Sept 7, 2016

Prof. Jennifer Jackman  
Salem State University  
Political Sciences Dept.  
352 Lafayette Street  
Salem, MA 01970

Dear Dr. Jackman,

I am writing in regards to the May 1, 2016 thesis Pro-fluoridation Efforts in a Changing Environment: Pro-active and Reactive Tactics of State Oral Health Coalitions by Victoria Chase, Fluoridation Coordinator for the Better Oral Health for Massachusetts Coalition (BOHMAC). I respectfully request this letter be attached to that thesis published on Digital Commons as a comment in order to address thesis bias, factual mistakes and omissions. I am including a few resources in the end notes and attachments to document the content of my commentary.

First, the term “Agnotology” used in the thesis is quite appropriate as it refers to a group tendency to ignore, censor or delay knowledge due to bias. Ms. Chase assumes that the public displays a cultural bias based on ignorance and skepticism consistent with agnotology. However, agnotology also includes governmental and industry suppression of facts and media neglect both resulting from “confirmation bias.” “Suppression of dissent” is another term used by social scientists to describe the phenomena where organizations with power dismiss, deny, or denigrate science that does not fit an agenda and in so doing create a polarized environment inhospitable to transparency, social dialogue and scientific inquiry. “Astroturfing” describes the efforts of advocacy groups to promote bias through manipulation of media. A 2016 report published in the Journal of Risk Research by Gesser-Edelsburg et al. analyzed the dynamics of the Israeli fluoridation debate. The authors coined the term “uncertainty bias” to describe the heavy handed misrepresentation of scientific and historical facts by Israeli authorities. This analysis is consistent with social scientist Prof. Brian Martin’s broader studies on the politics and polarization of scientific controversy that include fluoridation. I suggest that all these terms apply to the ongoing fluoridation battles on local, regional and national stages, but more so to the culture of fluoridation proponents and policy makers than that of opponents and public opinion.

Ms. Chase’s complaints about a lack of resources for public health are inconsistent with the previous information she presents about the creation and funding of pro-fluoridation groups, as well as the recent boast by the president of the New York chapter of the American Dental Association (ADA) that the ADA alone spent $10m on fluoridation promotion in 2015. We know that at least $500k was just on 2015 social media promotion. The formation of the American Fluoridation Society (AFS) is a result of the advocacy troll effort orchestrated by Pew Charitable Trusts that is referred to as the Rapid Response Team (RRT). By forming a non-profit, the AFS has monetized their efforts. According to another online boast, the AFS had at least one $50k donation from an oral health coalition. Corporate vested interests also bankroll advocacy.

In regards to the organized and chilling effect of the RRT, I posted a comment to a letter to the editor on my local Gloucester paper on Easter Sunday afternoon 2015 where I outed a rather

“Science absolutely requires independence and integrity. Without them science ceases to be science. It becomes a tool to manipulate people.” – Dr. Allison Wilson (2015)
vitriolic commenter as an out of state member of the Pew sponsored RRT, and mentioned that he had “made the papers” in his home state of Oregon. My comment was misinterpreted by him as my claiming ethical charges had been filed against him. Within minutes on that Easter afternoon, there were social media trolls from Florida, Canada, Colorado, North Carolina, and even Australia on my local Massachusetts paper attacking me and threatening me with libel lawsuits. I only know where they are from because I dug into their online identities. To the casual reader of the newspaper, this type of “rapid response” serves not only to misrepresent local community opinion on the topic, but also to silence any local who is considering speaking out in support of opposition science and arguments. Yet, it provided an eye-opening glimpse into the reach of the organized bullying efforts of those associated with the oral health coalitions.

As to resources and assets, Pew Charitable Trust, the ADA and oral health coalitions dispatch specialists to towns to train dentists. Per the 2015 CDHP report, Pew recommends fluoride proponents insert “outrage and anger” into real world and social media conversation. Coalitions coach local fluoridationists in the use of ploys in lieu of science. I heard from several attendees at the Gloucester training provided by BOHMAC that fluoridationist Myron Allukian, DDS demonstrated pounding on the table and declaring that he shouldn’t have to argue the benefit and safety of fluoridation any more than he should have to debate the fact that the table is flat. He instructed the dentists and BOH members in attendance do the same table pounding routine in order to shut down conversations with anyone who mentions science documenting harm.

