DATE: Friday, January 25, 2013

TO: City of Windsor, Ontario – City Council/Special Council Meeting

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FROM: Robert J. Fleming (President)

Canadians Opposed to Fluoridation ~
Canadiens Opposés à la Fluoration

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RE: Fluoridation of the City of Windsor Water Supply
Monday, January 28, 2013 – Special Council Meeting

TOPICS:

- Water Fluoridation Safety and Efficacy Issues
- United States Centers For Disease Control
- National Sanitation Foundation Standard 60
- Canada Food & Drug Act
- Canada Natural Health Product Regulations
- Ontario Safe Drinking Water Act
- Ontario Fluoridation Act
- Supreme Court of Canada Position on Fluoridation – 1957
- Municipal Councils Are Accountable For Fluoridation
- Canadian Studies Showing Water Fluoridation Doesn't Work
- Canada's Growing List of Communities Rejecting Water Fluoridation

Dear Mayor / Chief Executive Officer / Chair Eddie Francis,
and Councillors Drew Dilkens, Ron Jones, Fulvio Valentinis, Alan Halberstadt, Ed Sleiman, Jo-Anne Gignac, Percy Hatfield, Biagio Marra, Hilary Payne, and Al Maghnieh;

Citizens of Windsor have requested that we write to you. We forward this information letter to every member of Windsor Council, to ensure the following information is made thoroughly available to you, for your own consideration and personal verification, in anticipation of the fluoridation decision(s) that Windsor council is facing. It is hoped this information will prove useful and essential in guiding your sound decision making regarding the future of Windsor's municipal water fluoridation practice. We believe that Windsor's artificial fluoridation of municipal drinking water must be ended immediately.

I. Fluoride works topically, in high concentrations, when applied directly on the tooth enamel surface – such as with fluoride tooth paste brushing, and dental applications containing higher concentrations of fluoride, with the individual's/patient's informed consent. Both Health Canada (2010) and the US Centers for Disease Control (1999) have conceded that – ***swallowing fluoridated water has very little effect on reducing dental caries rates***. As such, why does any community still want to fluoridate people's drinking water for the purpose of swallowing/ingestion?

II. For many decades, promoters of water fluoridation, including Health Canada, touted fluoridation as somehow being natural, like calcium fluoride in ground-water. Yet, Health Canada (and others) remained silent on what is actually being used to fluoridate – ***a toxic waste product, from the phosphate fertilizer production industry, called hydrofluorosilicic acid, which contains silicofluorides/fluorosilicates, plus trace co-contaminants including arsenic, lead, mercury and radionuclides.*** Only recently has Health Canada finally conceded, ***"Health Canada has not conducted toxicology studies on fluorosilicates,"*** Reference: Response to Environmental Petition No. 221B, under Section 22 of the Auditor General Act, Received April 22, 2008. Health Canada also conceded ***health harm toxicology research has never been conducted on hydrofluorosilicic acid, the most prevalent chemical compound***

used in water fluoridation practice today. Reference: Health Canada's Chief Dental Officer of Health, Dr. Peter Cooney, Waterloo, Ontario debate audio, October 21, 2010

It appears Health Canada is comfortably satisfied promoting the **general concept** of municipal water fluoridation, while remaining largely silent on what municipalities actually should use to fluoridate; thereby leaving municipalities completely in the dark, and on their own, to discern safety and suitability of fluoridating chemical compounds when it comes to human health, toxicology and effectiveness pertaining to consuming such chemical compounds over one's lifetime. Ontario public health, and local public health, also do not provide much, if any, scientific research on **claimed** safety and/or **claimed** effectiveness of actual fluoridation chemicals.

III. The United States Centers for Disease Control indicates that, ***"Drinking water safety is defined and determined by federal, state, and local regulations. The main federal law that ensures the quality of American drinking water is the Safe Drinking Water Act (SDWA). Under the SDWA, the U.S. Environmental Protection Agency (EPA) sets standards for drinking water quality and oversees the states, localities, and water suppliers that implement those standards."***

The Centers for Disease Control then goes on to state, the ***"CDC promotes effective public health practices, such as community water fluoridation. It is not CDC's task to determine what levels of fluoride in water are safe."*** See: http://www.cdc.gov/fluoridation/safety.htm at first and second paragraphs.

