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FAO

An Taoiseach, Mr Enda Kenny TD  
Minister for Health, Mr Simon Harris TD  
Minister for Justice, Ms Frances Fitzgerald TD  
Minister Agriculture, Food & Marine, Mr Michael Creed TD  
Minister for Children and Youth Affairs, Dr Katherine Zappone TD  
Chief Dental Officer, Dr Dympna Kavanagh  
Mr Tony O'Brien, Director General HSE  
Peter Henshaw, Higher Executive Officer  
Ms Patricia Gilsenan O'Neill, Chief Executive Dental Health Foundation  
Dr Pamela Byrne, Chief Executive Officer FSAI

To whom it may concern,

I write in relation to the continued implementation of Ireland's mandatory water fluoridation policy which contrasts to the precedent set by every other European Country with whom the Precautionary Principle continues to be accorded paramount priority.

Given substantial and valid opposition to the policy throughout the country in recent years noting 14 Councils since 2014 publicly and formally called on the former Government to immediately repeal the Health (fluoridation of water supplies) Act 1960, I believe the points outlined below call into question and disrepute the assumed constitutional status historically cited as grounds for the policy's continued sanction.

- Included in the Irish Fluoridation Forum Report (2002) was the FSAI (Food Safety Authority of Ireland) recommendation[1] that unreliable fluoridation equipment be decommissioned to prevent the risk posed to the general public suffering dental fluorosis. Having followed this matter up with the Irish Expert Body on Fluorides and Health who have statutory responsibility for oversight and implementation of the Report's recommendations as well as advising the Minister for Health, it appears no such national management strategy has been implemented to identify the exact plants that were and continue to be a danger to public health.
- Upon recently contacted various parties regarding the fluoridation induced adverse effect of primary dentition fluorosis being a birth defect, the matter was raised in the Dail and with the Department of Health by current Deputies on my behalf where former Minister for Health Mr Leo Varakar in responding confirmed the European Commission sanctioned SCHER Report[2] (2011) published findings suggesting primary dentition fluorosis occurs in utero

(during pregnancy). The same Report also suggests primary dentition fluorosis is caused by the maternal fluoride intake crossing the placenta noting it is commonly accepted throughout modern literature on the subject that the enamel formation stage of primary tooth development occurs in utero. Permanent dentition can also suffer from enamel fluorosis only with permanent dentition this adverse side effect is inflicted during the ages of 3 months post partum (after birth) and 5 years old suggesting permanent dentition fluorosis is primarily caused by infant formula constituted with fluoridated water, food containing fluoride and food made with fluoridated water, fluoridated dental products and medicines containing fluoride amongst other sources.

Lacking amongst common literature on the subject are estimates of incidence levels or primary dentition fluorosis but of relevance and relative to the matter is the Irish Department of Health supported Cork Study[3] (2005) which found 32% of those infants reared in fluoridated areas of the City and County suffered from primary dentition fluorosis. It is further noted the authors did not consider in utero fluoride exposure or the amelogenesis stage of primary dentition formation in the course of their deliberations.

In terms of incidence levels of dental fluorosis prevalent amongst the general population, York (2000) and Cochrane[4] (2015) estimate 40 - 42% of the population will suffer from dental fluorosis where water fluoride concentration levels are set at .7ppm (current mandated levels in Ireland) noting the Oireachtas Draft Report [5] on Water Fluoridation Fluoridation in Ireland acknowledged a 700% increase in dental fluorosis incidence levels amongst the general population between 1984 and 2002.

It would appear evident that as a result of the policy, the interrelated Constitutional Rights of the unborn and individuals to bodily integrity (Articles 40.3.1 and 40.3.3) are being violated on a systemic basis across all constituencies noting Justice Kenny (Ryan v AG 1964) ruled CWF (Community Water Fluoridation) to be Constitutional on one of the conditions that children would not suffer fluorosis, damage or harm to their teeth as a result of fluoridation.

- In relation to the recently published HRB Review (2015), commissioned by the Department of Health in response to increasing political opposition to CWF around the country, the Irish Medical Independent [6] reported (April 16') the HRB Review did not examine the adverse effects posed to dental health through the policy of fluoridation. The same acknowledgement [7] is included in the Plenary Meeting (10<sup>th</sup> November 2015) Minutes of The Irish Expert Body on Fluorides and Health. Position statements disseminated to the public citing conclusions of the Review as supporting grounds for fluoridation in light of such a serious omission therefore appear erroneous and misleading.

- Regularly raised in addition to the points above is the ethical aspect of the policy, in other words, whether CWF constitutes a form of mass medication. Justice Kenny ruled [8] that referring to fluoridation as “mass medication” as such “was a misuse of words”, a ruling which was primarily based on the findings of a commission of enquiry set up by the New Zealand Government in the 1950’s which advised “fluoride is not a drug but a nutrient and fluoridation is a process of food fortification”. In more recent times however, the European Commission SCHER Report (2011) found fluoride was not an essential “nutrient” required for normal human growth and development which appears to render the adopted “medication” aspect of fluoridation invalid.

Similarly related to the aforementioned point is that regulatory authorities regularly cite the policy of fluoridation as a process akin to food fortification which is a misinterpretation of EC Directive 98/83[9] which states water is only considered a food product at the point of compliance (in the case of food fortification, point of entry on a premises/ sink tap). Given then that water at a treatment plant is not yet legally considered a food product, the addition of fluoride cannot be considered food fortification. The process, explicitly intended to treat or prevent dental caries could only be legally considered a medical product as provided for under EC Directive 2001/83[10] which is further supported by conclusions of the UK Nuffield Council on Bioethics[11 (2007)]. Various international human rights instruments prohibit involuntary medication[12].

