March 19, 2025

Tewksbury Board of Health
1009 Main Street
Tewksbury, MA 01876
Attn: Melissa Braga, Chair

Re: Fluoride

Dear Ms. Braga,

I am writing to you and all members of the Board of Health regarding the recent meeting on the topic of fluoride in our town drinking water. I strongly oppose town-wide fluoridation on three principles: the right to bodily autonomy, the fact that no ingestible medical treatment can be deemed one-hundred percent safe for all consumers, and there is a long history and countless examples of pharmaceuticals that have been removed from the market due to a wide range of adverse effects that were once deemed, "safe and effective."

First, the FDA has classified fluoride as a medical treatment, or drug. Given this classification, Tewksbury community members are receiving medical treatment without proper informed consent. Not only are there several reasons why this is unethical, but most people do not know that fluoride has this classification, nor have they been privy to the potential dangers of this drug. Following is a list of related issues with mass medicating the families of Tewksbury:

1. By fluoridating our town's water supply we are allowing local government bodies to force people to ingest a drug without consent. This is a practice that doctors cannot force on individual patients, therefore local governments should live by the same ethical principles. Whether fluoride is classified as a drug or not, no one should be forced to ingest anything against their will. If is it a criminal act for an individual to add a drug to another individual's drink at a bar, how is it not a criminal act to force fluoridation on a whole community of people?

2. The dose cannot be controlled, particularly considering that people ingest fluoride from many other sources, including dental products and treatments, and food and drinks that are processed using fluoridated water. Lastly, some people drink considerably more water than others, for example, athletes, people with kidney disease, those receiving chemotherapy, as well as babies, a majority of whose diets consist of formula made with fluoridated water for a year or more of the precious first year of their lives. The worst effect that this has is that fluoride accumulates in the body over time and young children's bodies absorb a larger amount (roughly 80% according to Ekstrand, J. et al, 1994) into their bones than adults do.

Second, no ingestible medical treatment can be deemed one-hundred percent safe for all consumers. Everything from pharmaceutical drugs to vaccines have been labeled “safe and effective” these days; many without proper randomized controlled trials to prove their effectiveness nor their safety. How many times have drugs been taken off the market after causing a high number of adverse effects; at times having severe health implications and even death to consumers? To follow are just a few examples of such drugs.

Medications that were initially approved as safe, but later pulled from the market due to serious side effects.

Pain Relievers & Anti-Inflammatory Drugs

1. **Vioxx (Rofecoxib)** – Withdrawn in 2004 due to an increased risk of heart attacks and strokes.
2. **Bextra (Valdecoxib)** – Pulled in 2005 for similar cardiovascular risks and severe skin reactions.
3. **Duract (Bromfenac)** – Withdrawn in 1998 due to life-threatening liver failure.

Weight Loss & Appetite Suppressants

4. **Fen-Phen (Fenfluramine & Phentermine)** – Fenfluramine was withdrawn in 1997 after being linked to heart valve damage.
5. **Meridia (Sibutramine)** – Pulled in 2010 due to cardiovascular risks.

Cold & Allergy Medications

6. **Phenylpropanolamine (PPA)** – Found in decongestants and weight loss pills, removed in 2000 due to increased risk of hemorrhagic stroke.
7. **Seldane (Terfenadine)** – A popular antihistamine, withdrawn in 1997 due to dangerous heart rhythm disturbances.

Diabetes Medications

8. **Rezulin (Troglitazone)** – Used for Type 2 diabetes but pulled in 2000 due to severe liver toxicity.
9. **Avandia (Rosiglitazone)** – Restricted in 2010 due to cardiovascular risks, though later re-approved with limitations.

Heart & Blood Pressure Medications

10. **Posicor (Mibefradil)** – Pulled in 1998 due to life-threatening interactions with other medications.
11. **Omniflox (Temafloxacin)** – An antibiotic withdrawn in 1992 for causing hemolytic anemia and kidney failure.