Ontario, Canada is governed by its own Safe Drinking Water Act (OSDWA), which sets out standards for drinking water quality. As with the American SDWA, Ontario's SDWA subscribes to The United States National Sanitation Foundation International (NSF) Standard 60.

NSF 'certifies' three basic chemical compounds in the fluoridation category under NSF Standard 60:

1. Hydrofluorosilicic Acid (a.k.a. Fluorosilicic Acid, Fluosilicic Acid, Hexafluorosilicic Acid, Hexafluosilicic Acid, Dihydrogen Hexafluorosilicate)

2. Sodium Fluorosilicate (a.k.a. Sodium Silicofluoride)

3. Sodium Fluoride

IV. The United States National Sanitation Foundation International (NSF) Standard 60 does nothing to ascertain if hydrofluorosilicic acid is safe for lifetime human consumption, or whether it is even effective at fighting dental caries/cavities. By its own admission NSF International is "an independent, not-for-profit, non-governmental organization." Reference: NSF/ANSI 60 – 2009 and 2011

By its own disclaimers, "NSF International (NSF), in performing its functions in accordance with its objectives, does not assume or undertake to discharge any responsibility of the manufacturer or any other party. The opinions and findings of NSF represent its professional judgment. NSF shall not be responsible to anyone for the use of or reliance upon this Standard by anyone. NSF shall not incur any obligations or liability for damages, including consequential damages, arising out of or in connection with the use, interpretation of, or reliance upon this Standard." Reference: NSF/ANSI 60 – 2009 and 2011

NSF does not conduct health harm or health benefit research itself. NSF expects the polluting industry to conduct such research, does not require proof be placed in NSF's hands that such research has been conducted, and allows such industries to voluntarily police themselves when it comes to affixing the NSF Standard 60 label onto hydrofluorosilicic acid shipments. NSF has made it clear that it merely makes recommendations, which others are free to follow or not follow, and that NSF accepts no liability if one chooses to follow NSF's recommendations.

Windsor currently requires its municipal water to be fluoridated with hydrofluorosilicic acid (or its derivative). What tangible scientific evidence does Windsor have in its possession right now, from any fluoridation chemical supplier, proving hydrofluorosilicic acid (or its derivative), when used in concentrations intended within your municipal water supply, is 'safe and effective' for lifetime swallowing/systemic ingestion by humans and/or animals?

Who has tested, or will test, hydrofluorosilicic acid (or its derivative) on behalf of your municipality, and then sign-off that it is safe for lifetime consumption and lifetime effectiveness at fighting dental caries/cavities?

You now know that NSF Standard 60 has nothing what-so-ever to do with such testing, assurances, guarantees or liability.

V. Health Canada concedes that hydrofluorosilicic acid (containing silicofluorides/fluorosilicates, plus trace co-contaminants such as arsenic, lead, mercury and radionuclides) ***is <u>not</u> regulated under Canada's Food & Drug Act, <u>nor</u> is it regulated under Canada's Natural Health Product Regulations***, despite the fact that it is being directly and routinely added into drinking water supplies for the purpose of treating dental caries disease in humans. ***In fact, <u>no</u> municipal water fluoridation products have <u>ever</u> been regulated in such manner by Health Canada.***

Recall that Health Canada also concedes (see above) that, ***health harm toxicology research has <u>never</u> been conducted on hydrofluorosilicic acid, the most prevalent chemical compound being used in water fluoridation practice today.***

This revelation is almost too fantastic to comprehend as being true, but it is true. Health Canada likes to hide behind calling fluoride a 'nutrient', without scientific proof that it is a 'nutrient', and then says we don't regulate 'nutrients'. Hydrofluorosilicic acid 'cocktail' contains far more than 'fluoride'. How convenient it must be for Health Canada to turn a blind-eye to that fact, and then dismiss all need for drug compliance, dismiss all need for natural health product compliance, and dismiss all need for health harm toxicology research, <u>by oversimplifying</u> the true and broad reaching impact of fluoridation as nothing more than mere 'nutrification' of the public. It is hard to imagine that hydrofluorosilicic acid is anything like a 'nutrient'; when the Canadian Environmental Protection Act classifies hydrofluorosilicic acid as ***"persistent"***, ***"bio-accumulative"*** and ***"toxic"***, Environment Canada classifies hydrofluorosilicic acid as a ***"hazardous substance"***, Transport Canada classifies hydrofluorosilicic acid as a ***"dangerous good"***, and the United States Environmental Protection Agency classifies hydrofluorosilicic acid as ***"class one hazardous waste"***.