- The policy continues to be implemented despite the total dietary fluoride burden of the population having been ascertained which contravenes the fundamental principles of toxicology, i.e. total dose control further noting the RCPI [13] (Royal College of Physicians Ireland in 1999) acknowledged an “optimal level” (safety threshold) of fluoride concentration in drinking water does not exist. To further substantiate this point, Justice Kenny (Ryan v Ag) was under the impression that a person at the age of 70 would have no more than 4000ppm deposited in their skeleton which appears to be a gross underestimation of what could be expected today based on consideration of all modern dietary sources of fluoride and that the human body is reckoned retain 50% of all fluoride ingested which increases with those suffering from reduced renal function and other health conditions that affect uptake and excretion.

In light of the above and in the interests of promoting and protecting the health and safety of the Irish People as well as the unborn who’s Constitutional Rights to bodily integrity appear have been and continue to be systemically infringed upon as a result of the Health (fluoridation of water supplies) Act 1960 and as amended (S.I No 42 of 2007), I urge relevant Ministers and Chief Executive Officers of respective

Government Departments and State Agencies to jointly consider the matter as one of urgent national importance requiring immediate attention.

Thank you for your consideration and I look forward to hearing from you at your convenience.

Yours sincerely,  
Owen Boyden

Director: The National Fluoride Free Towns Project

References:

- [1] [http://www.fluoridesandhealth.ie/download/documents/fluoridation\\_forum.pdf](http://www.fluoridesandhealth.ie/download/documents/fluoridation_forum.pdf)  
Pg131
- [2] [http://www.dentist.ie/\\_fileupload/Position%20Papers/SCHER%20Report.pdf](http://www.dentist.ie/_fileupload/Position%20Papers/SCHER%20Report.pdf)  
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- [3] <http://admin.ejpd.eu/download/2005-03-07.pdf>
- [4] [http://www.cochrane.org/CD010856/ORAL\\_water-fluoridation-prevent-tooth-decay](http://www.cochrane.org/CD010856/ORAL_water-fluoridation-prevent-tooth-decay)
- [5] <http://www.fluoridealert.org/wp-content/uploads/gormley-2007.pdf>
- [6] [http://www.medicalindependent.ie/87744/irish\\_water\\_set\\_for\\_increased\\_role\\_in\\_expert\\_body\\_on\\_fluorides\\_and\\_health](http://www.medicalindependent.ie/87744/irish_water_set_for_increased_role_in_expert_body_on_fluorides_and_health)
- [7] [http://fluoridesandhealth.ie/download/pdf/plenary\\_minutes\\_november\\_10th\\_2015.pdf](http://fluoridesandhealth.ie/download/pdf/plenary_minutes_november_10th_2015.pdf)
- [8] <http://www.supremecourt.ie/SupremeCourt/sclibrary3.nsf/pagecurrent/9FA0AA8E8D261FC48025765C0042F6B3?opendocument&l=en> Judgement of Ryan v AG  
1964,Pg 349
- [9] <http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:1998:330:0032:0054:EN:PDF>  
Article 6.1 (d)

[10] [http://ec.europa.eu/health/files/eudralex/vol-1/dir\\_2001\\_83\\_consol\\_2012/dir\\_2001\\_83\\_cons\\_2012\\_en.pdf](http://ec.europa.eu/health/files/eudralex/vol-1/dir_2001_83_consol_2012/dir_2001_83_cons_2012_en.pdf) Article 1.2 (a) & (b) bearing in mind Article 2.1 & 2.2

[11] <http://nuffieldbioethics.org/wp-content/uploads/2014/07/Public-health-ethical-issues.pdf> Pg 130 “The legal situation is that while in principle drinking water is considered a food, the addition of fluoride is not considered a food supplementation process. This is because, from a legal viewpoint, water provided by the local water supply is only considered a food once it emerges from the taps that are normally used for human consumption, and because water is not considered a food at the point at which fluoride is added, the process is not considered supplementation of food.”

[12] (a) Charter of Fundamental Rights of the European Union  
[http://ec.europa.eu/justice/fundamental-rights/charter/index\\_en.htm](http://ec.europa.eu/justice/fundamental-rights/charter/index_en.htm)  
Article 3.2

(b) The European Convention on Human Rights and Biomedicine  
<http://www.coe.int/en/web/conventions/full-list/-/conventions/rms/090000168007cf98>  
Articles 1 and 5

(c) The Universal Declaration on Bioethics and Human Rights  
[http://portal.unesco.org/en/ev.php-URL\\_ID=31058&URL\\_DO=DO\\_TOPIC&URL\\_SECTION=201.html](http://portal.unesco.org/en/ev.php-URL_ID=31058&URL_DO=DO_TOPIC&URL_SECTION=201.html)  
Article 6

[13] <http://www.dentalhealth.ie/download/pdf/waterfluoridation.pdf> Pg 17

[14]  
<http://www.supremecourt.ie/SupremeCourt/sclibrary3.nsf/pagecurrent/9FA0AA8E8D261FC48025765C0042F6B3?opendocument&l=en> Pg 346 .