

## References (Citations) for the items on the reverse of the Public Consultation flyer.

v.8, 220424

North-East residents probably won't want to become fluoridated.

The Public Consultation questions relate to (1) concerns about negative health impacts of water fluoridation, concerns about (2) the environment, (3) ethical concerns and (4) "others".

Because we are opposed to fluoridation, we have not sourced information on the issues which are used by proponents to sponsor fluoridation. These issues, listed in the PC questionnaire are (5) reducing tooth decay, (6) reducing the number of dental treatments such as tooth extractions or fillings, (7) reducing oral health inequalities, (8) reducing costs to the 'NHS, and (9) improving other health outcomes. We would be hard-pressed to find any evidence to shore up these aspirations. Indeed, high quality research evidence not admitted by the DHSC contradicts their aspirations and argues against WF practice.

To challenge (6) and (8) above, we have uploaded a bar chart on decayed tooth extractions (see the blue box) and provided evidence at Item 17 below on inequalities to challenge (7) above. Whilst untreated decayed teeth can provide an environment for the proliferation of bacteria which go on to damaging the heart, adding fluoride to our bodies is not the solution, particularly when fluoride does widespread damage to our bodies at cellular level.

In the following table we have repeated the 19 reasons from the flyer for objecting to fluoridation (Column 1) and have substantiated them in Column 2 by giving reasons and relevant references.

	Objections and Concerns	References/Citations
1	<p>Drinking water becomes <b>compulsory unlicensed medicinal water</b></p>	<p><b>British Standard 12175:2022</b>, p.19. “Function: hexafluorosilicic acid is used for the fluoridation of drinking water to increase the resistance of consumers to dental decay.” Thus, fluoridated water is a prophylactic medicine. (Not in the public domain)</p> <p><b>Shaw, D.</b> (2012). <a href="#">Weeping and wailing and gnashing of teeth: The legal fiction of water fluoridation. Sage Publications.</a> Volume 12, Issue 1 .</p> <p><b>McCormick, P.</b> (2021). <a href="#">Opinion on the legal status of Water Fluoridation.</a> (Not available on-line)</p> <p><b>Three Court rulings that fluoride when added to water or to any other preparation for ingestion is a medicine:</b>  Mrs Catherine McColl (A.P.) against Strathclyde Regional Council. Court of Session, Edinburgh SC 225 (SLT, <b>1983</b>). The transcript of Judge Lord <b>Jauncey</b>’s ruling can be read at: <a href="https://vlex.co.uk/vid/mccoll-v-strathclyde-regional-807327357">https://vlex.co.uk/vid/mccoll-v-strathclyde-regional-807327357</a></p> <p>Supreme Court of Canada in <b>Municipality of Metropolitan Toronto v. Village of Forest Hill (1957)</b> 9 D.L.R. (2d) 113 ( <a href="https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/3908/index.do">https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/3908/index.do</a> ) which held that the fluoridation of the water supply was using the water for a medicinal purpose and Cartwright J. in that case (at page 124) described fluoridation of the water supply as “compulsory preventive medication of the inhabitants of the area”</p> <p><b>In 2018, the Supreme Court of New Zealand</b> ruled that fluoridated water is a medicine (Clause 100).  “[100] We conclude that fluoridation of drinking water requires those drinking the water to undergo medical treatment in circumstances where they are unable to refuse to do so. Subject to s 5, therefore, s 11 of the Bill of Rights Act is engaged.”</p> <p>An interpretation can be found on <a href="https://fluoridealert.org/news/fluoridation-is-mass-medication-nz-supreme-court-rules/">https://fluoridealert.org/news/fluoridation-is-mass-medication-nz-supreme-court-rules/</a>. The decision can be found on <a href="https://www.courtsofnz.govt.nz/assets/cases/2018/2018-NZSC-59.pdf">https://www.courtsofnz.govt.nz/assets/cases/2018/2018-NZSC-59.pdf</a>  The decision was not appealed.</p>

