

Fluoride Causes Death and Disease

Bega Valley
June 2016
Geoff Pain



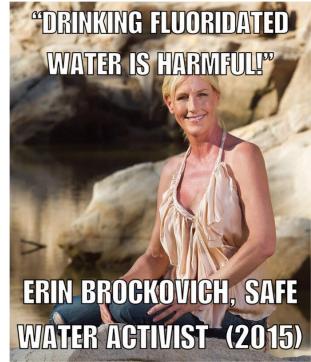
Good News

Celebs

Join

campaign

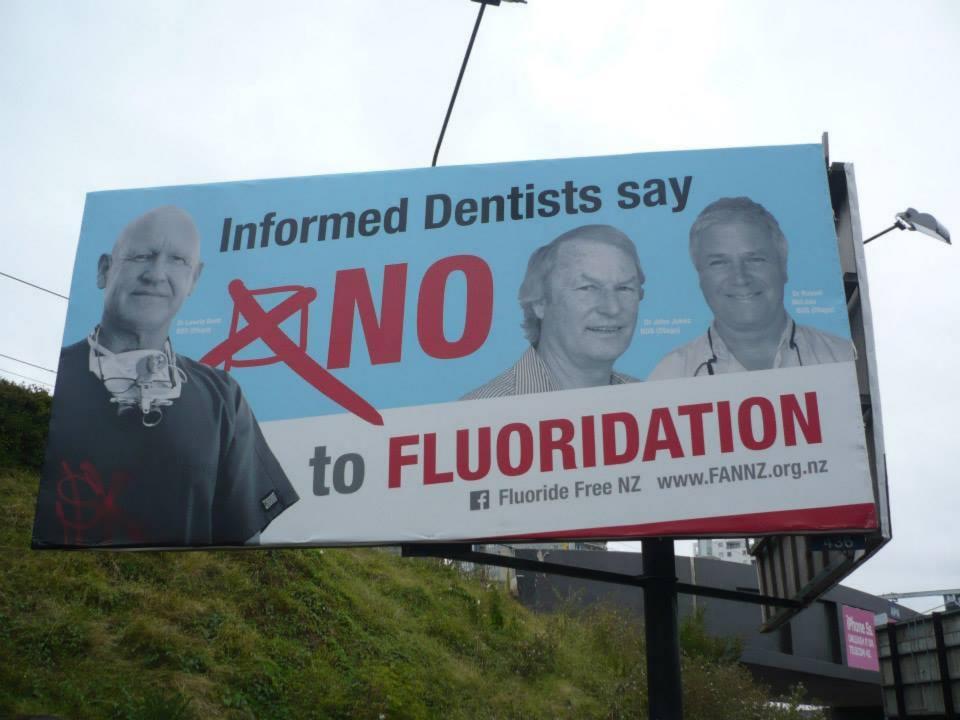




Examples of Australian Dentists Opposing Fluoridation

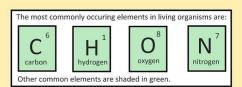
- Dr Maria Claudianos
- Dr Michael Chong
- Dr Andrew Harms
- Dr Aushi Patel
- Dr Karim Azmi
- Dr Anshu Singh
- Dr Anu Reddy
- Dr David Cowhig
- Dr Duncan Copp
- Dr Ross Mackay
- Dr Terry Rose
- Dr Terry Wong

- Dr Elizabeth Rowland
- Dr Eric Davis
- Dr Gavin Blyth
- Dr Joe Juric
- Dr Leigh Woodbridge
- Dr Lisa Matriste
- Dr Michelle Ever Juan
- Dr Phillip Stein
- Dr Prue King
- Dr Rachel Hall
- Dr Urvashi Pandi
- Dr David Stern



THE PERIODIC TABLE FOR BIOLOGISTS

II hydrogen Li Be 3 Na Mg sodium nagnesiur 20 19 Ca otassium calcium 38 Rb Sr 56 6 Ba Fr Ra



transition-metals

21	22	23	24	25	26	27	28	29	30
Sc	Ti	V	Cr	Mn	Fe	Co	Ni	Cu	Zn
				manganese	iron	cobalt	nickel	copper	zinc
39	40	41	42	43	44	45	46	47	48
Υ	Zr	Nb	Mo	Tc	Ru	Rh	Pd	Ag	Cd
57	58	59	60	61	62	63	64	65	66
La	Hf	Ta	w	Re	Os	Ir	Pt	Au	Hg
10/07/07/4	00.000000	100000000	120,500	1.00000000	ADVINION N	2002	5.5574.0003	10000000000000000000000000000000000000	
75	76	77		E 7					
Ac	Ku	На							

III IV V VI VII VIII

	r	He					
5	6	6 7		9	10		
В	С	N	0	F	Ne		
	carbon	nitrogen	oxygen				
13	14	15	16	17	18		
Αl	Al Si		S	CI	Ar		
20000	(00.00	phosphorous	sulphur	chlorine	10. 001		
31	32	33	34	35	36		
Ga	Ga Ge		Se	Br	Kr		
10	50	F.1	52	53	54		
49	2255700	51	1000000	53	0.000.000		
In	Sn	Sb	Te		Xe		
				iodine			
67	68	69	70	71	72		
TI	Pb	Bi	Po	At	Rn		

Some elements are used universally in nature—though their uses can be diverse.



Amine group of amino acids (the monomers of proteins)



· Also used in chlorophyll.



- Has a high affinity for oxygen
- Used in hemoglobin and myoglobin to carry oxygen in blood and muscles
- Used in ferredoxin in photosynthesis
- . electron carrier in some bacteria



- Source of energy for chemosynthetic bacteria in hydrothermal vents
- Found in the R-Group of cysteine, an amino acid, and can form disulfide bridges in protein folding.



- Phospholipids make up the plasma membrane.
- Sugar-phosphate backbone of DNA structure.
- Bonds between phosphate ions store energy in ATP.

phosphate ions



- Generate resting and action potentials in neurons.
- Used in maintaining osmosis.
 Sodium is the main cation (positive ion) in blood plasma, potassium in cytoplasm.
- . Sodium-potassium pump is an example of active transport



- Extracellular component of bone matrix
- Forms exoskeletons
- Stimulates synaptic transmission between neurons
- . Used in muscle contraction

making polymers.

Hydrolysis reactions break bonds.

example:

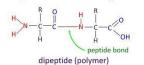
amino acids (monomers)

hydrolysis

hydrolysis

hydrolase used
water in OH water out

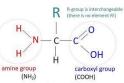
Condensation reactions create bonds between organic molecules,



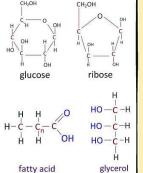
Organic Compounds

contain carbon and are found in living organisms.

Some examples include:



amino acids



Some exceptions are:

CO CO₂

 CO_3^{2}

HCO₃
hydrogen carbonates
Na₂HCO₃

CaCO₃
Na₂CO₃

Resources used:

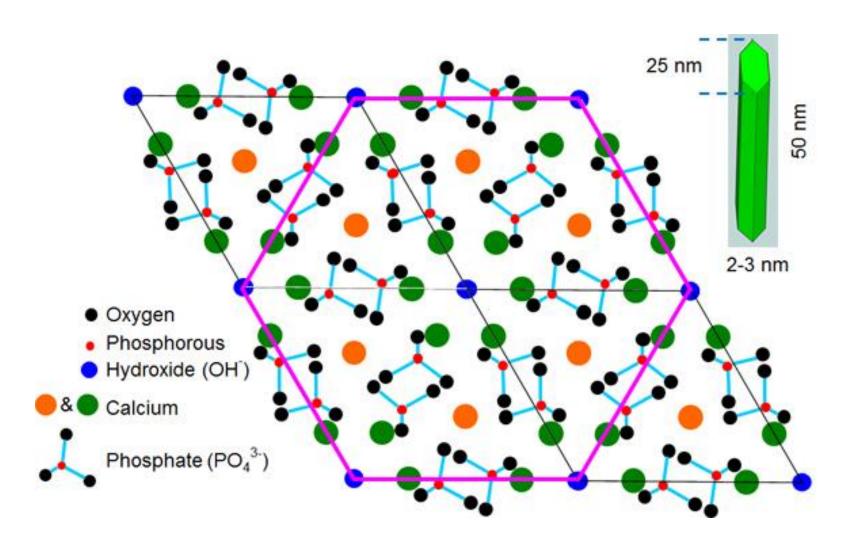
- . Kent, M. Advanced Biology. Oxford University Press, 2000.
- . Allott, A & Mindorff, D. Biology Course
 Companion. Oxford University Press, 2007.

Designed for the IB Biology course by Stephen Taylor, Bandung International School, Indonesia. June 2009.

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What is all the **FUSS** about? Hydroxyapatite **Fluoride** in **Unwanted Substitution Sites**



Something the NHMRC doesn't want members of the public to see - FUSS

Positron Emission Tomography using radioactive Fluorine in **healthy volunteers**.

The <u>dark areas are Fluoride</u> ions attached to organs, arteries and **bone** shortly after injection.

Note the **bladder** as the body fights to eliminate Fluoride, the base of the **brain**, **joints**, **kidneys**

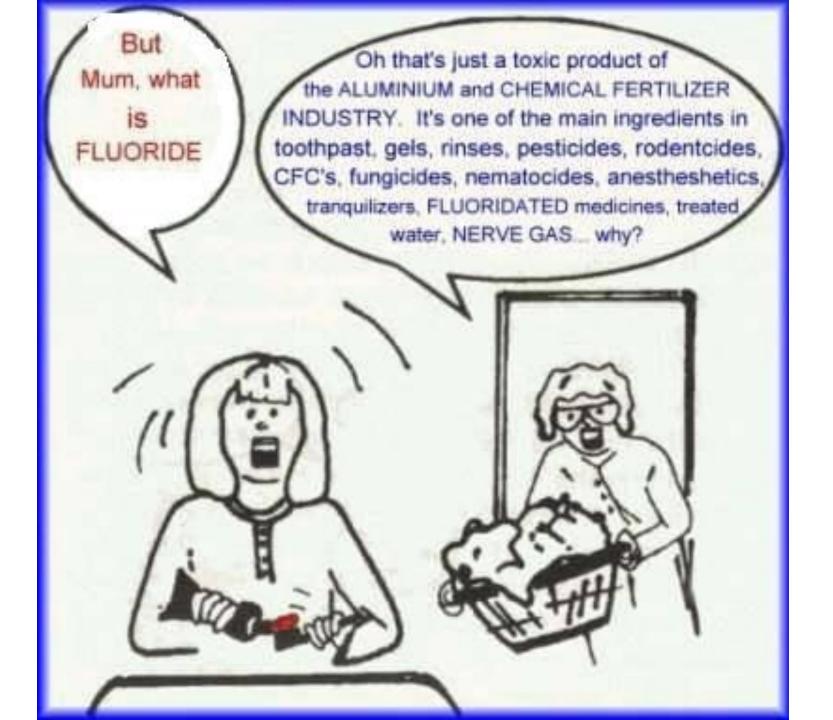
Ref: Association of vascular fluoride uptake with vascular calcification and coronary artery disease Li et al 2012 Nuclear Medicine Communications 2012, 33:14–20



Whole-body positron emission tomography image demonstrates remarkable fluoride uptake in both femoral arteries.



Patient with RCC and bone metastases who was imaged using routine ^{99m}Tc-MDP bone scintigraphy (left) and ¹⁸NaF PET-CT (right). Image courtesy of Emma Gerety.











