

To: Jennifer Alexander

From: Kimberly DeYong

Re: January 29, 2019, Special Fluoridation Meeting Submission

[REDACTED]

Ms. Alexander,

Kindly find attached my submission for the upcoming special fluoridation meeting. Please note that I wish to present as a delegate and I hope that the mayor decides that this special meeting warrants hearing from all members of the public that wish to speak – surely they won't all take the full 10 minutes.

Further, the delegates selected to present, should they not include everyone, should be proportioned to the delegate requests received from both sides. If 80% of the submissions have come from those opposed, then 80% of the people selected to speak should be from those opposed. To have an equal number of delegates from both sides of this issue does not fairly and accurately reflect the views/voice of the public.

I'm sending my submission by fax to ensure that arrives in time to be included in the public record and be given to council members for consideration. I've sent this submission via email to the info@tecumseh.ca email address as well as to sfuerth@tecumseh.ca and to jalexander@tecumseh.ca twice from my personal account and once from my employer's email account. I'm not sure what the difficulty is in receiving it but trust this fax will arrive to your office.

The digital copy of the submission is preferred because it includes reference and source links so hopefully that shows up in your inbox from one of my earlier attempts, too.

Kindly,

Kimberly DeYong

Municipalities Provide Safe Clean Drinking Water

by: Kimberly DeYong

Swallowing Too Much Fluoride Causes Health Harm

There is no debate that swallowing fluoride causes harm. Only up for debate is how much is too much before that harm becomes evident. Thus the disclaimer 'safe at optimal levels'. It is important to remember that the term 'optimal level' is a dilution defence.

So what is that 'optimal level' that gives us the benefits with none of the harms; and is that magic number the same for every individual regardless of our unique age, weight, body mass, physiology, lifestyle, diet, daily water intake and other sources of fluoride?

For decades WUC fluoridated to a level of 1.2 mg/l, a limit considered too high today. The supposed 'optimal level' has been reduced several times to today's claim of .7mg/l. There is no such thing as a fluoride deficiency disease and so the concept of an 'adequate daily intake' is flawed.

Even The Centers for Disease Control states that "It is not the CDC's task to determine what levels of fluoride in water are safe."

Optimal Level vs Dose Swallowed

Water fluoridation is unable to control for dose. Dose is how much fluoride is being swallowed and daily intake includes from all sources, not how much is being diluted in the public water supply.

The Canadian Dental Association recommends that to avoid dental fluorosis, daily fluoride intake from all sources should not exceed 0.05-0.07 mg/kg/day! So my 75 lb/34kg daughter, according to the CDA, gets twice the safe limit of fluoride when she has one cup of tea made with fluoridated water. For my weight, I'm right at the threshold of the safety mark with that same cup of tea. And this is before either of us have been exposed to fluoride by brushing our teeth with much more effective fluoridated toothpaste.

Canadian Paediatric Society Position on Fluoride in Infants and Children

The Canadian Paediatric Society position statement on *The Use of Fluoride in Infants and Children* states:

- fluoride prevents cavities topically, that means putting fluoride directly on tooth surfaces.
- swallowing fluoride has little effect on cavities while contributing significantly to fluorosis.
- caution zero fluoride until teeth have erupted and zero fluoride under the age of 6 months.
- limited fluoride supplement of .5mg/day until the age of 6 and over 6 a limit of 1.0mg/day.

TABLE 1

Recommended supplemental fluoride concentrations for children

Age of child	Fluoride concentration	
	<0.3 ppm	>0.3 ppm
0 to 6 months	None	None
> 6 months to 3 years	0.25 mg/day	None
> 3 to 6 years	0.5 mg/day	None
> 6 years	1.00 mg/day	None

In 1991, the CDC measured human fluoride levels in areas where water was fluoridated at a level between .7 and 1.2 ppm. They found a total fluoride intake in adults ranged from 1.58 and 6.6 mg per day and for children a fluoride intake range of .9 to 3.6 mg/day. The CDC has also conceded that fluoride works topically, it doesn't need to be swallowed.

Water Fluoridation and Health Harm (Dental Fluorosis and...?)

Since the 1980s there have been numerous studies that have identified adults and children are exceeding safe limits contributing to a rapid rise in dental fluorosis.

Dental fluorosis is the first sign of fluoride toxicity, a visible sign of fluoride overdose.

