In order to be able to measure changes in the caries attack rate after water fluoridation, it is suggested that examinations be made at 3- to 5-year intervals following the introduction of fluorides into the water supply.

Question 6: How can the state and local dental societies be brought into the preliminary planning for evaluation?

It is assumed that before a local dental society undertakes a fluoridation program, the state dental society has approved water fluoridation. The state dental society, through its council on dental health, should be consulted and should participate in the establishment of broad general principles for planning programs within the state. As local dental societies begin to evaluate their local programs, the state council on dental health should receive the information in order to correlate it on a state-wide basis.

In order that the local dental society can be effective in the evaluation of the water fluoridation program, the members of the society need to engage actively in planning the program and in collecting the data.

Question 7: How can the local health department officials, the health officer, sanitary engineer, laboratory director, public health nurses, health educator and others, be made aware of the problems and be convinced of the importance of this procedure?

It is important to point up to this group, that is, the health officer and civic authorities and local community groups, the magnitude of the dental caries problem. Other points to be stressed should be the economic loss to the community if water fluoridation is not done, as well as the results obtainable through fluoridation. The job of interpreting the data to the local health officials and civic leaders is the responsibility of the dental public health program director and representatives of the local dental society.

Question 8: How can understanding and conviction about adequate techniques be developed in the people who will be relied upon to carry them out?

Understanding and conviction about adequate techniques may be developed, first, by distributing instructions for the recording of dental findings and, second, by conducting pre-survey training and demonstrations before the pre-fluoride evaluation survey is made.

The ninth question on this questionnaire was left out by the group.

Question 10: How accurate do you consider DMF rates during the period of the mixed dentition?

The DMF rates and their segments refer specifically to the permanent dentition, and the def rates to the deciduous dentition. These rates may be determined accurately when permanent and/or deciduous teeth are present.

Question 11: Is it more accurate to define "M", "missing" as "extracted teeth"?

The symbol "M" indicates permanent teeth missing through extraction or permanent teeth indicated for extraction as a result of caries.

Question 12: Are annual dental examinations a waste of time and effort?

To be able to show progress in water fluoridation, an annual dental examination is a waste of time and effort since annual changes are not of sufficient magnitude to be impressive.

(Question 13: Will they (examinations) prove of better value in acquainting dentists with the problem in their own communities if the dentists conduct the survey?

The answer: After proper orientation, dentists will be better acquainted and in a better position to interpret data to the dental society and others if they participate in the survey in their own community.

Question 14: Compare and evaluate the observed and the estimated DMF.

The observed DMF rate is considered the best method to use because in a majority of communities the sample size would be too small to make an estimate rate reliable.

The fifteenth question is divided into two parts: Should lactobacillus acidophilus determinations be made on a community-wide basis to determine dental-caries susceptibility? No.

If so, should the expense be shared by the community or from the Department's budget? And again the group said no.

Question 16: How may the specific dental needs of children in a community be determined?

The specific dental caries needs for children in a community may be determined by the use of the DMF rates and/or def rates. By breaking down the DMF rate into its specific components, D, M or F, it is possible to determine the tooth mortality rates and the unmet needs that require attention.

Question 17: What basic things should be shown by a dental survey?

The change in the DMF rates and def rates are the basic things to be shown by a dental survey when measuring the effectiveness of water fluoridation. However, this same survey may be used to determine the unmet dental caries needs with a view to motivate the community to develop a well-rounded dental health program.

Question 18: How should follow-up investigations be conducted after the survey?

Definite provision should be made at the time of the original survey to conduct a follow-up investigation at a later date. This follow-up survey should be made in the same area, age group, and in the same manner as the original survey.

DR. NISONGER: Now we will move to Group III. Dr. Dwyer will make the report.

DR. DWYER: Group III had to deal with: How is essential information communicated to different groups: protocol, permission, resolutions, mass media.

At the initial meeting it was decided by the members of the group to combine the questions into four categories: stimulation, utilization, resistance and the ever-present miscellaneous. So we will give a summary of each of these groupings.

Summary of the first subject, stimulation. Questions 1, 8, 12, 14, 17. Lay groups are stimulated mostly through press, radio, and magazine articles. Detailed information should be assembled by the state health department and supplied to the dental and medical professions, sanitary engineers, local health departments and administrators, and any other interested group. This information is to be used to guide the local committee or group in keeping the project alive and in supplying the answers to the problems of organization and motivation necessary to complete the details of purchase and installation of equipment and put the program into operation.

Fluoridation should be the spark to kindle a desire for a full dental and general health program in the community.

Summarization of the second group, utilization. Questions 2, 4, 7, 9, 10, 11, 13 and 19. We have already received our stimulant; now we are going to utilize it. The state health department should collect and have for reference all materials from federal, ADA, state, and local sources. From these materials, kits could be assembled to be sent to professional or lay groups. The kits should contain scientific and technical data, equipment types, installations and controls, approximate costs, and so forth. Sample news releases, resolu-