Hazmat incident in Maffra 17/09/2010

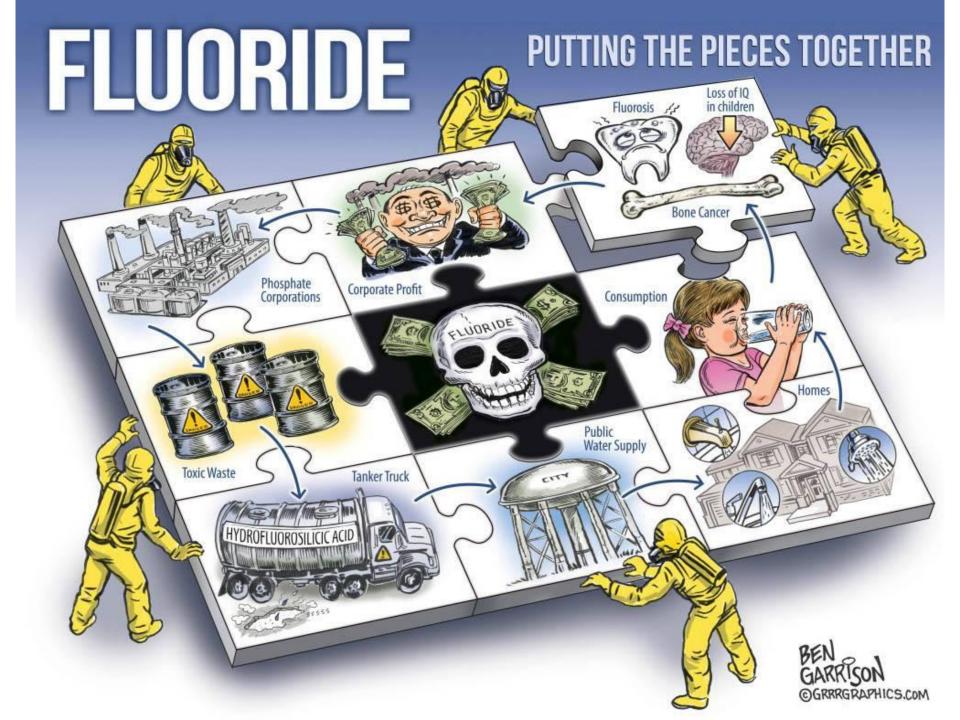
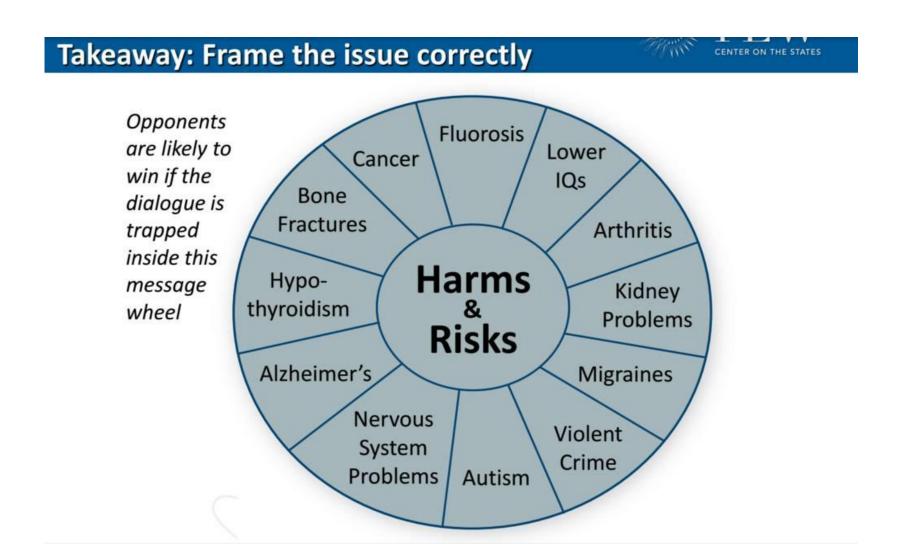
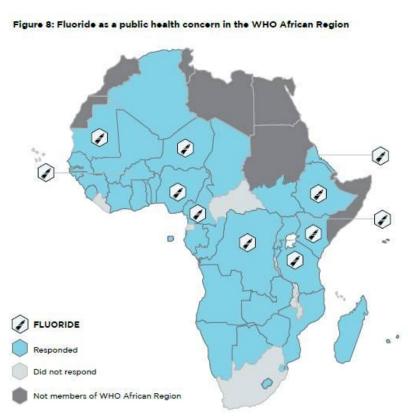


Image taken directly from training manual produced by Pew Trusts for Fluoride Pushers – lists Known Harms to be avoided in any debate



World Health Organization Officially Concerned about Fluoride

Countries worried



What they worry about

Clinical features and health impacts associated with fluoride

Clinical features

- High concentrations: Abdominal pain, excessive saliva, nausea and vomiting. Seizures and muscle spasms may also occur. Early symptoms of skeletal fluorosis include stiffness and joint pain. In severe cases, the bone structure may change and ligaments may calcify resulting in muscle impairment and pain.
- Low concentrations: Dental caries.

Health impacts

High concentrations: Neurological damage. Reduced IQ scores in children. Dental and skeletal fluorosis. Associated with osteosclerosis, calcification of tendons and ligaments and bone deformities, tooth mottling.

World Health Organization List of Fluoride Harms

- Neurological damage
- Reduced IQ scores in children (see also Xiang 2003)
- Dental and skeletal fluorosis
- Osteosclerosis
- Calcification of tendons and ligaments
- Bone deformities
- Conjunctival hyperaernia (excess blood in the eye)
- Respiratory disorders
- Chronic cough
- Bronchitis
- Chonic Obstructive Pulmonary Disease

- Lung Cancer
- Haematological Disorders
- Ischaemic Heart disease
- Carcinoma of the Trachea
- Cerebrovascular Disease
- Digestive Disorders
- Skin Diseases (perhaps referring to Fluoroderma and eczema here)
- Rheumatic disorders
- Nervous conditions
- Hearing and Visual disorders
- Cognitive Decline in older people
- Exacerbation of Asthma
- Diabetes
- Obesity

World Health Organization 2014. Regional Assessment Report. Chemicals of Public Health Concern and their management in the African Region Bergman, Åke, Heindel, Jerrold J, Jobling, Susan, Kidd, Karen A and Zoeller, R Thomas. Editors 2013 State of the Science of Endocrine Disrupting Chemicals – 2012 An assessment of the state of the science of endocrine disruptors prepared by a group of experts for the United Nations Environment Programme and World Health Organization.

Geoff Pain https://www.researchgate.net/publication/285771633_Fluoride_is_a_bio-accumulative_endocrine_disrupting_neurotoxic_carcinogen_-_not_a_nutrient

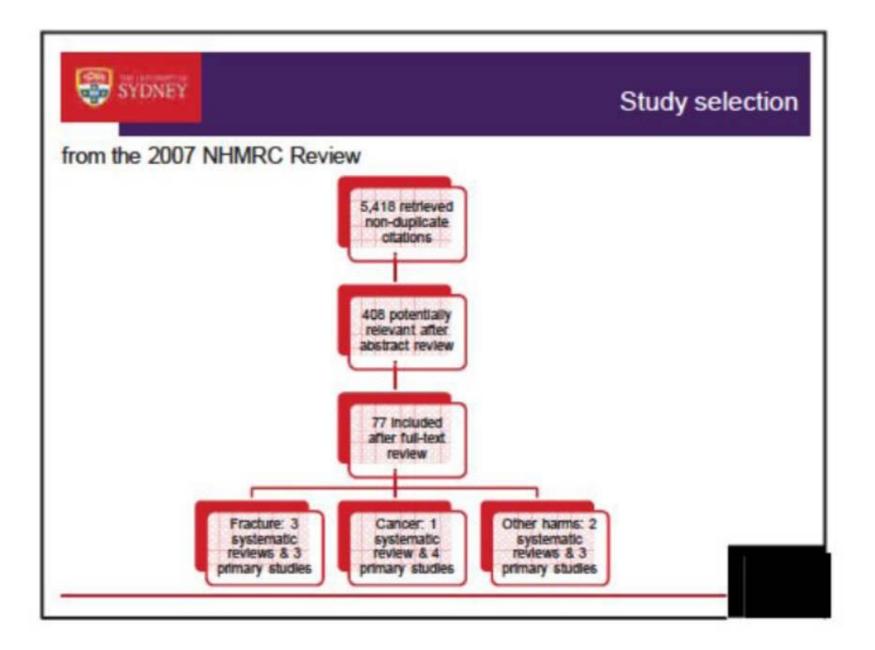
NHMRC 2007 Report – Harms Mentioned

- Dental Fluorosis*
- Cardiovascular disease ←
- Cancer Takahashi 2001*
- Osteosarcoma (bone cancer males)*
- Thyroid Cancer
- Osteoporosis
- Decreased Bone Density
- Fracture
- Down's syndrome
- Alzheimer's disease*
- Anaemia during pregnancy

- Age at menarche
- Congenital malformations*
- Infant mortality
- Sudden infant death ←
- IQ ←
- Mental retardation (High Fluoride, Low Iodine)*
- Skeletal fluorosis
- Goitre*
- Urinary stone disease*

Note: Harms in bold * are for studies mentioned finding statistically significant increased prevalence

The Great Culling – 2007 NHMRC Review



A survey of **suppression of public health information by Australian governments**

Boshra Yazahmeidi and C . D'Arcy J . Holman School of Population Health, The University of Western Australia

Background: It is cause for concern when a democratically elected government suppresses embarrassing information by hindering public health research or the publication of research findings. We conducted a survey of Australian public health academics to estimate the level of acts of suppression of research by Australian governments, to characterise these events, and to gather views on what interventions might be effective in curbing them.

Methods: A total of 302 academics in 17 institutions completed a postal questionnaire in August 2006 (46 % of 652 invited). The instrument sought details of suppression events they had witnessed since 2001.

Results: There were **142 suppression events**, including 85 personally experienced by 21.2 % (n = 6 4) of respondents. The rates were higher in 2005/06 than in earlier years. **No State or Territory was immune** from suppression. Although governments most commonly **hindered** research by **sanitising**, **delaying** or **prohibiting** publications (66 % of events), no part of the research process was unaffected. Researchers commonly believed **their work was targeted because it drew attention to failings in health services** (48 %), the **health status of a <u>vulnerable group</u>** (26%), or pointed to a <u>harm in the environment</u> (11%). The government agency seeking to suppress the health information **mostly succeeded (87 %)** and, consequently, **the public was left uninformed or given a false impression**. Respondents identified a full range of participative, cognitive, structural and legisative control strategies.

Conclusion: The suppression of public health information is widely practised by Australian governments .

Implications: Systemic interventions are necessary to preserve the integrity of public health research conducted with government involvement.

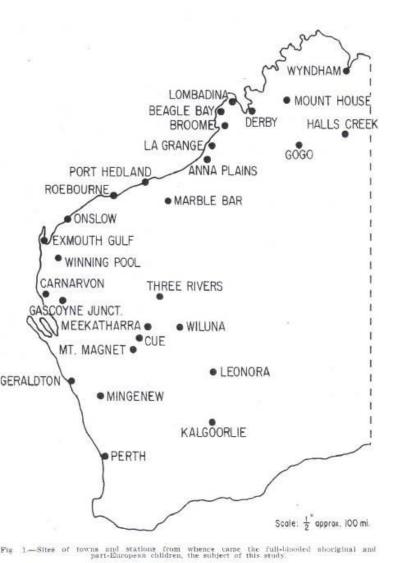
Keywords: Political censorship; official corruption; silencing dissension.

(Aust N Z J Public Health. 2007;31:551-7)

History - Why have different concentrations in different Australian States?

Minutes of the <u>1954</u> NHMRC discussing Fluoride Storage Toxicity Risk "Tea as a Dietary Source of Fluorine ... Fluorine in teas from India and Ceylon available in Queensland 2.5 mg/litre. China teas 4.0 mg/litre."

