

4 October 2019

Federal Minister for Health

The Hon Greg Hunt

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House of Representatives

Parliament House

Canberra ACT 2600

Email: Greg.Hunt.MP@aph.gov.au (sent by email and by post)

Minister for Health, Minister for Medical Research

NSW Minister for Health

The Hon Brad Hazzard

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Dear Ministers Hunt and Hazzard,

Responding to the Health Hazards associated with Water Fluoridation:

As senior government Health Ministers you have duty-of-care responsibilities to protect Australian citizens from known factors that negatively impact community health. I expect that you both acknowledge this duty as extremely important.

The water fluoridation policy was introduced to Australia in 1953, prior to the establishment of Australia's first aluminium smelter at Bell Bay in Tasmania. Both the aluminium smelting and superphosphate industries are well aware of the extreme toxicity of plant-generated fluoride waste products, and their negative health impacts on plant workers and generally on the environment downwind from plant chimney stacks. Water fluoridation conveniently and profitably disposes of unwanted fluoride waste products that are highly toxic.

In the early 1940's a deliberate and clever DECEPTION was created by ALCOA researcher Dr.T. Dean to address the increasingly serious fluoride pollution issue, and to 'soften' fluorine's toxic image problem. On the basis of a highly selective study involving 7,257 12-14 year old white children drawn from 21 cities (i.e. an average of 345/city), Dean et al. (1942) recommended increasing the fluoride concentration in drinking water to 1 part per million in order to "**significantly reduce**" dental decay, as suggested by his decay versus fluoride content graph. Hindsight and data from much larger population studies in the US, Europe and Australia reveal that Dean et al. were wrong in their conclusion and **that fluoride in drinking water does not protect against decay.**

Dean, however, was also acutely aware of dental fluorosis which can be an unsightly mineralised tissue harm appearing in some children drinking fluoridated water containing around and above 1 part per million fluoride. Hence, at the so-called "optimum" 1 ppm fluoride concentration level, **there is ZERO margin of safety for this one harm** which the NHMRC and Australian health departments acknowledge. US risk analysis expert Dr. Kathleen Thiessen (2007) addresses other fluoride-induced tissue harms in humans, including neurotoxicity, impaired glucose metabolism, and impaired thyroid function, which appear at fluoride concentrations below 1 ppm in drinking water. It must be remembered that fluoridated drinking water is estimated to account for roughly 2/3 of the 'average' total daily dose in milligrams per kilo of body weight. Beverages (black tea, wine, soft drinks), baked goods, fumigated preservatives, and fluoridated toothpaste are additional sources of daily fluoride intake.

Since 1953 Australia's NHMRC has defensively supported the water fluoridation policy, and pushed diligently to expand its uptake around Australia. The NHMRC's attempts to scientifically justify the fluoridation policy in periodic Reviews have been pathetic – namely, outrageously selective, clearly biased and unprofessional. As a retired academic scientist myself, I am appalled at the NHMRC's lack of objectivity and fairness in reviewing peer-reviewed published literature. My extensive reading and overall view of the literature is that, on balance, proven harms and probable harms reported in excellent quality papers strongly suggest that water fluoridation is hazardous, in varying degrees (from subtle to seriously impactful depending on individual fluoride sensitivity), to the health of a majority of human populations. **In other words, the health risks are too great to continue with this reckless and dangerous policy.**

A comprehensive position paper on Health Hazards associated with water fluoridation has been prepared for IAOMT, the International Academy of Oral Medicine and Toxicology, by Dr. D.C. Kennedy (2003). It points out that fluorine is *not a nutrient* as often erroneously claimed in older Australian government publications, and is not required in any physiological function in our human bodies. IAOMT claims *that the impacts of fluoride on our tissues are all negative* e.g. fluoride is an endocrine disruptor and a neurotoxin. Furthermore, the IAOMT review paper claims there is *no safe concentration or exposure level*. Dutch physician Dr. Hans C. Moolenburgh's 1993 Court Affidavit provides proof of short-term harm effects caused by ingesting fluoridated drinking water, and reversal of these effects simply by reverting to unfluoridated drinking water. Evidently the NHMRC and TGA have never sponsored research testing for such effects.

The responsibility for dental health resides with Federal Health. State Health departments implement the water fluoridation policy with repetitive assurances from Federal Health and the NHMRC that water fluoridation is "safe, effective and equitable". Why then has Federal Health been eager to off-load water fluoridation as a traditional TGA responsibility into state jurisdictions where the presumption of "effectiveness and safety" will be enshrined simply because the NHMRC makes these unsubstantiated claims?

The reality is that these claims are fraudulent and water fluoridation should cease as a failed and misguided policy. Furthermore, it has emerged recently that water fluoridation has been illegal since enactment of the TG Act in 1989. By now removing it as an "excluded good" the current illegality is also removed. However it is 100 % predictable that state health departments, in their new role, will surely fail to monitor health impacts, just as Federal Health's TGA has failed to do over the past 30 years.

In 2013 the Federal Department of Health misled parliament when it submitted that s. 7AA is needed in the TG Act 1989 to address the common practice of making therapeutic claims for goods having no health-related impact. S. 7AA entered force on 28 February 2014 and, to the best of my knowledge, remained unused until fluoridated water was recently chosen to be an "excluded good", thus attempting to remove it from therapeutic scrutiny within the TG Act 1989.

By engaging in this 'out-of-sight out-of-mind' response' Federal Health Minister Hunt, and/or his delegate Dr. John Sperrit, automatically perjure themselves because neither they nor the NHMRC can prove the NHMRC's claim that water fluoridation is "safe". The TG ACT sensibly recommends that Exclusion should occur *only if a claim of "safety" can be established. And it cannot, as the accompanying ATTACHMENTS demonstrate.*

Dr. Arvid Carlsson, Nobel Laureate in Medicine and physiology (2000) has stated :

"Sweden rejected fluoridation in the 1970's, Our children have not suffered greater tooth decay, as World Health Organisation figures attest, and in turn our citizens have not borne the other hazards fluoride may cause."

Time is long overdue for Australian governments to cast aside the deceptive mantle of fluoride madness which is undermining health. Our governments could then genuinely claim to govern with enhanced moral legitimacy, and perhaps then begin to earn the trust and respect of a more Australian citizens.

Yours sincerely,

Dr. John Lusk (retired earth scientist).

ATTACHMENT 1: [IAOMT Position Statement Against Fluoridation 2017](#)

ATTACHMENT 2: [IAOMT Position Statement Against Fluoridation 2003](#)

ATTACHMENT 3: [Affidavit of Hans C. Moolenburgh, M.D., Safe Water Association vs City of Fond Du Lac, March 1993.](#)