



CDC and ADA Now Advise to Avoid Using Fluoride

A new study in the *Journal of the American Dental Association* warns against using fluoridated water to make baby formula.

For many decades the ADA and the CDC (Center for Disease Control) have assured the public that fluoride in the drinking water is absolutely safe—even for babies.

Why the change? This brief treatise explains why the change and why officialdom has resisted change for so long.

Over a decade ago the EPA water safety scientists unanimously went on record against water fluoridation; and it took these researchers eleven years before that, studying past and emerging research, before their unanimous conclusion.

Entrenched government policy and all the people dependent on that policy are very slow to change.

Tooth Mottling: With that said, let's go to tooth mottling also called enamel fluorosis. Ingesting fluoridated water can eventually lead to discolored or badly damaged teeth.

American Dental Association (ADA) originally stated publicly on Nov. 9, 2006 that *"Infants less than one year old may be getting more than the optimal amount of fluoride if their primary source of nutrition is powdered or liquid infant formula mixed with water containing fluoride."* On October 25, 2010, on the ADA website, *"According to the American Dental*



Association, mild enamel fluorosis...may occur when children ingest excess fluoride while their teeth are developing."

The Centers for Disease Control and Prevention (CDC) is of a similar conclusion. According to their website: *"Recent evidence suggests that mixing powdered or liquid infant formula concentrate with fluoridated water on a regular basis may increase the chance of a child developing ... enamel fluorosis."*¹ (See note 6 at the end)

Dental Fluorosis—a Sign of Excessive Intake:

Dental fluorosis results in white and brown spots on your teeth. It is only caused by fluoride—typically due to ingesting too much fluoride during your developing years, from birth to about 8 years of age. According to the CDC, about one-third of U.S. children aged 12 to 15 years have very mild to mild forms of enamel fluorosis on their teeth.

Promoters of fluoridation say that these markings are "just cosmetic," which is the euphemism adopted when dental fluorosis began to increase and thus became an issue of concern. Whatever one calls it, it can be an indication that the rest of your body, such as your bones and the rest of your organs, including your brain, has been exposed to too much fluoride.

As Dr. Paul Connett, a chemist specializing in environmental chemistry, explained in recent interview:

"We know that 32% of American children have been overexposed to fluoride because you have this telltale sign of dental fluorosis, which in its mildest form is little white specs. But when it gets more serious, it affects more of the surface of your teeth and it becomes colored; yellow, brown, and orange mottling of the teeth... The teeth are the window to the bones. If you've seen the damage to the teeth, what damage can you not see?"

In other words, if fluoride is having a detrimental, visual



effect on the surface of your teeth, you can be virtually guaranteed that it's also damaging something else inside your body, such as your bones.

Bone is living tissue that is constantly being replaced through cellular turnover. Bone building is a finely balanced, complicated process. Fluoride has been known to disrupt this process ever since the 1930s.

Fluoridation got its start because:

1. There were hopeful feelings of reducing dental cavities. However, the evidence was controversial; research on the question was in its infancy (in the 1940s).
2. The government felt alarmed because of fluoride's heavy health damage on atomic bomb workers. Fluoride was necessary to enrich uranium. There was great fear that Hitler's scientists would beat the U.S. in the race to develop an atomic bomb; the American government agencies involved, because of this urgency, exerted great PR/propaganda efforts to paint fluoride with a smiley face.
The theory was developed that fluoride wasn't the threat to the bomb workers. Also, in terms of putting it in drinking water at a highly diluted rate (1 to 4 ppm), the pushers of fluoridation said it would be almost totally expelled from the body, (which has been proven to not be true).
3. Alcoa Aluminum and later the fertilizer industry had a toxic by-product (fluoride) that they had to spend large sums of money to make safe. So they and others supported water fluoridation as a way of disposing of this toxic waste.

The convergence of these three influences produced a juggernaut that prompted the EPA water safety scientists and others in Washington to eventually call fluoride "the protected pollutant." Even today, it is against the law to dump it on the ground, in streams, or in the ocean.

Fluoride is comparable to arsenic and lead in toxicity, and the presence of these two are causes for alarm when found in water.

Using an analysis of how fluoridation got a green light from government agencies and others, the author goes to Mary Sparrowdancer's book, *The Battle of Darkness and Light*.