2	Those with <b>mental capacity</b> cannot be forced to drink compulsory medicine.	<p><b>Mental Capacity Act 2005</b>, s2, which implies that all those who are not assessed as lacking mental capacity are persons with mental capacity. That’s the majority of people living in an area.  ( <a href="https://www.legislation.gov.uk/ukpga/2005/9/contents">https://www.legislation.gov.uk/ukpga/2005/9/contents</a> )</p> <p>Nor can Public Health Consultants urge for the passing of Regulations which require persons to undergo medical treatment.</p> <p><b>Public Health (Control of Disease) Act 1984</b>: Power to make regulations  ( <a href="https://www.legislation.gov.uk/ukpga/1984/22/contents">https://www.legislation.gov.uk/ukpga/1984/22/contents</a> )</p> <p>45E    Medical treatment</p> <p>(1) Regulations under section 45B or 45C may not include provision requiring a person to undergo medical treatment.</p> <p>(2) “ Medical treatment ” includes vaccination and other prophylactic treatment.</p>
3	<b>Non-consensual compulsory medicine violates your human rights.</b>	<p>The failure of the UK Government to ask individuals for their consent is the most important and concerning aspect of water fluoridation policy.</p> <p>Compulsory medicine should never be forced on an entire population, let alone on an individual with mental capacity. WF policy completely ignores our rights as individuals. This flies in the face of several Directives, Codes and Laws. The UK Government has tried to get away with fluoridating us because they think that they can insist that fluoridated water is not medicine. The definition in <b>BSEN 12175:2022</b>, p. 19, Function, counteracts this assertion as does the essay by David Shaw and the opinion of <b>Paul McCormick</b> (all three are above at 1).</p> <p><b>Human Rights Act, 1998</b>, Annex A, Article 3: ( <a href="https://www.legislation.gov.uk/ukpga/1998/42/contents">https://www.legislation.gov.uk/ukpga/1998/42/contents</a> ) “No one shall be subjected to torture or to inhuman or degrading treatment or punishment.” It is degrading to be forced to drink compulsory medicine!</p>
4	<b>The dose is uncontrolled.</b>	<p>Drink as much as you like! Labels on medicines instruct dosage and when to take the medicine. Medicinal water, however, can be taken freely and whenever without limit, even though the active substance is a bio-accumulative toxin. We don’t see anyone urging the free ingestion of lead or arsenic. Both are toxins and so too is fluoride. In fact, fluoride is a presumed developmental neurotoxin. (See Item 12 below.)</p>

4

Cont'd The dose is uncontrolled.

"Fluoride is a toxin with effects at ppm, we don't need it, you can't control the dose people get."

David Ball, DDS, MAGD, AIAOMT in [https://fluoridealert.org/content/bulletin\\_12-6-18/](https://fluoridealert.org/content/bulletin_12-6-18/)

In a thought-provoking review by Johnston and Strobel, the mechanism of fluoride's toxicity is described. Toxicity depends not only on the concentration per dose of fluoride but on the individual organism's response to the toxin. If the dose is uncontrolled, there could be a wide range of exposure across populations. In particular, the foetus and infant are over-exposed. The review convincingly establishes that fluoride is a toxin. High levels of fluoride can either be ingested when the concentration of fluoride in water and food is high OR when the organism ingests too many doses 24/7 for a lifetime.

**Johnston, N.R. and Strobel, S.A. (2020). *Principles of fluoride toxicity and the cellular response: a review*. Arch Toxicol. 2020 Apr; 94(4): 1051–1069. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7230026/>**

The **World Health Organisation** has published the following caution which the DHSC has failed to act on:

---

In setting national standards for fluoride or in evaluating the possible health consequences of exposure to fluoride, it is essential to consider the intake of water by the population of interest and the intake of fluoride from other sources (e.g. from food, air and dental preparations). Where the intakes from other sources are likely to approach, or be greater than, 6 mg/day, it would be appropriate to consider setting standards at concentrations lower than the guideline value.

---

**Guidelines for Drinking Water Quality, 4<sup>th</sup> edition** [WHO 2011 amended, p. 405]

( <https://iris.who.int/bitstream/handle/10665/352532/9789240045064-eng.pdf?sequence=1&isAllowed=y> )

Surely, before any new WF programmes are proposed, the DHSC should have conducted a survey of a fluoridated population to establish current levels of exposure by individuals in that population? Not to do so implies great negligence by our politicians and civil servants. We have a Freedom of Information response admitting that the DHSC knows about the WHO recommendation but there is a reluctance to state why they haven't applied it. Why not undertake a "tea" survey? Mugs of low quality tea contain alarming levels of fluoride.