- "cane-cutters in Bundaberg consume as much as 10 litres per day of which 4 litres is tea"
 - "Assuming 0.5 ppm in the water and 2.5 ppm in the tea, the maximum fluorine intake could be **16.5 mg/day**"
 - (My note: About 1/20th Lethal dose).
- ".. may be significant from the point of view of production of fluorosis".
- "Therefore the **Committee recommends that further research** be undertaken to collect information under conditions of high fluid turnover"



Kailis, D.G and Silva, D.G. **1970**, Occurrence of Dental Fluorosis in Australian Aboriginal Children Resident in Carnarvon Western Australia. Australian Dental Journal 216-224

Fluorosis in children recognized in 1970 as a widespread problem in Western Australia

Table 2

Water sources, fluoride concentration in ppm, and climatological data (30-year cycle), including average daily temperatures, relative humidity, points, and days of rainfall of towns and stations shown in Fig. 1

Towns or	Water sources F. ion ppm	Average daily temperatures			Relative	Points of	Days of
stations		Maximum	Minimum	Mean	humidity	rainfall (100-1 in.)	rainfall (0.01 in.)
Wyndham*	0 · 2 - 0 · 5	93 - 1	75.8	84.5	51		-44
Derby	0.3-0.4	92.2	71.3	81.7	59	2323	44
Halls Creek	0 1 - 0 9	92.2	64.0	78 1	45	2672	43
Lombadina	0.8-0.9	89.31	70-21	79 - 8+	65	2849	42+
Beagle Bay	(2-5) 0-1	89 - 3†	70.21	79.8+	65	2869	49
Broome	0 - 1 - 0 - 4	80.3	70-2	79.8	63	2036	43
La Grange*	0.2	91-6	69-1	80.4	65†	1667	
Anna Plains Stn.*	0.3	92-1	66-3	79-2	51		
Gogo Stn.*	1.2	-	33335	1000	1000		
Port Hedland	0 - 1 - 0 - 8	89-1	67-6	78.9	55	1304	21
Winning Pool*		91 - 1	62-0	76-5	46	890	
Marble Bar	0 · 1 – 1 · 0	96-2	67-6	81-9	39	1338	29
Roebourne	0.3-0.7	92.3	68-3	80-3	48	1292	22
Onslow	0 - 6-0 - 7	88 - 5	63-7	76-1	56	1079	22
Exmouth Gulf*	0 - 1 - 0 - 6			1	_	983	16
Carnarvon	0 - 4 - 2 - 3	80 - 2	62.7	71.5	64	862	38
Cascoyne Junction*	0.1	53/81765	1/1/03/01/11	0.000	0.00	732	28
Three Rivers Stn.*	1.7	-	_	-	-	824	17
Wiluna*	-	84.0	51.2	70.6	42	980	0
Meekatharra	0.2-0.4	84 - 8	59.0	71-9	38	854	40
Cue	1-25	83 1	58-4	70.8	44	818	40
Leonora*	0.5	77:11	52 - 4†	64-7†	43+	958†	-
Mt. Magnet*	0.2			-		833	45
Mingenew*	0.2	8-11	-	-		1630	68
Geraldton*	0.2	76.6	58 - 7	67-7	65	1801	82
Mount House Stn.*	1.0 .				-	2695	48

^{*} Incomplete data.

Western Australian taxpayers are billed for <u>Removal</u> of Fluoride at Quindalup which can reach 2.6 ppm

[†] Approximate.

How Fluoride Kills

The Queensland Government [2015] summarizes the toxicity of Fluoride as follows:

"Acute fluoride poisoning is manifested by vomiting, diarrhoea, abdominal pain, cyanosis, severe weakness, dyspnoea (laboured breathing), muscle spasms, paresis and paralyses, cardiovascular disorders including ventricular fibrillation, convulsions, coma and death. Fluoride kills by blocking normal cellular metabolism.

Fluoride inhibits enzymes, particularly metallo-enzymes involved in essential processes, causing vital functions such as the initiation and transmission of nerve impulses to cease. The strong affinity of fluoride for calcium leads to hypocalcaemia".



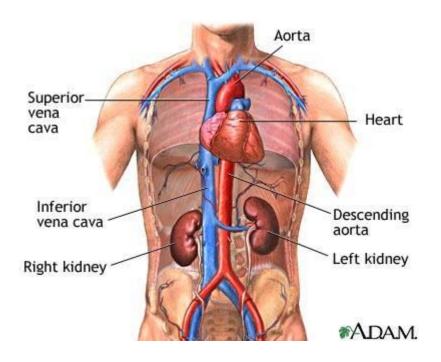
Every 12 minutes, an Australian dies from cardiovascular disease.

Fluoride continuously accumulates in the human body over a lifetime including the heart and arteries

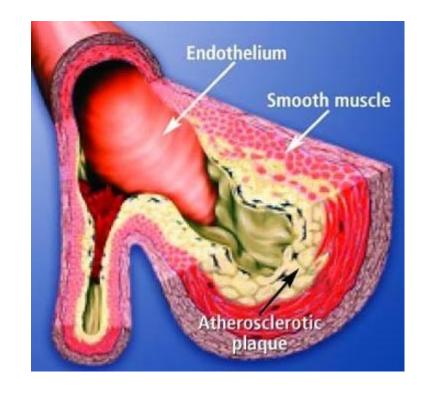
Fluoride causes Heart Attack, Stroke and Sudden Death



See my review https://www.researchgate.net/pu blication/293593658_Fluoride_ca uses_Heart_Disease_Stroke_and_Sudden_Death



Fluoride is an ACUTE Heart Poison and also a CHRONIC Heart Poison, a proven cause of Stroke and Ruptured Aorta. Fluoride is also a Kidney Poison.



Fluoride causes Heart Attack, Stroke and Ruptured Aorta

"Per capita cardiovascular deaths increased after Grand Rapids, MI, and Newburgh, NY, began industrial fluoridation (U.S. Public Health Service Congressional Record, Mar 24, 1952). 1,059 heart disease deaths occurred per year in 1948 in Grand Rapids, MI after 3 years of fluoridation but 585 yearly before fluoridation. The NY News, Jan 27, 1954 reported after 9 years of fluoridation in Newburgh, NY there were 882 heart deaths per 100,000 which was 74% above the National average." [Sauerheber 2013].

In **Grand Rapids** there was an **increase of 50%**, over a period of 4 years, in the **deaths from intra-cranial lesions (Stroke)** following the introduction of Fluoridation [Miller 1952]

Fluoride causes Heart Attack, Stroke and Ruptured Aorta

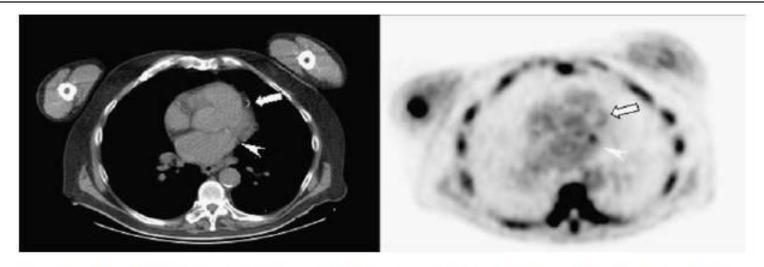
- Fluoride induces ventricular fibrillation and cardiac arrest [CSBP MSDS]
- Direct observation of damage to the heart caused by Fluoride includes vacuolar degeneration, haemorrhages, interstitial oedema, fibrous necrosis, dissolution of nuclei, thickening of the vessel walls and coronary artery ectasia (dilation)
- Sophisticated proteomics techniques have been applied to the study of the toxic mechanism of Fluoride on heart muscle [Lu 2009]. Twenty-one differentially expressed proteins were found, of which 15 were identified
- Fluoride impairs vascular tone and blood flow, increases recruitment and adhesion of circulating inflammatory cells to the endothelium, and prevents endothelial cell antithrombotic function
- Fluoride causes Hypertension (High Blood Pressure)
- Children with dental Fluorosis have altered ECGs, including prolonged Q-T interval, a biomarker for arrhythmias and a risk factor for sudden death
- Fluoride causes enhanced deposition of doped Hydroxyapatite "Calcification" which leads to inflammation sites for fatty deposits of atherosclerosis
- Fluoride increases cardiovascular hazards interleukin-6 and Interleukin-8 (IL-8). As has been stated "there is sufficient evidence to support <u>beyond any doubt</u> the involvement of IL-8 in the establishment and preservation of the inflammatory micro-environment of the insulted vascular wall" [Apostolakis 2009].

Fluoride causes Heart Attack, Stroke and Ruptured Aorta

- Fluoride increases fatty streak formation of the aorta and other sites
- Fluoride increases Monocyte chemotactic protein-1 (MCP-1) which induces infiltration of macrophages at vessel walls and formation of atherosclerotic lesions [Namiki 202, Kusano 2004].
- Fluoride interferes with heart muscle enzymes and causes cell death
- Fluoride interferes with Magnesium and Calcium metabolism
- Fluoride causes **oxidative stress** and degeneration of heart muscle
- Fluoride inhibits Thyroid function with consequential damage to heart function. Reduction of T4 has been linked to hypertension [Streeton 1988] and heart disease [Rodondi 2010].
- Fluoride increases risk of sudden death from ruptured aorta
- Diabetes, caused or exacerbated by Fluoride, further increases risk of cardiovascular death and disability
- Fluoridation of drinking water at 1.5mg/L "dramatically increased the incipient aortic calcification observed in rats with experimental chronic kidney disease" [Martín-Pardillos 2014, cited in MacArthur 2015].
- Cardiovascular disease death rates were about 1.7 times higher among adults aged 18 years or older with diagnosed diabetes than among adults without diagnosed diabetes. Rates for heart attack were 1.8 times higher among adults aged 20 years or older with diagnosed diabetes. Rates for stroke were 1.5 times higher [CDC 2014].

Fluoride causes Calcification of the Coronary Valve and Arteries

Fig. 3

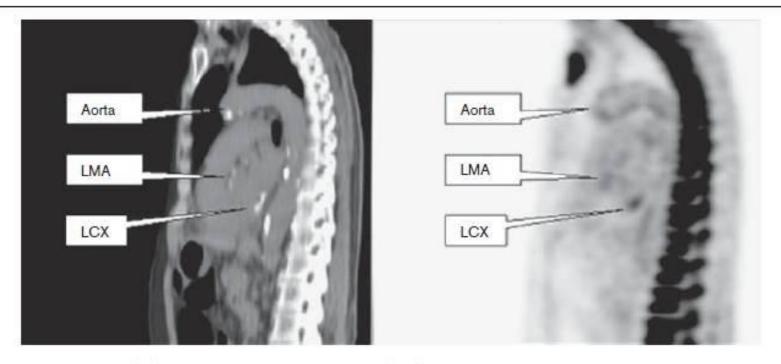


Computed tomography (left) and positron emission tomography (right) images show coronary calcification and fluoride uptake in the left anterior descending coronary artery (arrow) and the circumflex coronary artery (arrow head).

Coronary calcification dramatically increases the adjusted risk of a coronary event and sudden death, by a factor of 7.73 among participants with coronary calcium scores between 101 and 300 and by a factor of 9.67 among participants with scores above 300 (P<0.001 for both comparisons) [Detrano 2008].

Fluoride causes Calcification of the Aorta which can result in Sudden Death

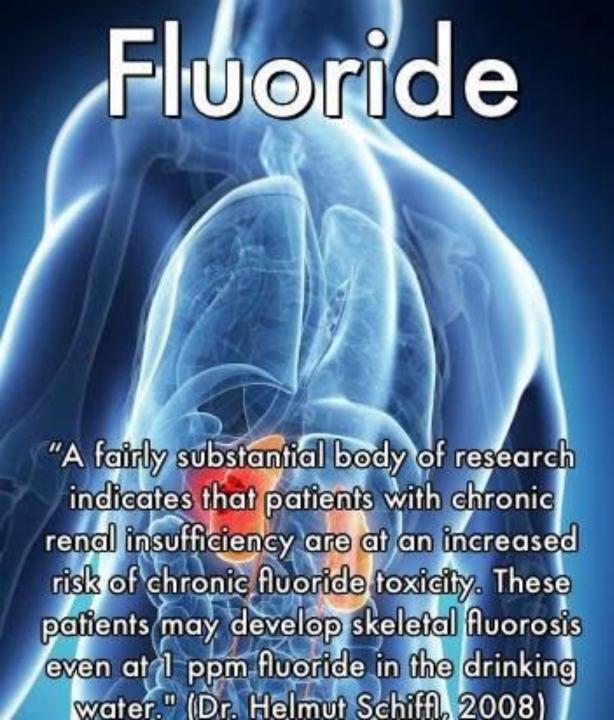
Fig. 2



Sagittal computed tomography (left) and positron emission tomography (right) images show aortic and coronary calcification and fluoride uptake. Calcification and fluoride uptake in the aorta do not always overlap. LCX, circumflex coronary artery; LMA, left main coronary artery.