'Reckless' and ***'cavalier'*** are two words that may come to mind when reflecting upon how Health Canada has been (mis)handling / (mis)managing such things all these many decades.

VI. Health Canada's Chief Dental Officer of Health, Dr. Peter Cooney, has conceded that lifetime swallowing of fluoridated water results in less than one cavity reduction per person, Reference: Waterloo, Ontario debate audio, October 21, 2010; also corroborated by Statistics Canada research data. See: http://cof-cof.ca/2010/11/fluoridation-information-night-in-waterloo-health-canadas-chief-dental-officer-responds-to-fluoridations-less-than-one-cavity-reduction-per-person/

Windsor Councillors need to ***insist*** that any purported reduction in dental caries/cavities ascribed to fluoridation, is clearly expressed in absolute terms, not merely percentage reduction terms. ***Zero to fifty percent cavity reduction, ascribed to fluoridation, when expressed in real terms means zero to half a cavity reduction per person per lifetime, not a mouthful of cavities being reduced to half a mouthful of cavities.*** If municipal council is set upon spending precious and scarce taxpayer dollars on water fluoridation practice, council would be wise to insist that ***payback*** for such investment can be ***proven*** to their taxpayers/investors, ***not merely claimed*** by blank statements, like $1 spent on fluoridation saves $38 in dental caries treatment. See: http://cof-cof.ca/2012/01/does-water-fluoridation-really-save-dollars-otherwise-spent-on-filling-cavities/

High quality, variable controlled population studies have been conducted within Canada, where ***hydrofluorosilicic acid fluoridation has been turned-off***, and dental caries rates did not go up – in fact ***dental caries rates actually went down***. Rates went down ***without any alternative forms of fluoride treatment, and without any heightened vigilance in dental care***. Dr. Christopher ***Clark*** and Dr. Steven M. ***Levy*** acted as principal researchers on these two studies. ***Clark*** and ***Levy*** also ***served on the six member Health Canada expert panel in 2008 which reviewed water fluoridation and then unanimously recommended fluoridation should continue in Canada, even after their own 2001 and 2006 published studies had proven otherwise.*** See: http://cof-cof.ca/canadas-chief-dental-officer-says-fluoridation-works-yet-canadas-variable-controlled-population-studies-tell-otherwise/

Then there is Dr. Dick ***Ito*** (DDS), who conducted ***"A cross-sectional study to compare caries and fluorosis in 7-year-old schoolchildren from a fluoridated area with those in a neighbouring non-fluoridated area in Ontario,"*** his 2007 MSc thesis at the University of Toronto – Graduate Department of Dentistry. Ito's study is ***also known as the Caledon and Brampton Study***, Region of Peel, Ontario, Canada. Remarkably, ***Ito found that, "the effect of fluoridation on caries in these communities was not evident given the matching of the fluoridated Brampton schools to the higher SES [socio-economic status] of Caledon schools plus the variable exposure to fluoridation within the communities."*** See: http://cof-cof.ca/2007/03/ito-caledon-and-brampton-study-peel-region/

Ito earned his University of Toronto – Graduate Department of Dentistry MSc degree by producing and ***defending his thesis study***, a thesis which clearly showed no beneficial effect from water fluoridation. ***Yet, to this day, Ito remains an avid supporter, spokesperson, and 'circuit-promoter' of municipal water fluoridation.***