The UK Government has not performed due diligence because that would mean a change in the **Water Industry Act 1991** ( <https://www.legislation.gov.uk/ukpga/1991/56/contents> ) if it was determined that 1mg f/litre plus adventitious contamination was bringing us perilously close to or over the maximum daily intake of 6 mg Fluoride/Day. Other countries (USA, New Zealand, Australia, Hong Kong and Ireland) have reduced the concentration/litre but they didn't have to worry about jumping over the regulatory hurdle.

5	<p><b>Everyone, large or small, drinks the same concentration.</b></p>	<p>Why should infants drink the same concentration of fluoride as adults? This doesn't happen when infants are prescribed a pharmaceutical drug: the concentration is far smaller than the concentration of the same medicine for an adult. Since we've established that fluoride is a medicine and that the water to which it is added is a medicine, a baby at 6 months is perilously close to ingesting the same amount of medicinal fluoride as a teenager.</p> <p><a href="https://fluoridealert.org/studytracker/17207">Cross D.W. and R.J. Carton. (2003) Fluoridation: "A violation of medical ethics and human rights."</a> International Journal of Occupational and Environmental Health, January-March 2003, Vol. 9(1):24-9.  <a href="https://fluoridealert.org/studytracker/17207">https://fluoridealert.org/studytracker/17207</a></p>
6	<p><b>Vulnerable people</b> are often sensitised to fluoride.</p>	<p>"The fluoride goes to everyone regardless of age, health or vulnerability."  According to <b>Dr. Arvid Carlsson</b>, the 2000 Nobel Laureate in Medicine and Physiology and one of the scientists who helped keep fluoridation out of Sweden: "Water fluoridation goes against leading principles of pharmacotherapy, which is progressing from a stereotyped medication - of the type 1 tablet 3 times a day — to a much more individualized therapy as regards both dosage and selection of drugs. The addition of drugs to the drinking water means exactly the opposite of an individualized therapy" (Carlsson 1978).</p> <p><b>Griess, C.</b> (2023) in <i>There's Something in the Water</i>. pp. 1-2. ( <a href="https://fluoridealert.org/wp-content/uploads/Something-in-the-Water-Introduction-Chapter.pdf">https://fluoridealert.org/wp-content/uploads/Something-in-the-Water-Introduction-Chapter.pdf</a> ) describes a teenager (Kyle) who was hypersensitive to fluoride. When his mother removed tap water from his diet his debilitating pain subsided but he still had headaches in the morning until she realised that he was absorbing fluoride from shower water.</p>
7	<p>Fluoride is an <b>enzyme disruptor</b>.</p>	<p>It's drunk 24/7 for every year lived in a fluoridated area.</p> <p><b>Sumner, J.B.</b> (1964) A quote about killed enzymes and fluoride: ( <a href="https://fluoridealert.org/articles/fluoride-biochemistry/">https://fluoridealert.org/articles/fluoride-biochemistry/</a> ) "We ought to go slowly. Everybody knows fluorine and fluorides are very poisonous substances and we use them in enzyme chemistry to poison enzymes, those vital agents in the body. That is the reason things are poisoned, because the enzymes are poisoned and that is why animals and plants die."</p> <p>James Sumner was a Nobel Prize Winner in Chemistry.</p>

