The finding's of the NTP's 6-year fluoride neurotoxicity evaluation

Chris Neurath Science Director American Environmental Health Studies Project

May 4, 2023

What did the NTP find?

The NTP's "moderate confidence" Vational Toxicology Progran conclusion for developmental neurotoxicity Handbook for Conducting a Literature-Based Health Assessment Using OHAT Approach for Systematic Review and **Evidence Integration** in human studies supports a "presumed hazard" conclusion when applying NTP's OHAT March 4, 2019 methodology. ice of Health Assessment and Translation (OHAT Division of the National Toxicology Program National Institute of Environmental Health Science

"Moderate confidence" is the 2nd highest OHAT confidence conclusion.

"Presumed hazard" is the 2nd highest OHAT hazard conclusion and is applied when human studies give "moderate confidence" and there is a "relatively large and consistent body of evidence"

Did NTP find a "relatively large and consistent body of evidence"?

"Moderate confidence" is the 2nd highest OHAT confidence conclusion.

"Presumed hazard" is the 2nd highest OHAT hazard conclusion and is applied when human studies give "moderate confidence" and there is a "relatively large and consistent body of evidence"

Latest NTP 2022 monograph

• 52 of 55 human studies found reduction in IQ from fluoride

• 18 of 19 human studies rated low Risk of Bias by NTP found reduction in IQ from fluoride

"The pattern of results across the 55 studies was consistent; 52 (95%) reported an inverse association"

"Subgroup analyses by sex, age group, study location, outcome assessment type, and exposure assessment type further support the consistent and robust pattern of an inverse association between fluoride exposure and children's IQ"

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"The pattern of results across the 55 studies was consistent; 52 (95%) reported an inverse association"

"Subgroup analyses by sex, age group, study location, outcome assessment type, and exposure assessment type further support the consistent and robust pattern of an inverse association between fluoride exposure and children's IQ" When NTP was still making hazard assessments in 2020, how large and consistent was the body of evidence needed to support a "presumed hazard" conclusion?

Latest NTP 2022 monograph

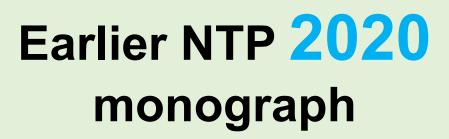
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The body of evidence has strengthened



- 44 of 46 human studies found reduction in IQ from fluoride
- 8 of 9 human studies rated low Risk of Bias by NTP found reduction in IQ from fluoride

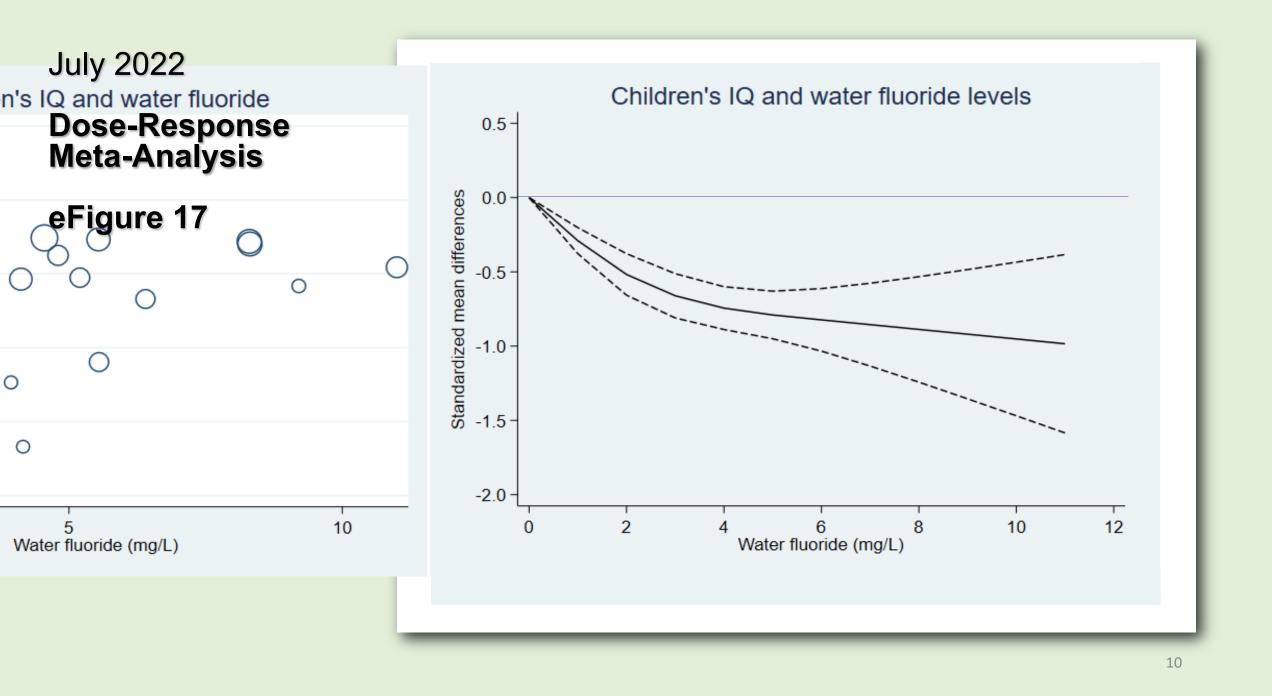
NTP 2020 monograph concluded fluoride posed a "presumed hazard" of developmental neurotoxicity