Ito is also past President of the Association of Local Public Health Agencies (aLPHa), an association that describes itself as, ***"a non-profit organization that provides leadership to the boards of health and public health units in Ontario."*** An association that has stated within its own ***"Messaging and Communications Strategies,"*** that ***"health unit staff and officials need to be aware of the key messages and in support of the public health view of fluoridation. <u>There is no place for personal views on fluoridation</u>."*** (Note: underlining added) Reference: aLPHa Notes, Drinking Water Fluoridation, February 10, 2011 – 1:00 to 5:00 PM, Champagne Ballroom, Novotel Toronto Centre, 45 The Esplanade, Toronto

Another key Canadian study is the University of Toronto – Graduate Department of Dentistry MSc degree earned by Dr. Amir ***Azarpazhooh*** (DDS), for his 2006 thesis research report titled ***"Oral Health Consequences of the Cessation of Water fluoridation in Toronto,"*** a report prepared for the Faculty of Dentistry – University of Toronto <u>and</u> City of Toronto Public Health. Azarpazhooh's ***"Supervisors"*** on this report were none other than ***Dr. Hazel Stewart – Director of Dental Services, Toronto Public Health*** and ***Dr. James L. Leake – Head of Dental Public Health at University of Toronto.***

Azarpazhooh found "a global decrease in dental caries has occurred regardless of fluoridation status" and ***"despite a historical interpretation that the removal of fluoride would result in an increase in dental caries the findings... do not support this claim."*** See: <u>http://cof-cof.ca/2006/08/azarpazhooh-oral-health-consequences-of-the-cessation-of-water-fluoridation-in-toronto-msc-thesis-report-faculty-of-dentistry-university-of-toronto-city-of-toronto-public-health-2006/</u>

<u>Why are Canadians 'not' being shown this important and very telling Canadian research</u>?

VII. The <u>stated purpose</u> of the Ontario Safe Drinking Water Act (OSDWA) is ***"to recognize that the people of Ontario are entitled to expect their drinking water to be safe"*** and ***"to provide for the protection of human health and the prevention of drinking water health hazards through the control and regulation of drinking water systems and drinking water testing."***

OSDWA, Section 19 – came into effect on January 1, 2013, and imposes broader standard of care for municipal drinking water systems to include every person who, on behalf of the municipality, oversees the accredited operating authority of the system or <u>exercises decision-making authority</u> over the system. That, of course, includes Ontario municipal

councillors and mayors. Moreover, ***every person governed under that standard of reasonable care, who fails to carry out their duty, may be found guilty of an offence.*** As such, Ontario councils/council members can now be held accountable and answerable **for what they allow, permit or request for their local municipal drinking water supply,** regardless of what Health Canada, public health and/or dental promoters of fluoridation might want or recommend. In the end, it is Ontario councillors and mayors who are most on the hook. Much about water fluoridation remains unregulated, yet as of January 1, 2013 Ontario councils are left holding this burden – all while Health Canada, Ontario public health, local public health, and/or dental promoters of water fluoridation remain merely advisors, and are not being asked to shoulder any of the liability or accountability. The ensuing legal onslaught, resulting in legal defence for Ontario municipal councils, will likely cost municipal tax payers significantly, in whole or in part. Money that could be better spent fighting cavities in a real way.

VIII. Ontario's Safe Drinking Water Act, (OSDWA) Section 20 (2)(b) is often cited by Ontario municipalities to suggest that their water fluoridation practice somehow falls ***"under a statutory authority or for the purposes of complying with a statutory requirement"***, thereby specifically claiming municipal empowerment to fluoridate pursuant to the Ontario Fluoridation Act (OFA). ***Such municipalities tend to overlook that the OSDWA is an Act specifically set out to treat municipal water so that the water is safer for people to drink, it is not an Act that sets out to treat people through the water supply. Such municipalities also tend to forget that under OSDWA Section 20 (1) "no person shall cause or permit any thing to enter a drinking water system if it could result in, a drinking water health hazard; a contravention of a prescribed standard; or interference with the normal operation of the system." Moreover, such municipalities forget that OSDWA Section 20(3) clearly states, "For the purposes of prosecuting the offence of contravening subsection (1), it is not necessary to prove that the thing, if it was diluted when or after it entered the system, continued to result in or could have resulted in a drinking water health hazard,"*** – which translates to mean ***dilution of hydrofluorosilicic acid is no defence***, under this section of the OSDWA titled "Dilution No Defence".