8	<p><b>Medical ethics:</b> GPs must <b>review</b> prescriptions. Compulsory medicine should receive even greater scrutiny.</p>	<p>“A structured medication review is a confidential consultation carried out by your GP, or a pharmacist or advanced nurse practitioner from your local primary care network, with full medical notes. The objective is to reach an agreement with you about your medicines, optimise the impact of the medicines you’re taking, reduce the number of problems you might be having with them, and reduce waste.</p> <p>They also give you the opportunity to raise any worries, thoughts or suggestions you might have about your prescribed treatments.”</p> <p><b>Pharmacy2U</b>, <i>What is a Medication Review?</i> ( <a href="https://www.pharmacy2u.co.uk/health-hub/health-advice/medicines-and-prescriptions/prescriptions/what-is-a-medication-review">https://www.pharmacy2u.co.uk/health-hub/health-advice/medicines-and-prescriptions/prescriptions/what-is-a-medication-review</a> )</p>
9	<p><b>Over-exposure:</b> there is fluoride from many sources.</p>	<p>Fluoride is widespread in our environment. Britain is a nation of tea drinkers but tea leaves contain a significant amount of fluoride! With 4 mugs of a cheaper brand of tea per day made with fluoridated water, an individual is brought perilously close to over-exposure.</p> <p>See the list of sources of fluoride - Resources Tab A-O in ( <a href="http://www.ukfffa.org.uk">www.ukfffa.org.uk</a> ), Over-Exposure to Fluoride</p> <p>See also the list of teas containing fluoride – Resources Tab A-O in ( <a href="http://www.ukfffa.org.uk">www.ukfffa.org.uk</a> ), Fluoridated Liquids Database</p> <p>See also <b>Fluoride Action Network <i>Sources of Fluoride</i></b>” ( <a href="https://fluoridealert.org/issues/sources/">https://fluoridealert.org/issues/sources/</a> )</p>
10	<p>The medicine is <b>hazardous industrial waste</b>.</p>	<p>Contaminants are not removed before Hexafluorosilicic acid is added to our drinking water. The road tanker comes with a certificate of conformity but contains sparse details. We have to assume that the overseas producers supply the Certificate. Analysing the contents of Hexafluorosilicic acid is difficult if an analytical laboratory is not previously aware of the names of the elements present in the acid. The <b>British Standard BSEN 12175:2022</b> lists some heavy metals in hexafluorosilicic acid, but not the other contaminants in the water used to prevent gases and particulates escaping into the atmosphere from the top of the factory chimney. <b>CAL in Dublin</b> was asked to analyse a sample of the acid and detected many of these other contaminants.</p> <p><b>BSEN 12175:2022, pp. 7-8.</b> The heavy metals are Antimony, Arsenic, Cadmium, Chromium, Lead, Mercury, Nickel and Selenium. All are present in minute quantities, but are, none-the-less, present.</p> <p><a href="#">CAL Laboratory Analysis, Dublin (2000)</a></p>

10	Cont'd <b>The medicine is hazardous industrial waste.</b>	<p><b>Bryson</b>, Christopher. (2004). <i>The Fluoride Deception</i>. New York: Seven Stories Press, 2004. Widely available on the Internet.</p> <p><b>Zelko, F. (2018)</b>. Toxic Treatment: Fluoride's Transformation from Industrial Waste to Public Health Miracle. (<a href="https://origins.osu.edu/article/toxic-treatment-fluorides-transformation-industrial-waste-public-health-miracle?language_content_entity=en">https://origins.osu.edu/article/toxic-treatment-fluorides-transformation-industrial-waste-public-health-miracle?language_content_entity=en</a>)</p> <p>It is important to distinguish between “natural” fluoride and “industrial” fluoride. Whereas <b>calcium fluoride</b> is naturally occurring, the industrial fluoride is contained in a highly corrosive and poisonous soup of chemicals, many of which are added to the waste stream of gases at the end of the phosphate-making process. Other elements – mainly <b>heavy metals</b> as well as <b>hydrofluoric acid</b> - also appear in the fluoridating acid which is euphemistically known as “hexafluorosilicic acid”. The “hexa-“ label means “six” and refers to the number of fluoride atoms in the molecule. However, the molecule also contains 2 atoms of hydrogen so the correct name is really “<b>hydrofluorosilicic acid</b>”. Because <b>hydrogen fluoride</b> is a dangerous gas and in an acid as hydrofluoric acid, it is just as dangerous.</p> <p>Hydrofluorosilicic acid is used for the fluoridation of drinking water because it is the cheapest waste by-product available.</p> <p><b>Whilst it is not ideal having calcium fluoride in drinking water it is not as health-damaging as hydrofluorosilicic acid.</b></p>
11	Fluoride is <b>not an essential nutrient</b> . Fluoride <b>deficiency does not exist</b> .	<p>“Fluoride is not essential for human growth and development.”</p> <p><b>European Commission</b>. (2011). Critical review of any new evidence on the hazard profile, health effects, and human exposure to fluoride and the fluoridating agents of drinking water. Scientific Committee on Health and Environmental Risks (<b>SCHER</b>), page 4.</p> <p>“Fluoride is not in any natural human metabolic pathway.”</p> <p><b>Cheng</b> KK, et al. 2007. Adding fluoride to water supplies. <i>British Medical Journal</i> 335:699-702.</p>
12	Fluoride is a <b>permanent and non-reversible brain-damaging neurotoxin</b> leading to <b>reduced IQ of the foetus and infant</b> .	<p>“Residents would be forced to take part in “<b>the baby brain damage lottery</b>”. The extent of IQ reduction and brain damage would depend on how aware the parents are of other sources of fluoride in their environment and take steps to reduce the exposure.”</p> <p><b>Grandjean</b>, et al. reported in <i>National Toxicology Program</i> (2023). Fluoride: Potential Developmental Toxicity. <a href="https://fluoridealert.org/researchers/the-national-toxicology-program/">https://fluoridealert.org/researchers/the-national-toxicology-program/</a></p> <p>The final version of a 6-year-long systematic review of fluoride’s developmental neurotoxicity in the USA was concluded in 2022 when it was reluctantly released to a Federal Court judge for examination. The reluctance is</p>