Fluorosis is proof that swallowing fluoride can cause human health harm. Teeth are easy to see, we can't see the effects internally on our tissues, bones and brains. New studies published in the fall of 2018 link optimal levels of fluoride to ADHD, hypothyroidism and over dosing for pregnant women.

Fluoride Toxicity Researcher Quotes on Safety of Ingesting Fluoride

She is "certain the safety of fluoride ingestion has not been proven. The problem is that it's an uncontrolled dose - everyone is exposed to different levels. It may be prudent for pregnant women to reduce ingesting fluoride during pregnancy." Christine Till, associate professor and research at the York University and lead author of Community Water Fluoridation and Urinary Fluoride Concentrations in a National Sample of Pregnant Women in Canada, EHP3546

"I have grave concerns about the health effects of fluoride exposure. And not just from my study but the other studies that have come out in recent years." Ashley Malin, lead author of Canadian thyroid study and researcher at the Department of Environmental Medicine and Public Health, Icahn School of Medicine at Mount Sinai.

"Certainly, the assumption that 'very mild' and 'mild' forms of fluorosis are acceptable, which underlies much current thinking about fluoridation, may need to be reconsidered...Clearly the simplest way of reducing the prevalence of fluorosis in child populations is to cease to fluoridate community water supplies." Benefits and Risks of Water Fluoridation, Ontario Ministry of Health

"Common sense should tell us that if a poison circulating in a child's body can damage the tooth-forming cells, then other harm also is likely" Why I changed my mind about fluoridation. Perspectives in Biology and Medicine 41:29-44.

"It is illogical to assume that tooth enamel is the only tissue affected by low daily doses of fluoride ingestion." Dr. Hardy Limeback, Head of Preventive Dentistry, University of Toronto

Do you know YOUR daily intake?

Who is monitoring our total fluoride exposure in Windsor-Essex to make the claim that we need to be supplemented with more, dosed based on our thirst? If the CDC statistics on fluoride intake are correct, water fluoridation results in an over dosing of the population.

And the Ministry of Health is aware of this. A study they commissioned called Benefits and Risks of Fluoridation states: "In Canada, actual intakes are larger than recommended intakes for formula-fed infants and those living in fluoridated communities. Efforts are required to reduce intakes among the most vulnerable age group; children ages 7 months to 4 years."

The known and not argued health harm of dental fluorosis was also reported in the Canadian Health Measures Survey that advises 40% of adolescent children surveyed have some form of dental fluorosis. This survey looked at twice as many children from non-fluoridating

communities as fluoridated, so perhaps that percentage would be higher if it included only children from fluoridated communities.

Municipal Responsibility: Water Quality

We know health care is a provincial responsibility. But the province has not bothered to mandate or regulate water fluoridation. They have opinions on the topic but accept no liability or responsibility and instead have passed this off to drinking water suppliers.

I was recently elected as a municipal councillor for the Town of Kingsville. Kingsville, despite never being fluoridated, has oral health stats the same as Windsor's, even when they were fluoridating. And this is confirmed by high quality, variable controlled population studies conducted within Canada, by Public Health data and Stats Canada data comparing heavily fluoridated Ontario with barely fluoridated Quebec - all showing no difference in cavities comparing fluoridated to non-fluoridated populations.



Joe Bachetti

Follow

Tecumseh scores well on student oral health
#wechu #tecumseh



I've been appointed to our Union Water Supply System board. This water supply system has never fluoridated, historically rejecting fluoridation because Heniz didn't want fluoridated water in their baby food. The Union Water Supply System is opposed to water fluoridation. They express concerns with adding a chemical that doesn't result in a net improvement to the quality of drinking water. And they have other concerns regarding capital costs, health and safety of staff, corrosion mitigation measures, and the agri/food industry that requires a large volume of high quality water. Perhaps Bonduelle, local dairy farmers or other agri businesses in Tecumseh share these concerns.

Lessons from Walkerton

Being responsible for safe water is obviously a great responsibility and special training is recommended for those with authority and oversight. The Walkerton Clean Water Centre will be providing training with respect to responsibilities under the Safe Drinking Water Act. Training will be held in March in the Tecumseh council chambers.

This training is designed to inform municipal councillors and officials of their oversight responsibilities under Section 19 of the Safe Drinking Water Act. This section of the OSDWA is an important recommendation that came out of the Walkerton Inquiry reports in 2002. It came into effect just as Windsor Utilities Commission ended water fluoridation in 2013. It expressly extends legal responsibility to decision-makers with authority over municipal drinking water systems, including municipal councillors. This section imposes a broader standard of care and makes councillors accountable for what they permit into the drinking water supply.