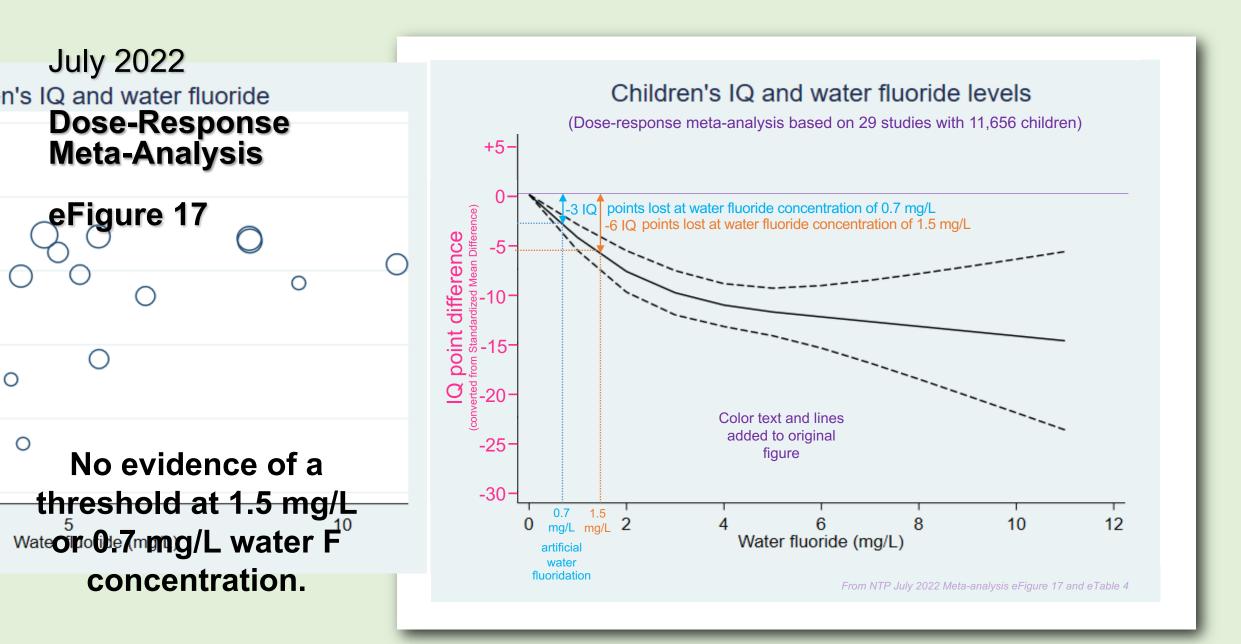
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"there was no obvious threshold as illustrated by the figure ..."

