

## Alexandra Lowder

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**Subject:** RE: Please end fluoridation

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**From:** Rick North <[hrnorth@hevanet.com](mailto:hrnorth@hevanet.com)>  
**Sent:** Thursday, April 3, 2025 2:27 PM  
**To:** Melissa Braga <[MBraga@tewksbury-ma.gov](mailto:MBraga@tewksbury-ma.gov)>  
**Subject:** Please end fluoridation

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Ms. Braga – Please pass this along to the other Board of Health members.

I'm writing to ask you to end water fluoridation in Tewksbury. I very much support your stance that every resident of Tewksbury should have the right of informed consent on whether to ingest a drug or not. Fluoridation takes away that right, especially for low-income families that can't afford bottled water or an expensive filter to avoid it.

My background is in non-profit health management. I worked 21 years for the American Cancer Society, the last five as CEO of the Oregon chapter, and seven years as the safe food director of the Oregon Physicians for Social Responsibility before retiring and moving to Wellesley to be closer to my grandchildren.

For most of my life, I supported fluoridation. Then, about 14 years ago, I started reviewing the science on its health risks and promptly changed my mind. For the past 13 years, I've been a full-time volunteer with a large group of scientists, physicians and dentists all over the U.S. and Canada to end the practice. I proudly serve on the board of the [Fluoride Action Network](#), the leading non-profit in the world that opposes fluoridation.

My main reasons for opposing fluoridation are its serious known health risks, including hypothyroidism, kidney disease, chemical sensitivity, fluorosis and a wealth of peer-reviewed, published scientific studies showing that it can increase the risk of lower IQs in children, as evidenced by the National Toxicology Program's [most recent reports](#) in 2024 and 2025 (the most robust scientific reviews of the issue in the world) and the September 2024 ruling by a federal court that fluoridation "**poses an unreasonable risk of reduced IQ in children,**" ordering the EPA to enact regulations to eliminate this risk.

**No cavity reduction, large or small, could justify these other health risks, especially irreversible brain damage to children.**

However, I want to point out something that is not widely known – ***fluoridation has little, if any, effectiveness in preventing cavities.***

The CDC's [claim](#) of a 25% cavity reduction for children and adults from fluoridation is wrong, taken from outdated, low-quality studies. Unfortunately, it has been blindly accepted by the American Dental Association, other organizations and the media.

On its website, the CDC cited only one source for children, the [2015 Cochrane Collaboration](#), considered the gold standard of measuring the effectiveness of health interventions. Yet the CDC has ignored the [updated October 2024 Cochrane report](#), which determined that fluoridation only lessened the percent of children with no caries by a statistically insignificant 3-4% (one-fourth of one cavity), with the possibility of “**no benefit**” at all. The CDC also doesn’t acknowledge [World Health Organization data](#) showing *no difference* in children’s cavity rates between fluoridated and non-fluoridated nations for the past 20 years.

The CDC also cited only one source for adults, a [2007 study](#) (Griffin et al), that reviewed nine outdated, mostly unblinded, low-quality studies, all between 1962 and 1992. *All* were done at fluoridation levels above today’s 0.7 mg/L standard, most significantly higher, **invalidating them for measuring current effectiveness**. Cochrane 2024 didn’t find one study on adult effectiveness that met their quality standards, nor any sufficient evidence fluoridation helped low-income families.

The CDC has also ignored the [2024 LOTUS study](#), the largest, most statistically powerful study ever done, analyzing 6.4 million adolescents and adults in the UK’s National Health Service. It found only an “**exceedingly small**” 2% lower cavity rate in permanent teeth for those drinking fluoridated water.

Finally, the CDC also ignored the consensus that fluoride’s effectiveness is mainly [topical](#), such as in toothpaste – *not from swallowing*. **Bottom line - its 25% claim isn’t based on science. It is based on a denial of science.**

Please see the attachment with the WHO graph comparing nations and FAN’s one-pagers on fluoridation’s neurotoxicity and ineffectiveness.