Health Canada, Public Health and Dental Industry reps are merely advisors. They shoulder none of the liability or accountability.

Ontario Safe Drinking Water Act and Fluoridation

The stated purpose of the OSDWA is "to recognize that the people of Ontario are entitled to expect their drinking water to be safe" and "to provide for the protection of human health and the prevention of drinking water health hazards through the control and regulation of drinking water systems..."

Safety Standard

Similar to the American Safe Drinking Water Act, Ontario's SDWA subscribes to the United States National Sanitation Foundation International (NSF) Standard 60 which 'certifies' three basic chemical compounds in the fluoridation category under NSF Standard 60: hexa or hydrofluorosilicic acid, sodium fluorosilicate and sodium fluoride.

The NSF does not ascertain safety or effectiveness of the chemicals it certifies, it doesn't accept liability resulting from reliance on the standard, it does not conduct health harm or health benefit research nor does it require proof that such research has been conducted.

What tangible scientific evidence do we have, proving fluoridation chemicals used in concentrations intended within our municipal water supplies are 'safe and effective' for a lifetime of swallowing? Who has tested or will test the fluoridation chemical on behalf of our municipalities and sign-off that it is safe?

Standard Not Met

Five years ago, at the special fluoridation meeting, WUC CAO John Stuart, was asked by then councillor Dilkens, if HFSA had undergone the required safety studies per standard NSF60. Mr. Stuart replied that they did not, a link to the video of this is below. A week later, Dr. Heimann's presentation to the town of Tecumseh stated "no research has focused on the consumption of fluorosilicates". And finally, in an Access to Information Request Health Canada admitted it had no report, study, toxicology or clinical test regarding fluorosilicates being added to tap water. It is clear that fluoridation chemicals do not meet the OSDWA requirement set out in standard NSF 60.

Fluoride Ion vs Fluoridation Chemicals

The fluoride promoters say, we've studied the fluoride ion, not fluorosilicates and to that I say, study what is added to our water because:

- 1) that's the way the Act/Standard reads,
- 2) according to a WUC administration report from October 26, 2012, dissociation depends on water PH, temperature and fluoride concentration, so while dissociation might occur at the water treatment plant, where is the evidence that the chemical doesn't reform at the customer's tap (where chemistry and temperature varies), when reconstituting orange juice (changing the PH), when boiled to make soup (increasing the F concentration) or when it is in our stomachs? This is why safety studies are necessary, so we know what the health effects are when ingesting.
- 3) from the fluoridation chemical's certificates of analysis it is clear that fluoridation chemicals include more than just fluoride. Fluorosilicates include lead, arsenic and other co-contaminants.

The Act Directs Us How To Keep Drinking Water Safe

The OSDWA: Section 20 (2)(b) could be considered to suggest water fluoridation somehow falls "under a statutory authority or for the purposes of complying with a statutory requirement", thereby empowering municipalities to fluoridate pursuant to the Ontario Fluoridation Act, but the OSDWA resolves the conflict between Acts.

But we can't overlook that the OSDWA is specifically set out to treat municipal water, so that water is safe for people to drink. It is not an Act that sets out to treat people through the water supply.

How to Ensure Safe Drinking Water

The OSDWA: Section 20 (1) states "no person shall cause or permit any thing to enter a drinking water system if it could result in, a drinking water health hazard; a contravention of a prescribed standard; or interference with the normal operation of the system."

Fluoridation: fluoridation chemicals added to drinking water may cause the health hazard of dental fluorosis (and arguably other harm) and are in contravention of the prescribed standard NSF60.

The OSDWA: Section 20(3) states "For the purposes of prosecuting the offence of contravening subsection (1), it is not necessary to prove that the thing, if it was diluted when or after it entered the system, continued to result in or could have resulted in a drinking water health hazard," This means dilution is no defence.

Fluoridation The terms 'safe at optimal level' and 'safe at optimal concentration' in drinking water are dilution defence arguments and avoid touching on the actual dose as it pertains to individual water drinkers. We can't control for dose of artificial fluoride from municipal drinking water.

The OSDWA Withstands All Other Acts

The OSDWA: Section 166(1) titled Exception to Conflict states "The provisions of this Act and the regulations prevail over the provisions of any other Act and any regulation made under any other Act, irrespective of when the other Act is enacted or the regulation is made under the other Act.

