous because it caused bone fractures.

It suggests a lack of scientific knowledge by the N.H. and M.R.C., or fear that the Government politicians may question the danger of this richly protected drug that is added to our drinking water supplies?

As the filling in the cake is of little importance scientifically, at least the 'let-out' conclusions are worthy of reading.

On page 83 they make the following statement:

"Szpunar and Burt (1990), investigated the fluo-

". . . advent of fluoridated toothpastes . . . has almost certainly increased fluoride deposition in the bones of some Australians."

ride exposure in Michigan school children and found that 98.6 percent of the children had used fluoride toothpastes, 27 percent had used topical fluoride rinses, 72.5 percent had at least one exposure to professionally applied topical fluoride, and 27 percent had used dietary fluoride supplements. The authors proposed a limit to the use or a reduction in the fluoride concentration of toothpastes, mouth rinses and supplements." (emphasis added)

The above statement illustrates quite clearly how fluoride in the water must be protected at all times, irrespective of whether it is causing problems, **reduce fluoride everywhere except in the water!**

On the same page in their conclusions about dental fluorosis and dosage, they state:

"While dental fluorosis is probably a sensitive indicator of the level of fluoride which humans are ingesting at the time of tooth development, its epidemiologic detection requires vigor, and the evidence about the extent to which it is increasing in communities served by fluoridated water supplies is debatable."

They then went on to say:

"However, there are no published studies on the level of fluorosis or its association with fluoride vehicles in communities in Australia since fluoridation was introduced. Clearly such studies are needed as dental fluorosis in childhood is the best available community indicator of total fluoride intake during the years of tooth development." **"The advent of fluoridated toothpastes in Australia has almost certainly increased fluoride deposition in the bones of some Australians. It**

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would not be surprising if there were some undetected cases of skeletal fluorosis in Australian population in individuals with pathological thirst disorders and/or impaired renal function. However, **the matter has not been systematically examined. This matter should be the subject of careful and systematic review.**" (emphasis added)

Here the N.H. & M.R.C. admit we are all being overdosed but their unscientific theme is — but please do not touch the fluoridated water!

They write this material as though their expert knowledge has discovered something new, but as so often related by our Association, the warning was produced in 1975 by Dr Sir Edward Dunlop at a Public Meeting held in the Melbourne Town Hall when he stated:

"The fact that lesser degrees of skeletal fluorosis are closely parallel to those of rheumatic diseases lessens the alertness of doctors."

The reference by Sir Edward Dunlop to "lesser degrees" relates to his description of grave abnormalities which he had personally seen in India caused by fluoride in the water supplies.

The N.H. and M.R.C. make a big splash on the fluoride-cancer link and attack Burk and Yiamouyiannis using all those well-known so-called scientific rebuttals by the fluoride lobby, all using each other to support

"... evidence that the duration of infant formula usage is a risk factor for dental fluorosis ..."

one another, making it look as if they are correct. This is the great ploy on fluoridation, instigated and well planned in the early 1940's as a way to make fluoridation fiction look credible because "he also said so".

A question to the Minister of Health under which the N.H. and M.R.C. is controlled.

In an investigation of such importance for the health of the Australian population, do you consider (1) no submissions from anyone outside the N.H. and M.R.C. are necessary? (2) if the expert committee of the N.H. and M.R.C. condemn a study that has been accepted in a number of important overseas court cases, would you not expect the authors of those studies to be contacted by the N.H. and M.R.C. for discussion of their research, before condemning them scientifically on very questionable data produced in the latest N.H. and M.R.C. Report?

The N.H. and M.R.C. Committee have never asked for submissions which seems most unusual in a so-called open scientific inquiry, and in attempting as they did, to scientifically assassinate Burk and Yiamouyiannis, why did they not communicate with these scientists about the data they were using against them? Even a communication with the Anti-Fluoridation Association would result in the supply of such data!

The Committee conclude on the fluoridation-cancer link page 93:

"After taking all the above factors into consideration, the Working Group is not convinced that the weight of evidence available at the present time is sufficient to establish a link between fluoridation of the public water supply and an increased risk of cancer".

Note:— "available at the present time" — what a let-out for the future credibility of the N.H. and M.R.C.!

When they get into fluoride in foods and beverages they seem way out in their scientific fluoride knowledge. They state tea has a "high concentration of fluoride". Tea brewed in the normal way with non-fluoridated water has a fluoride content of 1 ppm F so if the N.H. and M.R.C. consider this is a "high concentration" then all the fluoridated water supplies in Australia also have a "high concentration of fluoride".

Is a high concentration of fluoride safe? Seems safe in water and unsafe in tea!