Matt Jacob who is based out of Washington DC was also in Gloucester for that Cape Ann “framing” training. He is the marketing guru who has built his 20+ year career in fluoridation promotion. He built that “Toolkit” mentioned by Ms. Chase and I understand provides sample comments for the RRT in Pew presentations, online, and at Dental Conferences. I’m attaching items on the lobbying expenditures in the end notes and other documentation of monies spent to intimidate local opposition. Despite Ms. Chase’s cries of underfunding, fluoridation promotion has become a profitable industry for some, including Mr. Jacob, Dr. Allukian and some retired and semi-retired dental trolls who have found a way of monetizing their hobby.

I believe the bulk of the Fluoride Action Network (FAN) budget is generated from their annual fund raising efforts that net approximately $150k. FAN was founded by a distinguished retired chemistry professor. Fluoridationists target FAN, casting it in the role of deceiver while FAN primarily serves as an honest distribution channel for fluoride related science and fluoridation policy.

On the other hand, Ms. Chase casts fluoridationist as the white hats, writing that, “In Massachusetts the Better Oral Health for Massachusetts Coalition collaborates directly with the MassDPH’s Office of Oral Health to monitor fluoride activity throughout the state, and find funding for organized efforts.” I can testify that my repeated efforts as a citizen of Massachusetts to engage the MassDPH have been met with silence. When I reached out to the MA Attorney General’s office on this matter, their response was a veiled threat that they recognize the DPH as their client and the expert on fluoridation and that the AG’s office is uninterested in any science, testimony of harm, or environmental justice arguments but would instead aggressively defend the DPH if necessary.

“… the Department of Health’s objectivity is questionable – it funded the British Fluoridation Society and, along with many other supporters of fluoridation, it used the York Review’s findings selectively to give an overoptimistic assessment of the evidence in favour of fluoridation.”

“This study does not support the use of fluoride in drinking water.”
- Dr. Thomas Zoeller, U Mass scientist commenting on 2015 Cochrane Review
Nowhere in her thesis does Ms. Chase mention opposition science that has both documented adverse health effects and called into question the veracity of the pro-F statements of benefit. As a matter of fact, both the 2000 York and 2015 Cochrane international reviews of pro-fluoridation literature found them to be poor quality, at high risk of bias, without any evidence of safety, and with conclusions of benefit not supported by the evidence. Those same charges were first leveled in the 1950s by dental researcher, Dr. Philip R. N. Sutton. Moreover, the current “science” being manufactured to support fluoridation is also subject to the same charges of manipulation of datasets, data falsification, and conclusions inconsistent with the evidence.

Ms. Chase does not mention that EPA scientists have vigorously opposed fluoridation policy for decades, even though EPA management restricts agency involvement to enforcing contaminant levels. In 2006, that contaminant level of 4 ppm was judged as unsafe in 2006 by a National Academy of Sciences/National Research Council. Moreover, in 2005 eleven EPA unions representing 7,000 EPA scientists, lab workers and lawyers wrote a letter to EPA management recommending a maximum contaminant level goal (MCLG) for fluoride of zero, i.e. 0 ppm.

Nor does Ms. Chase’s thesis explain that the 1940s worst case scenario of an adverse population impact was predicted to be that a maximum of 10% of the population might have very mild to mild dental fluorosis, i.e. faint white stains on fewer than 25% of their teeth. In fact, according to a 2010 CDC report, approximately half of all American adolescents have some form of dental fluorosis, and approximately 4% have moderate to severe fluorosis affecting between 50-100% of their teeth which includes yellow and brown stains, pitting and flaking enamel. Neither does she mention that f-opposition is quite vocal about the Environmental Injustice of fluoridation as the prevalence and severity of dental fluorosis is twice as high in non-white populations due to genetics and in poor populations due to malnutrition. That these same populations also have higher rates of diabetes which suggests increased water consumption and higher rates of kidney disease which predicts less efficient elimination of fluoride further disproportionately compromises the health of African Americans, Latinos and Indigenous Peoples. This intentional oversight by pro-fluoridation organizations is a strategic ploy to garner endorsements to ‘reduce socioeconomic disparities,’ a disingenuous claim without merit.