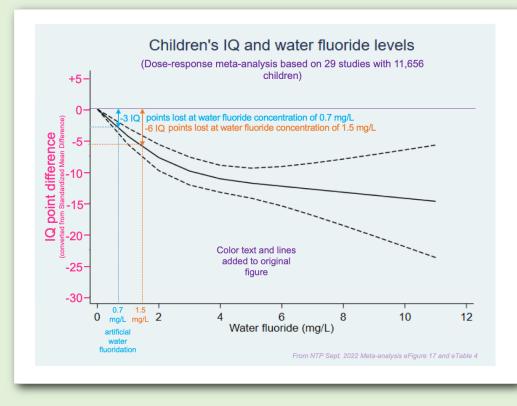
[BSC WG report page 326]





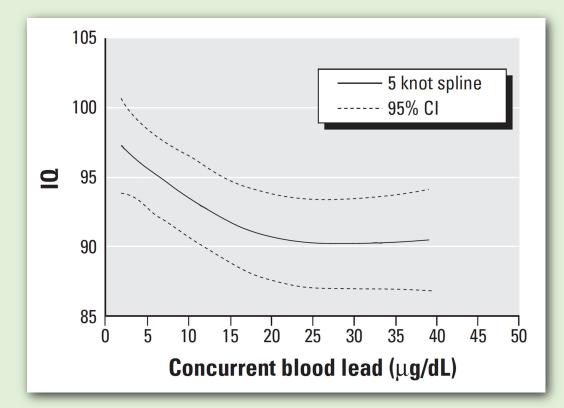
Dose-Response Relationships

Fluoride-IQ (NTP 2022)



Lead-IQ

(Lanphear et al 2005)



Research | Children's Health

Low-Level Environmental Lead Exposure and Children's Intellectual Function: An International Pooled Analysis

Bruce P. Lanphear,¹² Richard Hornung,^{12,3} Jane Khoury,¹² Kimberly Yolton,¹ Peter Baghurst,⁴ David C. Bellinger,¹ Richard L. Canfield,⁴ Kim N. Dietrich,¹² Robert Bornschein,² Tom Greene,³ Stephen J. Rothenberg,^{8,4} Herbert L. Needleman,¹⁰ Lourdes Schmas,¹¹ (Cail Wasserman,²¹ Joseph Graziano,²¹ and Russell Roberts¹⁴

The NTP's response to an HHS agency comment about exposures from drinking water in the United States:

The comment implies that our conclusions are based solely on "studies [that] were conducted on populations with higher exposures from water than are routinely found in the United States." This implication is not accurate. ...

... the confidence assessment also includes findings from studies with fluoride exposures that are similar to, or lower than, those associated with optimally fluoridated water supplies in the United States. ...

As demonstrated in Green et al. (2019), who used repeated individual urinary measurements, drinking water measures likely capture only a portion of a person's total exposure to fluoride as personal preferences and habits may increase total exposures to unknown levels. Therefore, this document, as well as any associated communication, focuses on total fluoride exposures from all sources, not just drinking water.

Summary of NTP findings

- "moderate confidence" of developmental neurotoxicity
- Iarge and very consistent body of evidence supports "presumed hazard" conclusion
- > no safe threshold observed
- "moderate confidence" conclusion applies to water fluoride of 0.7 mg/L

No wonder the divisions of HHS that promote fluoridation have tried to alter, delay, and suppress the NTP evaluation! From documents obtained through Freedom of Information Act (FOIA) the political pressure has come from fluoridation promoting divisions of HHS including NIDCR, CDC Oral Health, and the PHS Surgeon General's office, together with dental lobby groups like the American Dental Association.

These government and dental agencies have been vigorously promoting fluoridation for over 70 years.

They are using the same science manipulation tactics the lead, tobacco, and chemical industries have used to defend their toxic products.

Request to BSC members:

Uphold the scientific integrity of the NTP and its dedicated staff

FREE the NTP report

Additional Slides

Did NTP find a safe threshold?

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NTP also did dose-response meta-analysis of studies with individual-level continuous exposure measures.

These included the highest quality longitudinal cohort studies.

Did NTP find a safe threshold?

The BSC workgroup recommended NTP display results of these dose-response analyses graphically and we concur.

Nevertheless, the consistency of these studies finding adverse effects on IQ with various regression models at several ranges of exposures can be assessed from eTable 4.

Did NTP find a safe threshold?

NTP fit linear, quadratic, and spline models, and restricted included studies by several cut-off exposure levels.

Evidence for or against a safe threshold can be derived from comparing model results at the different cut-off exposure levels.