They then get into a most important area of dosage when examining baby formula foods, especially when made up with fluoridated water. They state page 96:

"Surveys of infant formulas prepared using fluoridated water (N.H. and M.R.C. 1990) have demonstrated relatively high fluoride concentrations in the range 0.4 - 1.9 ppm (median 1.1 ppm) . . . similarly an earlier market basket survey (N.H. and M.R.C. 1987) reported a range from 2.1 - 3.1 ppm (median 2.6 ppm) in infants cereals, and 0.9 - 2.5 ppm (median 1.6 ppm) in canned baby foods."

"... take other measures which may be necessary to reduce the concentration of fluoride in manufactured infant formulas."

They go on to say:

"These findings and the evidence that the duration of infant formula usage is a risk factor for dental fluorosis suggests a need to limit infants ingestion of fluoride."

Manufacturers should assume that infant formula will be reconstituted in fluoridated areas. It is therefore preferable for manufacturers to use non-fluoridated water in semi-constituted formula, and to take other measures which may be necessary to reduce the concentration of fluoride in manufactured infant formulas." (emphasis added)

Strange how this (F) "very safe poison" has them concerned in everything EXCEPT water. Science or fiction?

They then conclude by saying:

"The public could then treat it as equivalent to breast milk or cows milk (i.e. negligible fluoride content)."

Could that statement be misunderstood to mean baby formula is equal to breast milk values?

Can any mother be happy knowing that they are today poisoning their baby with a dose of fluoride hundreds of times in excess of that found in breast milk and the N.H. and M.R.C. only giving lip service?

In 1991 the N.H. and M.R.C. are beginning to understand what we have been attempting for many years to protect the Australian babies from fluoride poisoning with baby formulas and fluoridated water.

They cannot have it both ways — fluoridation is safe, or unsafe for babies, but today recommendations from overseas countries accept the world-wide recommended dosage of no more than 0.25 mg (F) per day for babies up to 2 years.

In further calculations on page 100, Table 33, the N.H. and M.R.C. estimate that a two-year old child receives 1.14 mg fluoride per day but even coming to this conclusion, that only allows the baby to drink one-third of a litre or about half a pint, which seems extremely low and impracticable.

However, the total of 1.14 mg fluoride for a two-year old baby equals nearly 500 percent overdose!

On page 104 part of the first paragraph makes frightening reading when considering the bulk of their publication tells you what a wonderful "safe drug" fluoride is for the community.

They state —

"A greater prevalence and severity of dental fluorosis is not only the first sign of toxicity, but has the advantage of being readily diagnosed and compared both over time and between groups. Hence a substantiated increase in dental fluorosis would be sufficient grounds for concern over total fluoride intake, and would suggest the need for altering the current pattern of exposure to fluoride vehicles." (emphasis added)

In the A.C.T. Report that Committee (page 85) use a study by "Carr, Fluoridation of Canberra, ADA Journal 1966", showing "Canberra before fluoridation" record-

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Box C9, P.O. Clarence Street, Sydney 2000
- Victoria
Anti-Fluoridation Association of Victoria,
Box 935 G, G.P.O. Melbourne. 3001

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ing 7 year old children with 42.2% and 12 year olds 53.4% mottled teeth.

As Dr L. Carr has been an executive of the N.H. and M.R.C. for many years we suggest this data by Carr is known to the present "expert Committee".

We mention this because it seriously questions the scientific honesty and reputations of the dental experts who not only recommended but pushed for the introduction of fluoride into the drinking water supplies in Canberra 1963 knowing that over 50% of 12 year olds were already showing the first signs of "fluoride toxicity" as described by the N.H. and M.R.C. indicator mottled teeth.

It all sounds like Arsenic and Old Lace!

In spite of such an obvious warning, the N.H. and M.R.C. go on to protect fluoride in the drinking water by stating the increased ingestion of fluoride is from tablets, drops, fluoridated toothpaste and such like, but they will not entertain any reduction for drinking water supplies.

They also state when referring to the recent animal studies that:

"In that case an argument might be mounted that it would be a prudent decision pending further resolution of this matter in human population, to reduce long-term exposure to fluoride. Such a decision would necessarily entail a trade-off between certain (although not readily quantifiable) increase in dental caries and the possibility of ensuring at least a comfortable safety margin or even of achieving a marginal reduction in actual risk in relation to bone cancer." (emphasis added)

Perhaps as part of finishing this critique it is worth quoting from page 110 of the Report:

"Australia has more than most countries invested heavily in study of fluoridation as a public health measure (and this has achieved beneficial results) but it has contributed less to the fundamental body of knowledge which is and will continue to be essential if water fluoridation is to continue as a National and regional preventive strategy. The issue is dynamic."

