

FLUORIDATION

A Study In The Usurpation Of Power

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THE idea of adding fluorides to public water supplies as a means of making teeth less susceptible to dental decay appears to have originated in the United States where it has been actively promoted at great expense by the Public Health Service.

So far as is known there is no evidence that fluorides in water are essential for the human body. It is well known that most human beings have had excellent teeth up to the time when sugar, biscuits and other refined carbohydrates began to be consumed in large quantities. It is also well known that wrong habits of diet have their effects upon other parts of the body as well as upon the teeth.

At the time when the U.S.P.H.S. embarked on their campaign, they knew that the use of water containing fluorides caused injury to the teeth (commonly called mottling) which could develop into disfiguring blemishes. They were in fact engaged in promoting the elimination of fluorides from water supplies where these were naturally present. This is, however, somewhat difficult, short of developing a new water supply, and it was decided that a tolerable maximum was 1 ppm (part per million). Hence, when the idea of adding fluorides to public water supplies was mooted, it was obviously impossible to advocate any greater concentration than 1 ppm.

It was also recognised that fluoridation was an entirely unprecedented measure, and a number of experiments were instituted in the U.S.A. which were planned to run for ten years. This was not too long a period in which to ascertain the cumulative effects of small doses of a known poison. No one appears to have given any attention to the principle that experimenting upon human beings without their consent is immoral, and that it had been laid down as a cardinal principle at the Nuremberg trials that not only was the full knowledge and consent of the subject of the experiment essential but that he must be able to withdraw from the experiment at any time. These principles have been reaffirmed in a draft code of ethics issued recently by the World Medical Association.

After these experiments had been going on for about five years, reports were issued claiming a reduction in dental decay of as much as 50 or 60 per cent. in children. (The advocates of fluoridation have never claimed that it can do teeth any good once they have been formed.) No investigation was made to discover what other effects fluorides might have on the health of people in the experimental areas.

At this stage caution was thrown to the winds. An all-out campaign for fluoridation was developed by means of pressure groups and many municipalities were persuaded to adopt it by administrative action. Where vigilant people discovered this and had the matter put to a popular vote, the fluoridators were generally not very successful.

At this stage our own Ministry of Health sent a mission to North America which apparently made contact only with advocates of fluoridation, and not with opponents. The Mission reported favourably in 1953, but recommended studies (the word experiment had become taboo) to be made here.

Several local authorities refused, but four were persuaded. In one of these, Andover, at successive elections the advocates of this plan were defeated until a majority against it rescinded the decision. After some five years a report entitled "The Conduct of the Fluoridation Studies in the United Kingdom and the results achieved after Five Years" was published in 1962. This claimed a reduction in the number of carious teeth per child ranging from 64 per cent. at age three to 11 per cent. at age seven. This relates only to the deciduous or milk teeth. The fate of the permanent teeth still remains to be discovered.

Once more the American pattern was repeated. Caution was thrown to the winds, and the experiments were said to justify the universal application of fluoridation.

Although the U.K. Mission had advised that full dental and medical examinations should be made at all ages, this was not carried out. Fluoridation was declared to be perfectly safe, because no doctors in the experimental areas had reported any ill effects. It would be surprising if there were a single doctor in any of the areas who even knew the symptoms of chronic fluorine poisoning (if they had had time to show themselves). A further endeavour was made to prove the safety of fluoridation by quoting some American statistics which had long since been subjected to a critical analysis showing that they were unreliable

and misleading, by denigrating the clinical research of competent medical men, and by suppressing all mention of significant observations made over many years in various parts of the world showing that the long continued ingestion of water containing fluoride in small amounts comparable to those advocated had produced serious and irreparable injury.

The Minister of Health (Mr. Enoch Powell) announced on 10th December, 1962 that he would be willing to approve schemes submitted by local health authorities (i.e. counties and county boroughs) under section 28 of the National Health Service Act, 1946, which empowers him to approve "arrangements for the prevention of illness." It is unlikely that Parliament would have passed this Act if it had thought that thereby the Minister could authorise the forcible administration of drugs to the whole population. Moreover as fluoride is not expected to act on the teeth of those over eight or nine years of age, it is hard to believe that compulsory administration of a drug to the rest of the population is an "arrangement for the prevention of sickness."