Exposure		Fluoride Exposure					
	Parameters	All data	<4 mg/L	<2 mg/L	<1.5 mg/L		
Water Fluoride -	All Studies						
No. Studies/No. O	bservations	29/39	21/27	7/9	7/7		
Number of Childre	n	11,656	8,723	2,971	2,832		
	Beta (95% CI)	-0.15 (-0.20, -0.11)	-0.22 (-0.27, -0.17)	-0.15 (-0.41, 0.12)	0.05 (-0.36, 0.45		
Linear Model ^b	p-value	p < 0.001	p < 0.001	p = 0.274	p=0.816		
	AIC	AIC = 53.8	AIC = 16.1	AIC = 11.8	AIC = 8.2		
Quadratic Model ^e	Beta (95% CI); p-value Beta (95% CI); p-value AIC p-value*	$\begin{array}{c} \textbf{-0.27} (-0.34, -0.21); \\ p < 0.001 \\ 0.02 (0.01, 0.03); p < 0.001 \\ AIC = 48.8 \\ p^{*} < 0.001 \end{array}$	$\begin{array}{c} -0.12 \ (-0.35, \ 0.11); \\ p = 0.318 \\ -0.04 \ (-0.10, \ 0.03); \\ p = 0.280 \\ AIC = 21.2 \\ p^* = 0.012 \end{array}$	$\begin{array}{c} 0.79 \ (-0.01, \ 1.58); \\ p = 0.052 \\ \hline -0.56 \ (-0.97, \ -0.16); \\ p = 0.006 \\ AIC = 12.5 \\ p^* = 0.007 \end{array}$	$\begin{array}{c} 0.30 \ (-0.53, \ 1.14) \\ p = 0.477 \\ \hline -0.23 \ (-1.01, \ 0.55) \\ p = 0.561 \\ AIC = 11.3 \\ p^* = 0.04 \end{array}$		
Restricted Cubic Splines Model ^d	Beta (95% CI); p-value Beta (95% CI); p-value AIC p-value*	$\begin{array}{c} \textbf{-0.29} \ (-0.39, -0.20); \\ p < 0.001 \\ 0.48 \ (0.18, 0.78); p = 0.002 \\ AIC = 42.3 \\ p^{*} < 0.001 \end{array}$	$\begin{array}{c} -0.14 \ (-0.34, \ 0.06), \\ p = 0.162 \\ -0.23 \ (-0.66, \ 0.20), \\ p = 0.295 \\ AIC = 16.9 \\ p^* = 0.009 \end{array}$	$\begin{array}{c} 1.15 \ (0.07, 2.22) \ p = 0.037 \\ \hline -1.20 \ (-2.03, -0.36) \\ p = 0.005 \\ AIC = 10.5 \\ p^* = 0.010 \end{array}$	$\begin{array}{c} 0.49 \ (-0.50, \ 1.47 \\ p = 0.334 \\ \hline -0.69 \ (-2.40, \ 1.02 \\ p = 0.428 \\ AIC = 10.2 \\ p^* = 0.05 \end{array}$		
Water Fluoride –	Low Risk-of-bias Stu	idies					
No. Studies/No. O	bservations	6/11	6/9	3/4	3/3		
Number of Children		4,355	4,251	921	879		
Linear model	Beta (95% CI) p-value	-0.19(-0.34, -0.05) p = 0.009	-0.22 (-0.36, -0.07) p = 0.003	-0.34(-0.72, 0.03) p = 0.070	-0.32(-0.91, 0.20) p = 0.276		
Linear model	AIC	p = 0.009 AIC = 10.3	p = 0.003 AIC = 3.9	p = 0.070 AIC = 4.5	p = 0.278 AIC = 4.1		

