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Fluoride Report Softened

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IN HIS OPENING REMARKS to the U.S. Surgeon General's ad-hoc committee on the health effects of fluoride, Robert Mecklenburgh, D.D.S., then Chief Dental Officer, U.S. Public Health Service, stated: "There isn't any group in the U.S. better qualified to come up with a recommendation than the group that is around this table today. It would be hard to refute or overwhelm what this committee in its judgment decides."

Indeed, it did require a group with equally high qualifications to refute and overwhelm the committee's decisions—namely, the committee itself. Between the draft report that was circulated among members for review and the final report that was

presented to Surgeon General C. Everett Koop, M.D., the committee's most significant conclusions and recommendations were eviscerated.

For example, the draft report stated: "The committee concluded that the fluoride content of drinking water *should be* [emphasis added] no greater than 1.4-2.4 ppm for children up to and including age 9 . . . because of a lack of information regarding fluoride effect on the skeleton in children (to age 9) over 3 ppm, and potential cardiotoxic effects at that level." (Ingested fluoride forms calcified deposits in the aorta, the report noted.) As for dental fluorosis, "There was a consensus that mottling or pitting of teeth could represent as yet unknown skeletal effects in

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Teeth Removed from Draft of '83 Fluoride Report

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children and that severe dental fluorosis per se constitutes an adverse health effect that should be prevented." Additionally, the draft noted that "there was some sentiment (especially among the pediatricians) in the committee that the age limit for children . . . should be as high as 18 years because of continued rapid bone development between ages 8 and 18."

This draft version accurately reflects the votes and conclusions of the committee.

as documented in the transcript of its meeting. But in the final report that was sent to the Surgeon General, the recommendation has been changed to read: "It is *inadvisable* [emphasis added] for the fluoride content of drinking water to be greater than . . . 1.4-2.4 ppm for children up to age 9." This phrasing made the recommendation optional.

Moreover, the only reason given in the final report for even suggesting a lower level for children was "in order to avoid the *uncosmetic* [emphasis added] effects of dental fluorosis." Vanished from the conclusions were the committee's concerns about skeletal and cardiotoxic effects over 3 ppm, its consensus that dental fluorosis was an adverse health effect, and the sentiment for a higher cutoff age.

In their place was this statement: "There exists no directly applicable scientific documentation of adverse medical effects at levels of fluoride below 8 mg/l (ppm). Therefore, it can be concluded that four times optimum in U.S. drinking water supplies [2.4-4.8 ppm] is a level that would provide no known or anticipated

adverse effect with a margin of safety."

The committee chairman, Jay R. Shapiro, M.D., declined to comment on these disparities.

In a January 1984 letter to the Environmental Protection Agency (EPA, which had requested the review), Surgeon General Koop set forth his summary conclusions based on the committee's final report: "My [1982] recommendations about the advisability of limiting fluoride concentrations to twice the optimum [1.4-2.4 ppm] in order to avoid unsightly dental fluorosis still pertain. At the same time, based on current scientific evidence, there is essentially no likelihood of even non-adverse medical effects where drinking water supplies contain up to four times the optimum [2.8-4.8 ppm] concentration of fluoride."

These two sentences constituted the sole residual force of the committee's original recommendations and conclusions. Subsequently, EPA raised the permissible level of fluoride in drinking water to 4 ppm for all members of the population, according to Joseph Cotruvo, Ph.D., director of the Criteria and Standards Division, Office of Drinking Water, EPA.

Fluoridation Growth, by Population

United States 1945 - 1985

