

The Fluoridation Fraud

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Some little known facts published for the information of all who are concerned with what may well turn out to have been the greatest confidence trick of all time.

THERE can be no doubt that the *main* reason why artificial fluoridation has made such progress throughout the world during the last 25 years is that the wealthy vested interests which sponsored it in the first place have failed to give publicity to the views and opinions of those qualified physicians, dentists, chemists and scientists who were against the idea, while governments, including our own, have been persuaded to follow this policy of ignoring or suppressing all opinions which are against fluoridation.

If our Ministry of Health had given as much publicity to the views of those professional people throughout the world who have declared themselves to be doubtful about the effectiveness and safety of artificial fluoridation as they have given to arguments in favour of it, and had then left the public to decide whether or not they wanted to accept the risk involved, it is most doubtful whether fluoridation would have been accepted anywhere. Acceptance, where it has occurred, has been a result of misrepresentation rather than of anything else.

"Secret" Meeting

Perhaps the best illustration of the deception which has been practised by the proponents of fluoridation was provided at a "secret" meeting which was held on June 6, 1951, under the auspices of the *Fourth Annual Conference of State Dental Directors with The Public Health Service and The Children's Bureau* in the Federal Security Building, Washington, D.C. The main purpose of this meeting was to "educate" dentists in the "Promotion and Application of Water Fluoridation." The minutes of the meeting were confidential and were made available only to those State Dental Directors and others who were in attendance. These minutes disclosed how fluoridation could be promoted by clever double-talk and "bafflegab" and by with-holding from the public information which they have every right to be given.

According to the United States Public Health Service (US PHS - the equivalent of our Ministry of Health) the minutes of this meeting have since been destroyed and are not available. Efforts to get copies, even by Congressmen, have failed. It was not realized, however, that someone present had taken shorthand notes of the whole proceedings. The following are extracts from these notes of some of the statements made by Dr. Frank Bull, Director of Dental Education, State Board of Health, Madison, Wisconsin, who conducted the meeting and who was, in effect, the instructor on how fluoridation should be put across:

1. "... Of course we in Wisconsin (where they started promoting artificial fluoridation in 1945) have believed for a long time that this is one of the great all-time programs. *I hope* we are right ..."
2. "... I think the first objection that is brought up is: 'Isn't fluoride the thing that causes mottled enamel or fluorosis? Are you trying to sell us on the idea of putting that sort of thing in the water?'
"What is your answer? You have got to have an answer, and it had better be good. You know, in all public health work it seems to be quite easy to take the negative. They have you on the defensive all the time, and you have to be ready with answers."

"Now, tell them this, that at one part per million dental fluorosis brings about the most beautiful looking teeth that anyone ever had. And we show them pictures of such teeth. We don't try to say that there is no such thing as fluorosis even at 1.2 parts per million, which we are recommending. But you have got to have an answer. Maybe you have a better one."

3. "... Incidentally, we never had any 'experiments' in Wisconsin. To take a city of 100,000 and say, 'We are going to experiment on you, and if you survive we will learn something' - that is kind of rough treatment on the public. In Wisconsin, we set up demonstrations. They weren't experiments. Anyway, there has been enough experience now to show that it doesn't make any difference whether nature puts the fluoride in the water or we do."
4. "Now, in regard to toxicity - I noticed that Dr. Bain used the term 'adding sodium fluoride'. We never do that. That is rat poison. You add fluorides. Never mind that sodium fluoride business, because in most instances we are not adding sodium fluoride anyhow. All of those things give the opposition something to pick at, and they have got enough to pick at without our giving them any more."

"But this toxicity question is a difficult one. I can't give you the answer on it. After all, you know fluoridated water isn't toxic but when the other fellow says it is, it is difficult to answer him. I can prove to you that we don't know the answer to that one, because we had a city of 18,000 people which was fluoridating its water for six to eight months. Then a campaign was started by organized opposition on the grounds of toxicity. It ended up in a referendum and they threw out fluoridation. So I would hate to give you any advice on that deal. It's tough."

"... when you get the answer on the question of toxicity, please write me at once, because I would like to know. We have answers, but apparently in some places they don't work."

