

The Minister for Health,
Mr. Brad Hazzard,

12th March, 2018.

Dear Sir,

Re – my correspondence dated 21st November, 2017 and 15th January, 2018 .

Dr. Ben Scalley reply: NHMRC Review of Water Fluoridation M17/6549. 13/1/18.

It is now 8 weeks since I last requested clarification and answers to questions I have that have arisen from the 2016 Draft and 2017 Statement on Fluoride. I have included the questions again for your easy reference.

1. The NSW Health Department need to explain how an independently selected panel of top Doctors, Scientist and Toxicologists etc., can “Ethically” ascertain a safe finding for fluoridation when they are not allowed to review, to question or to research the actual waste product that is used for water fluoridation? This is after-all, the Product they are continually finding Safe is it not?
2. Confirm what fluoride was used in all the research papers quoted, the Pharmaceutical Grade Sodium Fluoride as found in tablets, the Calcium Fluoride as used by Dentists or the Industrial Waste Fluoride that has varying levels of heavy metals and known Neurotoxins?
3. Provide the Research, on the compounded and long term effects on the human brain and body of the combination of the 4 neurotoxins; fluoride, lead, mercury and arsenic, plus the other contaminants that are all found in the waste Hexa or hydrofluorosilicic acid that is used for water fluoridation?
4. Provide the Missing Research, to the effects on the largest organ of the human body, the Skin; which is immersed in and subjected to water daily, water that contains one of the highest corrosive and reactive elements found on the planet!!! I ask this as I am personally aware that in 2011 Paediatric Dermatologist, Dr John Su informs 1 in 4, “children under the age of 2” now suffer eczema.
2015 ASCIA (Australian Society of Clinical Immunology and Allergy) reports: 3 in 10 Eczema Sufferers will go on to develop “Food Allergies”; 4 in 10 will develop “Asthma” and 78% of adults also, NOW suffer Eczema, these are all now rampant in the Australian population. Is Fluoride Waste contributing to this epidemic? **Why is “the effects to the Skin” not included in the review?**
5. NSW Health is now referring to fluoride as a Nutrient. NSW Health has previously informed the people of CWFL (Clean Water for Life) that as Fluoride is listed as a “Chemical” it does not require TGA Approval.
Please supply Links and references to the Therapeutic Goods Associations studies and approval papers, confirming safety and efficiency, for this new addition to the Nutrient Table. Dr. Ben Scalley, did provide a partial reply to this query, which was merely a statement re-categorising fluoride and referring to the study that found a Low incidence of Dental Fluorosis to be the basis for increasing the safe levels of fluoride for Australian Babies. **Note: No additional Research on the effects of the increased dosage to the Brain or other organs of the body?? Why Not??**
6. The NHMRC’s 2016 Draft and 2017 Statement clearly outlines the Grade and Level of Research conducted to bring about a Safe finding for Water Fluoridation.
Of the thirty one (31) Listed Medical conditions, just 2 returned a “Moderate Rating” on the Grade

Scale, the other (93.5% of research) on the remaining 29 Health Conditions is classified Low Grade and 62% of that is classified - Very Low, 'We are NOT CONFIDENT in the results.

Page 15 - Study Design: "All additional studies in the 2016 NHMRC are also Observational Studies.

Page 16 - "Lack of Blinding in Observational Studies contributes to them being considered "Low Quality".

Page 18 - The review Sums Up - Low Quality Research with:

"We have LIMITED CONFIDENCE in the results"

Page 16 - "The Research Reviewers identified that BIAS may be of concern in many of the studies included in the 2016 Report.

Not one (1) High Grade Study for any of the listed Health Conditions? nor the teeth, for that matter

The report goes on to state "There is *Insufficient Evidence* to reach a conclusion about any association between Water Fluoridation (Chronic kidney disease, Kidney stones, Hip fractures, Osteoporosis, Thyroid Function, Low birth weight, Skeletal Fluorosis, Musculoskeletal Pain) at "Current Australian Levels.

