



WATERSHED

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The battle for Buttermere

A tiny lakeland village with a population of about 50 souls has become the unlikely focus of attention in the continuing fluoridation saga.

The matter was brought to the AGM last year by Roy and Carol Smith, whose sleuthing revealed that the water company was upgrading the village water supply - but the new water would come from fluoridated Ennerdale.

The Smiths and campaigners from Cumbrians Against Fluoridation jostled with the health authority and the water company for months. The NPWA held a public meeting in the village hall, attended by most of the residents and their elected Councillor. The water company and the HA were not invited, since their positions were already known. The residents decided that they did not want their water fluoridated.

The 'official' line held by the water company and the HA was that Buttermere could be fluoridated because it was a 'protected scheme'. Not so, said the campaigners, and promptly called in North West Councils Against Fluoridation, who obtained copies of the original agreements and arranged a meeting with the water company to discuss the position and the validity of the agreements.

The original agreements signed in the 1960s and 1970s, by which parts of Cumbria are fluoridated, did not include Buttermere. No public consultation had ever taken place.

Dr Paul McCormick, legal adviser

to NWCAF, chaired the meeting of Council, water company, health authority and NPWA delegates which took place at Whitehaven at the end of January.

A water company delegate said that the company had taken advice, which indicated that Buttermere is part of a 'preferred scheme' and there was no need for a consultation.

Dr McCormick pointed out that although the water company believed that they had no choice but to continue to fluoridate in Cumbria, the original agreements showed that they could have ceased fluoridation after two years from the commencement, or any time thereafter. He said that the water company's belief that they can not now cease the practice is open to legal challenge.

Dr McCormick opined that one party to a contract can not be locked in to an agreement in perpetuity by the other party. In his opinion their Lordships would not look favourably on this because it is against the common law.

A shocked spokesperson for the HA exclaimed that if this is so, all existing water fluoridation schemes could be affected. Several delegates nodded in agreement.

Copeland Borough Council has always been against water fluoridation. Allerdale Borough Council is in favour. However, the Buttermere crisis led Allerdale to conduct a survey of the electorate via the Council's free newspaper.

Eighty-three per cent of respondents voted that the Council review its decision.

Allerdale BC has set up a task group to consider the evidence and will make a decision based on its findings.

ACTION REQUIRED

The NPWA executive committee requests all members who live in fluoridated areas to write to their own councils and their water providers, requesting copies of all the original agreements made between the (then) water providers and the councils, which facilitated fluoridation in their areas. Please send copies of these agreements to NPWA head office as soon as possible.

IRISH EXAMINER. 26.01.02

Anti-fluoridation campaign hits election

By Fionnuala Quinlan

A group opposing water fluoridation are to field two candidates in the General Election - one of whom will run in Health Minister Michéal Martin's constituency.

All told, 11 Irish local authorities have asked to be allowed to halt the practice.

Fluoride Free Water (FFW) spokesman, Dr Don Mac Auley, said they would field two anti-fluoridation candidates in Cork South Central and Dublin South.

"Over the next two months we are going to raise the issue of fluoridation and make the public aware of the dangers. "We are setting out to raise the issue in the Minister's own constituency and then challenge him electorally," he said.

FLUORIDATION CHEMICALS HAVE NOT BEEN SAFETY TESTED - HERE'S THE PROOF

Recent NPWA investigations revealed that the chemicals used to fluoridate drinking water had "FAILED FORMAL VOTE" in Europe. In January 2002, we exchanged several emails, extracted below, with UK and EU people responsible for setting Standards for water chemicals.

We wrote to **Dr Guy Franklin** of the Water Research Centre, whose website states that they are equipped to test and approve to European Standards (EN), British Standards (BS), International Standards (ISO), UK Water Industry Specifications (WIS) and a host of others.

We wrote: "Will you please let us have all the details of the testing which your agency or any other has done on disodium fluorosilicate and Hexafluorosilicic acid on which these chemicals have been adopted in the UK?"

Dr Franklin replied, copied to Peter Jackson of WRc plc:

"I can not disclose any testing information of disodium fluorosilicate or hexafluorosilicic acid because any data generated is the property of the commissioning body. This is not an attempt to hide data. In the past data was submitted to the Drinking Water Inspectorate for product approval under Regulation 25 of the Water Supply (Water Quality) Regulations. Once approval was given the products were added to a list published by the DWI. However, under EC procurement rules, any product with a European Standard can not be subject to equivalent National Regulations. These products are now the subject to first party certification and have been removed for the DWI list."