Thank you for your consideration and please feel free to contact me at any time if you have questions or comments.

Sincerely,

Rick North  
Wellesley  
503-706-0352

# Fluoridation's Ineffectiveness

The largest, most recent, highest-quality scientific studies on water fluoridation's effectiveness have shown **NO** significant reduction of cavities.

The **Cochrane Collaboration**, a non-profit organization of 30,000 expert researchers and health professionals from around the world, is considered the gold standard of evaluating effectiveness of health interventions.

Its latest (2024) systematic review<sup>1</sup> analyzed data from the 21 highest-quality studies. It found that fluoridation increased cavity-free results in primary (baby) teeth by **only 4%** and in **permanent teeth by only 3%**. Neither result is statistically significant and include the possibility of **no** benefit at all. It also found **no** sufficient evidence that fluoridation benefitted low-income families.

This is consistent with the 2024 LOTUS study<sup>2</sup>, **the largest ever done – analyzing 6.4 million people in the UK's National Health Service**. It found only a miniscule **2%** lower cavity rate in permanent teeth of adolescents and adults drinking fluoridated water – with **“no meaningful reduction in social inequities . . .”**

It is also consistent with the **Iowa Fluoride Study (IFS)**, funded by the National Institutes of Health, the most comprehensive research project in the U.S. The 2018 IFS study<sup>3</sup> found **no** significant correlation between ingested fluoride and cavity reduction, further validating its 2009 study<sup>4</sup> that stated **“recommending an ‘optimal’ fluoride intake is problematic.”**

Many on-the-ground experiences in cities such as Boston, New York, Cincinnati and Pittsburgh also showed fluoridation hasn't prevented cavities in low-income children. For instance, San Antonio reported in 2011 that **“After 9 years and \$3 million of adding fluoride, research show(ed) tooth decay hasn't dropped among the poorest of Bexar County's children. It has only increased – up 13 percent this year<sup>5</sup>.”**

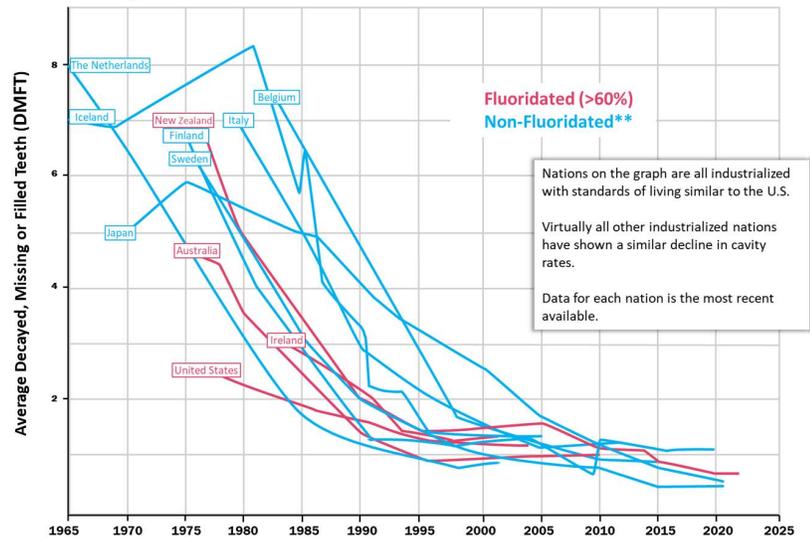
Even the American Dental Association's and Center For Disease Control (CDC)'s highly questionable claims of 25% cavity reduction<sup>6</sup> in children equates to **only half a cavity per child<sup>7</sup>**.

*There is already a consensus (including CDC<sup>8</sup>) that fluoride's effectiveness in preventing cavities is mainly topical – NOT swallowed.*

References at: <https://fluoridealert.org/content/fluoridation-ineffectiveness-2024/>



World Health Organization Data:  
Tooth Decay Trends For Children in Fluoridated Versus Non-Fluoridated Countries\*



\*World Health Organization (WHO), Collaborating Centre for Education, Training, and Research in Oral Health, Malmo University, Sweden. DMFT in 12-year-olds. <https://capp.mau.se/country-areas/> (accessed April 2024).