The **aorta** has been found to accumulate **Fluoride** up to 8,400 ppm [Greever 1971]. The elastic properties of the ascending aorta are impaired in patients with mild levels of fluoride toxicity [Varol 2010].

Phosphate-induced aortic calcification is accelerated following exposure of uremic rats to fluoride in water at around 1.5 mg/L [Martin-Pardillos].



Kidney patients suffer more from Fluoride toxicity

1.7 million Australians

FLUORIDE AND KIDNEY IMPAIRMENT

 "People with kidney impairment have a lower margin of safety for fluoride intake. Limited data indicate that their fluoride retention may be up to three times normal" (NHMRC Australian Drinking Water Guidelines 2004 and 2011)

 Investigating fluoride's cumulative effects was a specific requirement of the Tender to do the 2007 NHMRC fluoride review (known through FOI) – but the NHMRC didn't investigate or report

THREE DIE FROM FLUORIDATION POISONING AT CHICAGO MEDICAL CENTER ON 16 JULY 1993.

Deaths were caused by acute exposure of excess fluoride in the water used in the dialysis process being used on those kidney patients.

At least 5 other patients reacted to the fluoride poison.

The US Dept. Health and Human Services stated 4 January 1991 —

"If an individual is consuming abnormally large quantities of water (fluoridated) he should drink bottled water."

People on Dialysis are easily killed by Fluoride

Pyelonephritis caused by Fluoride – "Therapy" abandoned NHMRC does not want you to know

Adams PH, Jowsey J. (1965). Sodium Fluoride in the Treatment of Osteoporosis and Other Bone Diseases. Annals of Internal Medicine. 63(6): 1151-1155. pg. 1154:

"In some animals **sodium fluoride causes severe renal damage**; renal tubular damage and renal insufficiency have been reported in endemic fluorosis (16). These renal effects of fluorine may be important, particularly when long-term therapy is contemplated. The presence of pre-existing renal disease may also influence the response to the drug, because the kidney is the principal route of fluorine excretion. A patient with renal disease (**probably chronic pyelonephritis**) has been reported (17) whose **bone contained fluorine in a concentration exceeding 5,000 ppm**. There was no history of exposures to fluorides, and her usual drinking water contained less than 0.5 ppm of fluorine. This is of interest because in a **postmortem** study in Utah (18) the highest concentrations of fluorine were found in those with **chronic pyelonephritis**; this was not true of those with chronic glomerulonephritis. It is hard to explain these findings but in chronic pyelonephritis there is commonly a defect of water conservation with polyuria and polydipsia, and this may be the important factor. Sauerbrunn and associates have reported in this issue of the ANNALS the development of **skeletal fluorosis** in a patient with chronic polydipsia; the fluorine content of his drinking water was high but it was not at a level generally associated with the production of skeletal disorder. It seems probable that in this patient and in those with chronic pyelonephritis the high concentrations of fluorine found in the bone are the result of a greater consumption of water, which leads to a greater intake of fluorine."

References:

- 16. Singh, A., Jolly, S. S., Bansal, B.C., Mathur, C.C.: Endemic fluorosis. Epidemiological, clinical and biochemical study of chronic fluorine intoxication in Punjab (India). Medicine (Balt.) 43: 229, 1963.
- 17. Taves, D.R., Terry, R., Smith, F.A., Gardner, D.E.: Use of fluoridated water in long-term hemodialysis. Arch. Intern. Med. (Chicago) 115: 167, 1965.
- 18. Call., R.A., Greenwood, D.A., LeCheminant, W.H. Shupe, J.L., Nielsen, H.M., Olson, L.E., Lamborn, R.E., Mangelson, F.L., Davis R.V.: Histological and chemical **studies in man** on effects of fluoride. Public Health Rep. 80: 529, **1965**.

Thanks to slweb.org

Gries G, et al. - "Studies on the origin of chronic pyelonephritis in hypothyroidism" Med Welt.17:936-9. (1996)

Townsville Suffers – Hospital Admissions

Townsville HSD residents are admitted at a higher rate than people from other parts of Queensland for potentially avoidable conditions including asthma, congestive heart failure, convulsions and epilepsy, congestive obstructive pulmonary disease, dental conditions, ear, nose and throat conditions, and pyelonephritis.

Table 11: Top 10 potentially avoidable hospitalisations, rate per 100,000, 2005-06

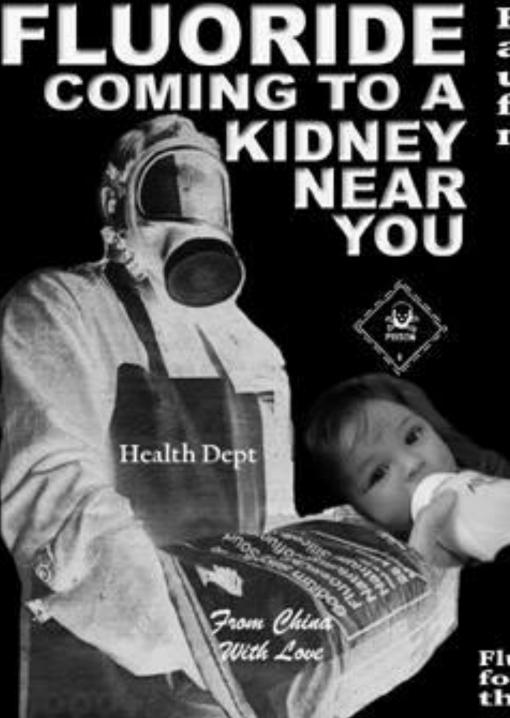
Condition	Townsville	Queensland
Angina	220.2	249.8
Asthma	170.9	162.3
Congestive cardiac failure	195.8	192.9
Convulsions and epilepsy	171.1	149.0
Congestive obstructive pulmonary disease	291.4	279.3
Dehydration and gastroenteritis	231.2	234.7
Dental conditions	282.9	267.0
Diabetes complications	814.8	943.2
Ear, nose and throat infections	189.4	175.3
Pyelonephritis	242.5	219.7

Source: Queensland Hospital Admitted Patient Data Collection. Prepared by: Health Surveillance, Tropical Population Health Network.

Cascade of Disaster - Pyelonephritis causes other disease

- Hypercalcemia
- Increased vascular calcification
- Reduced Bone Mineral Density
- Osteodystrophy
- Increased Fracture Risk
- Excess morbidity and mortality

Ref: Frost M, et al 2013 18F-fluoride Positron Emission Tomography Measurements of Regional Bone Formation in Hemodialysis Patients with Suspected Adynamic Bone Disease Calcif. Tissue Int. 93 436-437 and references therein.



Fluoro silicic acid H2SiF6 used in water fluoridation may contain

Antimony Arsenic Barium Beryllium Cadmium Chromium Copper lron Lead Mercury Selenium Thallium Zinc

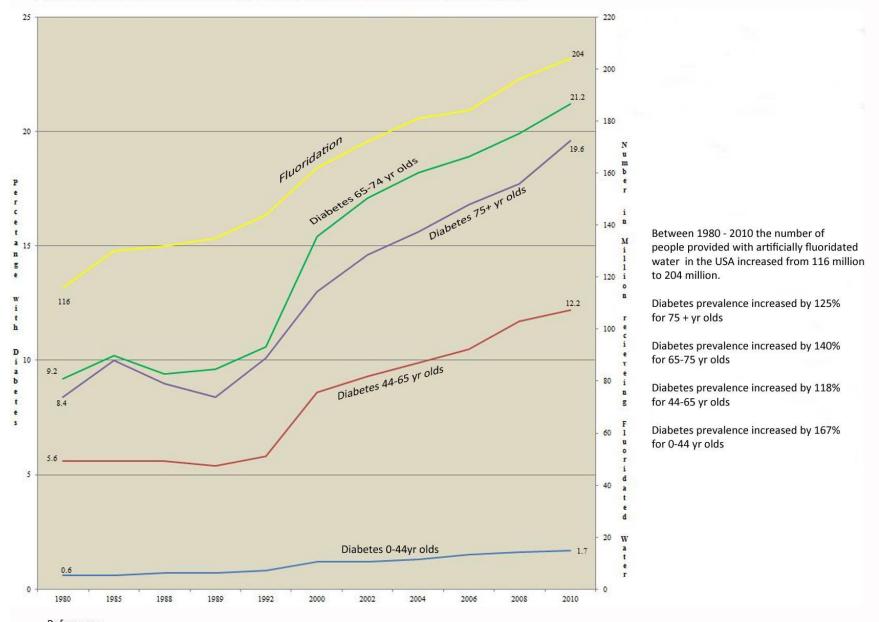
Fluoride is NOT SAFE for people, pets or the environment

Fluoride causes Diabetes leading to Disease and premature Death See my review

https://www.researchgate.net/publication/273442062_Fluoride_Causes_Diabetes

Lost Eyesight & Blindness Over time, poorly managed diabetes Dialysis & Kidney Failure can damage cells' ability to hold together, causing serious problems. Sores & Amputation

CHANGES IN NUMBER OF PEOPLE PROVIDED WITH ARTIFICIALLY FLUORIDATED WATER IN USA AND INCREASE IN DIABETES PREVALENCE BETWEEN 1980-2010



References:
Diabetes data from U.S. Center for Disease Prevention and Control
Fluoridation Status from U.S. Center for Disease Prevention and Control



Townsville Suffers – Diabetes Type 2

Diabetes Type 2 in Townsville was **10% higher** than in non-fluoridated Queensland

PHIDU. (2005) Population health profile of the Townsville Division of General Practice. Population Profile Series: No. 78. Public Health Information Development Unit (PHIDU), Adelaide

World Health Organization 2012

Specialist Report on Low-Dose Endocrine Disruptors states:

<u>Fluoride causes Diabetes and Obesity</u> by inhibiting Insulin secretion and affecting **Thyroid** hormones.

Note: <u>Does not appear</u> in Executive Summary

See my review

https://www.researchgate.net/publication/273442062_Fluoride_Causes_Diabetes



Impact of Fluoride on Women, the Unborn and your Children

Fluoride Supplement
Manufacturers warned
against using any
supplements if pregnant

Fluoride Reduces Chance of Getting Pregnant and going full term – Sperm Damage

Sun et al 2011 Arch Toxicol 85, 1441-1452 Fluoride-induced apoptosis and gene expression profiling in mice sperm in vivo

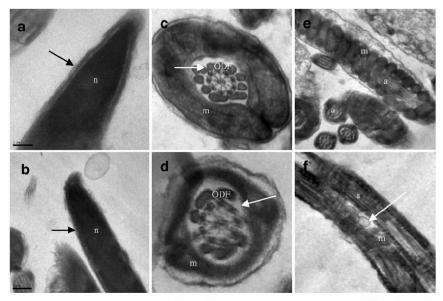


Fig. 1 Electron micrographs of mouse sperm nucleus and the middle piece of sperm tail. a Sperm nucleus (n) from controls showing the integral perinuclear membrane (arrow) surrounding the n (magnification: ×80,000). b n of sperm in mouse exposed to 150 mg/l NaF showing the absence of perinuclear membrane (arrow) (magnification: ×30,000). c Cross-section of the middle piece of sperm tail from control group presenting normal arranged outer dense fibers (ODF) as

the arrow pointed (magnification: $\times 100,000$). d Sperm tail of mouse treated with NaF showing the loss of ODF (magnification: $\times 100,000$), e Mitochondria (m) in control sperm are tightly arranged around the axoneme (a) (magnification: $\times 30,000$). f m in mouse sperm from NaF group is swollen and less dense than the controls (arrow) (magnification: $\times 30,000$)

Table 2 Effect of 49-day ingestion of sodium fluoride on fertility of male mice (mean ± SEM)

Group	No. of males	No. of females	Pregnant females	No. of implantations	No. of viable fetuses	Resorptions/implantations
Control	10	10	9/10 (90%)	8.13 ± 0.64	8.13 ± 0.64	0/73
150 ppm	10	10	4/10 (40%)*	7.75 ± 0.47	$6.00 \pm 0.41*$	7/30*

^{*} P < 0.05 (compared with the control group)

FLUORIDATED AT BIRTH

If you live in a fluoridated country fluoridation of your baby begins at

conception.