It is a matter of concern that the Working Group cannot point to a single ongoing Australian study which monitors adequately the impact and possible adverse consequences of this policy, and that in its pursuit of the terms of reference the Working Group has had to rely on indirect analyses of very inadequate data sets, collected not for the monitoring of this policy, but for other purposes a limited number of Australian studies and upon overseas investigations of these

matters." They say of their recommendations "those recommendations and conclusions must be qualified by emphasising the current dearth of an adequate evaluative Australian data-base." (emphasis added)

Perhaps on that note it is time to conclude by re-quoting the last sentence stating that **"the current dearth of an adequate evaluative Australian data-base"**.

Perhaps this N.H. and M.R.C. Committee did not intend to scientifically incriminate their organisation by admitting in the year 1991, after 38 years of endorsing fluoridation that there is a **"current dearth of an adequate evaluative Australian data-base"**. **"There are no Australian reports which permit the Working Group to precisely estimate with confidence, the current intake of fluoride which various aged individuals are ingesting, nor the differential amounts of fluoride which is being stored in Australian skeletons, in fluoridated and unfluoridated areas."** (Emphasis added)

And yet they have the scientific arrogance to recommend the Government keep flushing the stuff through every Australian person.

This is a short critique of a long and tedious Report on fluoridation, a critique which questions the validity of its contents and its relationship to the health of Australian people.

Perhaps the proof of the pudding is well illustrated by the recent presentation of a declaration of fluoridation safety to 120 Victorian politicians asking each to give a personal guarantee of safety and agree to pay compensation to anyone harmed from drinking fluoridated water.

No replies were received.

This declaration is available to every politician from the Prime Minister down and the day each and every one signs accordingly, then and only then can the Australian population believe in the genuineness of those in authority forcing this mass medication on to the public of Australia.

With all the recommendations in their Reports for future studies required to prove the safety and effectiveness of fluoridation it makes the fluoride dogma a ridiculous and dangerous exercise in fantasy.

But politicians live in a land of make believe, theatre in the parliament, and promises, promises, with no honest accountability or responsibility.

When the N.H. and M.R.C. "inquiry" is printed in book form we feel sure they will not report that on 23 August 1991 it became Law that the concentration of fluoride in Canberra's drinking water supplies must be reduced by 50% to 0.5 ppm F.

ON THE WATERFRONT

by John Archer

This publication is recommended to all those interested in unpolluted drinking water supplies. **On the Waterfront** is available in most book shops at about \$11.

Reference was made to the book in an article, **Sydney Sun-Herald**, 28th July, 1991, under the heading "Just how safe is our water supply?" Extracts are as follows:

*"In his book **On the Waterfront** making your water safe to drink, Archer reveals there is no legal definition of pure water in Australia, although there are voluntary guidelines set down by the Australian Resources Council and the National Health and Medical Research Council (N.H. and M.R.C.)"*

"In all but a few significant aspects, the W.H.O. (World Health Organisation) and N.H. and M.R.C. guidelines parallel each other, but it is these differences which leave some important questions unanswered," he writes —

"For example Archer cites the W.H.O.'s acceptable levels of carcinogens, aldrin and dieldrin as 0.03 micrograms per litre, while the N.H.

and M.R.C. has an acceptability of 1 microgram per litre.

The N.H. and M.R.C.'s levels for chlordane, DDT, heptachlor and lindane are also higher than those set by W.H.O.

The Chairman of the N.H. and M.R.C.'s Pesticides Committee, Dr Alan Black, said this week the guidelines were under review. He said they were set down earlier than those of W.H.O. and were therefore difficult to compare.

When chlorine combines with organic carbons from natural debris such as leaves, it forms trihalomethanes which can cause mutations in cells, according to overseas research. Some studies suggest a possible link between the presence of trihalomethanes and cancer.

However, Dr Ralph Matthews, Senior Principal Research Scientist with the C.S.I.R.O.'s Division of Coal and Energy said the benefits of chlorine outweighed the risks."

The stated reaction of the C.S.I.R.O. Senior Principal Research Scientist, Dr Ralph Matthews is unscientific and non-medical understanding, because there are

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other safer methods of disinfecting drinking water supplies already used in countries where chlorine has been discarded for obvious health reasons.

Discussing fluoridation and children's teeth the article stated:

"Archer examines the use of fluoride which was introduced in Australia in 1953 to improve dental health.

The study by Dr Mark Diesendorf from the Australian National University revealed that there was little difference in tooth decay of ten year olds in unfluoridated Brisbane and other capital cities between 1977 and 1987.

He said these results have been supported by studies in New Zealand and the U.S.A.."