Understand that when your medical officer of health and/or dental officer of health speak in terms like ***'optimal level'*** or ***'optimal concentration'*** in drinking water – these are ***dilution defence arguments***, which are **not permitted** under the OSDWA. Such terms also, and quite

cleverly, avoid touching upon ***dose*** of fluoride as it pertains to each unique individual consuming various amounts of fluoridated water. ***Clever for medical officers of health. Bad for municipal council members who may simply listen to these 'advisors' without insisting upon definitive, professional, tangible proof of what they are claiming.*** For example, how does one control every individual's dose of artificial fluoride from municipal drinking water without due consideration to the individual's age, weight, body mass, unique physiology, lifestyle, diet, daily water intake, and other sources of fluoride ingestion? Well... you can't, it's just that simple. To think otherwise is being willfully naïve.

The OSDWA resolves how such 'conflict' between Acts must be handled. ***OSDWA Section 166(1) titled "Exception To Conflict" states, "The provisions of this Act and the regulations prevail over the provisions of any other Act and any regulation made under any other Act, irrespective of when the other Act is enacted or the regulation is made under the other Act. The OSDWA goes on in Section 166(2) to state, "Subsection (1) does not apply if the other Act referred to in subsection (1) expressly states that a provision of that Act or of a regulation made under it prevails over the provisions of this Act."*** Therefore, the OSDWA withstands all other Acts irrespective of when they are enacted, unless the other Act expressly states it prevails over the OSDWA. ***The Ontario Fluoridation Act (OFA) does not expressly state that it prevails over the OSDWA.*** As such, the OSDWA overrides the OFA, despite municipal argument made to the contrary. In fact, the wording within the OSDWA anticipates such conflict between Acts, and handles it so clearly and completely, that ***there is no need to formally repeal any conflicting Act, such as the OFA.***

The OSDWA exists to protect all of Ontario's people consuming municipal drinking water from drinking water contaminants. Putting an untested, unregulated contaminant known as hydrofluorosilicic acid, containing silicofluorides/fluorosilicates plus trace co-contaminants of arsenic, lead, mercury and radionuclides into municipal drinking water is not permitted. The OSDWA applies in its entirety, not selectively. Ask the Ontario Ministry of the Environment what they will approve in Windsor; is it your fluoridation equipment, your choice of fluoridating chemical compound, or both. You will soon find out that they can only approve the fluoridation equipment as installed – and Windsor, alone, must ensure what they fluoridate with fully complies and conforms to the OSDWA, as well as other Acts/regulations.

IX. The Ontario Fluoridation Act (OFA) only makes reference to voting for a "fluoridation system ... comprising equipment and materials for the addition of a chemical compound to release fluoride ions into a public water supply." ***The OFA remains silent on what fluoridation chemical compound(s) a municipality decides upon. However, of utmost importance, the OFA does not in any way, empower under its legislated statutory authority, an Ontario municipality to command and operate a public drinking water supply for the purpose of treating dental caries disease in humans, by chemically or otherwise artificially altering the municipal drinking water supply. The OFA remains silent about "compulsory preventive medication of the inhabitants of the area."***

X. While municipalities might like to believe the Ontario Fluoridation Act (OFA) confers upon them authority for treating dental caries through the municipal water supply, it does not. In the Supreme Court of Canada case, Metropolitan Toronto v. Forest Hill (Village), [1957] S.C.R. 569, it was concluded, ***"The question is as to the power of the council to enact the impugned by-law, and the answer depends upon the nature of the subject-matter to which it relates. If, on the evidence in the record, it could properly be regarded as action by the council to provide a supply of pure and wholesome water or to render more pure and wholesome a supply of water already possessing those characteristics I would hold it to be valid. But, in my opinion, it cannot be so regarded. Its purpose and effect are to cause the inhabitants of the metropolitan area, whether or not they wish to do so, to ingest daily small quantities of fluoride, in the expectation ... that this will render great numbers of them less susceptible to tooth decay. The water supply is made use of as a convenient means of affecting this purpose. In pith and substance the by-law relates not to the provision of a water supply but to the compulsory preventive medication of the inhabitants of the area. In my opinion the words of the statutory provisions on which the appellant relies do not confer upon the council the power to make by-laws in relation to matters of this sort. In view of the difference of opinion in the Courts below and in this Court, it is fortunate that this is a case in which if we have failed to discern the true intention of the Legislature the matter can be dealt with by an amendment of the statute."***