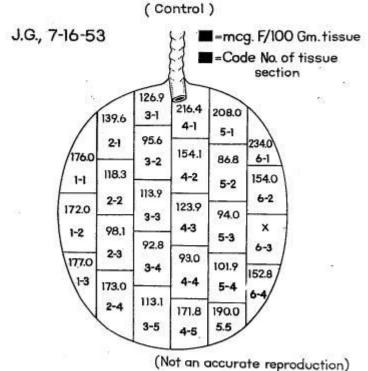
75% of the maternal dietary
fluoride intake is passed to the
developing child, where it accumulates in its
developing bones and organs.



"Control" 141

Enziflur tablets 102

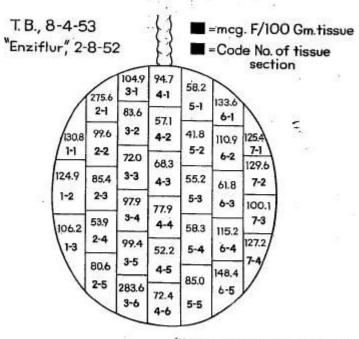
WHOLE PLACENTAS



Weight: 612.23 Gm.

Average: 141.1 mcg. F/100 Gm. placenta

FIGURE I WHOLE PLACENTAS



(Not an accurate reproduction)

Weight: 667.45 Gm.

Average: 102.1 mcg. F/100 Gm. placenta

FIGURE III

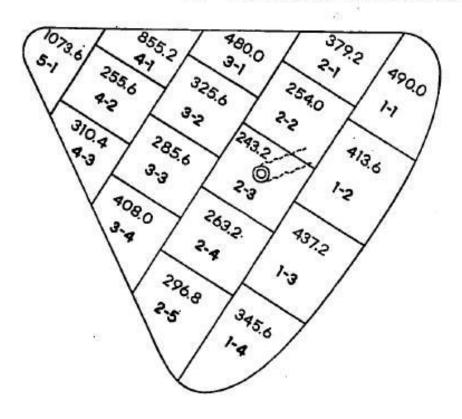
WHOLE PLACENTAS

(Sodium Fluoride)

G.L., 12-19-53

=mcg. F/100 Gm. tissue

=Code No. of tissue section



Sodium Fluoride

418 mcg/100g

(Not an accurate reproduction)

Weight: 427.55 Gm.

Average: 418.6 mcg. F/100 Gm. placenta

The urine and serum fluoride levels of the pregnant women and the bone and brain fluoride content of the fetuses are shown in Table 1.

Table 1. Urine and serum fluoride of the pregnant women, and bone and brain fluoride of the fetuses (mean±SD)

		Pregna	nt women	Fetuses	
Group	n	Urine F (µg/mL)	Serum F (µg/mL)	Bone F (µg/g)	Brain F (µg/g)
Non-fluorosis area	10	1.67±0.82*	0.41±0.15	2.50±0.11*	1.23±0.24*
Fluorosis are a	10	4.32±2.94	0.55±0.21	2.87±0.25	1.65±0.33

^aThe bone and brain fetal fluoride levels are dry tissue analyses; *p<0.05 comparing the non-fluorosis and the fluorosis are a groups.

The levels of monoamine neurotransmitters in the fetal brain tissue are given in Table 2.

Table 2. Levels of monoamine neurotransmitters in fetal brain tissue (mean±SD)

Group	n	Nor- epin ephri ne (mg/g)	Epi- nephrine (mg/g)	Dopamine (ng/g)	3,4- dihydroxy- benzoic acid (ng/g)	5-hydroxy- tryp tamin e (ng/g)	5-hydroxy- indole- acetic acid (ng/g)
Non-fluorosis area	10	92.92±41.12*	17.44±2.82*	5.28±2.79	8.01±4.36	450.60±319.93*	37.53±20.14
Fluorosis area	10	32.81±18.30	21.84±2.92	7.34±3.92	10.34±8.66	123.34±31.91	31.28±18.95

^{*}p<0.05 comparing the non-fluorosis and the fluorosis area groups.

Yu et al 2008 Neurotransmitter and Receptor Changes in the Brains of Fetuses from areas of Endemic Fluorosis. Fluoride 41(2) 134-138

NDA withdrawn for fluoride and vitamin combinations

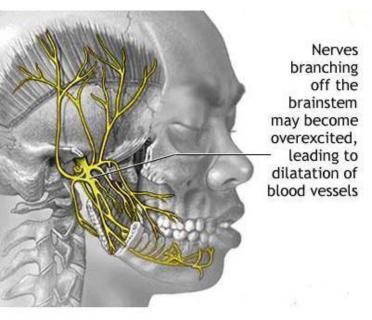
The FDA has addressed a "regulatory letter" to approximately 35 companies marketing combination drugs consisting of fluoride and vitamins. The letter states that these drugs are related to a product (Enziflur lozenges) for which FDA has withdrawn approval of a new drug application. The NDA for Enziflur was withdrawn because there is no substantial evidence of drug effectiveness as prescribed, recommended, or suggested in its labeling. The FDA has therefore advised manufacturers of combination fluoride and vitamin preparations that their continued marketing is in violation of the new drug provisions of the Federal Food, Drug, and Cosmetic Act; they have, therefore, requested that marketing of these products be discontinued.



DID YOU KNOW THAT IT HAS BEEN MEDICALLY DOCUMENTED IN DOUBLE BLIND CLINICAL STUDIES THAT EXPOSURE TO

FLUORIDE

CAN CAUSE MIGRANE
IN CHILDREN AND ADULTS



Journal of Dental Medicine (Volume 16. No 4. October 1961)

Data from a 14 year study involving 1000 subjects

The same **1961** study by Reuben Feltman and George Kosel, Fluoride "supplement" **promoters**, showed

that Fluoride causes:

- Eczema
- Atopic Dermatitis
- Epigastric distress
- Emesis (vomiting)
- Hypothyroidism
- Fluorosis
- Delayed eruption of teeth

These Fluoride **promoters** stated:

"When adverse reactions occur, the therapy can be readily discontinued and the patient or parent advised of the fact that sensitivity exists and the element (Fluoride) is to be avoided as much as possible"

If your water is Fluoridated, how are you expected to avoid Fluoride?

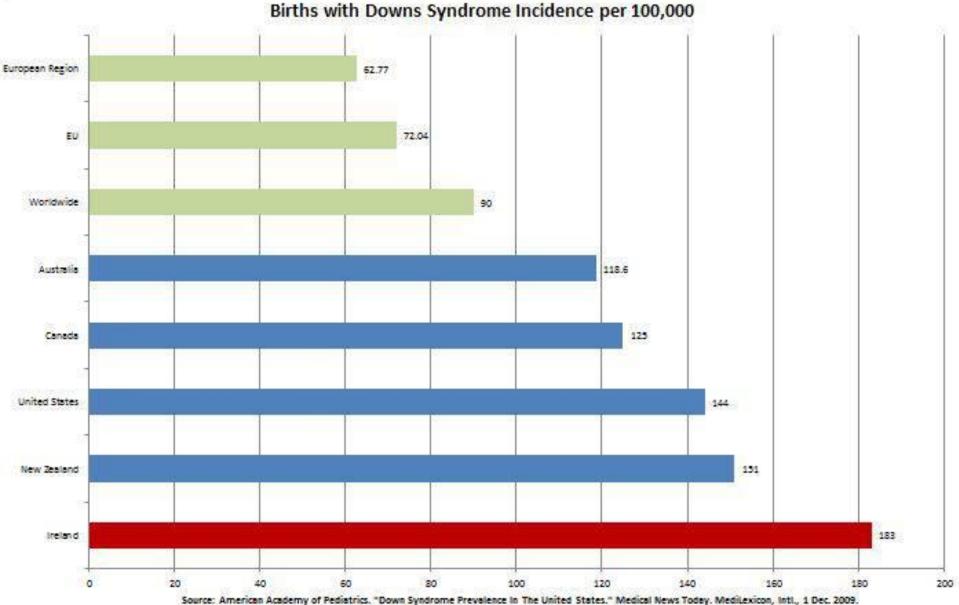


Dosage: 3-5 years 1/2 tablet a do

6-8 years 1 tablet a day 9 years and over 2 tablets a Tablets should either be chewel dissolved in drinking liquid

PSM Healthcare Ltd t/a HM





Am J Hum Genet. 1991 November; 49[5]: 1014–1024. MCID: PMC1683237

Prevalence of Down Syndrome Among Children and Adolescents in 10 Regions of the United States. Pediatrics December 2009 (124:6);1565-1571.

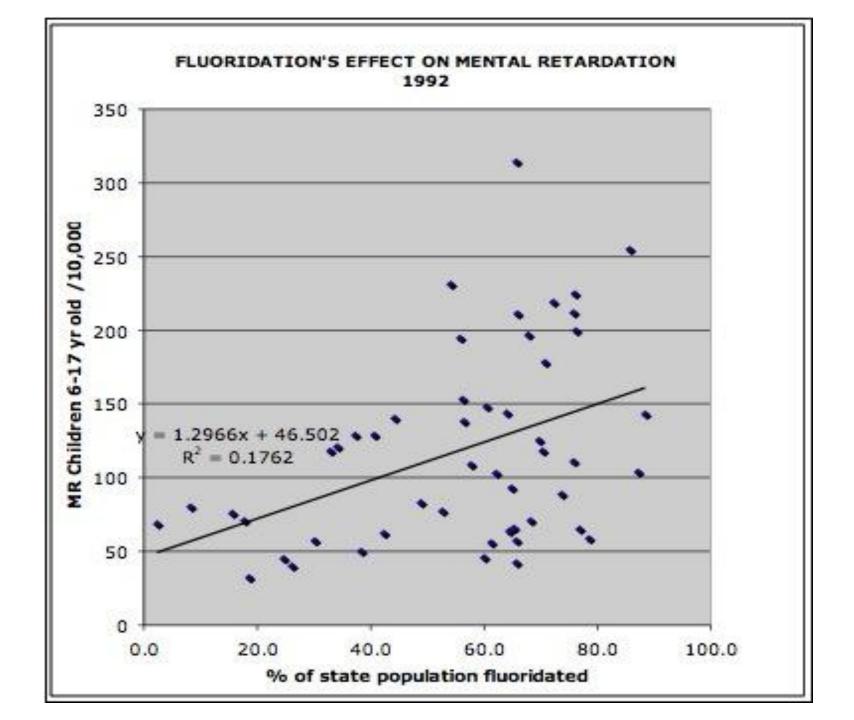
Canada, Congenital Anomalies in Canada: A Perinatal Health Report, Public Health Agency of Health Canada (2002).