After Archer makes his point on the state of chil-

dren's teeth being equal in non-fluoridated areas, the reply came back from Dr. Cathy Mead of the N.H. and M.R.C. saying the N.H. and M.R.C. "would continue to recommend fluoridation".

Well one should expect such solidarity and personal reputation protection of all those who guarantee fluoridation is safe and effective and no one will be harmed from drinking fluoridated water.

Archer said the bulk of the responsibility for our water rests with Water Authorities.

However, it is reported that "the Head of the Sydney Water Board, Mr Bob Wilson said the book would serve to raise the level of debate on the issue, he would not comment on the accuracy or facts stated in the book."

FLUORIDATION THE POLITICAL WAY

Following our article "The Fluoride Acid Test", *Fluoridation News*, July/August 1991 in which we quoted Jeff Kennett's opinion about compulsory medication, we received a copy of a letter 4th June 1991 written by Mr Kennett, as Leader of the Opposition, Victorian Parliament.

He stated:

"To the best of my knowledge, we have yet to be convinced that the fluoridation of Melbourne's water supplies has caused major problems. In fact, it has been shown that it has a net community benefit."

He then went on to say in his final paragraph:

"I can only say I am sorry that you are adversely affected by fluoride in our drinking water supply. I also understand that you would not be alone in this." (emphasis added)

The Leader of the Opposition in the Parliament admits **"I also understand you would not be alone in this."**

The Parliamentary Leader of the Liberal Party admits his understanding of fluoridation health hazards, but his Party's policy is compulsory medication of all Victorian people.

One may ask who does Mr Kennett really represent?

It seems not the people who voted him into his responsible public position, but the faceless people who control the political actions in our Parliament.

History repeats itself, and perhaps here we have a repeat of dentist Bull in his famous 1950 oration to a special fluoridation dental symposium under the auspices of the U.S. Public Health Service.

Dentist Bull in his promotion of fluoridation said:

"We have told the public that it works so we can't go back on that." (Extract of minutes "Promotion and Application of Water Fluoridation, Congress Library".)

Another interesting recommended promotional exercise for dentists was:

"Public meetings should be sponsored by lay groups and service clubs."

Bull singled out the school teachers' and parents' association as "a honey when it comes to fluoridation". "Give them all you've got!"

Bull's program was very successful on many trusting organisations who felt no one should or would distrust such high ranking government public servants.

But fluoridation history not only repeats but changes dramatically as seen in July/August 1991 *Australian Fluoridation News* where we reported the United States National Parents' and Teachers' Association had withdrawn its support for compulsory, artificial fluoridation.

It's a long time, 40 years, since Bull and his dentists sold fluoridation, but truth is an everlasting concept of our existence. We need never to bow to such evil.

STOP PRESS

FLUORIDE DEFEATED SEPTEMBER 1991

**Truth and The Will of People.
It can happen in Australia.**

King Solomon 950 B.C. said:

"Wisdom is the principal thing; therefore get wisdom; and with the getting get understanding."

On Saturday 14 September 1991 the people of Port Macquarie, Coffs Harbour, Howlong and Gosford, N.S.W., voted "for or against fluoridation" of their particular drinking water supplies.

RESULTS

Port Macquarie	AGAINST	71.5% (20,533)
	FOR	28.5% (8,198)
Coffs Harbour	AGAINST	63.5% (16,671)
	FOR	36.5% (9,589)
Howlong	AGAINST	79.5% (569)
	FOR	20.5% (147)

Gosford — The local paper "Central Coast Express" 20.9.91 on its front page said "Fluoride gets the thumbs down". The editorial said "Voters turn off fluoride taps".

At the time of going to press the only results from Gosford are official samples from two areas showing 60% against fluoridation.

The usual Government and Dental fluoridation promotion was distributed throughout including their covert and overt fluoridation propaganda all of which was challenged with scientific fact, backed by medical and dental published evidence.

The result of "truth", "science" and "people power" against the political clout, the mighty wealth of the Government fluoridation lobby, demonstrates the contra "might of right" on which basis the anti fluoridationists successfully promoted their campaigns in the three cities.

Honest and responsible people would normally accept the "will of the people" so let us hope the Premier of N.S.W. and his Government will fit into the category of honest, responsible and above all accountability and let fluoridation die in these cities accordingly.

VIDEO AVAILABLE

An excellent video on the Fluoridation Debate at Port Macquarie 31 August 1991 is available from Don Mackay, 182 Old Lake Road, Port Macquarie, NSW 2444. Cost \$20.00. We recommend this video which shows the Government experts expounding their science on fluoridation followed by three speakers against. The video clearly illustrates the **quality** of the Government fluoridation propaganda followed by the "will of the people".

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