Another oversight is failure to mention the National Toxicology Program’s (NTP) ongoing investigation into the neurotoxicity of fluoridation. Dr. Kristina Thayer, NIEHS and Deputy Division Director for Analysis NTP Office of Health Assessment and Translation (OHAT) presented at an excellent meeting on July 16, 2016 to discuss some of the preliminary findings of NTP animal studies that acknowledged current fluoridation levels may be cause for concern. Although Ms. Chase would not have had access to that specific data at the time of her thesis submission, the neurotoxicity studies that include a hundred or more animal, in vitro, and ecologic studies dating back to 1995 which she so cavalierly dismissed are quite significant and consistent evidence that exposure to fluoridation chemicals in utero, infancy or early childhood can and do have an adverse impact on brain development.

Before I address the misrepresentations and omissions in the section on Gloucester, I’d like to further identify myself and my involvement. Although at one point I attended a few CAFAN meetings, that group was not a good fit for me. Neither of us regard me as a member.

“There are numerous mechanisms by which uncontrolled dosing of fluorides through water fluoridation can potentially harm thyroid function, the body and the brain. .... I support federal investigative hearings looking into why our cities and towns are allowed to continue to add fluoride to public water sources and why the whole story about fluorides is only just now coming out.”
- Dr. Mark Hyman MD, medical correspondent, scholar, author (2016)
That’s not to say I don’t know some of these people and talk to them on occasion. The same holds true for CAFAN and FAN. They are not really connected, although FAN makes assets available for free and CAFAN uses them, just like the volunteer Rapid Responders use the publicly available Toolkit created by paid fluoridation lobbyist and marketing expert, Matt Jacob. Sadly, fluoridation opponents neither have that quality of material nor the “media packets” the pro-fluoridation lobby provides local newspapers according to their “pro-active” game plan.

As to my involvement as an activist, it is personal. I became seriously ill during my second pregnancy in 1981 and almost lost my child. My illness continued after I gave birth. It was marked by rashes, hives, fatigue, and gastrointestinal problems resulting in drastic weight loss. Both my children were also plagued by rashes and gastrointestinal problems. It took me awhile, but I finally realized there was something in the water making us ill. My local doctor yelled at me when I asked if it might be something in the water. A subsequent out-of-town doctor said there were so many chemicals in the water it could be anything and just told me to use spring water for everything. Ten years later I switched to filtered water. The bleeding eczema did not return, but my 10 year old had a scary period of weight loss and ill health that brought us to Boston Children’s Hospital concurrent with the installation of that high quality water filter and my diagnosis of “chronic Lyme Disease.” Again, doctors prepared me to lose my son. My son eventually recovered but never did like to drink water. Additionally, although quite smart, my son has a learning disability consistent with those described in the animal studies of in utero exposure.

In 2014, my “chronic Lyme” hobbled me and I was having kidney and liver problems. Nine days after being assiduously strict in my avoidance of fluoride, even using spring water to brush my teeth, my arthritis of 23 years disappeared. My kidney and liver trouble also disappeared. Even my painfully dry gums cleared up. I had given up drugstore toothpastes decades earlier because they gave me mouth sores. I’ve since found scientific documentation of all of my symptoms going back to the 1950s, including a Public Health Service controlled dose study of pregnant women and children. The city started fluoridating July 1, 1981 during my pregnancy. I remember being quite ill at an event that 4th of July weekend which I marked that as the beginning of my decades long illness. I couldn’t be angrier. My doctor knew in late 1982 that the “bruises” I was showing him were a distinctive autoimmune reaction, a hiv caused by fluoride poisoning called Chizzola maculae. Otherwise, he wouldn’t have yelled at me and said “who put you up to this” when I tried to get him to examine my lesions and asked if the water could be making me ill. He was the head of the BOH who ordered fluoride into the water. Incredibly, I still did not fully realize the extent of my family’s sensitivity to fluoride or that there are millions like me until 2014. Like everyone, I wanted to believe my doctor and other “experts” who reassured us our water was safe and healthy and that my family was just uniquely allergic to many foods.

This self-delusion that we can trust our doctors, scientists and health agencies is in fact the more typical public response to official proclamations, not skepticism. Yale University psychologist Stanley Milgram proved this universal obedience to authority tendency decades ago in an experiment that has been reproduced many times in psychology laboratories, in television hidden camera skits, and in the manipulation of public opinion by advocacy groups as advised in the Engineering of Consent by Edward Bernays, aka the father of propaganda. This is why fluoridation proponents are trained to aggressively cite endorsements as “proof”

"Ironically, the “antis,” who are usually portrayed as unscientific, often act more scientifically in the debate.... By contrast, the political profluoridation stance has evolved into a dogmatic, authoritarian, essentially antiscientific posture, one that discourages open debate of scientific issues.”
- Dr. Edward Groth, III (1991)
and assign expert status to those who support fluoridation while ignoring or denigrating any who oppose fluoridation. Similarly, advocates routinely belittle or attack research that is inconsistent with their agenda. This is in fact what happens in communities debating fluoridation policy. The proactive stance of the fluoridationists is a combination of appeals to authority and bullying tactics.