WHO European Health Database 2012

Fluoride Messes with Your Mind

- Impaired memory and concentration
- Hypnesthesia (Drowsiness, Sluggishness)
- Lower reaction rates and reduced abstract thinking ability
- Decreased self-coordination ability
- Over-stimulation
- Exaggerated facial expressions
- Unusually verbose and talkative
- Apprehensive
- Transient restlessness, irascibility
- Occasional silliness and loss of contact
- Anxiety and depression

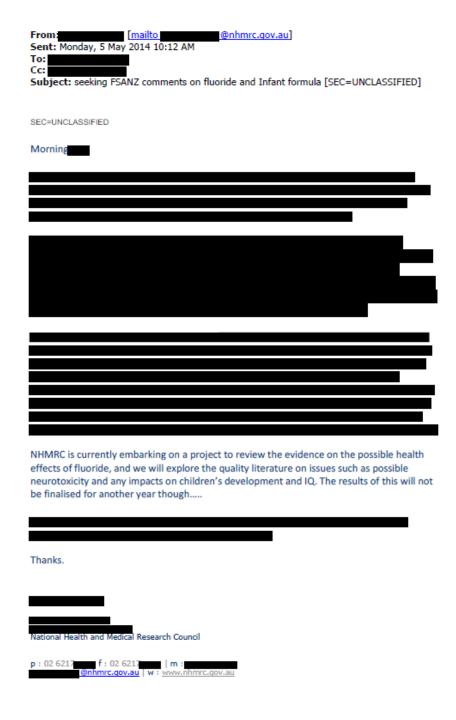
References



May 2014

NHMRC worried about Harvard meta-analysis (statistical analysis of multiple independent studies) of science that shows Fluoride reduces IQ and that babies given infant formula made from fluoridated water get up to 380 times as much Fluoride as breastfed babies, sent this email to someone at Food Standards Australia and New Zealand "seeking FSANZ comments"

I would love to read the "redacted" bits of this!! →



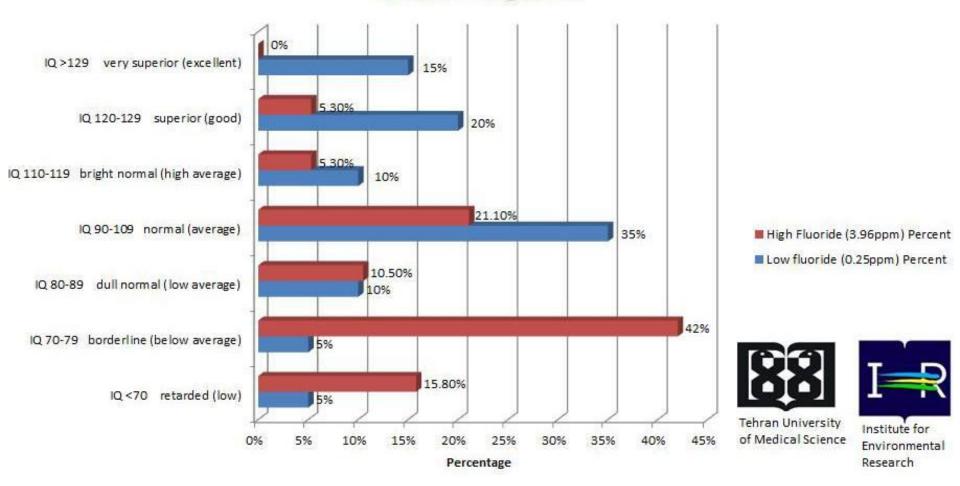


XXXI ST CONFERENCE OF THE INTERNATIONAL SOCIETY FOR FLUORIDE RESEARCH (OCTOBER 18-21, 2013)

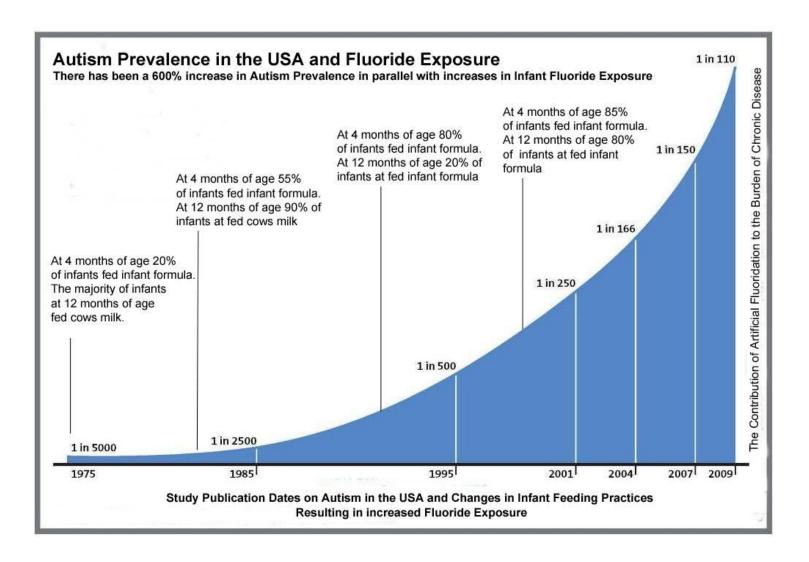


TEHRAN, IRAN

The distribution of IQ scores of children living in areas with fluoride in their drinking water



Evidence that switching from cow's milk to **Formula** made up with **Fluoridated water** is associated with an explosion in **Autism** incidence



FUSS Causes Brain Sand Growth

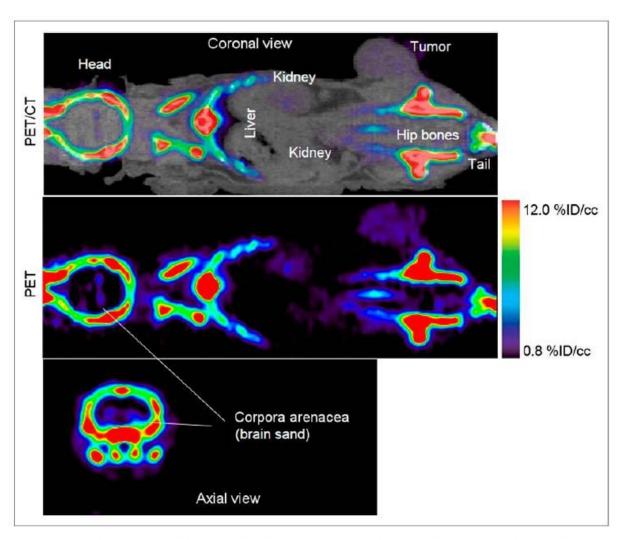


FIGURE 2. A 60- to 80-min summed PET/CT and PET image of ¹⁸F⁻ uptake in mouse bearing MDA-MB-231 tumor and imaged for 120 min. With windowing level set between 0.8 and 12 %ID/cc, bone image is saturated but tumor and brain sand are visible with high contrast-to-background soft-tissue ratio

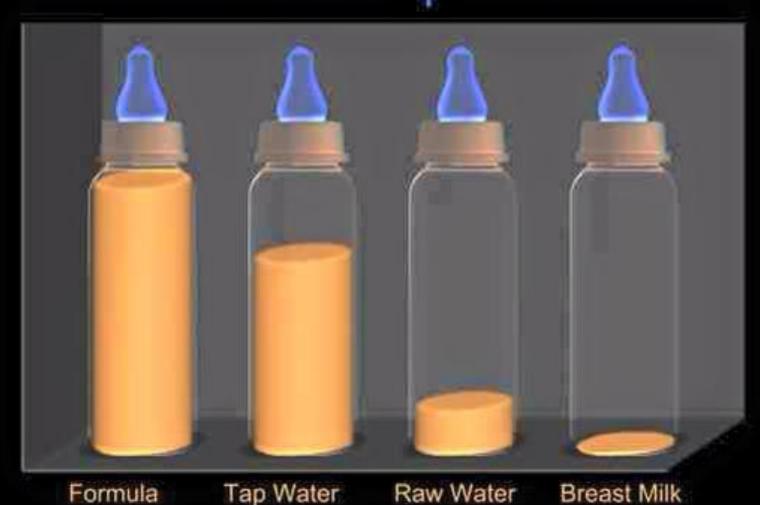


POWDERED INFANT FORMULA MADE WITH

FLUORIDATED
TAP WATER
CONTAINS
UP TO

38,000% MORE FLUORIDE THAN MOTHERS MILK

Infant Fluoride Exposure Levels



WATER FLUORIDATION

and

Attention Deficit/Hyperactivity Disorder.

In Febuary 2013, in a comprehensive report which I submitted to the Government of Ireland, I documented that over 60,000 children in the Republic of Ireland suffer from attention-deficit/hyperactivity disorder (ADHD), with a further 120,000 adults in Ireland also believed to be living with this disability. In this report I highlighted that artificial fluoridation of water may be contributing to this epidemic of neurological disorders.

Despite sending this document to every elected representative in Ireland as well as the Chief Medical Officer in the Health Service Executive, I have received no acknowledgement nor reply to this report.

Exactly two years later, on the 27th February 2015 researchers at the Department of Psychology, York University, Canada, have now published findings in the journal *Environmental Health*, which demonstrate a direct association between exposure to fluoridated water and increased ADHD prevalence in U.S. children and adolescents. Each 1% increase in artificial fluoridation prevalence was associated with approximately 67,000 to 131,000 additional ADHD diagnoses from 2003 to 2011.

For the sake of your childrens health and the future of this country, please share this information.

"Each 1% increase in artificial fluoridation prevalence was associated with 67,000 to 131,000 additional ADHD diagnoses from 2003 to 2011"

Declan Waugh

Scientist and Fluoride Researcher

Some Facts on FLUORIDE and Sudden Infant Death

Six years after the global implemention of the back to sleep campaign in 1991, the SIDs rate in Ireland, Australia, NZ and USA was approximately double that for other developed European countries including England and Wales, Sweden, the Netherlands and Norway. In 2001, the Institute of Public Health reported that for the period 1991-2000 the SIDs rate in

the Republic of Ireland was 310% higher than non fluoridated Northern Ireland.

Official statistics for SIDS for NI for the years 2006-2010 reported a prevalence of SIDs from birth to one year of 0.12 per 1000 live births. For the same period the corresponding figure for Ireland was 0.34 per 1000 live births. That's a 288% difference.

- Fluoride increases production of Arachidonic Acid which has been shown to have a causal association with sudden infant death syndrome and sudden adult death from cardiac failure.
- Fluoride inhibits Cholinesterase, low cholinesterase is known to have a causal association with SIDs.
- Fluoride alters Sialidase metabolism in the lung which increases risk of respiratory infection. Respiratory infection has a causal association with SIDs and infant mortality.
- Fluoride inhibits Periostin production in the lung which binds to collagen maintaining the biomechanical properties of the lung. Low periostin levels is recognised as a risk factor in respiratory disorders.
- Fluoride has been demonstrated to decrease Collagen production in lung tissue, contributing to greater risk of respiratory disorders.
- ➤ Fluoride has been demonstrated to contribute to maternal anaemia in pregnancy, preterm births and of low birth weight babies. Preterm births and low birth weigh are known to have a causal association with SIDs.
- Fluoride accumulates in the pineal gland, altering its function and contributing to reduced melatonin. Low melatonin is an established risk factor in SIDs.

Fluoride
exacerbates 9
known risk factors
for
Sudden Infant Death

Fluoride linked to increased Cancer

- Bladder
- Bone
- Brain
- Breast
- Cervix
- Colon
- Gallbladder
- Hodgkin's Disease
- Kidney
- Leukaemia
- Liver

- Lung
- Lymphoma
- Myeloma
- Nasal and Sinus
- Oesophagus
- Oral cavity
- Ovary
- Pancreas
- Pharynx
- Prostate
- Rectum
- Uterus

Reviewed in Pain G. 2015.

Fluoride doped Hydroxyapatite in Soft Tissues and Cancer – A Literature Review available at Research Gate

TABLE 3. GASTROINTESTINAL TRACT CANCER DEATH RATE.

	Cancer	Death Rate (per	100,000).	
CANCER DEATH RATE DUE TO CANCER OF THE:	NATIONAL AVERAGE	NONFLUORIDATED CITIES	FLUORIDATED CITIES	% INCREASE FLUORIDATED CITIES NONFLUORIDATED CITIES
Tongue and mouth	4.21	5.26	7.59	44%
Esophagus	4.10	4.18	7.19	72%
Stomach	15.22	12.61	18.39	45%
Large Intestine	16.54	15,30	21.43	40%
Rectum	7.65	6.09	10.98	80%
TOTAL (Gastro-				
intestinal Tract)	47.72	13.44	65.58	51%

Table 3 shows that most (about 65%) of the increase in cancer death rate from fluoridation is due to an increase in gastrointestinal cancer death rate.

From Yiamouyiannis, JA. **1975**. A Definite Link Between Fluoride And Cancer Deaths. *Nat. Health Fed. Bulletin 21:9*

Uterine Cancer Rate versus Fluoride in Japan

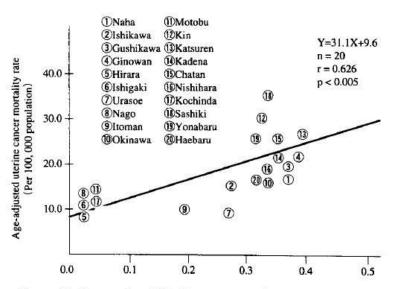


Figure 2. Scatter plot of fluride concerntration versus uterine cancer mortality rate.