"As the world breathed a sigh of relief in knowing that the Nazi health officials' experimentation on human beings had been halted in Germany, 1945 marked the year that 'public health officials' in America began their experimentation on human beings with water fluoridation." Why does she write "experimentation?" —Because it is a very toxic chemical and little or no testing of its long-term effects had been done.

Her writing explained that looking at the beginning of the campaign to fluoridate drinking water, we can and should assume good intentions on the part of some or many of the original researchers and proponents.

Nevertheless, some complexity comes into this picture when we find out much of the early research was funded by Alcoa Aluminum and others who had fluoride waste to sell—and recently released records show the military was anxious to put a positive face on fluoride.

Back in the 1940s, problems were arising because of crippling health damage to the A-Bomb workers and also livestock near the production plants. The imperatives of producing an A-Bomb before the Nazis led to a devious expediency, one of deflecting health damage possibilities away from fluoride.

An attitude of acceptable risk carried the day. This was understandable in light of the survival/defense posture created by the Japanese attack and Germany's design for world



domination. Also there was the fact that, in spite of crippled cows, etc. near the involved plants, there was the unproven theory that fluoride in the body did not accumulate; rather, it broke into other elements which were then eliminated from the body.

Faulty, Corrupted Testing: No one involved in management doubted the heavy toxic results of fluoride at the concentration levels in the plants and surrounding areas, but there was hope that the diluted fluoride compound being used to fluoridate drinking water would be okay. The sad and corrupt part is that the testing experiments were terminated early, and water fluoridation was whitewashed. Subsequent testing was SHORT TERM and used a different compound than what was being used in over 90 percent of the fluoridated water systems.

Much of the beginning research on the safety and effectiveness of water fluoridation was funded by government grants, and there were pressures to give fluoridation a positive image with the A-bomb workers and with the public.

Facts emerge: Over the years scientific studies have produced conflicting pictures. However, after a half century plus, it seems irrefutable that:

- Ingesting fluoride via drinking water has little or no effect on the prevention of dental cavities. However, topical application, as in toothpaste, has some beneficial effect.
- Sooner or later the ingesting of fluoride will produce some deleterious effects on the body. Some of this very toxic chemical is not eliminated and takes up residence in the body's cells—those most vulnerable.
- Research shows fluoride produces dental fluorosis and increases susceptibility/vulnerability to cancer, kidney damage, neurologic/brain impairments, bone fractures, lowered thyroid function: it slows down at least 62 enzymes, increases infertility, hyperactivity, or lethargy. The list of negative health effects suspected and proven is

larger, but those mentioned should suffice to make the point.

- As mentioned elsewhere after eleven years of examining the previous research on fluoridation, the water safety researchers at the EPA voted unanimously to ban water fluoridation.

History: The many aspects of the story of fluoridation are well documented in Christopher Bryson's book *The Fluoride Deception* and Paul Connett's book, *The Case Against Fluoride*. The author of this piece, Ken Howard, has written a smaller compilation of evidence titled, *Fluoridation, The Good, The Bad & The Ugly*.

Central questions are: how did fluoridation come to have so much official support? Why has scientific certainty been so difficult to establish?

This involves the determination of causes in the immensely complex world of human health, plus the role of position, status, optimism and money in shaping conclusions. There are such things as honest predilections, negative pride (the ego-driven need to be right, damn the evidence, full speed ahead—perhaps because of misplaced faith and good intentions) and downright corruption of evidence in order to achieve or maintain status and monetary reward, plus avoid lawsuits.

The flawed, questionable science that proponents of fluoridation used from the beginning asserted that the case for fluoridation was a slam-dunk; no safety questions whatsoever. Lacking tested research this became a political issue rather than one of health science.

The following is somewhat redundant, but is included for emphasis and clarity. Because fluoride was vital to the production of Atomic Bombs, a combination of forces worked



to put a "good face" on this very toxic element.

What follows is a partial review of an article, by the title of "Fluoride, Teeth & the A-Bomb," that appeared in *Earth Island Journal*-Winter 1997-98. The researchers of the article were Joel Griffiths and Christopher Bryson.

The authors tell us that some six decades ago, the United States started a campaign to add fluoride to public water supplies. The public face of this huge PR push was reduction of dental cavities. Recently declassified documents are adding a new dimension to the history of the fluoridation movement. They reveal a surprising connection between fluoride and the dawning of the nuclear age.