5. "One thing that is a little hard to handle is the charge that fluoridation is not needed. They (the opponents of fluoridation) talk of other methods, and when they get through adding up all the percentages of decay that we can reduce by such methods, we end up in a minus. When they take us at our own word they make awful liars out of us."
6. "... We have told the public it works, so we can't go back on that..."
7. "... the state committee and the state director can do a lot before medical groups. I suppose we have appeared before every medical society in the State of Wisconsin. Now the local man generally isn't in a position to do that. He is afraid that when he gets up before the medical fellows, they will have a lot more knowledge about things than he has... and let me tell you this: The medical audience is the easiest audience in the world to present this thing to. They are used to carrying on public health activities. This worry about toxicity doesn't mean much to them because of all the human experience we have had."
8. "Now let's get into a couple of don'ts. We have had a little experience on some things to avoid. Don't use the word 'artificial', and don't use sodium fluoride. You don't know what a community is going to end up using as its fluoriding agent. But don't let them raise the question of rat poison if you can help it. And certainly don't use the word 'experimental'."
9. "If it is a fact that some individuals are against fluoridation, you have just got to knock their objections down. The

question of toxicity is on the same order. Layoff it altogether. Just pass it over - 'We know there is absolutely no effect other than reducing tooth decay,' you say, and go on. If it becomes an issue, then you will have to take it over, but don't bring it up yourself."

10. "If you can - I say if you can, because five times we have not been able to do it - keep fluoridation from going to a referendum."
11. "The biggest difficulty with this, and the biggest drawback, and the most obvious reason for criticism, is the lack of data. Of course, we are all working to get more data. These show that as the temperature rises, the fluorosis experience increases with the same fluoride concentration in the water. The criterion that we have been using is that if there is some 10 to 20 per cent fluorosis in the community, that would not be objectionable, because in those places the degree of intensity is not greater than the accepted designation of mild."

The following paragraph, including the sentence in brackets, is from *Magnesium Deficiency and Fluorine* (revised January, 1967) by Dr. Robert C. Olney, M.D., of Lincoln, Nebraska. It lends support to the facts set out in the foregoing report:

"The teeth, including the enamel, are living tissues and are nourished by metabolic processes throughout the life of the individual. When fluorine replaces the 'hydroxyl' in the enamel, the enamel becomes a chalky dead substance instead of a living tissue. Fluorine causes calcific plugs in the pulp, thus devitalizing the teeth. Deterioration, decay and periodontal diseases are increased, and the real damage shows up in middle life. (Grand Rapids, Michigan, after years of fluoridation, has 77% more dentists with 8.5% increase in population.) It is unbelievable and incredible, but many of our dental colleges are teaching our young dentists that the enamel of the teeth is an inorganic dead substance instead of a living tissue."

Surely this is the first time in history that those who are responsible for the conduct of public affairs have joined forces with the medical or dental profession in what can only be described as a slick, high-pressure sales campaign to promote the acceptance of a product which would not be accepted if all the facts about it were made public. Such a state of affairs indicates either corruption or stupidity somewhere. It certainly indicates danger.



Most thinking people agree that one of the greatest dangers facing Britain today is the attack by the totalitarian mentality on the rights and freedom of the individual. Fluoridation is regarded by many as an outstanding example of this attack. The fact that it was launched to promote the private interests of some of the most powerful business organisations in the world makes it doubly dangerous. The above cartoons help to illustrate the history and promotion of fluoridation.

The first cartoon explains how fluoridation started and accounts for the quite fanatical zeal with which it has been promoted for more than a quarter of a century. Stocks of waste products containing highly poisonous fluorides had been steadily mounting in the United States. How to get rid of these had become a major problem. "Put the stuff into public water supplies to prevent tooth decay in children," suggested a chemist - one G. J. Cox - who had been commissioned to find a way of solving the problem as well as of lessening tooth decay in children without restricting their consumption of sugar products. So started fluoridation.

But getting people to accept this strange experiment of adding a well-known cumulative poison to public water supplies was easier said than done. The second and third cartoons help to illustrate the policy finally adopted by the original promoters of fluoridation.

First the idea was given the appearance of being a long step forward in the field of medicine and one that would appeal to the natural instinct of all decent people to

support any idea alleged to prevent suffering in children. Next, doctors, dentists and scientists were persuaded to endorse the original fluoridation thesis. Finally, the United States Public Health Service was persuaded to support the idea "in the public interest."

Having thus created a powerful pressure group of professional people and politicians, the band wagon was launched and other governments were persuaded to follow the American example. Local pressure groups were then started all over the world. Their object? To act as sounding boards for fluoridation propaganda in order to persuade members of local councils to vote in favour of compulsory mass medication in the form of fluoridation - to vote, that is, in favour of depriving *all* consumers of public water of their basic right to receive water which has been treated to make it safe and potable (drinkable), but which has NOT been tampered with for any other purpose such as to influence the development or functioning of the human body or mind.

Send copies of this pamphlet to councillors and other influential people in your locality...

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* The "London (or National) Anti-Fluoridation Campaign" no longer exists. Instead, refer to the National Pure Water Association (NPWA) in the UK, which carries on the mission of informing people on fluoridation matters. See website: www.npwa.org.uk