

Layman Speaks for the Silent and the Silenced

University of Arizona Proves Sodium Fluoride Is 100 Times More Poisonous Than U. S. P. H. S. Claims

Newburgh and Grand Rapids Statistics of 10 Years of Artificial Fluoridation DISPROVE Dental Benefits Promised by U.S.P.H.S.

To the Editor of **THE EAGLE**:—

You have made superficial half serious, half witty editorial remarks on occasion of my anti-fluoridation testimony before congressional committees in Washington last May and in Boston, March 15. National artificial fluoridation of public water with sodium fluoride or hydrofluoric acid advocated by U.S. Public Health Service is not a laughing matter. Your comments on the substance of my five bills, now before the Massachusetts Legislature, would have been more valuable.

According to the articles and testimony of a number of researchers here and abroad, lifelong consumption of fluorine in water, food and beverages is dangerous because of its accumulation in the body and its extraordinary toxicity. Sodium fluoride is 100 times more lethal than calcium fluoride present naturally in some waters of our Southwest. Yet the same concentration is recommended by USPHS.

It takes 100 times less fluorine in sodium fluoride than in calcium fluoride to kill rats ("Industrial and Engineering Chemistry," p. 795. July, 1934). Yet Dr. John W. Knutson of USPHS declared: "All fluoride ions, regardless of source, are the same chemically and in their physiological action" (HR 2341, p. 367). Should we put our confidence in the USPHS theory or the rats' experience?

The director of the Cambridge Medical Center, Dr. Charles A. Brush, stated last May at a Washington hearing (HR 2341, p. 149), "Small amounts of sodium fluoride are very active and, if constantly consumed, may cause chronic fluoride poisoning, which would impair the health and shorten life." Further, on page 150: "Massachusetts General Laws, Chap. 270, Sec. 2, and also Chap. 111, Sec. 160, make fluoridation illegal, but appeals to the state official responsible to enforce these laws go unanswered."

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My analyses of artificial fluoridation, as far as tooth decay is concerned, show it at best to be useless. I do not presume to know anything about teeth. I merely painstakingly compared the number of defective and missing teeth and the dental health conditions officially reported for children of various age groups before fluoridation was introduced in Newburgh, N.Y., and Grand Rapids, Mich., with what was found there subsequently after fluoridation was in effect eight to nine years. I also compared these results with official USPHS promises.

The official promise given to the Massachusetts dentists at their convention on Jan. 17, 1952, by Dr.

John W. Knutson, now assistant U.S. surgeon general, was in part: "Straighter, stronger, better looking teeth" . . . "Two-thirds fewer cavities and extractions" . . . "These benefits are not temporary; they last a lifetime."

As the evidence against fulfillment of this promise has been growing in Newburgh and Grand Rapids, the promise has been reduced from "lifetime" down to the age of nine. From the "lifetime" benefits it first shrunk to "school age," then to 12-year-olds, later to "younger children." The latest data sheets from Newburgh researchers shows "benefits" up to the age of 10. In Washington last May, Dr. H. Trendley Dean, secretary of Research Council, American Dental Assn., and one of the top official promoters of fluoridation, recited "benefits" up to the age of nine (HR 2341, p. 273). The promised reduction in the number of teeth decayed also has been diminishing. It started with two-thirds reduction; it went down to two-fifths; and now in Newburgh it has reached one-third; and even this for 10-year-olds, not older. As you, of course, know the permanent teeth begin to erupt at the age of five or six; half erupt by 10.

Dr. Knutson, on Sept. 25, 1953, reported to the Grand Rapids convention that children in Grand Rapids had as many filled teeth after eight years of fluoridation as before, and even eight-year-olds have half of their permanent teeth defective in spite of fluoride. Among nine-year-olds, three out of every four had one or more permanent teeth in trouble.

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The latest information from Newburgh is no better. On the average, more than half of the permanent rear or molar teeth are defective among 10-year-olds. This means that half of these children have *more than half* of their molars in trouble, in spite of nine years of fluoridation. In 1954, among 5,000 children examined in Newburgh, 3,000 had dental troubles, 1,000 more than in unfluoridated Kingston.

The U.S. Public Health Service in 1949 opposed fluoridation and with Dr. Knutson's personal assistance were recommending the direct application of fluoride compound to teeth as "the only methods of proven effectiveness." However, from 1950 or 1951, they cannot think of any better way of getting minute quantities of fluorine into children's teeth than by pouring into drinking water of the nation at least a million times as much sodium fluoride as can possibly be absorbed by the teeth of very young children. The fact that sodium fluoride is a cheap, abundant industrial by-product does not make the plan any less

ridiculous. The fluorine tablets available for direct use are evidently too simple to inspire the service's top administrators.

I have not read that fluoridation in Newburgh or Grand Rapids has reduced parents' dental bills. Don't you think it would be only fair for those dentists who publicly endorsed fluoridation as a method of obtaining "two-thirds fewer cavities and extractions for a lifetime" to cut down their service charges proportionately or charge nothing for work where fluoridation failed to meet the promise?

Aside from the dental aspects, is it not alarming that the USPHS, to put across a preposterous, ill-advised method, succumbs to the use of devious, subtle propaganda with up-to-date psychological tricks? These were explained in detail to the state dental health directors at their fourth annual conference, with Dr. Knutson presiding, and other top health and American Dental Assn. officials present June 6-8, 1951. Specific advice was given how to maneuver the press, the PTA, the doctors, how "to build a fire under the dentists" and keep opponents off the platforms in public discussions of fluoridation, etc.

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The tricks worked remarkably well. The USPHS promise was swallowed by many well-meaning unsuspecting people, in and out of pertinent professions, to the credit only of their esophagus and the willingness to accept bureaucratic pronouncement as irrefutable truth.

Some of these innocent victims are in addition hushed by their professional codes discouraging individuals from public opposition to a public stand taken by their professional societies. Thus, it is left to laymen to speak, on their own, for the silent and the silenced.

My five bills before the Legislature are based on confidence in the collective wisdom of free public opinion, freely informed and freely expressed. They are devised to protect the Commonwealth from over-zealous, remote Washington bureaucrats. The bills if passed would give the people an opportunity to make their own decisions in regard to dental non-communicable diseases leaving fluoridation to referendums. Furthermore, the bills are designed to protect us from an overdose of fluorine, one of the most potent poisons known, which now is present in beverages and food to an unstated but surprisingly high degree.

I will be glad to discuss artificial fluoridation publicly with any of its official proponents including Dr. Knutson.

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