Editorial

More on Fluoride, Mercury and Teeth

Can you recall controversies as widespread as those generated by the addition of fluoride to water and the use of mercury in amalgams in our teeth? The medical and dental professions have been on the side of using these toxic elements, claiming that as used they are not toxic. For years they have labelled opponents of the use of these elements as quacks and as being unscientific. The war has suddenly become intensified following new information recently made available.

The fluoride debate is considered in *Science*, January 19, 1990. *Science* reported that an animal study directed by the U.S. National Toxicology Program (NTP) showed that fluoride was carcinogenic for rats. Last August, an official from Environmental Protection Agency noted, "Very preliminary data indicates that fluoride may be a carcinogen."

*Newsweek*, February 5, 1990, states, "This week NTP plans to release data showing that lab rats given fluoridated water had a higher rate of rare bone cancer called osteosarcoma. Rats who did not receive fluoride did not develop cancer. The more fluoride, the higher the incidence."

This vindicates the claims made by Dr. John A. Yiamouyiannis many years ago. He also analyzed a massive amount of data gathered by the National Institute of Dental Research (NIDR) of the United States Public Health Service. The study was released June 21, 1988, but NIDR had not released the following data. This was extracted by Dr. Yiamouyiannis and his staff. The study had cost $3,670,000 to examine 39,207 school children ages 5-17 years in eighty-four different geographical areas.

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<thead>
<tr>
<th></th>
<th>N</th>
<th>DMFT</th>
<th>Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fluoridated areas</td>
<td>28</td>
<td>2.0</td>
<td>34%</td>
</tr>
<tr>
<td>Non-fluoridated areas</td>
<td>29</td>
<td>2.0</td>
<td>35%</td>
</tr>
<tr>
<td>Partially fluoridated areas</td>
<td>27</td>
<td>2.2</td>
<td>31%</td>
</tr>
</tbody>
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DMFT = Decayed, missing and filled permanent teeth.

This data shows fluoridation had no significant effect on children's teeth.

These recent studies showing fluoride is carcinogenic (toxic) and non-therapeutic when added to water provides support to the "unscientific" views of fluoride opponents. Perhaps within another generation unfluoridated water will become available again in U.S.A. and Canada in every municipal water system.

The mercury amalgam proponents are also on the defensive. Recently Hahn, L.J.; Kloiber, R.; Vimy, M.J.; Takahashi, Y. and Lorscheider, F.L. in the *Journal of the Federation of American Societies for Experimental Biology*, 3,2641-2645, 1989, studied the release of mercury from amalgams in an adult sheep. They place radioactive mercury in a sheep's teeth and studied what happened to it. After twenty-nine days, mercury was found in lung, gastrointestinal tissue and jaw. This finding proves the traditional view of dentists is wrong. The mercury in a dental amalgam does not lie quietly in the amalgam. It is rapidly absorbed after it is released as vapour into the mouth. Chewing and brushing increase the release of mercury. They conclude, "Our laboratory findings in this investigation are at variance with the anecdotal opinion of the dental profession, which claims that amalgam tooth fillings are safe. Experimental evidence in support of amalgam safety is at best tenuous."


Evidence is accumulating that not adding fluoride to water and not adding mercury to human mouths will greatly enhance the health of our people. Their omission will be beneficial.

The controversies are growing. I think the debate is almost won and will soon be
followed by concerted public health action.

**Literature Cited**


**Alaska's Bill 146**

For the past twenty-five years, medical disciplinary boards and colleges of physicians and surgeons have suppressed the growth of treatments they consider unconventional or experimental. Doctors found to be using these treatments have been punished — up to and including loss of licence to practise. The main issue has been the unconventionality of the treatment, not its efficacy or toxicity. When charged, the onus has been on the physician to prove that what s/he was doing was safe and effective. This gave these controlling bodies immense power and created fear in the practitioners — enough to keep them in line. It was worse than the power of excommunication. As far as I know, these groups never examined patients to find out if they were better or whether they had been harmed. Several of my colleagues lost their licences to practise on the basis of these charges.

In the state of Alaska, this has been changed. On June 14, 1990, the governor of Alaska signed House Bill 146 into law. The amendment to the bill reads, "The (disciplinary) board may not base a finding of professional incompetence solely on the basis that a licensee's practice is unconventional or experimental in the absence of demonstrable physical harm to the patient."

Alaska has given back to physicians the right to practise medicine using treatments they consider therapeutic which do no harm. Orthomolecular medicine falls into this group. At last, physicians in Alaska can use nutrition and supplements without fear they will be harassed or lose their medical licence. Alaska is the first — which state or province will follow?

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