

**A damning critique and analysis of the NHMRC's 2017 "Sham"
review of water fluoridation and appeal for Royal Commission Inquiry:**

**23 Reasons why Australia needs a Royal Commission
into the NHMRC's fraudulent fluoride review**

EXECUTIVE SUMMARY

August 3, 2017, was the deadline for very limited public comment on a [draft Public Statement on Water Fluoridation](#) by the Australian government's National Health and Medical Research Council (NHMRC). This Public Statement was drawn largely from these documents:

2017: National Health and Medical Research Council (NHMRC). [Information Paper - Water Fluoridation: dental and other human health outcomes](#). July.

2016: [Health Effects of Water Fluoridation: Technical Report](#). Report to the National Health and Medical Research Council (NHMRC), Canberra. By Jack B, Ayson M, Lewis S, Irving A, Agresta B, Ko H, Stoklosa A. August 24, 2016, (released in September). 322 pages.

2016: [Health Effects of Water Fluoridation: Evidence Evaluation Report](#). Report to the National Health and Medical Research Council (NHMRC), Canberra. By Jack B, Ayson M, Lewis S, Irving A, Agresta B, Ko H, Stoklosa A. August 24, 2016, (released in September). 284 pages.

On behalf of the Fluoride Action Network Australia, Merilyn Haines is calling for a Royal Commission to investigate the manner in which the Australian government's NHMRC conducted its review of the safety, effectiveness and ethics of Water Fluoridation.

Haines charges that a) the 2017 NHMRC review of water fluoridation was unprofessional, unscientific, biased, highly selective, deeply flawed and prevented meaningful scientific and public input and b) other NHMRC activities - outside this review (see items 12 and 21 below) - clearly demonstrate a bias of the NHMRC (a federal government agency) in favor of both promoting and defending the practice of water fluoridation - a long-standing government policy.

In examining the manner in which the panelists were selected, the way studies were selected and excluded, the very limited opportunities for public participation and independent scientific input, Haines argues that it is hard to come to any other conclusion than that this review was designed simply to defend a long-standing government policy and not to genuinely examine the science (or lack of science) on which it is based. This is not the first time this has happened.

The NHMRC produced a very poor review in 2007 which received extensive criticism from independent scientists. To produce an even more biased and restrictive review in 2016 is even more egregious in lieu of the new science published (or updated) since 2007.

For example, on effectiveness, the 2015 Cochrane review (a gold standard when it comes to meta-analysis of health issues) found little in the way of high quality studies to demonstrate the effectiveness of fluoridation. On safety, there have now been over 300 published animal and human studies indicating that fluoride is neurotoxic. This large body of evidence has been largely ignored in the 2017 NHMRC review, even though it is being currently scrutinized by the National Institute of Health Sciences (NIEHS) and the National Toxicology Program (NTP) in the USA.

In this analysis, 23 specific examples of NHMRC manipulations have been documented. Many of these by themselves should disqualify the NHMRC 2017 review from serious consideration, but in combination should question the very existence of the NHMRC as a body that can be relied upon by the public and decision-makers to provide objective analysis of government policy.

Here are the 23 examples:

