Request to Speak to a Committee of Council

Standing Committee Requested

Kindly indicate which Standing Committee:* BOARD OF HEALTH 14/19/20

Requestor Information

Name of Individual:* LIZ HUGHES
Name of Organization: INDIVIDUAL
Do you or your organization represent a lobbyist (voluntary) Yes
Contact Number: *
Email Address: *
Mailing Address:* 

Reason(s) for delegation request:* TO PRESENT INFORMATION ON WATER FLUORIDATION FROM DR. JAMES BECK

Will you be submitting a formal presentation with your request?* Yes

Requests to speak to Council are forwarded to the Standing Committee for consideration. Once considered by Committee, and approved, you will be notified of the date for your presentation. Personal information collected on this form is authorized under Section 5.10(2) of the City's Procedural By-law No. 03-301 for the purpose of contacting individuals and/or organizations requesting an opportunity to appear as a delegation before a Standing Committee and will be published with the Committee Agenda. The Voluntary Lobbyist Registry is a public document and will be available for viewing in the City Clerk's office. The Procedural By-law is a requirement of Section 238(2) of the Municipal Act. Questions about its collection can be directed to the Manager of Legislative Services, 71 Main Street West, 2nd Floor, Hamilton, ON L8P 4Y5 (905) 546-2424 ext. 5409
May 5, 2008

Members of Hamilton City Council

Councillors:

I am a physician and scientist who became interested in the matter of fluoridation of public water supplies some five or six years ago. I have studied the scientific literature and followed developments of knowledge and public policy since. Because of what I have learned I feel an obligation to urge those responsible for public policy on fluoridation to reconsider new evidence and responsible criticism of old claims around three questions about fluoridation:

1. Is it effective?
2. Is it safe?
3. Is it ethical?

Fluoridation of public water supplies has been in effect somewhere in the world for six decades now. Over that time the prevalence of dental caries (cavities) has fallen in industrialized countries. This has been taken by many to indicate efficacy. But research has consistently shown that the decrease has occurred in countries without fluoridation to the same or greater degree as in those with fluoridation. Furthermore it is observed that in jurisdictions where fluoridation has been discontinued the caries has not become more prevalent. Meanwhile research has been widely interpreted to show that there is a slight beneficial effect due to topical application to teeth but not due to ingestion. The answer to this first question is clearly no.

The question of toxicity is easy to answer with respect to some body systems, difficult for others. The most obvious toxic effect has been dental fluorosis. In mild cases it appears as mottling discoloration of tooth surfaces. In moderate and severe cases it involves discolouration, pitting and weakening of the enamel and has serious consequences. In Canada the treatment of this condition costs tens of thousands of dollars. Even if the effect were only cosmetic as far as teeth are concerned, it can have serious negative effects on a child's or teenager's life.

Evidence uncovered over the last two decades has shown an association of fluoride in drinking water, at concentrations comparable with those where water is artificially fluoridated, with lower IQ (so-called intelligence quotient) in children. In laboratory studies of animals and of spontaneously aborted fetuses an association with abnormal cellular effects on cells of the brain has been found.

On the basis of strong evidence widely accepted it is clear that fluoride intake is a cause of impaired thyroid function. Indeed fluoride ion was used medically to treat hyperthyroidism.
Deleterious effects on sexual systems in humans have been found to be associated with fluoridation: in girls, early onset of menstruation; in men, low sperm counts.

We now have strong evidence of the association of osteosarcoma in boys and young adult males with fluoridation. Osteosarcoma is a bone cancer which is often fatal.

Increased incidence of bone fracture is associated with fluoridation. Fluoride affects kidneys. And there are other toxicities. The answer to the second question, Is it safe?, is clearly no.

Given the evidence that fluoridation is ineffective and that it is unsafe, the question of ethicality is easily answered in the negative. But let me add a few words about medical ethics. It is unethical to administer a substance or procedure to a person without the consent of that person, informed by a qualified professional who must answer questions from that person and who must inform the recipient of the reasons for the administration and of possible effects. It is unethical to administer a substance or procedure that has not been approved by a qualified body. Dosage and/or intensity must be monitored and controlled and the effects must be monitored by a qualified professional. The recipient must be able to stop the administration at will. The substances used to fluoridate are not tested or approved for humans; the dosage is not controlled; consent has not been obtained (plebiscite is not consent in the context of medical ethics, and not reasonable for deciding medical measures in any case); the effects on individuals are not monitored.

Yours truly,

James S. Beck, M.D., Ph.D.

Professor Emeritus of Medical Biophysics

University of Calgary