We wrote again to Dr Franklin, cc'd to Peter Jackson:

"I am sure that you will appreciate our increasing concern when relevant information on chemicals which are added to the British public water supply with the intention of treating people are not freely available.

If you will please furnish the name of the commissioning body for whom the testing of these chemicals was done . . ."

Here is an extract from Peter Jackson's lengthy reply:

"WRc-NSF recognises that it has a reputation as a professional organisation which can be relied on to maintain confidentiality regarding sensitive and confidential information and will not act in any way which might prejudice that reputation. The importance of confidentiality between WRc-NSF and its various clients is a topic of high priority within the company

However, I can inform you categorically that WRc-NSF has never tested any samples of disodium hexafluorosilicate or hexafluorosilicic acid. Therefore in this case we have no test data to release nor names of clients - these simply do not exist.

Disodium hexafluorosilicate and hexafluorosilicic acid are classified by DWI as "Traditional Chemicals" for which there is no requirement to gain DWI approval for particular commercial products. Therefore individual commercial brands of these chemicals have never been listed or tested by DWI. We have done tests . . . but not in the case of these particular chemicals.

The quality of disodium hexafluorosilicate and hexafluorosilicic acid suitable for the treatment of drinking water is specified in BS ENs 12174 and 12175 respectively. These standards do not contain any requirement for third-party testing. It is up to the manufacturer to ensure that their product meets the requirements . . . This would be done through in-house quality assurance procedures.

ENs 12174 and 12175 were produced by CEN TC164/WG9 in which I participate as Principal UK Expert. I am also the Chairman of BSI Committee C11/59 that provides the UK input to this CEN Committee and receives draft standards for comment. I am therefore in a good position to state categorically that no product

testing was undertaken in the development of these ENs. No manufacturers of fluoridation chemicals participated in WG9, or in its sub-committee Task Group 4. The specifications in ENs 12174 and 12175 were developed on the basis of existing standards . . . and codes of practice . . .

In only a very few cases have CEN TC164/WG9 Task Groups undertaken product testing . . . not to determine the purity of products per se. In the case of disodium hexafluorosilicate and hexafluorosilicic acid, no testing at all would have been carried out since no manufacturer of these products participated in the work of WG9 or TG4. As noted above, it is the manufacturer's responsibility to ensure that a product sold as conforming to a BS EN does in fact meet the specification. TG4 has now been disbanded since its work is complete and all of its members have now retired from their companies."

HE ADDED:

"To summarise:

- 1. WRc-NSF has not tested these chemicals. WRc-NSF does not have access to any information that NSF International may hold.**
- 2. No approval or testing by DWI is required or has been carried out.**
- 3. The BS ENs for these chemicals do not specify any third party test requirements. Quality assurance is provided by manufacturers who operate externally-assessed quality control systems.**
- 4. No product testing was done in the course of developing the BS ENs."**

SO, NOW WE KNOW.

Fluoride-pushers' letter gets short shrift from "THE PROBE", (Vol.44, No.2, February 2002).

ACTION REQUIRED:

Please send copies of this correspondence to your MP, MEP, Councillor and Water Company. ASK THEM TO ASK TONY BLAIR how and why these chemicals, which FAILED a FORMAL VOTE in Europe were EACH given a BS EN.

'Alarmist' fluoride reports undermine efforts.

Your news feature on fluoride (Fluoride: Are opinions changing? December 2001) reports that Dr Vyvyan Howard has 'selected various papers' which he claims establish that fluoride and, by implication, water fluoridation, is neither safe nor effective in reducing tooth decay rates.

The University of York Centre for Reviews and Dissemination's systematic review of the safety and benefits of water fluoridation (1) is a far more reliable source of evidence - not least because it looked at all the evidence and so avoided the possibility of bias in selection of studies. The review concluded that water fluoridation is effective in reducing tooth decay and no evidence of a link with cancer, bone fractures or other adverse effects was found. The most recent survey of UK 5-year-olds highlights, yet again, wide inequalities in dental health. (2). Young children living in socially deprived, non-fluoridated areas continue to suffer unacceptably high levels of tooth decay.

We are disappointed that The Probe has, on this and other occasions, been prepared to publish articles on fluoride and fluoridation which are, frankly, alarmist and do much to undermine the profession's efforts to improve the dental health of the most vulnerable children.

Ian Wylie, Chief Executive, British Dental Association.

