However unknowingly, I and other health professionals have contributed to the insidious poisoning of all of us. I feel obligated to reveal some of the research complied through the years on this vital matter.
Several years ago I discovered some fluoridation research data that had been omitted from my formal education. (1-6) As I studied the American Dental Association (ADA) and the United States Public Health Service (USPHS) data, I found that some serious errors and/or misinterpretations were made (intentionally) concerning the claimed value of artificially fluoridated water.

Clearly the data shows that fluoride does not reduce or prevent tooth decay whatsoever. Instead, it might temporarily delay the decay process by approximately two years and by about age 19 the decay rates are identical for fluoridated populations as compared to non-fluoridated populations. (7-9)

Based on the ADA and USPHS data the following are the reasons why I no longer recommend fluorides:

1. Fluoride is a powerful cellular enzyme poison and is hazardous to all living organisms, regardless of how large or small the ingested dose. Fluoride poisons certain critical enzyme functions within our body. These enzymes in our body control all the cellular respiration, reproduction, intestinal function, brain activity, and growth and development in children. (10-14)

2. The symptoms of chronic fluoride poisoning are diverse. They include numerous bodily ills such as back and joint stiffness, hearing and visual disturbances, heart, kidney, and allergy problems. Two conspicuous symptoms have been consistently linked to fluoride poisoning. One is bone damage which usually goes unnoticed. The other, the first visible symptom of fluoride poisoning, is mottled enamel. Mottling of the tooth enamel, sometimes called fluorosis, occurs when the cells responsible for tooth enamel formation are inhibited and/or killed by the ingested fluoride. When these cells are inhibited or killed, normal enamel formation is interfered with and when the tooth erupts, its surface can appear discolored (Mottled) and/or rough and pitted. A mottled tooth has areas of varying whiteness and is abnormally susceptible to staining. Mottling starts to occur when the concentration of fluoride in water reaches 0.1 part per million (ppm) and becomes more severe as the concentration increases. The USPHS recommends that water be fluoridated at a concentration of 1.0 ppm, a level ten times higher than the toxic baseline toxic dose for mottling to occur. (1,15-19)

3. The fluoride chemicals used for the artificial fluoridation of drinking water are quite different from the chemical calcium fluoride that is found in “naturally fluoridated water.” Calcium fluoride is a more chemically stable compound of fluoride. The fluoride chemicals used for artificial fluoridation of drinking water are unstable and highly reactive fluoride acid compounds. These acids are actually the industrial waste solutions from aluminum and fertilizer manufacturing. These fluoride waste solutions have been proven to be sixty times more toxic than naturally occurring calcium fluoride. (20-21)

4. Prior to 1950, the ADA, the USPHS, and the American Medical Association (AMA) were all strongly opposed to the human consumption of fluoride in any form or concentration. In 1950, the USPHS did a conspicuous about-face and began to strongly recommend the artificial fluoridation of public drinking water. (22-26)

5. A group of dentists, physicians and PhD’s who are keenly aware of this misleading fluoride endorsement for 20 plus years offered a reward for a copy of any USPHS study which documents fluoride to be safe, beneficial and of value as claimed by the USPHS. To date, no one has ever been able to find such a study. The amount of that reward stands at $ 100,000.00. (27)

6. The Vital Statistics of the United States documents that death rates in fluoridated populations consistently run 15 to 20 per cent higher than cancer death rates in non-fluoridated populations. (28-29)

In light of the above evidence, would you choose to have fluoride in your water?

**Why then is fluoride in our water?**
Mainly, it has to do with a business/political connection between the aluminum and fertilizer industry and certain governmental bureaucrats. The aluminum and fertilizer industry had a tremendous amount of highly acidic and toxic waste fluoride solutions left over from their manufacturing and there was absolutely no market for these waste fluoride solutions and they would have to find a way to neutralize and safely dispose of these toxic waste solutions... all at their expense. So existing scientific studies were either ignored or altered and new “studies” were scripted so the desired conclusion was determined first and then the study was carried out in such a way to achieve the previously determined desired result.

Corporate America and these bureaucrats then sufficiently wined-and-dined and influenced some senior dental officer in the USPHS to do an about face during the late 1940’s and early 1950’s. This arm-twisting then progressed to include the ADA and the AMA in endorsing the widespread use of fluoride.

I encourage you to study the research data listed in the bibliography and draw your own conclusion.

Also understand that when sufficient numbers of people become aware of this fluoride fraud, and when we then get these toxic waste fluorides chemicals out of our drinking water; we will be opening another can-of-worms. That’s because the fluoride that’s being added to our water supplies isn’t manufactured specifically for that purpose. The fluoride solutions used for the artificial fluoridation of drinking water are industrial waste solutions left over from aluminum and fertilizer manufacturing. These industries will no longer be able to get rid of these waste fluoride solutions this way and it is very costly to neutralize and properly dispose of these solutions. So even if we get these waste fluoride solutions out of our drinking water, we will still have a fluoride problem.

The evidence DEMANDS that a re-evaluation of this fluoride fraud needs to be done... immediately. I am recommending that the artificial fluoridation of drinking water be immediately ceased while that re-evaluation is being done.

Again, study the ADA and USPHS research data listed in the bibliography and draw your own conclusion.
2. Taylor, E., DDS, Preliminary Studies On Caries Immunity in The Deaf Smith County (Texas) Area, JADA 29:438, 03/42.
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21. Largent, E.J., FLUOROSIS, Book is available from the Huntington Beach Library, No 615.9, Fluorosis Section LAR.
22. RESOLUTIONS, # 11, Fluoridation of the Public Water Supplies, AJPH, 40:1587, 12/50.