The authors state: "The government's hidden motives behind promoting fluoride as 'safe' have not been revealed to the general public, nor to civilian researchers, health professionals or journalists—until now."

The documents reveal that fluoride was a key chemical in the production of atomic bombs. Throughout the Cold War, huge quantities of fluoride were needed. One of the most toxic chemicals known, fluoride became the leading chemical health hazard of the US atomic bomb program—both for workers and for nearby communities.

Griffiths and Bryson chronicle the many details of the government's efforts to mitigate and hide the extent of the problem (which included lawsuits against the plants making the fusion material). This included public relations—propaganda efforts. Many steps were taken to defuse the situation, including support for water fluoridation with all the attendant claims of safety.

Medical researchers, who have reviewed these recently declassified documents, fear that Cold War security considerations may have prevented objective and scientific evaluation of fluoride's true impact on public health. (See Note 1 at the end)

However, even in the beginning there were good studies that raised questions about adding such a toxic chemical to drinking water. These were shunted to one side (see Note 2) and a public image of opponents as “radical, conspiracy freaks” and “know-nothings” was cultivated under the leadership of Edward Bernays—the father of modern commercial propaganda.

Good science takes time with checks and double checks of methodology and screening processes to eliminate bias and happenstance. Many are the scientific “facts” of the early 1900s that have been refuted or greatly modified.

Journey: in our youth we go from an attitude of the infallibility of authority, especially scientific authority, to an attitude of critical analysis. This is a journey that everyone takes to some degree. For the author of this piece, the journey has been slow. An attitude that water fluoridation is beyond questioning sadly has become a closed issue on the part of many.

A while back the Belgium health minister called fluoride “a slithering poison,” meaning its effects are usually subtle, slow developing, and hard to detect.

In the third quarter of the 20th century, Western Europe was largely fluoridated. Then, as evidence gathered, they began to reject fluoridation. Today Europe is less than 2 percent fluoridated. (See Note 4)

The balance of scientific opinion is changing, but it will take the proponents time to change because of the investment they have made in reputations, money, and because of the sheer lethargy of the bureaucratic process. Saving face is not just an oriental cultural trait.

A 2006 report by a committee of the National research Council recommended that the federal government lower its current limit for fluoride in drinking water because of health risks to both children and adults.

Studies have shown that high doses of fluoride can



stimulate the proliferation of bone-building osteoblast cells, raising fears that the chemical may induce malignant tumors.

The NRC committee concluded that fluoride can subtly alter endocrine function, especially in the thyroid—the gland that produces hormones regulating growth and metabolism... Says John Doull, professor emeritus of pharmacology and toxicology at the University of Kansas Medical Center, who chaired the NRC committee: “The thyroid changes do worry me. There are some things there that need to be explored.”

What the committee found is that we’ve gone with the status quo regarding fluoride for many years—for too long, really—and now we need to take a fresh look. For a half century or more the scientific community, who have depended on what the fluoridation proponents have said, have come to think the issue is settled. Doull says, “But when we looked at the studies that have been done, we found that many of these questions are unsettled and we have much less information than we should, considering how long this [fluoridation] has been going on. I think that’s why fluoridation is still being challenged so many years after it began. In the face of ignorance, controversy is rampant.”

The above goes along with an EPA spokesman who, in response to a congressional committee question, admitted that the agency in charge of water safety, the EPA, has no long-term, chronic disease type studies on the effects of water fluoridation.

Note 1: A Manhattan Project (A-Bomb) memo, April 29, 1944, contained a frightening warning: "Clinical evidence suggests that uranium hexafluoride may have a rather marked central nervous system (CNS) effect... It seems most likely that the F [fluoride] component rather than the T [code for uranium] is the causative factor."

In the memo-stamped "Secret," Colonel Stafford Warren, head of the Manhattan Project's Medical Section, was asked to

approve a program of animal research on CNS effects since it was deemed important "to prevent a confused workman from injuring others by improperly performing his duties." He did so immediately because of the gravity of the situation. This was at the height of World War II. Other than memos, the research program is missing from the files of the National Archives, "... no evidence of the Manhattan Project's fluoride CNS research could be found in the files."