"Insufficient Evidence" if there is insufficient evidence, *No Science or Not Enough Science* one way or the other, Biased, Limited and 'We are NOT CONFIDENT in the results' – I have to be honest, this instils 'No Confidence' in Me. **How does the FRG justify a safe finding on such a Low Grade and No Research?**

Why has the "Precautionary Principle" been ignored?

Where is all the "Gold Standard Science" known as *Double Blind Studies*? If there is none, **why, have you not proposed and funded the necessary Gold Standard Science?**

This is what I and all Australians expect from our Health Services.

7. Furthermore in September, 2017 the National Institute of Health released the results of the Canadian study, funded by the United States which confirmed a reduction of IQ in children consuming fluoride.

Link: <https://ehp.niehs.nih.gov/ehp655/>

Will NSW Health be suspending fluoridation until this most recent research has been reviewed?

If not, when will this report be reviewed?

Following on page 3 is an extract and table from the 2017 Statement on fluoride: Page 35.

Outcome definition and prioritisation

GRADE guidelines (Guyatt et al 2011) specify that outcomes should be pre-specified and undergo an initial classification into three categories according to their importance for decision making (critical, important but not critical, or low importance) prior to undertaking the review. The relative importance of the outcomes is to be reassessed after reviewing the evidence. Classification of the importance of the outcomes was performed by the Fluoride Reference Group prior to the start of review activities and confirmed as part of the GRADE process of interpreting the body of evidence identified in the review. The pre-specified outcomes to be included for the review of the dental effects of water fluoridation are presented in Table 11, with their importance as confirmed by the Fluoride Reference Group.

Table 11 Outcomes from the systematic review to be included in the evidence evaluation

Outcome	Definition of outcome (examples)	Importance of the outcome
Dental caries: and soft tissues of the teeth	Chronic and progressive disease of the mineralised	Critical for decision making
Dental fluorosis: It can appear on the teeth as white flecks, brown staining pitting of the enamel and in severe cases could cause aesthetic concern.	Hypo mineralisation of the dental enamel.	Critical for decision making
Neuro-cognitive: (delirium, Alzheimer disease)	Disturbances in the mental process related to thinking, disorders reasoning, and judgment	Important, but not critical
Dementia:	The impairment of brain function, involving memory, thinking and concentration (dementia)	Important, but not critical
Neuro-developmental	Disorders of brain function that affect emotion, learning and memory (intellectual disability, communication disorders, autism spectrum disorder, attention deficit/hyperactivity disorder, specific learning disorders, motor disorders)	Important, but not critical

Please clarify my understanding of the above table 11 and “Important but Not Critical” outcome.

IS the Reference Group prioritising the effects/outcomes to the teeth – BEFORE/ OVER the effects to the Brain?

Please note, I had many more queries but settled on presenting these few so as not to overburden the Department and assure a faster reply.

As a person that is expected to pay for and consume this product for life, it is up to your Department to ‘Sell’ its virtues and prove its value and safety to me, the consumer.

I am,
Your’s faithfully,

Connie Crawford.

6th April, 2018

Dept. Health NSW.

Dear Mr. Hazzard,

Your Reference M17/6549. 13/1/18.

I have emailed 3 letters to your office: 21/11/2017 - 15/1/2018 and 12/3/2018, these letters all requested the same information. I did receive one reply to my first letter which you deferred to Dr Ben Scalley. He answered just one (1) of my ten (10) questions at the time. I am still waiting on the answers to my other questions.

I have just read the Australian Charter of Healthcare Rights. This Department is currently breaching its own principles and my rights to respectful consideration and communication, also the right to comment and have my concerns addressed PROPERLY and PROMPTLY.

Please rectify this situation as soon as possible, thank you.

I did neglect to add the following information from my last request: that is with regard to the disclaimer at the bottom of the reply from Dr. Scalley that advises the views expressed in his letter were not necessarily those of the NSW Ministry of Health. I respectfully request that all the answers and information that I am provided with conform and ARE the VIEW of the Ministry of Health.

Yours faithfully,

Connie Crawford.