Gastrointestinal Medications

12. **Propulsid (Cisapride)** – Used for GERD but removed in 2000 due to fatal heart arrhythmias.

Psychiatric & Neurological Drugs

13. **Pondimin (Fenfluramine, part of Fen-Phen)** – Pulled in 1997 for causing heart and lung issues.
14. **Serzone (Nefazodone)** – Antidepressant withdrawn in 2004 due to severe liver failure.

Antibiotics & Anti-Infectives

15. **Raxar (Grepafloxacin)** – An antibiotic withdrawn in 1999 for causing deadly heart arrhythmias.
16. **Trovan (Trovafloxacin)** – Pulled in 2001 due to liver toxicity concerns.

The following medications were initially pulled from the market due to safety concerns but later rebranded or reintroduced under a different name, sometimes with modified formulations or new restrictions. Here are a few notable examples:

Medications Rebranded or Reintroduced Under New Names

1. **Thalidomide → Thalomid**
    - Originally marketed in the 1950s as a sedative and treatment for morning sickness, it was withdrawn due to severe birth defects.
    - Later reintroduced as **Thalomid** for leprosy and multiple myeloma under strict controls.
2. **Accutane (Isotretinoin) → Absorica, Claravis, Amnesteem**
    - Pulled from the market due to birth defect risks and psychiatric side effects.
    - Reintroduced under different names with enhanced warnings and monitoring programs.
3. **Lotronex (Alosetron) → Reintroduced as Lotronex**
    - Withdrawn in 2000 due to severe gastrointestinal side effects.
    - Reintroduced in 2002 with restrictions for treating severe irritable bowel syndrome (IBS) in women.
4. **Redux (Dexfenfluramine) → Removed but similar drugs resurfaced**
    - Part of the **Fen-Phen** weight loss combination, pulled in 1997 due to heart valve damage.

    - While Redux itself was not rebranded, related drugs like **Qsymia (Phentermine/Topiramate)** emerged as weight-loss alternatives.
5. **Baycol (Cerivastatin) → No direct rebranding, but related drugs stayed**
    - Withdrawn in 2001 due to severe muscle damage and kidney failure risks.
    - While Baycol was not reintroduced, similar statins (like Crestor and Lipitor) remained available with increased warnings.
6. **Trovan (Trovafloxacin) → Similar Fluoroquinolones Remain**
    - Pulled in 2001 due to liver toxicity, but other fluoroquinolones like **Levaquin (Levofloxacin)** remained on the market.
7. **Meridia (Sibutramine) → Related Drugs Rebranded**
    - Pulled in 2010 due to cardiovascular risks.
    - **Contrave (Bupropion/Naltrexone)** and **Qsymia** were introduced later as alternative weight-loss medications.

With countries and/or states putting a pause on further administration of mRNA Covid vaccines due to the fact that it causes myocarditis, pericarditis, and even debilitating neurological side effects, these vaccines were consistently deemed “safe and effective” since their roll-out in December, 2020. This falsehood continues to this day, despite the mounting evidence over the last four years that proves otherwise. Endorsements from those who profit most from big pharma do not equate to scientific evidence that a drug is “safe and effective.”

Lastly, because of the wide-reaching influence that pharmaceutical companies have not only on educational programs in the field of medicine, but also medical boards, medical practitioners and politicians, it would be impractical at best to believe that fluoride is safe and effective for all consumers. It would be pointless for anyone with an opposing viewpoint to cite studies in support of mass-fluoridating our water supply, as they are often heavily tainted by those with the power and money to game a broken system. With pharmaceutical companies raking in BILLIONS of dollars annually, how can one determine whether they truly have people’s health and well-being at the heart of their work?

Although there are so many other points that I could make, it is largely for the reasons stated above that I am in support of terminating the mass-medication program of Tewksbury residents against their will via the fluoridation of our community water supply.

With gratitude,

Heidi Bisso
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Tewksbury, MA 01876