In regards to the errors and omissions in the thesis specific to Gloucester:

1. The fluoride opposition organization goes by the acronym CAFAN, not Cape FAN

2. CAFAN is comprised of both Rockport and Gloucester residents as we share the same newspaper. It would have been more appropriate to have addressed the opposition as Cape Ann as the battles were mirror images and involved the same participants, albeit Rockport voted in May 2015 and Gloucester in November 2015

3. Neither the Gloucester nor Rockport pro-fluoridation panels hosted by their respective Boards of Health in the week prior to each election included opposition participants nor truthfully addressed opposition stances, instead using inaccurate “straw man fallacies” to sway their audiences. The head of the Gloucester BOH and a local dental panelist went so far as to say it would cost millions to remove fluoride from the water when opposition was only asking for an end to supplementation. Rather than educating the public, these are textbook examples of disinformation consistent with propaganda and agnotology

4. The Rockport pro-fluoridation panel did not answer any of the questions on index cards submitted by opposition, but instead made sweeping statements in the last few minutes like “we have a few questions here on kidneys, can the panel comment” and then announced they were out of time and ended the event (ed. 9/8/16 KS)

5. Those pro-fluoridation panels were aired live and repeatedly while the opposition event was only aired at 6 PM on Halloween night and I believe one other time. The head of the Gloucester BOH is a long time active member of the local access cable station (CATV). Given his aggressive pro-fluoridation public behavior, I suspect he used his position to suppress opposition voice at CATV

6. That local station repeatedly aired the monthly “Skeptics Meeting” chaired by the Gloucester BOH director, where he and his cohort ridiculed opposition by innuendo and the facetious use of an online story about pit bulls. He also disparaged a report in a scientific journal listed in PubMed as being published by an organization with headquarters in Cairo and New York City by implying that anything out of Cairo should be suspect. He failed to mention the international publisher’s New York City headquarters

7. Our newspaper was pro-fluoridation and held back the letter from 2006 NRC panelist, Dr. Hardy Limeback, for about 2 weeks. They finally printed it with dozens of other opposition letters in a “web-only” section the last day of comments before the referendum vote while printing pro-fluoridation editorials, letters and a prominent and misleading guest column from a local dentist in the paper version the entire week preceding the election

8. Letters from opponents were not printed for weeks, until after protests of why not and resubmissions from authors; one from my cousin printed the day after the Rockport election even though it had been submitted 3 weeks earlier. Some letters were never printed
9. Opponent letters were also edited unfairly, with key sentences citing science cut and statements of opinion softened with the insertion of “I believe” while pro-F letters with outrageous claims and conjectures were allowed to stand without any equivocation.

10. The week preceding both elections also saw multi-day full page advertisements denigrating “anti-public health conspiracy theorists,” citing “bogus attacks” and providing a 1950s cartoon of how fluoride needs to be incorporated into the growing teeth of children to be effective above a CDC quote and logo. The incorporation theory was the 1940s medical hypothesis that formed the basis of the fluoridation policy. Many doctors and chemists refer to this theory as a “malignant medical myth.” It was discarded by the CDC in 1999.

This brings us back to agnotology. It's not the opponents of fluoridation, derisively referred to as the “antis” or “FOs” by the fluoridationists, who are representative of an ignorant and anti-public health culture. It is those whose prestige or paychecks depend on backing fluoridation policy and in so doing ignore, belittle and besmirch science and testimony that does not fit in with their pro-fluoride belief system who exemplify agnotology.

