

13 March 2020

By Email to:

Mr Alan Singh

Executive Director, Research Translation
National Health and Medical Research Council

CC: NHMRC CEO – Professor Anne Kelso

CC: Federal Minister for Health – The Hon. Greg Hunt

CC: State and Territory Ministers for Health – The Hon. Brad Hazzard (NSW); The Hon. Jenny Mikakos (VIC); The Hon. Stephen Miles (QLD); The Hon. Roger Cook (WA); The Hon. Stephen Wade (SA); The Hon. Sarah Courtney (TAS); The Hon. Rachel Stephen-Smith (ACT); The Hon. Natasha Fyles (NT).

CC: Attorney General – The Hon. Christian Porter

Dear Mr Singh

Re: Response to your letter sent on behalf of the Federal Minister for Health

Thank you for your letter dated 11 November 2019, responding to Fluoride Free Australia's concerns about water fluoridation and especially the potential of fluoride to damage both the fetal and infant brain (Copy attached). Our response has been delayed by the subsequent publishing of several very important studies pertaining directly to this issue, which I discuss below.

I must say I found your response dispiriting. Please allow me explain why:

Your letter falls into a pattern that both Fluoride Free Australia and many Australian individuals have received from your organisation over the years. The impression that this pattern creates is that no matter how serious the implications of the issue that we bring to the attention of NHRMC, that you are far more concerned about protecting this practice than protecting the health of the Australian population.

To be more specific: the study you dismiss (Green et al 2019), based on unidentified and unarticulated criticisms, was a paper funded by US government agencies and published in the world's leading journal of paediatrics. Before publication this study passed through a much more intensive review process than normal and was accompanied by an editorial, a review article by Professor David Bellinger (one of the world's leading toxicologists) and a podcast from two of the editors of JAMA.

Regarding the criticisms of this particular study, many of these were ill-informed, incorrect and possibly self-serving. Please refer to a summary paper of responses to most if not all of these criticisms, available [HERE](#).

In addition, you and other pro-fluoride commentators continue to imply that the Green 2019 study appeared in isolation. In reality this study essentially replicated the Bashash 2017 study – another major US government-funded study. The Bashash 2017 study was conducted by a team of leading researchers from universities and research institutions from the United States, Canada and Mexico.

What is striking about both the Bashash 2017 and Green 2019 studies is that this is the first time fluoride's neurotoxicity has been implicated to occur during the fetal stage of development. This changes, by an order of magnitude, the notion of what dose of fluoride can cause harm. However, NOT ONE risk assessment performed by a government agency in any fluoridated country (including Australia) has considered potential impacts of fluoride on fetal development.

Before the Bashash 2017 and Green 2019 studies there were many other human and animal studies providing extensive evidence of fluoride's neurotoxicity. To date there have been 72 IQ human studies, of which 64 have

found an association between lowered IQ in children and exposure to fluoride and only eight which have not found such an association. A complete listing of these studies is available [HERE](#). A summary article is also available [HERE](#).

Since the Bashash 2017 and Green 2019 studies were published, even more striking evidence and results of fluoride's impact on cognitive function have been published in peer-reviewed journals, especially Riddell et al 2019 and Till et al 2020.

In the Riddell 2019 study, the authors showed the prevalence of ADHD among adolescents in fluoridated communities in Canada was nearly THREE (2.84) times higher in fluoridated communities compared to non-fluoridated communities. In the Till 2020 study, the authors found a significantly lower IQ in the children exposed to formula made with fluoridated tap water, compared to children exposed to formula made with non-fluoridated water. The drop of IQ in this study was up to 9 IQ points!

It should be stressed here that these studies are examples of harm being caused at the levels of exposures used for fluoridation in Australia. In other words, these study results are not a 'high-dose phenomenon', but are observed at doses consumed every day by the foetus, infant and child in Australia (Please note our concentration of 0.6 to 1.1mg/L is higher than Canada's 0.7mg/L).

As you are probably aware, the US National Toxicology Program has undertaken a systematic review of all the relevant animal and human studies relating to fluoride's neurotoxicity and they published a draft late last year. This draft review is being revised in response to suggestions made by a panel appointed by the National Academy of Sciences. This revision by the NTP will allow them to include studies since the draft was published, including the vitally important studies mentioned above, i.e. Riddell 2019 and Till 2020.

I would hope with all this science on the table, that the NHMRC would urgently update its knowledge on the neurotoxicity of fluoride. I hope you would agree with me; if the science is what it suggests, including some of the highest quality research yet undertaken on this subject, you would begin to end your long history of defending and promoting water fluoridation.