The NHMRC,

1. Stacked the fluoride review committee with fluoridation lobbyists and advocates.
2. Broke a promise that it would include experts opposed to fluoridation.
3. Secretly commissioned a new study on dental effects (previously listed as “out of scope”), when the 2015 Cochrane Collaboration review didn’t deliver a convincing pro-fluoridation position.
4. First, misled about its knowledge of a new thyroid study (Peckham et al., 2015) and then dismissed its findings, reaching a biased and false position that there is no evidence that fluoride interferes with thyroid function.
5. Falsely claimed a low-quality IQ study (Broadbent et al, 2014) was a high-quality study.
6. Downplayed, dismissed or excluded most other IQ studies and evidence of fluoride’s neurotoxicity.
7. On flimsy grounds excluded a significant study linking fluoridation to ADHD (Malin and Till, 2015) – then failed to even acknowledge its existence.
8. In 2007, the NHMRC used a *promised* study in a Letter-to-the-Editor to negate an unrefuted Osteosarcoma study (Bassin, 2006) to claim there was no link to cancer. Then in its 2017 review the NHMRC failed to acknowledge that the promised study failed to refute the Bassin study but still continued to maintain no evidence of a link between fluoridation and cancer.
9. Selected a publication cut-off date for studies (that would be considered) that would exclude a very significant review by the US NRC (2006) and the Bassin (2006) study that were not given due consideration in its 2007 review.
10. The NHMRC 2017 review based its claims of safety largely on its 2007 review, however, its 2007 review was largely a copy of the 2000 York University review, which according to the York Review’s Professor Sheldon did NOT show fluoridation to be safe!
11. Obscured on chronic kidney disease even though it is aware that poor kidney function increases uptake of fluoride into the bones and poses risks over a lifetime. Such cumulative risks – and the special plight of those with poor kidney function –have never been investigated by NHMRC.
12. On another but related matter, the NHMRC endorsed doubling children’s upper safety limits for fluoride ingestion (using data from the 1930s) almost certainly anticipating that the pre-existing limits would be exceeded by bottle-fed infants in which formula is made up with fluoridated tap-water.
13. Abandoned the normal evaluation method for studies of fluoride’s effectiveness almost certainly in an effort to disguise the fact that most of the studies reviewed were of low, or very low quality.
14. NHMRC 2017 rates tooth decay and dental fluorosis as more important end-points than other health incomes, including cancer and lowered IQ.
15. Commenced review with strict restrictions for acceptable evidence, then included a) unpublished work; b) a favourable narrative and c) an abstract.
16. Attempted to diminish known dental fluorosis harm by manipulating fluorosis ratings and raising threshold of concern.
17. Misleads the public and decision-makers by claiming fluoridation reduces tooth decay by 26-44 % - but without indicating just how small such reductions are in absolute terms – often less than one tooth surface out of over 100 tooth surfaces in a child’s mouth!
18. Dishonestly claims fluoridation is safe by excluding important studies on spurious grounds, ignoring many others, and even cherry-picking weak studies that serve their purpose (e.g. Broadbent on IQ).

19. Doesn't exhibit an understanding of, or appreciate, the basic principles of toxicology – concentration is not the same as dose!

20. Perverted the principles of medical ethics by presenting a bogus ethical claim constructed by lobbyists rather than ethicists.

21. Gave an incomplete project of dubious quality a prestigious NHMRC award

22. NHMRC fluoridation public consultations have been shams.

23. The NHMRC's extraordinary effort to maintain the dubious claims that fluoridation is safe, effective and ethical, are becoming more and more desperate by the year. NHMRC 2007 was very bad, NHMRC 2017 verges on fraud.

Conclusions

The NHMRC has ignored its Duty of Care and betrayed the Australian public with its poor and perverted fluoride review. The NHMRC's fluoride review should be shredded.

We request that citizens and scientists from inside Australia and around the world will call for a Royal Commission inquiry to investigate the NHMRC's behavior in this matter. Hopefully they will call for a new review to be commissioned by the Federal government but carried out by an independent organization, with the panel comprised of unbiased scientists and professionals.

In terms of reviewing government policies in general, it is requested that the Royal Commission investigate the wisdom of using a government department such as NHMRC to review the science of controversial programs, when those programs have been part of long-standing government policy. Under such circumstances it is urged that the Royal Commission recommend such reviews be organized by a non-governmental agency. This agency would be required to select panels completely independent of governmental influence. Ideally such panels would consist of experts drawn from both sides of the issue in question, and those who have not taken a position on the issue: a good model would be the panel selected by the U.S. National Research Council for its review of fluoride's toxicity in 2006.