: Section 166(2) goes on to state "Subsection (1) does not apply if the other Act referred to in subsection (1) expressly states that a provision of that Act or of a regulation made under it prevails over the provisions of this Act.

The Ontario Fluoridation Act does not expressly state it prevails over the OSDWA.

Therefore the OSDWA overrides the Ontario Fluoridation Act. It can be argued, and I suspect will be judicially someday, that the OSDWA handles the conflict so clearly and completely that there is no need to formally repeal any conflicting act, such as the Ontario Fluoridation Act.

Ontario Fluoridation Act

The Ontario Fluoridation Act (OFA) only makes reference to voting for a "fluoridation system... comprising equipment and materials for the addition of a chemical compound to release fluoride ions into a public water supply." It makes no reference to what fluoridation chemical the municipality decides upon.

The Ontario Fluoridation Act (OFA) does not empower an Ontario municipality to operate a public drinking water supply for the purpose of treating dental caries disease in humans. The OFA is silent about "compulsory preventive medication of the inhabitants of the area."

When the Ministry of Environment approves fluoridation they are only approving fluoridation equipment. The municipalities alone must ensure that what they fluoridate with fully complies and conforms to the OSDWA and any other applicable Acts.

Supreme Court of Canada

Municipalities do NOT have Authority to Treat People via the Municipal Water Supply

The Supreme Court of Canada case from 1957, Metropolitan Toronto v. Forest Hill (Village) concluded that a municipality does not have the right to pass a by-law for the provision of the "compulsory preventive medication of the inhabitants of the area."

"The question is as to the power of the council to enact the impugned by-law, and the answer depends upon the nature of the subject-matter to which it relates. If, on the evidence in the record, it could properly be regarded as action by the council to provide a supply of pure and wholesome water or to render more pure and wholesome a supply of water already possessing those characteristics I would hold it to be valid. But, in my opinion, it cannot be so regarded. Its purpose and effect are to cause the inhabitants of the metropolitan area, whether or not they wish to do so, to ingest daily small quantities of fluoride, in the expectation...that this will render great numbers of them less susceptible to tooth decay. The water supply is made use of as a convenient means of affecting this purpose. In both and substance the by-law relates not to the provision of a water supply but to the compulsory preventive medication of the inhabitants of the area. In my opinion the words of the statutory provisions on which the appellant relies do not confer upon the council the power to make by-laws in relation to matters of this sort. In view of the difference of opinion in the Courts below and in this Court, it is fortunate that this is a case in which if we have failed to discern the true intention of the Legislature the matter can be dealt with by an amendment of the statute."

To this day, in Ontario, no legislated Act exists which confers upon any municipality legal authority to treat people via the municipal water supply. The Fluoridation Act is silent on why we ought to release fluoride ions into the public water supply but clearly that purpose is compulsory preventive medication of the inhabitants.

If this higher Court decision prevails to this day, intentional fluoridation of the municipal water

supply for the purpose of reducing dental cavities remains unlawful, regardless of the Ontario Fluoridation Act.

Fluoridation is compulsory preventive medication, with a chemical that has not undergone long-term rigorous toxicology studies to prove safety or effectiveness, that contains co-contaminants of arsenic, lead and more, with all accountability and liability avoided by the fluoridation promoters.

Ensure Water Quality - Keep it Fluoride Free

- We know fluoride works topically, it doesn't have to be swallowed exposing all our other cells and tissues.
- We know in fluoridating communities people are ingesting fluoride at levels causing the health harm of dental fluorosis, and that treatment of dental fluorosis is not covered by dental benefits or provincially funded plans.
- We know access to topical fluoride products are readily available, through tooth paste, rinses and at the dentist's office and that these treatment are covered by dental benefits and provincially funded programs.
- We know there are questions and concerns about health harm to pregnant women, children's IQ, thyroid and kidney sufferers, those sensitive to fluoride and more. Lack of conclusive evidence of this harm, because scientific studies aren't being conducted or the studies that are conducted are being dismissed by fluoridation promoters, is not evidence of safety.

Finally, the OSDWA exists to protect all of Ontario's municipal water drinkers from contaminants. Putting an untested, unregulated contaminant known as hydrofluorosilicic acid, containing silicofluorides and trace co-contaminants of arsenic, lead, mercury and radionuclides is simply not permitted.

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