At stake here is not only our children's welfare but the trust of the Australian public in our national health body and our respective health authorities. We should not allow a separation of the best science and public health policy. To do so would pose a very serious threat to the public's trust in government health authorities and NHMRC in particular.

I also take this opportunity to invite you and/or any NHMRC staff to meet with visiting Professor Paul Connett, an expert in the toxicology of fluoride who has been researching this subject for 24 years. Professor Connett is touring Australia from 12 March to 9 April and will be available in Melbourne, Sydney and Brisbane on the dates listed [HERE](#). Otherwise, he would be available for a Skype meeting in between these listed speaking sessions at our mutual convenience.

I look forward to hearing from you.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Andrew Parry', written in a cursive style.

Andrew Parry
[Fluoride Free Australia Inc.](#)



Ref No: MC19-016470

Andrew Parry
Fluoride Free Australia
info@fluoridefreeaustralia.org

Dear Mr Parry

Thank you for your correspondence of 11 October 2019 to the Attorney-General, the Hon Christian Porter MP, regarding water fluoridation and impacts on human health. This matter has been referred to the Minister for Health, the Hon Greg Hunt MP. The Minister has asked me to reply on his behalf.

As Australia's leading expert body on the development and maintenance of public health and clinical standards, the National Health and Medical Research Council (NHMRC) is responsible for providing health advice based on the best available scientific evidence. Part of the ongoing monitoring and maintenance of publications such as the 2017 Public Statement – water fluoridation and human health in Australia (the Statement) involves keeping a watching brief on any studies regarding human health effects of community water fluoridation.

NHMRC has noted the recent study *Association Between Maternal Fluoride Exposure During Pregnancy and IQ Scores in Offspring in Canada* (Green *et al*, 2019). Many Australian and international experts, including those on the NHMRC Water Quality Advisory Committee, have identified several problems with the scientific methodology used by the authors. It is best practice when reviewing the evidence to consider issues with the research methods and how they might affect the overall confidence in the results reported in the published study. This is important in reaching a conclusion about whether water fluoridation causes any benefits or harms. This approach was used by NHMRC when reviewing the evidence that underpins the Statement.

You have mentioned that you have concerns regarding NHMRC's scientific methods and ethical conduct in developing the Statement and the 2017 NHMRC Information Paper – Water fluoridation: dental and other human health outcomes (the Information Paper) that supports it. I would like to assure you that NHMRC used internationally-recognised systematic review methods and best practice approaches to develop this advice. Details on the methods used are provided in the Evidence evaluation and Technical reports. NHMRC, the then Fluoride Reference Group and the Australian Health Ethics Committee also consider it ethical to fluoridate community water supplies because it provides important dental health benefits and reduces tooth decay across the population. This is especially important for children and those who are on a lower income with less access to dental treatment or other forms of fluoride.

As outlined in the Information paper, the conclusion reached by NHMRC and the Fluoride

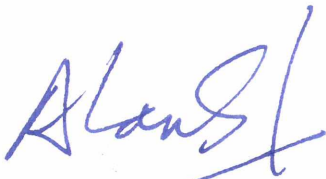
Reference Group in 2017 is that the existing body of evidence is consistent in showing that fluoridated water reduces tooth decay. Please note, NHMRC does not re-evaluate advice in response to individual published studies but rather in response to a body of evidence and research outcomes. While NHMRC monitors what studies are published on this topic, a review of NHMRC's fluoride advice is not being considered at this point in time.

While many other countries choose not to fluoridate their public water supplies due to their high levels of naturally-occurring fluoride or other population-level fluoridation programs, New Zealand, Canada, the United Kingdom, Ireland and the United States of America continue to support public water fluoridation to ensure dental health. Any additional concerns you may have about the chemicals used to fluoridate water and the causes of tooth decay may be addressed in our [Questions and Answers resource on the NHMRC website](#).

NHMRC continues to support community water fluoridation as there is no reliable evidence that water fluoridation at current Australian levels causes health problems. I would like to remind you that the implementation of this advice continues to be the responsibility of the state and territory governments as clarified by the recent action of the Therapeutic Goods Administration to name fluoridated water as an 'excluded good'. This decision was made in consultation with and supported by federal and jurisdictional health authorities, including NHMRC.

I trust this letter and the aforementioned documents will help address any outstanding issues you may have on community water fluoridation.

Yours sincerely



Alan Singh
Executive Director
11 November 2019