Sheila Jones, MPH, Co-ordinator, National Alliance for Equity in Dental Health.

[The "National Alliance for Equity in Dental Health" is a fancy name for the British Fluoridation Society and their pals. ALSO NOTE: 1. The York Review did NOT look at all the evidence. 2. They found the studies reviewed were of poor quality with a risk of bias. 3. They found that 48% of people living in fluoridated areas have dental fluorosis.]

[The Probe's] Editor's comment:

I note your concerns regarding our report of the fluoride aware-

ness day; however, I'm afraid that I can not and will not take the stance of ignoring all fluoride-related issues which may or may not seem controversial.

As a dental newspaper, The Probe would be failing in its duty if I, as editor, chose to shy away from issues which challenged the majority opinion.

Derrick Garwood's article was purely a report of an open meeting. It did not call for new recruits to the 'anti-fluoridation brigade', nor did it in any way imply that everyone reading the report should immediately denounce fluoride. It did, however, feature the views of qualified dentists, who -whether or not you agree with their line of thought - are just as entitled to their opinions as you or I.

I fail to see how allowing the profession to read a report of a meeting will "undermine the profession's efforts to improve the dental health of the most vulnerable children". Surely, the pro-fluoride professionals amongst us will not be swayed by the publication of an impartial report. I certainly do not consider the views of those opposing fluoride to be at risk from those reports regarding effective, fluoride-containing dental products, regularly featured in both The Probe and its sister magazine The Hygienist. The Probe is a newspaper for the dental profession, like it or not, comprises a whole variety of opinions. Dr Rynne's challenge to the Irish Government over its fluoridation policy is a newsworthy issue - therefore, it warrants coverage.

On the other hand, if anyone reading this knows of any forthcoming pro-fluoride events or newsworthy pro-fluoride issues, please do be sure to let us know. As a dental newspaper The Probe would be most interested in reporting on them.

**Aide memoire:
Please help our work to
continue by remembering the
NPWA in your Will.**

Irish Doctor Sues

A packed meeting at Coventry for FLUORIDE FREE DAY heard Dr Andrew Rynne give his reasons for bringing a case against the Irish Minister for Health to stop the mandatory fluoridation of the Republic's water supply.

He has issued proceedings against the Minister for Health, the Eastern Regional Health Authority, Kildare County Council, the Attorney General and the State. The basis of the case is that the Irish Constitution guarantees certain human rights, and the 1960 fluoridation law is unconstitutional as it infringes his right to bodily integrity. It is likely to be heard in the high court in about 18 months.

Senior Counsel believes the case has every chance of succeeding in the high court or the supreme court. Should that fail, he has an excellent chance in the European Court of Human Rights, arguing that fluoridation breaks article five of the Council of Europe's 1997 Convention on Human Rights and Biomedicine, which states "an intervention in the health field may only be earned out after the person concerned has given free and informed consent".

Dr Vyvyan Howard, clinico-cytotoxicologist of Liverpool University gave an exceptional review of the dangers of fluorides.

Chairman of the Meeting, **Dr Tony Lees**, BDS, demonstrated the plethora of fluorinated dental products which add to the total body burden of the population.

The following is extracted from an article published in "Dentistry", 7 Feb. 2002.

What Constitutes Uninformed Consent?

Tony Lees, BDS, presents the case against glass ionomers

Carolyn Smith is a well educated, intelligent woman. She has a degree and takes a keen interest in environmental matters. She is concerned about the safety of mercury amalgams and water fluoridation. So, when, last year, she needed dental treatment, she was very relieved when her dentist placed a tooth coloured filling and not a toxic mercury filling. She would not have consented to a mercury filling.

Some days after the filling session, Carolyn began to feel unwell. She

suspected that the filling that she had received might be the cause of her problems and asked her dentist what he had used. He replied that a glass ionomer (GI) filling had been placed. These fillings are known to release fluorides and other substances. Carolyn consulted a doctor who recommended magnesium and calcium supplements but she was not free of problems until her dentist removed the glass ionomer filling and substituted with a composite.

Carolyn's unfortunate experience led her to ask two questions:

1 Are GI fillings toxic?

2 Has my right to informed consent been violated by having a toxic substance implanted into my mouth without my knowledge or consent?