Reference: Fluoridation: The Good, The Bad, & The Ugly, by Kenneth M. Howard, p 73-74; for the "rest of the story," see The Fluoride Deception, by Christopher Bryson

Note 2: The August 1, 1988 issue of Chemical and Engineering News carried a 17-page article featuring fluoridation. It dealt with the attempt of fluoridation promoters to suppress the publication of articles, which might indicate that fluoridation is unsafe or ineffective.

Dr. Richard Foulkes authored a report in 1973 recommending mandatory fluoridation in the province of British Columbia. By 1992 he concluded, "Fluoridation of a community's water supplies can no longer be held to be safe or effective in the reduction of tooth decay ... even in 1973 we should have known this was a dangerous chemical." Dr. Foulkes points out that his original report was based on information given to him, which was biased and selected.

Professor Allert Schatz, PhD (Microbiology) Award Winning discoverer of Streptomycin, the drug that fights bacterial infections, stated, "Fluoridation ... is the greatest fraud that has ever been perpetrated and it has been perpetrated on more people than any other fraud has."

Robert C. Atkins, M.D. is the founder of a New York City medical clinic, author of several best-selling books and host of a national syndicated radio health program. He states, "Our government has spent forty years telling us fluoridation is safe, and actively promoting what is, in effect, forced medication, and now



it's paralyzed by the enormity of its error."

Dr. Phyllis Mullenix says she lost her job at Harvard's Forsyth [Dental] Research institute in 1994 after she insisted on publishing research results showing that fluoride adversely affected brain function. By 1994 Dr. Mullenix had spent 12 years in Forsyth's toxicology department. Eleven of these twelve years she served as the chairman - oops! Chairwoman of that department.

Question: Has what happened to Mullenix happened to others who have taken a stand to make public those findings which are contrary to the official fluoride policy? YES-Many times!

Good scientific procedure welcomes contrary evidence as part of an on-going, self-correcting process of true science. However, the fluoridation issue, from the beginning, has been shaped by money and the created illusion of reducing dental cavities. Potential loss of funding seems to indicate censorship of material and dismissal of reputable employees.

Don Hay, the associate director of Forsyth Research Institute, told Mullenix, "If you publish this information, we won't get any more grants from NIDR (National Institute of Dental Research)," and he also told her, "Forsyth gets about 90 percent of its money from NIDR." Upon learning that she was, indeed publishing her paper, Forsyth fired her.

Note 3: Prominent Dental Researcher Apologizes for Pushing Fluoride. Dr. Hardy Limeback addressed his faculty and students at the University of Toronto, Department of Dentistry. In a poignant, memorable meeting, he apologized to those gathered before him in these words:

"Speaking as the head of preventive dentistry, I told them that I had unintentionally misled my colleagues and my students. For the past 15 years, I had refused to study the toxicology information that is readily available to anyone. Poisoning our children was the furthest thing from my mind.

"The truth was a bitter pill to swallow. But swallow it I did.

"Unfortunately, the CDC is basing its (fluoridation) position on data that is 50 years old and questionable at best. Absolutely no one has done research on fluorosilicates, which is the junk they're dumping into the drinking water. On the other hand," he added, "the evidence against systemic fluoride in-take continues to pour in.

"...(As a dentist) I have absolutely no training in toxicity," he stated firmly. "Your well-intentioned dentist is simply following 50 years of misinformation from public health and the dental association. Me, too. Unfortunately, we were wrong."

(These Exerpts are from an interview between Barry Forbes, journalist at The Tribune in Mesa, Arizona, and Dr. Hardy Limeback, Canada's leading fluoride authority and Canada's primary promoter of fluoride until April of 1999.)
Dr. Limeback, D.D.S., Ph.D. in Biochemistry, is head of the Department of Preventive Dentistry for the University of Toronto, and has been president of the Canadian Association for Dental Research.
Dr. Limeback lists the formal data that caused his paradigm shift as a dentist in the posted article, "Why I Am Now Officially Opposed to Adding Fluoride to Drinking Water" at the website: <http://www.fluoridealert.org/limeback.htm>

Note 4: Europe—Fluoridation

Europe, after investing heavily in water fluoridation, has strongly rejected it. Only 2 percent of Europe remains



Clinical Toxicology, 1984
 U.S. Environmental Protection Agency

fluoridated. Why? Water fluoridation was stopped in the following World Health Organization (WHO) countries, according to a report in the *International Society for Fluoride Research*, Fluoride 31 (3), 1998, pp. 171-174:

Federal Rep. of Germany	Introduced 1952	stopped 1971
Sweden	Introduced 1952	stopped 1971
Netherlands	Introduced 1953	stopped 1976
Czechoslovakia	Introduced 1958	stopped 1988/90
German Dem. Rep.	Introduced 1959	stopped 1990
USSR	Introduced 1960	stopped 1990
Finland	Introduced 1959	stopped 1993
Outside Europe: Japan	Introduced 1952	stopped 1972

Cessation of fluoridation in these countries is the result of mounting scientific evidence that fluoridation is neither safe nor effective.

