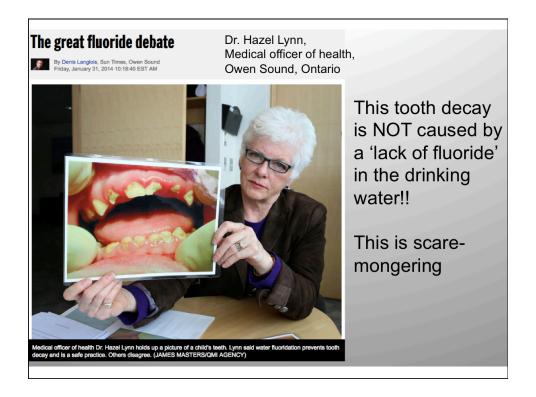
Submission to LaSalle ON Council

For Public Record

by

Dr. Hardy Limeback BSc PhD (Biochem) DDS

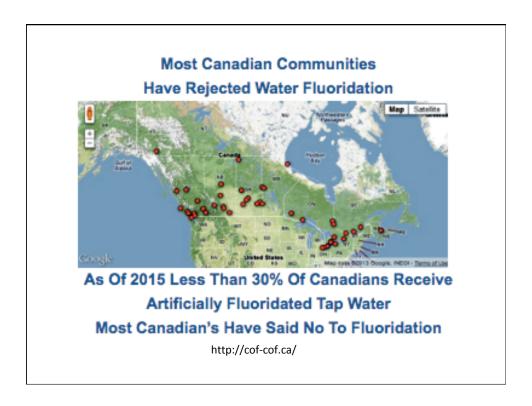
Professor Emeritus, Faculty of Dentistry, University of Toronto Member of the US NRC 2006 Committee on Fluoride in Drinking Water

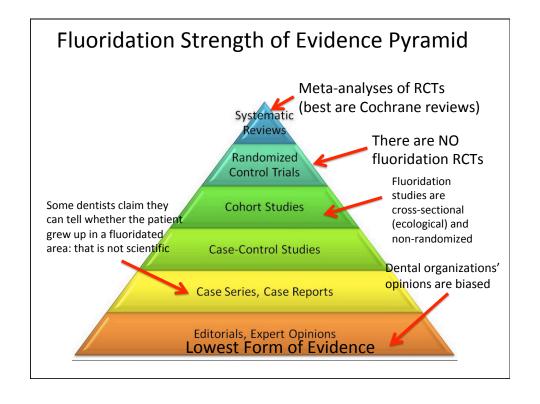




Fluoridation Ineffectiveness

- Not one double blinded, randomized clinical trial (standard for drug approval) was ever conducted to prove fluoridation works.
- The most recent cross-sectional study (Slade et al) showed that at most 0.5 teeth/person are saved from decay after 20 years of fluoridation





No Randomized Clinical Trial for Fluoridation!

Can epidemiology studies comparing fluoridated areas with non-fluoridated areas be used to estimate benefits? NO, not even if all these confounders are considered

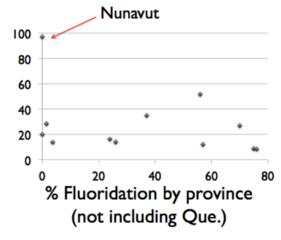
Confounders	Slade et al, 2018
ethnicity, genetics	yes
gender	yes
age	yes
sucrose exposure	no
education	yes
income	no
rural vs urban	partial
overall health	no
trace element exposure -Sr, Pb, Ca, Mg	no
salivary flow	no

Confounders	Slade et al, 2018
salivary buffering capacity	no
Vitamin D status	no
use of fluoridated toothpaste	no
access to dental care, -professional fluorides, -dental sealants, -chlorhexidine	no no no
enamel hypoplasia prevalence	no

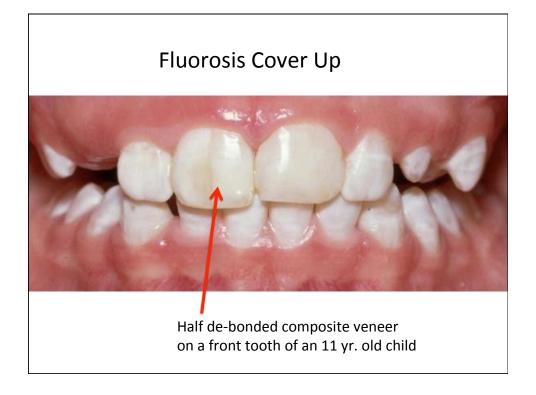
See Neurath, Beck, Limeback et al. Commun Dent Oral Epid. 2017 for a discussion

