



*Sub-populations vulnerable to fluoride toxicity include pregnant women & their fetuses, bottle-fed babies & young children, ethnic & low income groups, the elderly and those in fragile health.*

August 30, 2019

To: Leadership at American, Canadian, Mexican & other Schools of Public Health and Schools of Nutrition; and the Health & Medicine Division at the U.S. National Academies of Sciences

Dear Deans & Directors,

In a July 2019 report to the City of Calgary, the *O'Brien Institute of Public Health* at the University of Calgary acknowledged the high quality science that has consistently found a prenatal dose-response pattern of life-long adverse effects from maternal ingestion of low doses of fluoride consistent with 'optimal' fluoridation programs. Although not quite a reversal of their policy of aggressively promoting fluoridation as a public health initiative, the *O'Brien Institute* advised that fluoridation policy decision making belongs to legislatures. They also advised monitoring 'the issue' of prenatal neurological harm.

In August 2019, the highest ranking pediatric journal in the world published yet another study from the *Maternal-Infant Research on Environmental Chemicals* (MIREC) project using Canadian data. The MIREC findings validate the findings of a series of similar high-quality longitudinal cohort studies of Mexican mother-child pairs. These recent Canadian and Mexican studies confirmed a pattern of significantly lowered IQ and increased risk of learning disabilities resulting from low fluoride doses during pregnancy. Studies in these series and other studies have also noted fluoride's impact on hormonal functioning. Therefore, whether from food or water, maternal doses of fluoride endorsed by fluoridation proponents poison babies' bodies and brains in the womb.

The Mexican studies are part of the *Early Life Exposures in Mexico to Environmental Toxicants* (ELEMENT) project. They were conducted by expert researchers at the University of Toronto, the University of Michigan and Harvard University in collaboration with the Mexican government. Another major 2017 report from expert researchers in South America took it a step further. They advised that Chilean national water and food fluoridation policies were ineffective in preventing dental decay and "pose risks of various diseases in the asthmatic-skeletal, neurological, endocrine and skin systems" that disproportionately affect infants, children and adolescents due to timing of exposure.

Studies from the United States validate that bottle-fed babies and toddlers living in optimally fluoridated American communities routinely exceed the upper tolerable limits (UL) set by the *Food & Nutrition Board* of the National Academies of Science in a controversial 1997 decision that included fluoride as a non-nutrient element on a nutrient chart because of claims of apparent dental benefit and the faulty assumption that there were no adverse health effects up to the politically determined UL.

The resource section of this letter contains the citations to these and other valid studies documenting a range of harm that disproportionately affects consumers based on race, genetics and status. Documented neurological harm is most evident in the very young and the elderly but is by no means the only ill effect from chronic low dose exposure to fluoride. Inflammatory, endocrine and renal diseases are also documented ill effects. Because of the disproportionate harm to Latinos, Indigenous Peoples and Blacks, fluoridation policy constitutes an environmental injustice as well as a medical assault and battery on vulnerable populations. On behalf of consumers who experience chronic disease, lifelong disability and premature death because of the hubris of authority intent on protecting its own professional image rather than public health, we say #WeToo.

**[We Too: Medical Assault & Battery](#)**

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The signatories of this statement along with thousands of other professionals are on record in their science-based opposition to fluoridation as a public harm policy. The politicized and immoral decision to fluoridate may rest with legislatures as noted by the *O'Brien Institute*, but those non-medical and non-scientific bodies are influenced by credentialed authorities in matters of nutrition and health.

It is time for Schools of Public Health, Schools of Nutrition, and credentialed individuals to go on record with statements of opposition to water and food fluoridation schemes as public harm policies. It is time to abandon misguided good intentions and dated dental dogma. It is time to take action based on evidence of harm. Failure to do so amounts to complicity in scientific fraud.

Respectfully,

Michael D. Kohn, JD - President, National Whistleblower Center  
Hardy Limeback, BSc, DDS, PhD - 2006 National Research Council on Fluoride in Drinking Water  
Stephanie Seneff, PhD - Senior Research Scientist, MIT  
Kilmer S. McCully, MD - former Chief of Pathology & Laboratory Medicine at VA, Boston HealthCare System  
Richard Shames, MD - Thyroid Health Specialist & Medical Author  
James Fredenberg, MD - Anesthesiologist  
Robert C. Dickson, MD, CCFP, FCFP - Founder of Safe Water Calgary  
David Egilman, MD, MPH - Clinical Professor at Alpert School of Medicine, Brown University  
Griffin Cole, DDS, NMD, MIAOMT - Clinical Instructor of Integrative Medicine & Dentistry  
Henry Rodriguez - League of United Latin American Citizens, Texas Chapter

att: references

prepared by: KSpencer

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## RESOURCES

### CANADIAN REFERENCES

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