\*\* No salt or water fluoridation program present in country.

# FLUORIDATION'S NEUROTOXICITY



There is **no question** that fluoride is neurotoxic - it can cause irreversible brain damage. Water fluoridation **cannot** be declared safe.

On September 24, 2024, a federal court ruled, after a 7-year science-based lawsuit, that fluoridation “**poses an unreasonable risk of reduced IQ in children.**”<sup>1</sup> It ordered the EPA to take action to eliminate this risk.

This landmark decision was based on an ever-increasing number of peer-reviewed, published studies and the testimonies of several of the world's leading scientists.

The National Toxicology Program (NTP), part of the National Institutes of Health (NIH), is the highest-level scientific review in the country. Its monograph, published August 21, 2024, concluded higher water fluoridation levels “**are consistently associated with lower IQ in children.**”<sup>2</sup> In the 19 highest-quality studies, 18 linked higher fluoride with lower IQs. *Several of these studies found this link at levels in fluoridated water, 0.7 mg/L.*

NTP's meta-analysis of 74 human studies from 10 nations, published January 5, 2025, provided more details. It reaffirmed the monograph, saying that “**the more fluoride a child is exposed to, the more likely that child's IQ will be lower than if they were not exposed.**”<sup>3</sup> Some children are more genetically susceptible to toxins and others simply drink more water or ingest more food and drinks processed with fluoridated water. All contribute to the toxic load, contradicting claims that no children are harmed from drinking fluoridated water.

Four of the most significant studies documenting the seriousness of fluoride's neurotoxicity are from Canada:

- 2020: (Till et al)<sup>4</sup> Babies fed formula mixed with fluoridated water averaged 6 IQ points less than those mixed with non-fluoridated water. Non-verbal IQ losses were even higher, an average of 13 points.
- 2019: (Green et al)<sup>5</sup> Every 1 mg/L increase in fluoride in pregnant women's urine linked to a 4.5 decrease in IQ in their male children. *JAMA Pediatrics'* physician editor said, “**I would not have my wife drink fluoridated water**”<sup>6</sup> if she were pregnant. Linda Birnbaum, PhD, retired director of the National Toxicology Program, said, “**It is time to protect kids' developing brains from fluoride.**”<sup>7</sup>
- 2019: (Riddell et al)<sup>8</sup> A nearly 300% higher risk of ADHD was found for children living in fluoridated areas. This reaffirmed earlier studies linking fluoride to ADHD in Mexico (2018)<sup>9</sup> and the U.S. (2015).<sup>10</sup>
- 2018: (Malin et al)<sup>11</sup> Iodine-deficient adults - nearly 18% of the population - with higher fluoride levels had a greater risk of hypothyroidism (known to be linked to lower IQs). Author Ashley Malin, PhD, said, “**I have grave concerns about the health effects of fluoride exposure.**”<sup>12</sup>

On May 1, 2024, the first U.S. study on human neurotoxicity (Malin et al)<sup>13</sup> was published. Based in Los Angeles, it found that children of mothers with higher fluoride exposures during pregnancy had *double* the risk of several neurobehavioral problems, including anxiety, depression and symptoms linked to autism. *It was the 10<sup>th</sup> consecutive NIH-funded study linking higher fluoride to neurotoxic harm.*<sup>14</sup>