Exposure			Fluoride Ex	posure	
Analysis	Parameters	All data	<4 mg/L	<2 mg/L	<1.5 mg/L
Urinary Fluoride	- All Studies				
No. Studies/No. O	bservations	18/32	13/26	7/11	5/8
Number of Childre	en	8,502	6,885	4,654	3,992
	Beta (95% CI)	-0.16 (-0.24, -0.08)	-0.17 (-0.30, -0.05)	-0.06 (-0.14, 0.01)	-0.09 (-0.16, -0.01
Linear Model ^b	p-value	p < 0.001	p = 0.005	p = 0.094	p = 0.026
	AIC	AIC = 73.8	AIC = 68.0	AIC = 1.2	AIC= 2.8
	Beta (95% CI);		0.07 (-0.23, 0.38);	-0.22 (-0.65, 0.20);	0.65 (-1.46, 2.76);
	p-value	-0.10 (-0.31, 0.11); p = 0.360	p = 0.645	p = 0.303	p = 0.548
Quadratic	Beta (95% CI);	-0.01 (-0.05, 0.02); p = 0.496	-0.07 (-0.16, 0.01);	0.08 (-0.13, 0.30);	-0.66 (-2.11, 0.80)
Model ^c	p-value	AIC = 84.3	p = 0.071	p=0.456	p = 0.379
	AIC	p* = 0.14	AIC = 75.8	AIC = 9.2	AIC = 8.3
	p-value*		$p^* = 0.08$	$p^* = 0.42$	p* = 0.10
	Beta (95% CI);		-0.03 (-0.22, 0.16);	-0.14 (-0.32, 0.04);	-0.52 (-1.65, 0.62);
	p-value	-0.12 (-0.28, 0.04); p = 0.150	p = 0.741	p = 0.130	p = 0.371
Restricted Cubic	Beta (95% CI);	-0.10 (-0.43, 0.23); p = 0.545	-0.24 (-0.47, -0.002);	0.13 (-0.17, 0.43);	0.63 (-1.32, 2.59);
Splines Model ^d	p-value	AIC = 79.6	p = 0.048	p = 0.395	p = 0.524
	AIC	p* = 0.13	AIC = 73.3	AIC = 8.5	AIC = 6.7
	p-value*	-	p* = 0.07	p* = 0.37	p* = 0.07
Urinary Fluoride	– Sensitivity analysis	including Ibarluzea et al. (2021) ⁸⁷ Bayley MDI scores		
No. Studies/No. O	bservations	19/33	14/27	8/12	6/9
Number of Childre	en	8,815	7,445	4,967	4,305
	Beta (95% CI)	-0.15 (-0.23, -0.07)	-0.15 (-0.28, -0.03)	-0.04 (-0.14, 0.05)	-0.08 (-0.15, -0.003
Linear model	p-value	p < 0.001	p = 0.015	p = 0.371	p = 0.043
	AIC	AIC = 75.0	AIC = 69.0	AIC = 1.7	AIC = 3.6
Urinary Fluoride	– Sensitivity analysis	including Ibarluzea et al. (2021)87 McCarthy GCI scores		
No. Studies/No. O	bservations	19/33	14/27	8/12	6/9
Number of Childre	en	8,749	7,445	4,901	4,239

Exposure		Fluoride Exposure				
Analysis	Parameters	All data	<4 mg/L	<2 mg/L	<1.5 mg/L	
	Beta (95% CI)	-0.15 (-0.23, -0.07)	-0.16 (-0.28, -0.04)	-0.05 (-0.14, 0.04)	-0.08 (-0.16, -0.01)	
Linear model	p-value	p < 0.001	p = 0.011	p = 0.259	p = 0.036	
	AIC	AIC = 74.5	AIC = 68.6	AIC = 1.3	AIC = 3.0	
Urinary Fluoride – Low Risk-of-bias Studies						

No. Studies/No. Observations		9/15	9/15	5/8	4/7	
Number of Children		5,713	5,713	4,141	3,952	
	Beta (95% CI)	-0.10 (-0.21, 0.01)	-0.10 (-0.21, -0.01)	-0.05 (-0.17, 0.08)	-0.08 (-0.16, -0.01)	
Linear model	p-value	p = 0.082	p = 0.082	p = 0.472	p = 0.028	
	AIC	AIC = 5.9	AIC = 5.9	AIC = 2.8	AIC = 2.5	

Note: AIC = Akaike information criterion; SMD = standardized mean difference; p = p-value for effect estimate; p* = p-value for likelihood ratio tests; MDI = Mental Development Index; GCI = General Cognitive Index

*Parameter estimates are changes in SMDs (beta [95% CI]) based on the restricted maximum likelihood models; model fi ^bThe estimates represent change in SMD for the linear model and AIC, respectively.

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[BSC WG report pages 697-699]

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- 44 of 56 dose-response meta-analysis regression models found lower IQ as F increases
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						-

Notes: AIC = Akaike information criterion; SMD = standardized mean difference; p = p-value for effect estimate; p* = p-value for likelihood ratio tests; MDI = Mental Development Index; GCI = General Cognitive Index

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[BSC WG report pages 697-699]

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A majority of models have negative associations (IQ reduced as F increases), including a majority of models restricted to those studies with <1.5 mg/L