It is the fluoridationists who commit out and out fraud in their manufacture of poorly designed studies that leave out key datasets and of badly biased reports, opinion statements and theses with errors of fact and omission. It is they who are self-delusional, using their access to power to marginalize the public. It is they who create unscientific and misleading marketing literature they tout as science. It is they who engage in scientific misconduct through their manipulation of facts and meritless endorsements. It is they who protect their paychecks by their willful blindness to an unethical policy that wrecks acute harm on approximately 15% of the population who due to either genetic or acquired intolerance can not safely drink or bathe in fluoridated water. It is fluoridation proponents who peddle fear by circulating ghastly photos of rotten teeth while predicting a dental Armageddon without community water fluoridation programs. It is the fluoridation proponents, whether well meaning and naive shills or sociopathic players, who in their arrogant advocacy for an ill-conceived policy based on a dental myth expose infants in the womb, young children, the elderly, and those in fragile health to a poisonous endocrine disruptor and inflammatory drug that bioaccumulates in brains, bodies and bones.

Respectfully,

Karen Spencer

About: Currently a consultant working with software development teams, I am a former analyst and project leader. I am adept at conducting research and analyzing trends. My special interests include critical thinking, data-driven decision making, and organizational theory. I hold a Masters from Lesley University.

encl: Fluoridation promotion on Cape Ann (6 items)

Sampling of Recent Publications & Discussion:


• Note: Although not fluoride specific, fluoride is a known endocrine disruptor and therefore applies.

A Malin and C Till. Exposure to fluoridated water and attention deficit hyperactivity disorder prevalence. Environmental Health 2015, 14:17. [http://www.ehjournal.net/content/14/1/17/abstract]


National Toxicology Program expert phone conference with FAN on NTP preliminary animal study findings of fluoride neurotoxicity. July 15. 2016. [https://www.youtube.com/watch?v=9GaAcLG5_qE]

Recent Aggregations of Analysis with Scientific Citations:


IAOMT Policy position on ingested fluoride and fluoridation. International Academy of Oral Medicine and Toxicology. 2015. [https://iaomt.org/iaomt-position-fluoridation/]


END NOTES
Funding & Advocacy


- Matt Jacob biography: https://www.cdhp.org/team/matt


Fluoride Action Network fundraising: http://fluoridealert.org/content/2016-fundraiser/

A few older science items:


• This longest and perhaps best study done on the impact of fluoride ingestion documented symptoms of eczema, vertigo, headaches, gastrointestinal illness, etc. In their progress report, the authors wrote: “It has been reported that cases of fluorine intoxication occur in persons with a history of allergy. It is emphasized that a lower threshold in tolerance to drugs in allergic patients must be reckoned with.” (Feltman, Dental Digest. 1956). The dental researchers suggested more study was needed on the adverse effects that they had confirmed with double blind experiments, but the Public Health Service withdrew funding.


• List of Symptoms: http://fluorideinformationaustralia.files.wordpress.com/2013/01/flier_waldbott_symptoms_ftgd.pdf
• Case Studies of Pre-Skeletal phase: http://www.fluoridation.com/waldbot.htm


• Note: This is not fluoride specific, but rather documents that the CNS has an immune system subject to inflammation. This 2015 study suggests the mechanism by which fluoridation chemicals, which are inflammatory drugs and endocrine disruptors that impact immunological function, cause the neurological symptoms that accompany the more obvious rashes, gastrointestinal effects and arthritic symptoms of fluoride poisoning/intoxication.


• 1993 Moolenburgh affidavit: https://fluorideinformationaustralia.wordpress.com/legal/affidavits/
• 2014 Moolenburgh interview: https://www.youtube.com/watch?v=Jw3xbtS4vpM


EPA scientists opposition:

• 2001 Dr. Hirzy testimony to Congress: https://www.youtube.com/watch?v=ViNNlwznTzl

About 2006 NRC:

• Dr. Hardy Limeback’s letter to UK’s South Central Strategic Health Authority: http://www.eidon.com/dr-hardy-limeback.html
• Dr. Robert Isaacson on fluoridation:
  • Scientific position: http://bingweb.binghamton.edu/~isaacson/fluoride.html
  • Expert opinion: http://media.wix.com/ugd/81cfd5_91f15e53855f4380bc609c7155f3d80a.pdf
VOTE Tuesday, November 3rd
Keep Gloucester Fluoridated
DON’T LET FEAR-MONGERS AND ANTI-PUBLIC HEALTH CONSPIRACY THEORISTS TAKE AWAY YOUR PUBLIC HEALTH INFRASTRUCTURE. FLUORIDE IN DRINKING WATER HELPS KIDS FORM STRONG TEETH WHILE THEY ARE DEVELOPING.

Come out and vote.

Bogus attacks on water fluoridation, like the bad science attacks on vaccines are taking public health backwards.