Updated February 2025

References at:  
<https://fluoridealert.org/content/references3/>

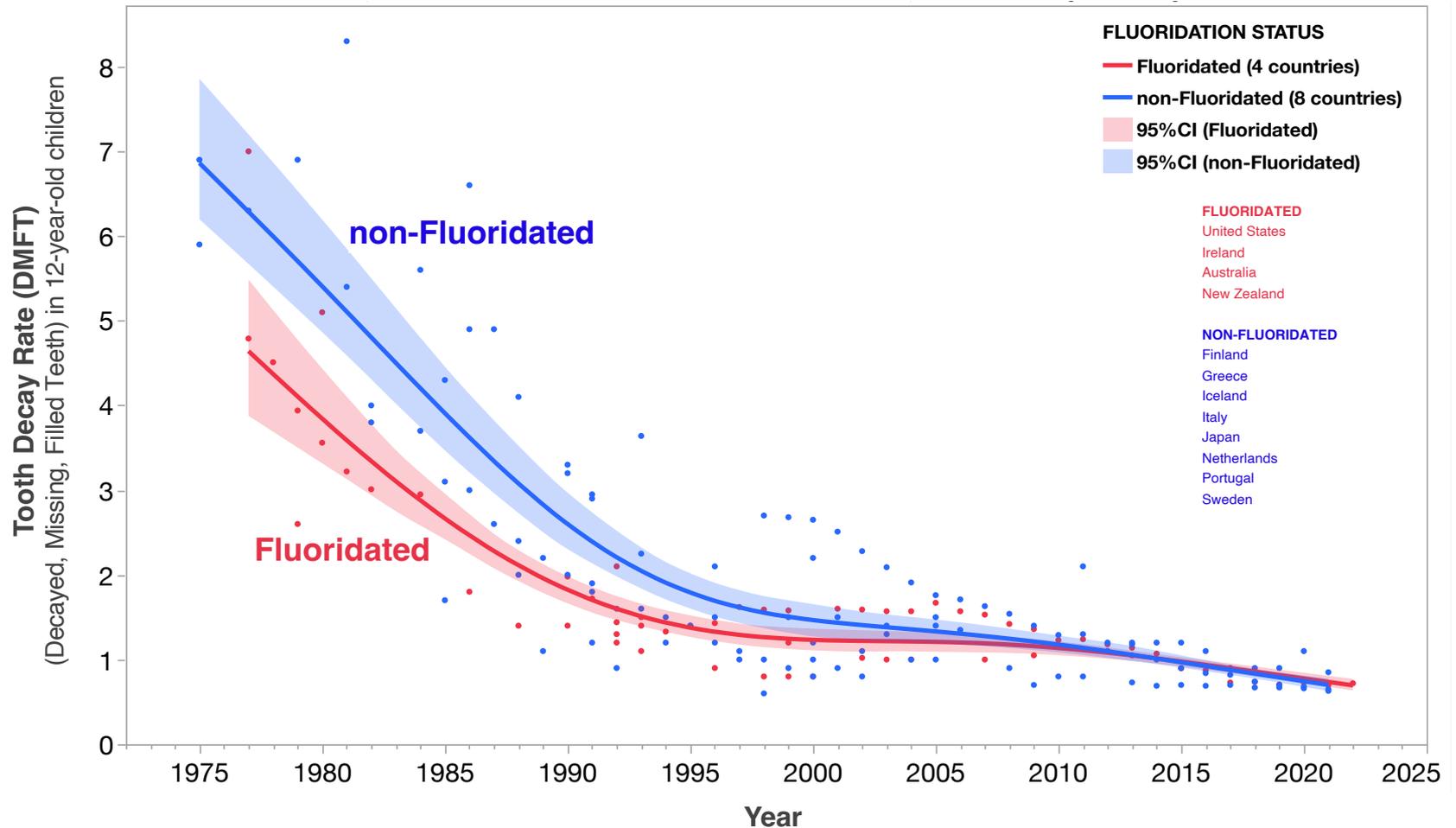


**Fluoride Action Network**  
fluoridealert.org

# World Health Organization (WHO) Data

## Comparing Fluoridated and Non-Fluoridated Developed Nations

Average cavity rates in both declined dramatically and are now indistinguishable



- WHO data available from: <https://capp.mau.se>
- The fluoridated nations have at least 60% of their populations with artificially fluoridated water while non-fluoridated nations have 0%.
- Non-fluoridated nations do not have significant sales of fluoridated salt.
- The large majority of countries in the world have no artificial fluoridation. Only 2% of the population of Europe has fluoridated water.