<p><b>12</b></p>	<p>Cont'd <b>Fluoride is a permanent and non-reversible brain-damaging neurotoxin</b> leading to <b>reduced IQ of the foetus and infant.</b></p>	<p>observable because the word “<b>DRAFT</b>” has deliberately not been removed from the title page. The findings of the review are reported by the <b>Fluoride Action Network</b> at <a href="https://fluoridealert.org/articles/national-toxicology-program-finds-no-safe-level-of-fluoride-in-drinking-water-water-fluoridation-policy-threatened/">https://fluoridealert.org/articles/national-toxicology-program-finds-no-safe-level-of-fluoride-in-drinking-water-water-fluoridation-policy-threatened/</a></p> <p>The reference for the systematic review is: <b>National Toxicology Program</b> (2022). NTP Monograph on the State of the Science Concerning Fluoride Exposure and Neurodevelopmental and Cognitive Health Effects: A Systematic Review NTP, Monograph 08, September 2022.  <a href="https://ntp.niehs.nih.gov/sites/default/files/ntp/about_ntp/bsc/2023/fluoride/documents_provided_bsc_wg_03152_3.pdf">https://ntp.niehs.nih.gov/sites/default/files/ntp/about_ntp/bsc/2023/fluoride/documents_provided_bsc_wg_03152_3.pdf</a></p> <p>The systematic review concluded that fluoride is a presumed developmental neurotoxin and that “In numerous responses to comments by reviewers of the report, the NTP made clear that they had found evidence that exposures of at least some people in areas with fluoridated water <b>at 0.7 mg Fluoride/litre</b> were associated with lower child IQ.” There is also exposure of the foetus to maternal fluoride which greatly increases the body burden.</p> <p><b>The UK fluoridates at 1 mg Fluoride/litre.</b></p>
<p><b>13</b></p>	<p>Fluoride causes an almost double increase in <b>hypothyroidism diagnoses.</b></p>	<p>A piece of English research in 2015 found an almost double the number of diagnoses of hypothyroidism in fluoridated Birmingham compared to non-fluoridated Greater Manchester. For England as a whole, there was 30% more hypothyroidism diagnoses in fluoridated England compared to non-fluoridated England.</p> <p>Fluoride is antagonistic to iodide which is essential for thyroid and endocrine health.</p> <p>“In many areas of the world, hypothyroidism is a major health concern and in addition to other factors - such as iodine deficiency - fluoride exposure should be considered as a contributing factor. The findings of the study raise particular concerns about the validity of community fluoridation as a safe public health measure.”</p> <p><b>Peckham, S., D. Lowery and S. Spencer</b> (2015). “Are fluoride levels in drinking water associated with hypothyroidism prevalence in England? A large observational study of GP practice data and fluoride levels in drinking water.” <i>J. Epidemiol Community Health</i> 2015; 0: 1-6. ( <a href="https://fluoridealert.org/wp-content/uploads/peckham-2015.pdf">https://fluoridealert.org/wp-content/uploads/peckham-2015.pdf</a> ) and ( <a href="https://kar.kent.ac.uk/47338/7/Revised-Fluoride-and-hypothyroidism-jan15-final.pdf">https://kar.kent.ac.uk/47338/7/Revised-Fluoride-and-hypothyroidism-jan15-final.pdf</a> )</p>