Tohyama, E. **1996**. Relationship
Between **Fluoride** Concentration in
Drinking Water and **Mortality Rate from Uterine Cancer** in Okinawa
Prefecture, Japan.
Journal of Epidemiology. 6(4) 184-191
Note: The Americans Fluoridated
Okinawa from 1945-1972

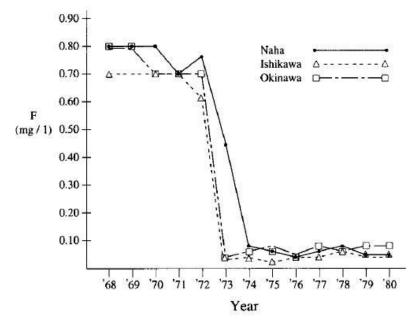


Figure 3. Secular changes in fluoride concentration of drinking water for 3 typical fluoridated municipalities.

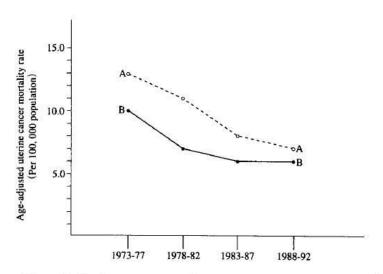


Figure 5. Uterine cancer mortality rate over a 5-year time period (1973-1992) for fluoridated municipalities (A, open circles) and non-fluoridated municipalities (B, filled circles).

Tea = Fluoride = Breast Cancer

Susanna C Larsson, Leif Bergkvist, Alicia Wolk, Division of Nutritional Epidemiology, The National Institute of Environmental Medicine, Karolinska Institute, Sweden

Followed up **61,433 women** who were **cancer free** at baseline in 1987-1990 Over a mean **follow-up of 17.4 years**, through December 2007, there were 2,952 incident cases of invasive breast cancer identified. **Coffee consumption was not associated with risk** of overall breast cancer (multivariate relative risk (RR) for ≥ 4 cups/day versus <1 cup/day = 1.02; 95% CI, 0.87-1.20) or with any subtype defined by ER and PR status. **Black tea consumption was significantly positively associated with risk** of overall **breast cancer** (RR 1.22 95% CI 1.05-1.40) and ER+/PR+ tumors (RR 1.36 95%CI 1.09-1.69).

Ref: Larsson SC et al. 2009. Coffee and black tea consumption and risk of breast cancer by estrogen and progesterone receptor status in a Swedish cohort. **Cancer Causes and Control**, 20(10) 2039-2044

FUSS causes malignant breast cancer

"It (breast cancer) is the second leading cause of cancer death among women, causing almost 40,000 deaths in USA in 2011 alone"

"One significant feature of breast cancer diagnosis is the presence of calcium deposits (averaging 0.3 mm3 in size) detected via mammograms."

"hydroxyapatite enhances the mitogenesis of mammary cells, amplifying the malignant process and resulting in accelerated tumor growth."

Ref: George H. Wilson III *et al*, An Approach to Breast Cancer Diagnosis via PET Imaging of Microcalcifications Using 18F-NaF,

THE JOURNAL OF NUCLEAR MEDICINE 2014 (7) 1138-1143

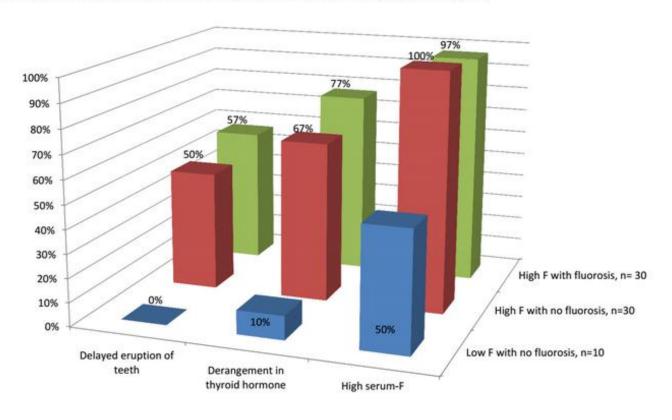


Fluoride is well known to suppress your Thyroid function and was for many decades used to treat overactive Thyroids.

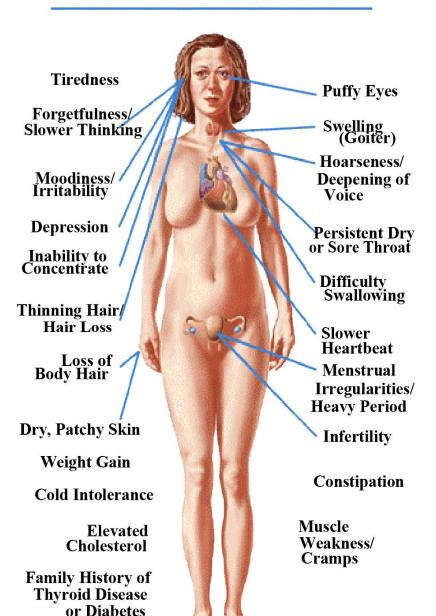
Low Fluoride, High Fluoride and High Fluoride with visible Fluorosis compared – note Thyroid Derangement and Eruption affected even with no <u>visible</u> Fluorosis

Derangement in Thyroid Hormone (FT3, FT4, TSH) Levels and Serum-Fluoride levels in children, high and low fluoride levels, with and without fluorosis.

Singh N, Verma KG, Verma P, Sidhu GK, Sachdeva S. A comparative study of fluoride ingestion levels, serum thyroid hormone & TSH level derangements, dental fluorosis status among school children from endemic and non-endemic fluorosis areas. *SpringerPlus*. 2014;3:7.



Signs and Symptoms of HYPOTHYROIDISM



Hydroxyapatite are detected in your Thyroid Gland, your cancer surgeon will recommend rapid removal of the entire organ to reduce the high risk (> 18%) of malignant cancer.

Yoon, D Y et al 2007. **Peripheral Calcification in Thyroid Nodules**

Ultrasonographic Features and Prediction of Malignancy
J Ultrasound Med 26:1349–1355

Fluoride accelerates Post-menopausal Osteoporosis by altering Hydroxyapatite

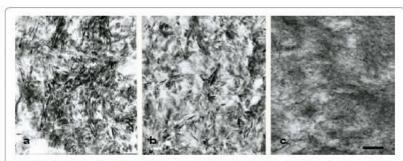


Figure 2: Lower magnification of electron micrographs of minerals observed in the control (a), X-ray-opaque (b) and X-ray-transparent areas (c) of the calvaria obtained from the combined group. Minerals of X-ray-transparent areas are less abundant than those in X-ray opaque area. (a-c): same scale, bar = 100 nm.

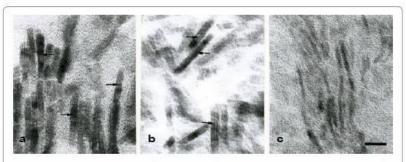


Figure 3: Higher magnification of electron micrographs corresponding to Figure 2. Minerals observed in the control (a) and in the radiopaque areas (b) are crystals showing central dark lines, whereas those in radiolucent area (c) are amorphous and not crystallized. Arrows indicate the central dark lines. (a-c): same scale, bar = 10 nm.

Obvious change in crystal morphology due to Fluoride in Estrogen deficient rats

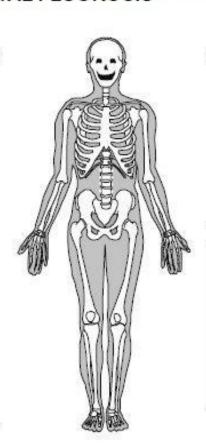
Mitsuo Kakei, Masayoshi Yoshikawa and Hiroyuki Mishima 2016 Fluoride Exposure May Accelerate the Osteoporotic Change in Postmenopausal Women: Animal Model of Fluorideinduced Osteoporosis. Advanced Techniques in Biology & Medicine 4(1).

A subject that The Australian Medical Association chooses not to teach to our doctors.

SKELETAL FLUOROSIS

RADIOLOGICAL PRESENTATIONS

- Osteosclerosis
- Periosteal bone formation
- Calcification of interosseous membrane, ligaments, capsules, muscular attachments, tendons.
- Exostoses
- Osteophytosis
- Associated metabolic bone disease



CLINICAL PRESENTATION

- Heel pain
- Painful and restricted joint movements
- Deformities in Limbs
- Hunch back

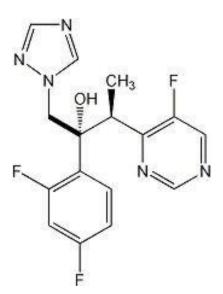
IN EXTREME CASES

- Paralysis,
- Mucular wasting,
- Premature aging

Fluoride causes crippling Bone Deformity

Fluoride Excess and Periostitis in Transplant Patients Receiving Long-Term Voriconazole Therapy

Robert A. Wermers, Kay Cooper, Raymund R. Razonable, Paul J. Deziel, Gary M. Whitford, Walter K. Kremers and Thomas P. Moyer Clinical Infectious Diseases Jan 2011



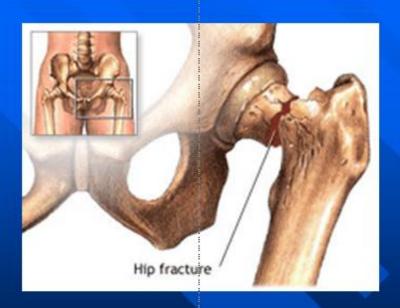
All subjects who received voriconazole had markedly elevated plasma fluoride levels - (14.32 μmol/L ± 6.41 compared to 2.54 ± 0.67 μmol/L in controls, p<0.001). Half of the treated group had evidence of periostitis.

Figure 1. Radiograph of the left hand and forearm demonstrating numerous areas of periosteal ossification arising from the cortical surfaces, some of which are indicated by the arrows.

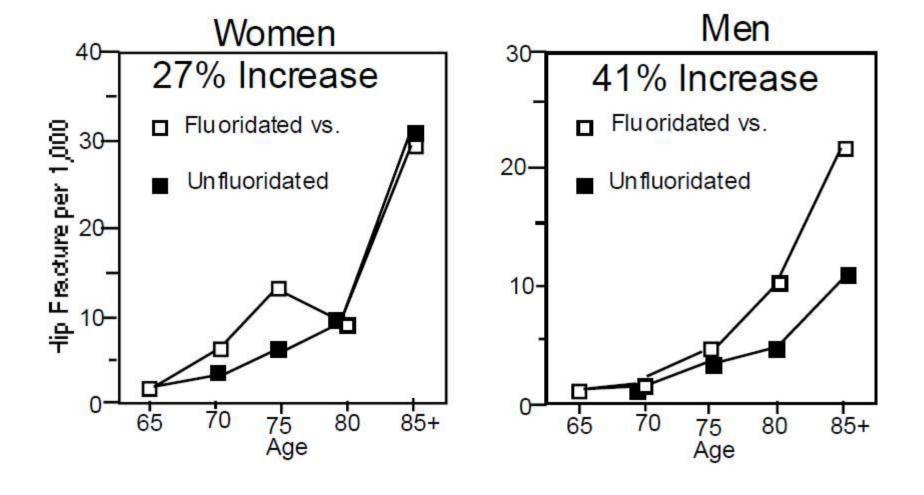


FLUORIDE ACCUMULATES IN BONES

National Research Council (2006): Fluoride & Skeletal System

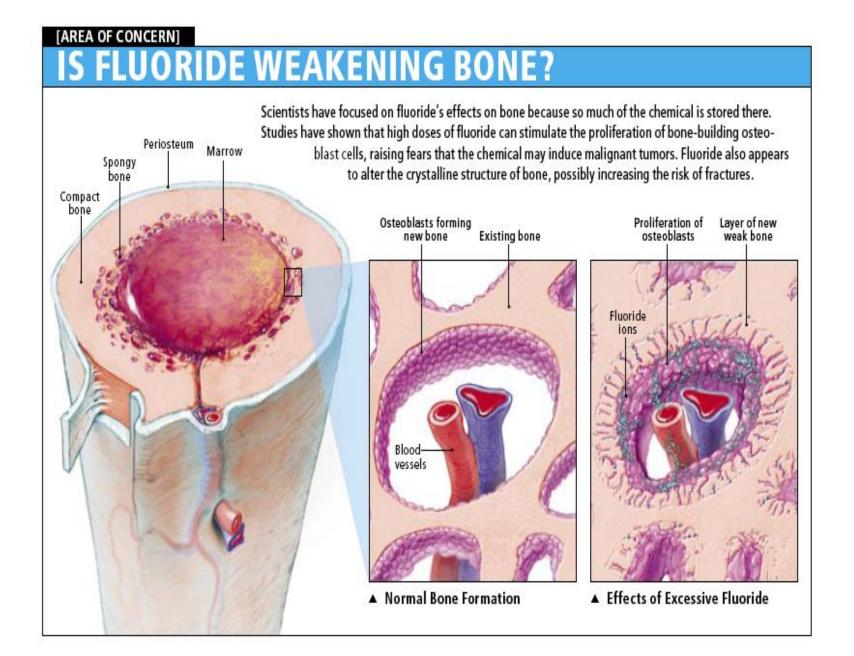


"All members of the committee agreed that there is scientific evidence that under certain conditions fluoride can weaken bone and increase the risk of fractures.