“Dentists and WHO experts predicted a very large caries increase (“a tide of caries”) after termination of fluoridation in those European countries. Analysis of the data, however, reveals a significant decrease in dental caries (caries decline) after suspension of water fluoridation in Japan, the Netherlands, Prague, the German Democratic Republic, and elsewhere. Never has any real increase in dental caries been observed after water fluoridation was discontinued.”

Note 5: Miscellaneous Facts

1. The type of fluoride added to drinking water never occurs in nature. It is a toxic industrial waste product, contaminated with many hazardous substances.

Lucier Chemical Industries, Inc. internal spec sheet.
 Chemical and Engineering News, vol. 66, p. 39, 1988
 Thomas Reeves, Chief Fluoridation Engineer, CDC, 2001

2. Fluoride is more toxic than lead and slightly less toxic than arsenic. However, several hundred times more fluoride is allowed in the water than either lead or arsenic.

3. Fluoride gradually accumulates in the body and the environment, like lead and arsenic, gradually inflicting damage over a long period of time.

Clinical Toxicology, 1984
 U.S. Dept. of Health and Human Services, ATSDR Doc. TP 91/17 (1993)

4. Four glasses (one liter) of fluoridated water equals a one-milligram prescription dose of fluoride, or four times the maximum dose for children 6 months to 3 years of age.
 EPA Drinking Water Glossary, p. 19, June, 1994
 Pediatrics, vol. 95, 1995

5. Infants should be given no fluoride at all. Formula made with fluoridated water is harmful to babies.
 Journal of Public Health Dentistry, vol. 59, 1999
 Journal of the American Dental Association, vol. 131, 2000

6. There is NO DIFFERENCE in tooth decay rates in fluoridated and un-fluoridated cities. Recent studies of de-fluoridated cities have shown no increase in cavities, and sometimes a decrease.
 Perspectives in Biology and Medicine, vol. 41, 1997
www.fluoridealert.org/WHO-dmft.htm
 Journal of the Canadian Dental Association, vol.53, 1987
 Caries Research, vol. 34, pp. 462-8, 2000

7. Fluoridation chemicals have never been approved for safety or effectiveness by either the EPA or the FDA. The product used in most water supplies is hydrofluorosilicic acid.
 Letters from the EPA, CDC, FDA, and NSF responding to a congressional investigation, 1998-2000

8. Fluoride is linked to many health problems, including thyroid



disease, bone cancer, behavior problems, arthritis, and genetic damage.

J. Clinical Endocrinology, 18:1102-1110, 1958

Problemy Endokrinologii, 42:6-9, 1996

Chemical and Engineering News, vol. 66, 1988

Lancet, vol. 36, p. 737, 1990

Review of Fluoride: Benefits and Risks, U.S. Public Health Service, pages F1-F7, 1991

Carcinogenesis, vol. 9, pp. 2279-2284, 1988

A Brief Report on the Association of Drinking Water Fluoridation and the Incidence of Osteosarcoma among Young Males, New Jersey Department of Health, Nov. 1992

Neurotoxicology & Teratology, vol. 17, no. 2, 1995

9. Fluoridation has been rejected, discontinued, or banned throughout most of the world. Almost all of Europe is un-fluoridated, and their teeth are often healthier than fluoridated Americans'.

Chemical and Engineering News, vol. 66, p.30, 1988

World Health Organization data

10. It is the right of every citizen to make their own personal health decisions. It is a basic right to have our water supply free of medication. No one should be forced to drink fluoride.

11. Dental fluorosis, the permanent discoloration, scarring, and weakening of children's teeth, is a visible sign of fluoride poisoning. Fluorosis is rapidly increasing in this country, even in un-fluoridated areas.