14	<p><b>Hip fractures</b> are doubled in fluoridated areas.</p>	<p>Fluoride accumulates in bones. Although bone material is rendered denser when fluoride bio-accumulates in them, fluoride is not an inactive substance. When in bone cells, fluoride reduces the activity of osteoclasts which are responsible for clearing away dead and dying bone cells but increases the activity of osteoblasts which are responsible for making new bone cells. This means that bone cells become more densely packed. However, fluoride also disrupts the activity of bone collagen which makes bone material resilient to sudden shocks and stress. The result of fluoride's interference is that bones break more easily.</p> <p>The 2022 DHSC Health Monitoring Report on Fluoride and Health inexplicably failed to reference or analyse Helte <i>et al's</i> 2021 study even though the study was published in the previous year. Researchers should always search for relevant literature to discover recent findings. A good piece of research always contains a chapter on the literature search. Since this did not occur, we have grave doubts about the validity of the rest of the Monitoring Report. Who were the researchers who wrote the Monitoring Report and what were their qualifications and experience?</p> <p><b>Helte, E., et. al.</b> (2021). Fluoride in Drinking Water, Diet, and Urine in Relation to Bone Mineral Density and Fracture Incidence in Postmenopausal Women. ( <a href="https://doi.org/10.1289/EHP7404l.129.No.4">https://doi.org/10.1289/EHP7404l.129, No. 4</a> Research Open Access )</p>
15	<p>A systematic review concludes that fluoride is a cause of <b>Diabetes II.</b></p>	<p><b>Systematic reviews are considered to be high quality research because they identify all research studies dealing with one issue and then analyse each study to determine quality and the validity of the conclusions reached. The aim is to determine statistical significance of the conclusions and to finally publish the over-riding hypothesis.</b></p> <p><b>Pain, G.</b> (2018). Fluoride Causes Diabetes 2018 Update. A Systematic Review. Published on Researchgate. <a href="https://www.researchgate.net/publication/328249196_Fluoride_Causes_Diabetes_2018_Update">https://www.researchgate.net/publication/328249196_Fluoride_Causes_Diabetes_2018_Update</a></p>
16	<p>Swallowed fluoride is <b>NOT cost-effective</b> at reducing dental decay.</p>	<p><b>Fluoride Alert Network</b> (2024). <i>Virtually no dental benefit from fluoridation: Massive new Government-funded study of England.</i> A summary of the <b>LOTUS</b> and <b>CATFISH</b> studies. 16<sup>th</sup> Feb. 2024 . <a href="https://fluoridealert.org/articles/virtually-no-dental-benefit-from-fluoridation-massive-new-government-funded-study-of-england/">https://fluoridealert.org/articles/virtually-no-dental-benefit-from-fluoridation-massive-new-government-funded-study-of-england/</a> . (For the CATFISH and LOTUS references see below at 17.)</p>