THE CASE

Glass ionomer fillings, cements and fissure sealants were first used in dentistry in the late seventies and are now very widely used. GI powder is manufactured by heating glass powder with cryolite (sodium aluminium fluoride). Cryolite unfortunately leaks out of GI fillings of not just fluoride but aluminium, fluoride, lead and arsenic. Also released are complicated aluminium fluorosilicates which can pass the blood brain barrier and are implicated in Alzheimer's Disease.

The cytotoxicity of GIs has been studied by Lonroth et.al (2001). The results show: 'all freshly cured GIs released aluminium and fluoride concentrations far above what is considered to be cytotoxic.' Some released 215 ppm aluminium and 112 ppm of fluoride. One brand of GI showed 100 ppm of lead. Fraschini et.al (1998) showed that in some GI products the arsenic concentration was 5 times the maximum permissible level.

The US Government has recognised the importance of reducing arsenic levels in drinking water from fifty parts per billion to ten parts per billion. The GI with the most arsenic contain ten parts per million, one thousand times over the new water standard. It can be safely assumed that there is a risk of toxicity to any patient who has had GI filling, cement or fissure sealant, which leak fluoride, aluminium, arsenic, lead and fluorosilicates.

Composites with added fluoride should be categorised as

WHAT DOES THE NPWA DO ON BEHALF OF ITS MEMBERS'?

- Responds daily to enquiries from medical and dental students, researchers, journalists, teachers, environmentalists and the general public, on water quality and fluoride issues.
- Provides speakers - talks to groups of up to 250.
- Featured in a 3-hour programme with *Parents of Fluoride Poisoned Children* on the globally-networked Jeff Rense Show. Recently, Rense interviewed Barry Groves for 2 hours to promote his new book.
- Regularly asked to produce articles for publications.
- Invited (and funded) by Unicef to attend an inter-national conference on water in Brazil.
- Networks globally on fluoride issues.
- Submits evidence to national and local Government.
- Liaises with Councils and MPs.
- Assists with anti-fluoridation campaigns world wide.

pharmaceutical products not medical devices, so are these fillings strictly legal?

INFORMED CONSENT

Carolyn maintains that her informed consent was not obtained for the placement of a toxin-releasing filling in her mouth.

Carolyn contacted her local Councillor, her MP, the Minister of Health, the shadow Minister and the Lib Dem spokesman on Health. 'I have been denied my right to be fully informed about what is put into my mouth by a dentist.'

After many months of correspondence she received a reply from the Department of Health Policy Directorate. "We recognise that you have raised an important issue around consent to treatment. The Government agrees that patients should have the same opportunity to give informed consent to dental treatment as they have with other forms of medical treatment. We are shortly to issue all dentists with twelve key points on consent. It is intended that the guide should be kept in an accessible place in the surgery so that all members of the dental team may be aware of their obligations."

We have yet to receive the promised Ministry guidance.

Fluoride ingestion in the UK is increasing alarmingly. There are many sources - air pollution, water, food, pesticide and fertiliser residues, drugs and an increasing exposure from dental sources such as glass ionomers, toothpastes, mouth rinses and topical fluorides.

I believe that the dental defence societies and insurance companies will find it increasingly difficult to defend dentists against uninformed consent cases.

WHO VISITS THE NPWA WEB SITE? - TRACKER STATISTICS, by order of highest recorded visits:

United Kingdom, Canada, USA Educational, Australia, New Zealand, Ireland, Non-Profit Organizations, United States, Japan, South Africa, USA Government, Singapore, Israel, Germany, USA Military, Netherlands, Mexico, Turkey, France, Spain, Malaysia, Saudi Arabia, Brazil, Switzerland, Austria, Norway, Sweden, Belgium, Italy, United Arab Emirates, Thailand, Denmark, Finland, Indonesia, Argentina, Greece, Bulgaria, Hong Kong, India, Chile, Estonia, Pakistan, Russian Federation, Romania, Czech Republic, Yugoslavia, Portugal, Tanzania, Cyprus, Croatia, Poland, Venezuela, Niue, Philippines.

NOTE: Only U.S. universities, Government departments & Military hits are listed by category. Others (hundreds are included in the complete 'by country' stats.

Av. 'hits' per week: 500.

Av. page views per visit: 3.

Most popular web page: Dental fluorosis: "Smile, please - but

IN MEMORIAM

We deeply mourn the loss of Bob Vaughan, FBIM, Treasurer and great supporter of the NPWA, who died in January.

We extend most sincere condolences to Liz, our Chairman, and their sons Tony, Andrew & Kevin and grandchildren.

don't say 'Cheese!'