70 years of research from private and public institutions have shown Fluoridation is Safe and Effective.

Fluoride in drinking water saves Gloucester residents an ADDITIONAL $380,000 in dental care costs BEYOND what toothpaste and flossing can save, annually!

We can TRUST the recommendations of the American Medical Association, American Academy of Pediatrics, American Nurses Association, American Public Health Association, American Dental Association, CDC, and over a hundred of other national and international organizations promoting water fluoridation.

WATER FLUORIDATION BENEFITS EVERYONE:
children forming teeth, adults, disabled and autistic citizens, cancer patients...etc

For every dollar spent on fluoridation, it saves $38 in preventable treatment costs. For Gloucester, that translates to $38x$10,000 in savings: $380,000 in treatments costs.

Sources below:
http://www.cdc.gov/fluoridation/factsheets/cost.htm
keeptheflo.org

Ad paid for by:
Sam A. Merabi, DMD, MPH adjunct instructor Harvard School of Dental Medicine
William Bebrin, DMD, DMSc - Gloucester Orthodontist

HOW FLUORIDE WORKS

FLUORIDE IN DRINKING WATER IS TAKEN IN BY TEETH STILL DEVELOPING BELOW THE GUMS TO HELP CREATE A STRONG SURFACE PROTECTING THE TEETH FROM CAVITIES

IN CHILDREN AND ADULTS TEETH ARE BATHED IN FLUORIDE WHEN DRINKING WATER

ACID PRODUCED BY BACTERIA IN THE MOUTH CAN CREATE HOLES ON THE SURFACE OF THE TEETH FLUORIDE HELPS PROTECT & REBUILD THIS SURFACE PREVENTING ABOUT 25% OF CAVITIES

GIVING TEETH THE FLUORIDE THEY NEED ALL DAY LONG

Build a better foundation for healthy teeth and keep your teeth stronger, longer. Fluoride in water. 70 years and going strong. At a faucet near you. Visit www.CDC.gov/Fluoridation for more information.

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October 31, 2015 12:05 am / Powered by TECNAVIA
Trust your healthcare professionals on fluoridation

William R. Bebrin

Our public water as it comes directly out of the city’s wells and quarries pre-supplementation, as well as our ocean water, contains substantial concentrations of fluoride, albeit in the former case not at levels high enough for adequate cavity prevention. When listening to the anti-fluoridation’s rhetoric one must remember that to remove this natural occurring fluoride, which they claim is toxic, would require the expenditure of millions of taxpayer dollars.

Our public water as it comes directly out of the city’s wells and quarries pre-supplementation, as well as our ocean water, contains substantial concentrations of fluoride, albeit in the former case not at levels high enough for adequate cavity prevention. When listening to the anti-fluoridation’s rhetoric one must remember that to remove this natural occurring fluoride, which they claim is toxic, would require the expenditure of millions of taxpayer dollars.

It is understandable that not everyone has the time or inclination to read the seminal papers on fluoridation. If you cannot, I suggest trusting the same healthcare providers and organizations that you’ve trusted with other aspects of your wellness. These include your board of health, your physicians, your dentists, your nurses and numerous national healthcare organizations.

If you have been alarmed by the reckless and unsubstantiated conspiracy claims of the anti-fluoride naysayers, the claims of a 70-year long collusion between the fluoride industry and the medical, dental, and public health professions to hide the truth about fluoridation’s risks and its efficacy, you should ask yourself the following:

Is it really believable that there have never been enough ethical people in any of our multitude of national health organizations to have any of these organizations come out publicly against community fluoridation? Furthermore, why is it that none of the investigative news organizations such as the New York Times, the Washington Post, 60 Minutes, or 20/20 have come out against fluoridation or reported on the conspiracy? In fact just the opposite, the Gloucester Daily Times, the Boston Globe, and National Geographic all have recently come out in favor of fluoridation.

So when considering how to vote on Nov. 3, I suggest listening to the committed and learned people to whom you have previously entrusted your health care and who have the credentials to advise you, rather than the conspiracy theorists, whose leaders are a sculptor, a bookkeeper, and a woman who is convinced that Rockport’s fluoridated water gave her dog cancer. Their pamphlets and websites are filled with flawed science, misrepresented science and just bad science. As educational materials they are the literary equivalent of snake oil, so let the buyer beware.

So please listen to your health care professionals and boards of health and support the continued fluoridation of our public water supply so we can have healthier teeth and smiles into our old age.