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Linear Model ^b	p-value	p < 0.001	p < 0.001	p = 0.274	p = 0.816	
	AIC	AIC = 53.8	AIC = 16.1	AIC = 11.8	AIC = 8.2	
Quadratic Model ^c	Beta (95% CI); p-value	-0.27 (-0.34, -0.21); p < 0.001	-0.12 (-0.35, 0.11); p = 0.318 -0.04 (-0.10, 0.03);	0.79 (-0.01, 1.58); p = 0.052 -0.56 (-0.97, -0.16);	0.30 (-0.53, 1.14) p = 0.477 -0.23 (-1.01, 0.55	
	Beta (95% CI); p-value	0.02 (0.01, 0.03); p < 0.001	-0.04 (-0.10, 0.03); p = 0.280	-0.56(-0.97, -0.16); p = 0.006	-0.23 (-1.01, 0.52) p = 0.561	
Widder	AIC	AIC = 48.8	AIC = 21.2	AIC = 12.5	AIC = 11.3	
	p-value*	p* < 0.001	$p^* = 0.012$	p* = 0.007	p* = 0.04	
Restricted Cubic Splines Model ^d	Beta (95% CI); p-value Beta (95% CI); p-value AIC p-value*	$\begin{array}{c} -0.29(-0.39,-0.20);\\ p<0.001\\ 0.48(0.18,0.78);p=0.002\\ AIC=42.3\\ p^*<0.001 \end{array}$	$\begin{array}{c} -0.14 & (-0.34, 0.06), \\ p = 0.162 \\ \hline \\ -0.23 & (-0.66, 0.20), \\ p = 0.295 \\ AIC = 16.9 \\ p^* = 0.009 \end{array}$	1.15 (0.07, 2.22) p = 0.037 -1.20 (-2.03, -0.36) p = 0.005 AIC = 10.5 $p^* = 0.010$	$\begin{array}{c} 0.49 \ (-0.50, 1.47 \\ p = 0.334 \\ \hline -0.69 \ (-2.40, 1.0) \\ p = 0.428 \\ AIC = 10.2 \\ p^* = 0.05 \end{array}$	
Water Fluoride -	Low Risk-of-bias Stu	dies				
No. Studies/No. Observations		6/11	6/9	3/4	3/3	
Number of Children		4,355	4,251	921	879	
	Beta (95% CI)	-0.19 (-0.34, -0.05)	-0.22 (-0.36, -0.07)	-0.34 (-0.72, 0.03)	-0.32 (-0.91, 0.2	
Linear model	p-value	p = 0.009	p = 0.003	p = 0.070	p = 0.276	
	AIC	AIC = 10.3	AIC = 3.9	AIC = 4.5	AIC = 4.1	

Exposure			Fluoride Ex	posure	
Analysis	Parameters	All data	<4 mg/L	<2 mg/L	<1.5 mg/L
Urinary Fluoride	- All Studies				
No. Studies/No. O	bservations	18/32	13/26	7/11	5/8
Number of Childre	en	8,502	6,885	4,654	3,992
	Beta (95% CI)	-0.16 (-0.24, -0.08)	-0.17 (-0.30, -0.05)	-0.06 (-0.14, 0.01)	-0.09 (-0.16, -0.01
Linear Model ^b	p-value	p < 0.001	p = 0.005	p = 0.094	p = 0.026
	AIC	AIC = 73.8	AIC = 68.0	AIC = 1.2	AIC= 2.8
	Beta (95% CI);		0.07 (-0.23, 0.38);	-0.22 (-0.65, 0.20);	0.65 (-1.46, 2.76)
	p-value	-0.10 (-0.31, 0.11); p = 0.360	p = 0.645	p = 0.303	p = 0.548
Quadratic	Beta (95% CI);	-0.01 (-0.05, 0.02); p = 0.496	-0.07 (-0.16, 0.01);	0.08 (-0.13, 0.30);	-0.66 (-2.11, 0.80)
Model ^c	p-value	AIC = 84.3	p = 0.071	p = 0.456	p = 0.379
	AIC	p* = 0.14	AIC = 75.8	AIC = 9.2	AIC = 8.3
	p-value*	-	$p^* = 0.08$	p* = 0.42	p* = 0.10
	Beta (95% CI);		-0.03 (-0.22, 0.16);	-0.14 (-0.32, 0.04);	-0.52 (-1.65, 0.62)
	p-value	-0.12 (-0.28, 0.04); p = 0.150	p = 0.741	p = 0.130	p = 0.371
Restricted Cubic	Beta (95% CI);	-0.10 (-0.43, 0.23); p = 0.545	-0.24 (-0.47, -0.002);	0.13 (-0.17, 0.43);	0.63 (-1.32, 2.59)
Splines Model ^d	p-value	AIC = 79.6	p = 0.048	p = 0.395	p = 0.524
	AIC	p* = 0.13	AIC = 73.3	AIC = 8.5	AIC = 6.7
	p-value*	-	p* = 0.07	p* = 0.37	p* = 0.07
Urinary Fluoride	- Sensitivity analysis	including Ibarluzea et al. (2021) ⁸⁷ Bayley MDI scores		
No. Studies/No. O	bservations	19/33	14/27	8/12	6/9
Number of Childre	en	8,815	7,445	4,967	4,305
	Beta (95% CI)	-0.15 (-0.23, -0.07)	-0.15 (-0.28, -0.03)	-0.04 (-0.14, 0.05)	-0.08 (-0.15, -0.00
Linear model	p-value	p < 0.001	p = 0.015	p = 0.371	p = 0.043
	AIC	AIC = 75.0	AIC = 69.0	AIC = 1.7	AIC = 3.6
Urinary Fluoride	– Sensitivity analysis	including Ibarluzea et al. (2021)87 McCarthy GCI scores		
No. Studies/No. O	bservations	19/33	14/27	8/12	6/9
Number of Childre	en	8,749	7,445	4,901	4,239