Journal of Public Health Dentistry, vol. 57, pp. 136-143, 1997

Journal of Public Health Dentistry, vol. 46, pp. 184-187, 1986

Journal of the American Dental Association, vol. 108, pp. 56-59, 1984

12. We are already being over-fluoridated without drinking artificially fluoridated water. Fluoride is found in most toothpaste, in foods and drinks processed in fluoridated areas, and in pesticide residue on fruits, vegetables, and grains.

13. Recent studies show that hip fracture rates in the elderly are significantly higher in fluoridated areas.

Journal of the American Medical Assn., vol. 264, 1990

Annals of Epidemiology, vol. 2, pp. 617-26, 1992

Amer. J. of Epidemiology, vol. 150, pp. 817-24, 1999

14. Malnourished people, particularly children, as well as the elderly, people with diabetes, kidney, and heart disease, are at greater risk for fluoride's harmful effects.

U.S. Dept. of Health and Human Services, ATSDR Doc, TP 91/17 (1993)

15. Because fluoride toothpaste contains enough fluoride to seriously poison a small child, there is an 800 number to call on the back of the tube, as stated by Proctor & Gamble, the maker of Crest.

Note 6: Dental fluorosis—in 1986-1987, 22.6 percent of adolescents aged 12-15 had dental fluorosis, whereas in 1999-2004, 40.7 percent of adolescents aged 12-15 had dental fluorosis. (Eugenio D. Beltran-Aguilar, D.M.D., M.S., Dr. P.H.; and Bruce A. Dye, D.D.S., M.P.H., CDC's National Center for Health Statistics, November 2010, #53 NCHS Data Brief.)

Note 7: New study from China correlates fluoride levels in children's blood to lowered IQ. After 24 former studies regarding effects of fluoride on brain development, a new study was released on December 17, 2010:



Background: Animal studies show that brain fluoride levels increase with increasing exposure to fluoride. Human studies have indicated an association between high levels of drinking-water fluoride and lower intelligence.

Objective: This study was conducted to assess the relationship between serum fluoride and children's IQ. **Conclusions:** The results indicated that fluoride in drinking water was *highly* correlated with serum fluoride, and higher fluoride exposure may affect intelligence among children. (Citation: Xiang Q, Liang Y, Chen B 2010. "Serum Fluoride Level and Children's Intelligence Quotient in Two Villages in China," peer-reviewed by Environmental Health Perspectives: <http://ehp03.niehs.nih.gov/>)

¹ Sources: Journal of the American Dental Association October 14, 2010; 141(10):1190-1201; CDC May 28, 2010

NEWS RELEASE

Wednesday, January 12, 2011

From: NYSCOF@aol.com—Dan Stockin and Ken Howard, Abundant Living Information Services (alinfo.net)

Please send this to your media and legislative contacts and others, and visit our www.spotsonmyteeth.com website

Fluoridegate: Fluoride Spots On Teeth the Tip of the Iceberg

Calls for Investigation Accelerate as Documents, Conflict of Interest Questions Emerge

Decades of assurances that consuming fluoride in drinking water is a safe and an effective way to prevent cavities are being called into question as a jarring Fluoridegate controversy erupts across the nation.

A series of disclosures are surfacing about the actions of water fluoridation promoters that point to a likely tsunami of Fluoridegate investigations, hearings, and explosive courtroom entanglements.

Tennessee state legislator Frank Niceley states, "There is a real Fluoridegate scandal here. Citizens haven't been told about harm from fluorides, and this needs to be investigated by the authorities and the media."

On January 7, 2011 officials at the U.S. Dept. of Health and

Human Services recommended lowering the amount of fluoride in drinking water.

Health officials stated that their recommendation was simply a fine-tuning of fluoride levels to prevent a largely unnoticeable teeth staining called "dental fluorosis." But information now being shown to law firms, legislators, and investigative journalists affirms that the tooth staining is often disfiguring, that fluorides pose multiple other risks, and that questions about conflict of interest, undue influence and improper actions warrant investigation.

"A number of groups, law firms, and journalists now want the names and job descriptions of persons inside CDC, both now and previously, that have been responsible for CDC's promotion of water fluoridation," Stockin says.