Hip Fractures in Women and Men increase with Age and Fluoride accumulation

Scientific American 2008 - Mainstream Media!



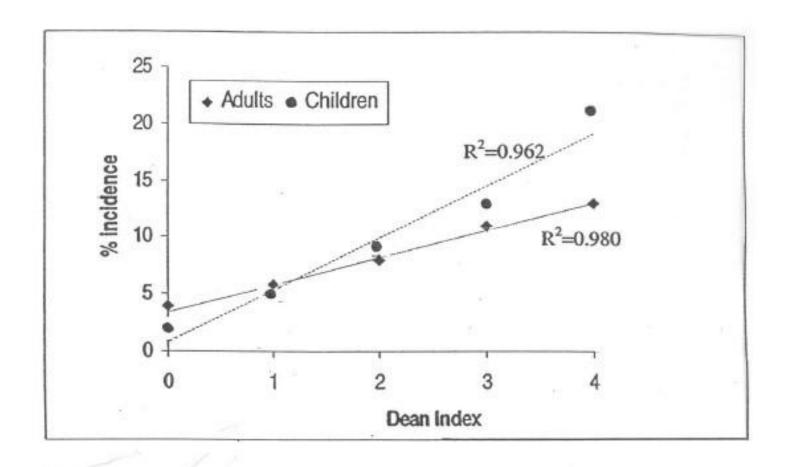


Figure 4. Incidence of bone fractures plotted against the severity of dental fluorosis (Dean's Index) for children and adults in the Guadiana Valley in the state of Durango in Mexico (from Alarcon-Herrera et al, 2001).

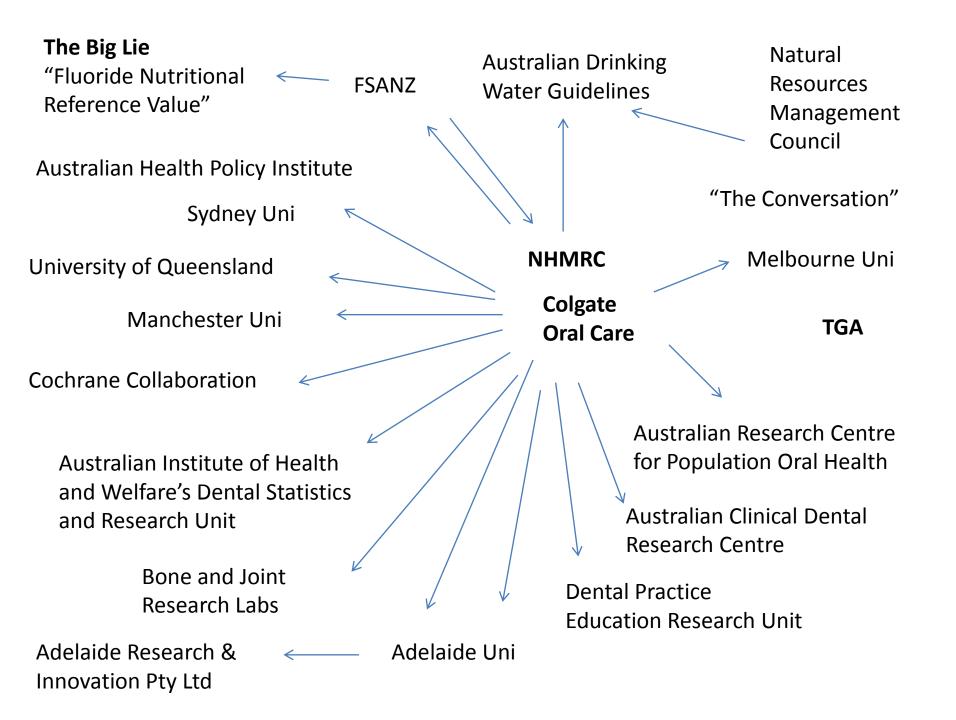
Fluoride damages muscle and connective tissue and accumulates in the skin



Cellulite recently linked to Fluoride



Fluoroderma recognized by Fluoride promoters for over 50 years. **Proven by placebo and challenge test**.



"The Big Lie – Fluoride Nutrient Reference Value"

NHMRC Nutrient Reference Values for Australia and New Zealand (NRVs 2006)

The NRVs note that fluoride intake from food sources are low in Australia. Foods generally have a concentration well below 0.05mg/100g. However, water in fluoridated areas generally has a higher concentration.

	Nutrient Requirement* (Adequate Intake)	Upper Level of Intake**	
Adult Men	4mg/day	10mg/day	
Adult Women	3mg/day	10mg/day	

^{*} This is based on the general requirement of 0.05mg/kg body weight/day and adjusted for standard body weights of 76kg for men and 61kg for women.

The Commonwealth Department of Health and Ageing, New Zealand Ministry of Health and NHMRC have started a review of the 2006 NRVs with fluoride identified as a priority nutrient for review. These results are expected in early 2014.

Note: <u>Lethal dose</u> is as low as 5mg/kg = 350 mg for a 70 kg human. These fools think that a lethal dose shared by 35 people is OK.

10 mg is **300,000,000,000,000,000 atoms of Fluoride** toxin per day!

^{**} This represents the highest average daily nutrient intake level likely to pose no adverse health effects to almost all individuals in the general population. As intake increases above the UL, the potential risk of adverse effects increases.

Therapeutic Goods Administration (TGA) – washes its hands

- "The TGA is not currently reviewing recommended Fluoride intake for Australians"
- "Fluoridated drinking water is not therapeutic goods (sic) within the definition of that term in the Therapeutic Goods Act 1989."
- "The Therapeutic Goods Administration thus has no role in regulating fluoridated drinking water"

Towns around Australia threatened with Fluoridation



Tom Price 3500

Two Rocks 2280

Wyncham #100

Yanchep 4280

TASMANIA

Gretna 2216

VICTORIA

Bell Bay George Town 6906

DowlingsCreek 1059

Town Population Byron Shire 30,000 Boorowa 2469 Brewarrina 1254 Carrathool 2586 Central Darling 1991 Coonamble 2998 Gunnedah 12265 Gwydr 5516 Jerilderie 1526 LiverpoolPlains 7480 Murrumbidgee 2415 Namabri 5890 Narrandera 3871 Narromine 3789 Oberon 4600 Upper Hunter 13754

Wentworth 1248 QUEENSLAND

Wakool 2146

Walgett 2267

Bundaberg 71000 Burdokin 17784 Cairns 142124 Cassowary Coas t31291 Charters Towers 8234 Cloncumy 2384 Doornadgee 1258 Fraser Coast 99000 Livingstone 34000 Mount 162 227.85 North Burnett 10600 Parco 1924

South Burnett 33040 Southern Downs 36367 Tablelands 46937 Whitsunday30000

WEST. AUSTRALIA Augusta 1400 Australind 16040 Bindoon/Chittering 1050 Boyanup 1100 Bridgetown 2800 Brunswick Junction 1260 Bunbury 34620 Busselton 20000 Cape 12420 Camarvon7480 Cowaramup 1190 Daiyelkıp 7110 Denmark 4000 Port Denison 3300 Donnybrook 2580 Eaton 9710

Halls Creek 1500

Hedland 14070

Hopetoun 1400

Jurien Bay 1520

Kunururra 5600

Margaret River 6300

Moekatharra 1390

Kalbarri 1500

Lancelin 1500

Leonoral BO

Noora 1840

Newman 5800

Ararat 8076 Apollo Bay 1200 Beechworth 2645 Badger Creek 1964 Beautort 1483 Beolarra 1022 Boort #179 Broadford 3387 Briagalong 122 Cohuna 2313 Cobram 6111 Charlton 1256 Casterton 1425 Camperdown 3463 Myttleford 3181 Euroa 3166 Mt Beauty 1200

Bright 2165

Orbost 2452

Marsfield 4360

Donald 1642 Emerald 6187 Foster 1757 Gembrook 2173 Glengorry 1329 Healesville 7104 Healthcoto 2880 Heyfield 1942 Inglewood 1079 Invertoch 4960 Katunga 1178 Koondrook 1050 Korumburra 4465 Lancefield 2492 Leongatha 6860 Lorne 1421 Millgrove 1653 Mirboo 2344 Mortlake 1391

Murchison 1055

Nagambie 1617

Nathalia 1897

Nyora 1364

Orbest 2627

Rochester 3198

Rosedale 1662

Stawel 6150

St Amaud 2647

Rushworth 1395

Neerim South #186

Nichols Point 1448

Dartmouth 2746

Dimboola 1653

SOUTH AUSTRALIA

Terang 2310

Timboon 1246

Trentham 1482

Warburton 2199

Wesburn 1200

Yarra Glen 2792

Yea 1665

Warracknabeal 2745

Yackandandah 1832

Tatura 4448

Roxby Downs 4750 Coober Pedy 3500 Kangaroo Island) 2400

ACT

Fully fluoridated

have populations of approx 1000 but also

All these communities

have low levels of naturally occurring fluoride Gail vinla Gunbalunya Millingimbi Ngukurr Gapawiyek Yimkala

Ramingining

Successful Community Resistance Campaigns so far

Byron

Bundaberg

Burdekin

Cairns

Carnaryon

Cassowary

Charters Towers

Cherbourg

Cloncurry

Daylesford

Doomadgee

Fraser Coast

Maranoa

Mount Isa

North Burnett

Northern Peninsula

Paroo

Rockhampton

South Burnett

Tablelands

Weipa

Whitsunday

Yackandandah

No fluoride for Yack By Lauren Salathiel 29, requesting that

Local residents who have recently voiced opposition to the notion of the addition of fluoride to local water supplies were relieved when Indigo Shire Council announced at its October 27 meeting that no fluoride would be added to the water supply of Yackandandah, Beechworth, Rutherglen and Wahgunyah.

The decision followed a motion by Cr Bernard Gaffney at the previous council meeting, on September

council "commence a conversation" with North East Water, in regard to the addition of fluoride to the water of areas of the shire with reticulated water supply.

Chiltern, Kiewa, Barnawartha and Tangambalanga, which receive their water from Wodonga, already have fluoride in their supply.

At the September meeting, Cr Gaffney said he realised the issue could be an emotive one, and that wide community

consultation was required before any decision could be made.

Cr James Trenery began an informal consultation with the Yackandandah community on the town's Facebook page, receiving 85 contributions from local community members, the vast majority of whom were opposed to any such move.

Many contributors had strong feelings about the reported health impacts of adding fluoride to the water, and cited the

experience of European countries, which no longer fluoridate their water due to health concerns associated with the practice.

Others emphasised that they disliked the taste of fluoridised water, and asked that Yackandandah's water supply "be left as it is".

Novelly, one commentator asked that council perhaps consider adding shiraz to the water supply instead.

Watch this space for developments on that one...





For what it's worth, I believe the science is settled on fluoridation and it poses no threat to anyone.

RETWEETS

LIKES

14

















8:52 PM - 14 Jun 2013



38









Ken Jobling @rkjobling · 15 Jun 2013

@RichardDiNatale @HughRundle Fluoride is not safe for everybody. who.int /ceh/publicatio...



"Seriously, this crazy guy said, whether I agree or not, that he intends to use my bones as a waste dump for toxic FLUORIDE, by putting it in MY drinking water for me to consume for my entire life."

YOUR BODY YOUR CHOICE