Still less does it appear to be legal for water supply authorities (who in most cases are not health authorities) to add drugs to water when they are under a statutory duty to afford a pure and wholesome supply of water.

In reply to a question on this point the Parliamentary Secretary (Lord Newton) said that if legal proceedings were taken the Minister would indemnify both the local health authority and the water undertaker. Thus a new doctrine of public policy emerges, namely that the Minister may invite people to risk breaking the law and promise to indemnify them if they do.

In both Houses the point was made by Ministers that some places had natural fluorides in the water supplies, and it was inferred that this was a ground for adding artificial fluorides to water everywhere. It might just as well be said that if some water supplies have radio-active material in them, this is a reason for adding it to the rest.

So far as I am aware the only case in which the legislature of this country has authorised compulsory mass medication was by the vaccination acts. These aroused increasing opposition until a wide loophole for escape was opened on the ground of conscientious objection, and ultimately the compulsory provisions were repealed. For many years opponents pointed out that many more infants were dying from the effects of vaccination than from smallpox. Now, after some two centuries of vaccination, it is officially admitted that vaccination of infants under one year of age is not desirable.

Such is the fallibility of official medical opinion. The question may be asked why has fluoridation gained acceptance to a certain extent especially in North America. The answer is simple: by constant appeal to opinions which are said to be authoritative or expert. But no opinion is of any value unless it is based upon adequate knowledge of the relevant facts, and upon the ability to evaluate them.

Great play has been made of the endorsements of bodies such as the American Medical Association, the World

Health Organisation and in this country the Medical Research Council. We know, however, that the approval of the American Medical Association in 1951 was given without any discussion or any facts for or against being put before the delegates on a resolution which went through one of its committees at the instance of two state health officers. Ever since then the AMA's officers have been busy explaining to anxious enquirers that it does not engage in the approval, endorsement, guarantee, or acceptance of any food or drug, but that this does not conflict with its statement on fluoridation.

The Expert Committee of the World Health Organisation said that "hundreds of controlled fluoridation programmes are now in operation in many countries. Some have been in progress for the past twelve years, so that conclusions are based on experience." The use of the word "controlled" implies that these were scientific experiments in which there were comparisons between fluoridated areas and control areas. Instead of hundreds there had been hardly half-a-dozen, and the results from these were subjected to severe criticism on scientific and statistical grounds (*Fluoridation: Errors and Omissions in Experimental Trials*. P. R. N. Sutton, D.D.S., Cambridge University Press.)

The British Medical Research Council issued an endorsement of fluoridation, although the only research which it had conducted was in 1948 on *Industrial Fluorosis: A Study of the Hazard to Man and Animals near Fort William, Scotland* (as a result of the smelting of aluminium), and that research certainly did not warrant any sweeping statements about the safety of fluoridation or its benefits to teeth.

The "studies" conducted in this country were, in the words of the Central Health Service Council of the Ministry of Health, intended to be "demonstrations" that fluoridation was good for teeth, for the Standing Dental Advisory Committee had already come to the conclusion in 1953 that "there is no scientific or medical evidence available which suggests that there is any risk in drinking water containing fluoride in that concentration." This had to be said, as experiment on human beings without their consent is both immoral and illegal, and having been said the probability of a subsequent admission that this was a mistake was minimal. Nevertheless there was then evidence of risk and more evidence has since accumulated. Hence the insistent question: why were not the facts for and against put before the public simply and clearly?

Expensive Space—(5)

A THREE-QUARTERS of an acre site bounded by Crutched Friars, Pepys Street and Savage Gardens in the City of London has been sold for £1,400,000. A block of offices to be erected on the site is to cost £700,000—from the *Evening Standard*, January 24.