Other key issues are surfacing: Was improper influence by vested interests the reason CDC did not issue a press release four years ago about risks related to baby formula and fluoride? At the time, CDC quietly admitted on a little-noticed web page that because of possible dental fluorosis, parents may want to mix infant milk formula with unfluoridated water.

The Gerber baby products company now sells an unfluoridated water so parents of babies can avoid using fluoridated water for mixing milk formula.

The National Kidney Foundation quietly withdrew its endorsement of fluoridation in 2008 and did not put up a visible link to its new statement on its website or issue a press release to alert its members.

NKF is a recipient of grant funding from the Centers for Disease Control.



In 2006 a National Academy of Sciences report designated kidney patients, diabetics, infants, and seniors as "susceptible subpopulations" that are particularly vulnerable to harm from ingested fluorides.

Call to Action: A Fluoride Warning for Infants—We propose and urge that the state legislature requires all fluoridated drinking water systems to place the following warning on all billing statements:

Your public water supply is fluoridated. Fluoridated water should not be added to infant formula, foods, or drinks intended for babies 12 months of age or younger in order to avoid dental fluorosis.

For the sake of our children and to avoid or minimize law suits, we urge you to contact your state legislators and county officials.

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For those who want more evidence of manipulation:

Cancer Bioassay Findings In 1990, the results of the National Toxicology Program cancer bioassay on sodium fluoride were published, the initial findings of which would have ended fluoridation. But a special commission was hastily convened to review the findings, resulting in the salvation of fluoridation through systematic down-grading of the evidence of carcinogenicity. The final, published version of the NTP report says that there is, "equivocal evidence of carcinogenicity in male rats," changed from "clear evidence of carcinogenicity in male rats."

The change prompted Dr. William Marcus, who was then Senior Science Adviser and Toxicologist in the Office of Drinking Water, to blow the whistle about the issue, which led to his firing by EPA. Dr. Marcus sued EPA, won his case and was reinstated with back pay, benefits and compensatory damages. EPA water safety scientists submitted material to the subcommittee dealing with the cancer and neurotoxicity risks posed by fluoridation.

"We believe the Subcommittee should call for an independent review of the tumor slides from the bioassay, as was called for by Dr. Marcus, with the results to be presented in a hearing before a Select Committee of the Congress. The scientists who conducted the original study, the original reviewers of the study, and the review commission members should be called, and an explanation given for the changed findings."



Examples of dental fluorosis. Even with mild fluorosis, enamel is subject to increased erosion and attrition because the structural integrity of the enamel is compromised. An enamel breaks away, small pits become visible.

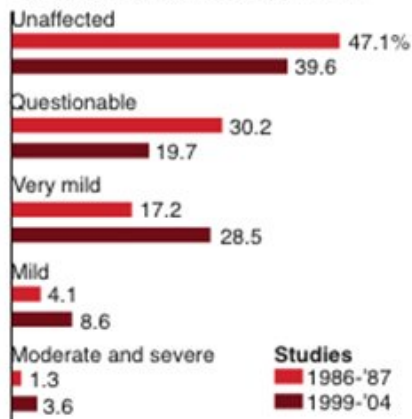


Government lowers recommended level of fluoride in water

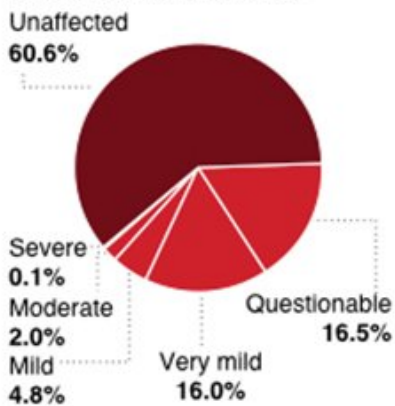
The U.S. Department of Health and Human services recommended lowering the level of fluoride to 0.7 milligrams per liter of water. Since 1962, the standard has fluctuated between 0.7 and 1.2 milligrams. The change comes after a study found increasing numbers of fluorosis, or discoloration of the teeth, among adolescents.

Dental fluorosis

Change in the prevalence in dental fluorosis among children aged 12-15



Percent distribution of dental fluorosis among persons aged 6-49 in the United States from 1999-2004



SOURCES: GDG/NCHS, National Institute of Dental Research, National Survey of Oral Health in U.S. School Children, 1986-1987 and National Health and Nutrition Examination Survey, 1999-2004 AP