To this day, in Ontario, no legislated Act or other statutory authority exists, which confers upon any municipality legal authority to treat people via the municipal water supply, through compulsory preventive medication of the inhabitants. Such was the case in 1957 Ontario, such is the case today. Ontario's Fluoridation Act has forever remained silent on precisely

why we ought to release fluoride ions into the public water supply, and clearly that purpose is compulsory preventive medication of the inhabitants. The Supreme Court of Canada, Metropolitan Toronto v. Forest Hill (Village), [1957] S.C.R. 569 position has never been complied with. Therefore, it appears the higher Court decision prevails to this day, and intentional fluoridation of the municipal water supply for the purpose of reducing dental caries disease/dental cavities disease remains unlawful to this day, regardless of the Ontario Fluoridation Act (OFA).

Moreover, whereas the Supreme Court of Canada views water fluoridation as "compulsory preventive medication of the inhabitants of the area" – it is entirely inappropriate and reckless to add anything into Canada's municipal drinking water supplies, for the purpose of medicating the people in anticipation of reducing dental caries disease/dental cavities disease, without first having subjected such additive(s) to long-term, rigorous, toxicology studies in order to determine good/bad health effects in humans; and without having first conducted double-blinded, randomized, variable/placebo controlled, clinical trials to conclusively prove effectiveness in reducing dental caries/dental cavities disease – all in order to then form the proper basis for a new drug classification and drug identification numbering, under Canada's Food & Drug Act.

XI. Council likely thought it was free to choose whether or not to artificially fluoridate the municipal water supply. Council may have even thought it had a say in what fluoridation chemical to use to fluoridate with. Council probably thought 'promoters' of water fluoridation shared the accountability and liability that came with water fluoridation lobbying, recommendations, implementation, practice and choice of chemical compound used.

Council now knows this is NOT the case, and recognizes what it must do.

XII. Your public expects and requires all Windsor Council members to ask very tough questions and to secure very real answers with tangible records of undeniable proof, concerning the purported benefits, purported safety, and legal implications concerning water fluoridation and use of unregulated, untested fluoridating agents such hydrofluorosilicic acid chemical

compound containing silicofluorides/fluorosilicates. The calibre of your undertakings in this regard will be all that protects your citizens, and all that protects Windsor Council. Municipal council holds the ultimate authority and decision making power to stop Windsor's fluoridation. Municipal council is the last thin line of protection between harm and their citizens. While much about municipal water fluoridation and fluoridation chemicals has remained unregulated and unlegislated; council and municipal obligations and responsibilities have remained clearly legislated and tightly regulated – as to what can, should and must be done.

Is Windsor municipal council willing and prepared to do what is required of them?

Canada's growing list of communities actively rejecting fluoridation of their drinking water.
See: http://cof-cof.ca/2013/01/canadas-growing-list-of-communities-rejecting-fluoridation-of-their-drinking-water/

Sincerely and respectfully,

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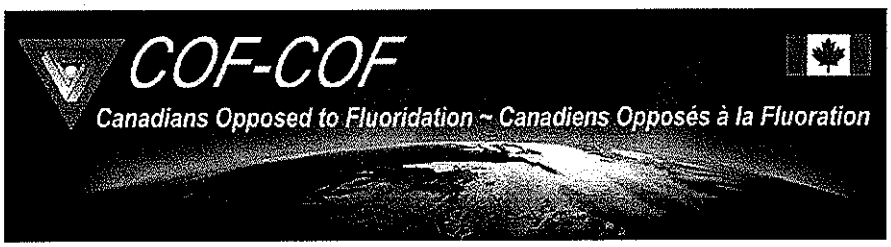

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