<p><b>17</b></p>	<p>Four UK-based studies 2000 - 2023 found <b>no proof that swallowed fluoride reduces oral health inequalities</b> across social groups.</p>	<p>The <b>York Review</b> (2000) and the <b>Cochrane Collaboration</b> (2015) were two high-quality systematic reviews which found no reduction in oral health inequalities. Their conclusions have been collated and are filed <a href="#">here</a>.</p> <p><b>York Review Reference:</b> McDonagh et al (2000). <i>A Systematic Review of Water Fluoridation</i>. NHS Centre for Reviews and Dissemination, University of York, ISBN 1 900640 16 3</p> <p><b>Cochrane Collaboration Reference:</b> Ihezor-Ejiofor Z, et. al. (18th June 2015). <i>Water Fluoridation to Prevent Tooth Decay</i>. Primary Review Group, Oral Health Group, Cochrane Collaboration  <a href="http://www.cochrane.org/CD010856/ORAL_water-fluoridation-prevent-tooth-decay">http://www.cochrane.org/CD010856/ORAL_water-fluoridation-prevent-tooth-decay</a></p> <p>The <b>CATFISH</b> researchers could find no evidence either. “In both cohorts, we could find no strong evidence that WF reduces dental health inequalities.” In the Conclusions of Goodwin M, R. Emsley and R, Kelly et al. (2022). Evaluation of water fluoridation scheme in Cumbria: the CATFISH prospective longitudinal cohort study. Southampton (UK): National Institute for Health and Care Research; 2022 Nov. Public Health Research, No. 10.11.  <a href="https://www.ncbi.nlm.nih.gov/books/NBK586983/">https://www.ncbi.nlm.nih.gov/books/NBK586983/</a> .</p> <p>The <b>LOTUS</b> researchers could also find no evidence: “The research team found no compelling evidence that water fluoridation reduced social inequalities in dental health, and the numbers of missing teeth between the groups were the same.”. Moore, D. et. al. (2024) . The LOTUS Study: Fluoridation for Adults.  <a href="https://sites.manchester.ac.uk/lotus/#results">https://sites.manchester.ac.uk/lotus/#results</a></p> <p><b>IMPORTANT NOTE:</b> LOTUS and CATFISH are listed in the “Evidence” section of the DHSC’s PCWF Document as being “Contemporary studies in the UK [which] have also increased the evidence base on community water fluoridation...” This statement implies that both studies provide evidence in support of WF. That is clearly mis-information. Both studies could find no evidence of a reduction in oral health inequalities AND any reduction in dental decay due to fluoride was found to be <b>modest</b>. Compare this with the poorly supported statements from the NHS, the Integrated Care Partnership for the North East and North Cumbria, and the DHSC.</p>
------------------	---	--

18	<p><b>98% of Europe</b> does not fluoridate its drinking water.</p>	<p>The very short list of fluoridated European countries includes Ireland and possibly small areas of Poland and Serbia. Ireland is fluoridated mandatorily with no chance of dissent unless the Irish law is repealed. We have confirmation from sworn testimony in a Court of Law in San Francisco in 2024 during the “Fluoride on Trial” case (see Item 12 above), that Spain stopped fluoridating its citizens this century. Many European countries have refused to begin fluoridating their citizens, some have legislated against the practice and one or two stopped the practice some decades ago.</p>
19	<p><b>50% of the added fluoride reaches our dying rivers.</b> The EU describes fluorides as dangerous substances in the aquatic environment.</p>	<p>The <b>retained EU Directive 2006/11/EC</b> of the European Parliament and of the Council of 15 February 2006 on <b>pollution caused by certain dangerous substances</b> discharged into the aquatic environment of the Community. <a href="https://www.legislation.gov.uk/eudr/2006/11/contents#">https://www.legislation.gov.uk/eudr/2006/11/contents#</a> Fluorides are listed in Annex 1, List 2(7).</p> <p>Half of the fluoride in treated sewage is discharged into streams and rivers. The other half is found in sewage sludge, some of which is spread on fields. When phosphate fertiliser is used, the fluoride in the fertiliser and in the sludge greatly increase the concentration of the toxin in the soil and in run-off if the field is adjacent to a stream or river.</p> <p><b>We’ve added a final item below.</b></p>
20	<p><b>Water Fluoridation (WF) is universally unpopular</b></p>	<p>We have provided the results of newspaper and radio polls and these are accessible on the “blue box” page. The majority of people who volunteered to state their preference, opted to be against WF. Even this year (2024) following the Mail on-line and Daily Telegraph articles, the comment boxes have been replete with a majority of comments against WF. A few referenda and consultations have also showed a vote against WF practice. Another file on the blue box page tells us that 63 local authorities since 1958 have declined the practice. So, in the light of this public opinion against the practice, how can the DHSC ignore all this informal evidence and press ahead with <b>fluoridating</b> 1.6 million people, most of whom don’t even know about this Public Consultation?</p> <p>The word “<b>fluoridating</b>” is emotive but it is entirely appropriate to use it. Fluoride is bio-accumulative in the same way as any other activity which fills us up: feeding, hydrating etc. However, “feeding” and “hydrating” are benign whilst “fluoridating” is not.</p>