William R. Bebrin, DMD, DMSc, is a resident of Gloucester.
Community Water Fluoridation:
Interactive Speaker Trainings

Wednesday, September 10th, 5:30-9pm,
Temple Ahavat Achim, Gloucester, MA
Thursday, September 11th, 8:30-1pm,
Mass Dental Society, Southborough, MA

Attendees will learn how to “frame” the issues around community water fluoridation; increase their ability to speak effectively about community water fluoridation in public forums; small groups; and during one-on-one conversations. Training and tips for speakers, mock interviews, evidence-based fluoridation information and resources and other practical assistance will be provided. To support the strategy of educating communities on the benefits of community water fluoridation, this training will provide some discussion on how to develop a communication plan.

Learning Objectives:
1. Learn how to “frame” the issues around community water fluoridation.
2. Increase ability to speak effectively about community water fluoridation in public forums, in small groups and during one-on-one conversations.
3. Identify successful ways to communicate about the issues of community water fluoridation.
4. Locate and utilize existing resources to promote community water fluoridation.

For more information:
Rebekah Fiehn
rfiehn@betteroralhealthmass.org
617-988-2263

Expert trainers:
Matt Jacob, BA
Children’s Dental Health Project, Washington, DC
Peter Mitchell, BA
Salter Mitchell,
Alexandria, VA
Catherine Hayes, DMD,
SM, DrMedSc
Boston, MA
Jodie Silverman, MPA
Health Resources In Action, Boston, MA

With CWF Lessons Learned from
Dr. Myron Allukian Jr.
VOTE Tuesday May 5th
To Keep Rockport Fluoridated
DON'T LET ANTI-PUBLIC HEALTH FEARMONGERS TAKEAWAY YOU PUBLIC HEALTH INFRASTRUCTURE ON A SLOW ELECTION YEAR.

Come out and vote.

Bogus attacks on water fluoridation, like the bad science attacks on vaccines are taking public health backwards.

Over 60+ of research from private and public institutions have shown Fluoridation is Safe and Effective.
Water Fluoridation Saves Rockport Residents over $130,000 in dental treatment cost every year!

Trust the recommendations of our Board of Health, American Medical Association, American Academy of Pediatrics, American Nurses Association, American Public Health Association, American Dental Association, CDC, and over a hundred of other national and international organizations promoting water fluoridation.

Rockport spends approximately 50 cents per person per year on fluoridation: about $3500. For every dollar spent on fluoridation, it saves $38 in preventable treatment costs. For Rockport, that translates to $38 x $3500 in savings: $133,000 in treatments costs.

Sources below:
http://www.cdc.gov/fluoridation-factsheets/cost.htm
http://www.wda.org/np_superfaq/1000s-10k/docs/comunity-water-fluoridation-com
keeptheflo.org

Paid for by Sam Menino DMD, MPH and John P. Flavin DDS
Takeaway: Frame the issue correctly

Opponents are likely to win if the dialogue is trapped inside this message wheel

Harms & Risks

- Cancer
- Fluorosis
- Lower IQs
- Arthritis
- Kidney Problems
- Migraines
- Violent Crime
- Nervous System Problems
- Autism
- Alzheimer’s
- Hypothyroidism
- Bone Fractures
KSpencer

I prefer learning science from actual science rather than from 1960s Peter Seller comedies. That the dental community and other fluoridationists bring up that old Cold War satire at every opportunity does make me wonder where they learn their science.

Science plus Legal Opinion


SS is a dentist from North Carolina who is known as the most prolific and vitriolic of the trolls. My first introduction to him was when he appeared on my city paper posting a series of ad hominem attacks about me and other locals. When I researched him, I found he had posted the identical nasty responses to letters not only in states from Alaska to Florida, but also in foreign papers. I noticed that several of the other aggressive proponents on my local paper were also posting on those same threads. When the Gloucester representative of CAFAN was interviewed on a Boston radio station, this North Carolina DDS, made about 179 of 217 comments on that thread, either insulting, misleading, or just reams of copy and paste rebuttal. He now proudly represents himself as a founding member and the “Information Officer” of the AFS, which is compromised of several trolls who have found a way to monetize their hobby, plus Myron Allukian, who has earned his living and built his professional reputation on fluoridation promotion since the 1960s.

SS not only responded to my comments with “a” on several occasions, this “professional” proactive Information Officer once responded with “c.”