Exposure		Fluoride Exposure				
Analysis	Parameters	All data	<4 mg/L	<2 mg/L	<1.5 mg/L	
	Beta (95% CI)	-0.15 (-0.23, -0.07)	-0.16 (-0.28, -0.04)	-0.05 (-0.14, 0.04)	-0.08 (-0.16, -0.01)	
Linear model	p-value	p < 0.001	p = 0.011	p = 0.259	p = 0.036	
	AIC	AIC = 74.5	AIC = 68.6	AIC = 1.3	AIC = 3.0	
Urinary Fluoride	Urinary Fluoride - Low Risk-of-bias Studies					
No. Studies/No. C	bservations	9/15	9/15	5/8	4/7	
Number of Childr	en	5,713	5,713	4,141	3,952	

Number of Children		5,713	5,713	4,141	3,952	
	Beta (95% CI)	-0.10 (-0.21, 0.01)	-0.10 (-0.21, -0.01)	-0.05 (-0.17, 0.08)	-0.08 (-0.16, -0.01)	
Linear model	p-value	p = 0.082	p = 0.082	p = 0.472	p = 0.028	
	AIC	AIC = 5.9	AIC = 5.9	AIC = 2.8	AIC = 2.5	
Notes:						

AUC = Akaike information criterion; SMD = standardized mean difference; p = p-value for effect estimate; p* = p-value for likelihood ratio tests; MDI = Mental Development Index; GCI = General Cognitive Index

*Parameter estimates are changes in SMDs (beta [95% CI]) based on the restricted maximum likelihood models; model fit bThe estimates represent change in SMD for the linear model and AIC, respectively.

The estimates represent change in SMD for the linear model and AIC, respectively. The estimates represent change in SMD for the linear term, change in SMD for quadratic term, AIC, and p-values for likelihood ratio test versus linear model, respectively. Potentia

The estimates represent enange to our stream terms terms that are a stream of the quadratic term equal to zero. Paparture from a linear trend was assessed by testing the occilicient of the quadratic term equal to zero. The estimates represent change in SMD for the first spline term, change in SMD for the second spline term, AIC, and p-value for likelihood ratio test vs linear model, respectively.

stential departure from a linear trend was assessed by testing the coefficient of the second spline equal to zero.

[BSC WG report pages 697-699]

Fine highlighting on Beta coefficient indicates negative association between F and IQ.

Latest NTP 2022 meta-analysis

- 44 of 56 dose-response meta-analysis regression models found lower IQ as F increases
- 23 of 24 linear dose-response meta-analysis regression models found lower IQ as F increases

 9 of 14 dose-response meta-analysis regression models restricted to studies with <1.5 mg/L F found lower IQ as F increases

• 5 of 6 linear dose-response meta-analysis regression models restricted to studies with <1.5 mg/L F found lower IQ as F increases

A majority of models have negative associations (IQ reduced as F increases), including a majority of models restricted to those studies with <1.5 mg/L

Thus, no threshold is suggested