Fluoridation in Canada DOES NOT reduce day surgeries required to treat rampant dental decay

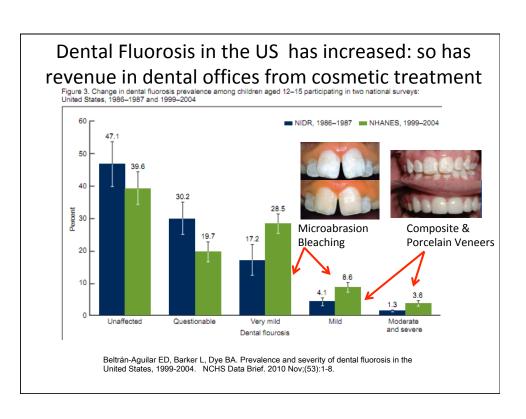
Day surgeries per 1000 for cavities











Caries susceptibility of human fluorosed enamel and dentine

P.G.K. Waidyasekera a,* , T. Nikaido a , D.D.S. Weerasinghe a , K.A. Wettasinghe b , J. Tagami a,c

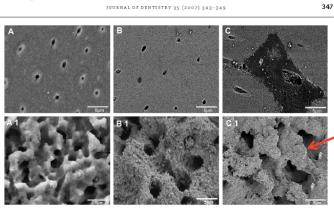


Fig. 4 – SEM images of the dentine surfaces. (A) Non demineralized polished surface of the normal dentine. (B) Non demineralized polished surface of the mild florosed dentine. (C) Non demineralized polished surface of the moderately fluorosed dentine showing an area of interglobular dentine (pointer). (A1) Normal demineralized dentine showing the spongy appearance of the intertubular dentine (pointer), (B1) Mild fluorosed demineralized dentine. (C1) Moderately fluorosed demineralized dentine showing irregular shaped tubular orifices (pointer).

Moderately fluorosed dentin is more susceptible to acid attack (caries)

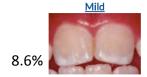
Fluoridation- a lousy trade off from 40 years of exposure

One tooth might have been saved from dental decay

.....but look at the dental fluorosis



out of 100 children 100 fillings might be saved =\$20,000



3.6% Severe

8.6 children out of 100 needing cosmetics at \$1000/child =\$8,600

3.6 children requiring cosmetics up to \$20,000/child =\$72,000

Total = \$80,600

CDC (2004) "The prevalence of very mild fluorosis increased from 17.2% to 28.5% and mild fluorosis increased from 4.1% to 8.6%. The prevalence of moderate and severe fluorosis increased from 1.3% to 3.6%".

"Moderate + severe fluorosis has reached epidemic proportions in the US. 30% of children have fluorosis that needs treatment."

Dr. Hardy Limeback BSc PhD DDS

Prof. Emeritus, Former Head of Preventive Dentistry, University of Toronto Member of the 2006 NRC Committee on Fluoride in Drinking Water

Neurath, Limeback et al. JDR Clin Trans Res in press

Lead poisoning

Burton's Lines-bluish discoloration of the gums



Arsenic Poisoning
Mees Lines on the fingernails

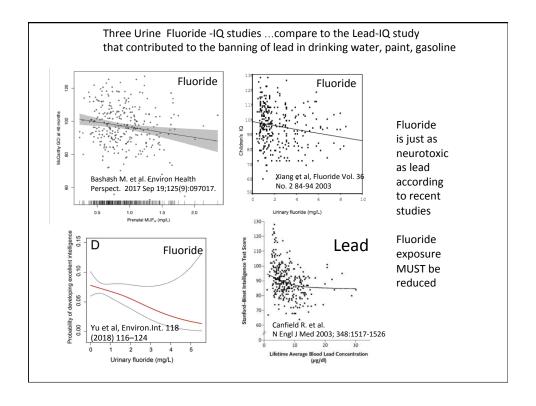


Cosmetic signs (lines) of lead, arsenic, fluoride overdoses.....

poisoning is poisoning!!

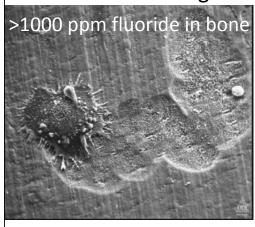
Fluoride Poisoning
-mild dental fluorosis lines on teeth





Effect of fluoride accumulation in bone on bone cells

Osteoclast resorbing bone



-early bone cell death-release of high F-levels to immune cells-change in bonearchitecture

NRC Report 2006

