

Testimony in Opposition to Artificial Fluoridation

before a Committee of the

LOS ANGELES CITY COUNCIL

Los Angeles, California

February 13, 1974

Gentlemen:

It is a privilege to appear before you in support of the principle that freedom of choice is vital to our way of life. If any person, governmental agency, minority or even majority group can tell you or me what we shall eat or drink, or what medicines we shall or shall not take, then we might as well admit that our constitutional republic is no more - - for all practical purposes we shall have become a police state.

Since the subject of fluoridation is controversial, I must make it clear at this point that I speak only for myself and not for any organization. I am sure this also applies to the other speakers appearing this afternoon.

Curriculum vitae

In 1930 I received my M.D. degree from the College of Physicians and Surgeons at Columbia University. My internship included two years at Presbyterian and two years at Bellevue Hospital in New York. I have been in private practice for 39 years, specializing primarily in allergy with special emphasis on nutrition. I am a member of the American Medical Association and numerous other professional societies including Fellowship in the American College of Allergists, the International Association of Allergists and the International Academy of Metabology. I am a former Speaker of the House of Delegates, Association of American Physicians and Surgeons, and served on the Board of Directors for eight years. I am also a member of the Los Angeles County Milk Commission.

My remarks are based upon a 20 year study of artificial fluoridation of public water supplies. In 1956 I read a "Statement on Fluoridation" before the American Academy of Applied Nutrition in Los Angeles. At that time I listed valid objections to fluoridation. None of these has ever been refuted and evidence in support of these objections continues to accumulate.

You are faced with a most important decision regarding fluoridation. Separating the wheat from the chaff is difficult.

Without question you have been, or will be, told by the top brass of the Public Health Service and the American Dental Association that artificial fluoridation is "effective", "safe", and "endorsed by all leading organizations" (whatever that means). The intimation has been made that unless you promptly order fluoridation of the Los Angeles water supply, you will be classified as cruel and calloused ogres for denying "800,000" children the "proven" benefits "of the greatest scientific advance in public health in this century". You undoubtedly have been told that "fluoridation is no longer scientifically debatable: therefore, the City Council should decide to fluoridate, since the citizens are incapable of sound judgment."

Have you wondered why the only concern expressed by the fluoridators seems to be for children's teeth? What about the long term effects on the health of millions of children and adults without regard for allergy or chronic illness, who would be forced - for a lifetime perhaps - to consume water containing one of the most active and cumulative poisons known to man? This includes your constituents as well as you and your families!

Controlled studies by Doctor Reuben Feltman of Passaic, New Jersey, are thought-provoking. He gave pregnant women and then their progeny one mg. of fluoride per day. There was a slight reduction in dental caries, but one percent of the subjects had to stop taking fluorides because they vomited, had abdominal pains, headaches, sore mouths, skin rashes or joint pains. The fluoridators inform us that eighty million people are drinking naturally or artificially fluoridated water. If so, it is possible that 800,000 people in the United States may be ill from this cause - and neither they nor their physicians know why! Recent studies suggest that the incidence of toxicity is considerably higher. Fluorides should only be taken in measured doses under close supervision. This is impossible through the water supply.

There is increasing evidence that our environment is contaminated with larger amounts of fluoride every year. Animals and human beings are being poisoned by emissions from steel mills, phosphate fertilizer plants, aluminum plants, etc. in Oregon, Montana and other areas.

George Waldbott, M.D., of Detroit, has now seen more than 250 cases of toxicity from fluoride in the drinking water at one part per million. He has reported many of these cases, but his findings have been downgraded and he has been attacked personally from the standpoint of his scientific ability and integrity. (I show you a book of his entitled "Contact Dermatitis" which will assure anyone who looks at it that he has scientific ability.)

Dr. Petraborg from Minnesota has also studied at least 250 cases of fluoride toxicity, most of which came from drinking water containing one part per million of fluoride.

John J. Shea, M.D., of Dayton, Ohio, has seen more than 50 cases of toxic reactions to either fluoridated water, or more commonly, to fluoridated toothpaste. He has reported on a number of these.

Hobart Feldman, M.D., of North Miami Beach, Florida, is conducting a double-blind study on the response of normal individuals to sublingual challenges with fluoride solution containing one part per million of fluoride. Other people throughout the country are testing private patients by this same method. While Dr. Feldman has not yet correlated his results and his study is not complete, he has found between 20 and 40 percent of individuals to react to fluorides when administered in this manner. (300 tests so far.)

I have tested probably 50 patients in the same manner, or with five drops of a solution containing 10 mg. per cc., which is the equivalent of .33 mg. of fluoride ion. While I have not assessed my results, I would assume that 20 to 30 percent of those tested have reacted. This is particularly true of those giving a history of chemical sensitivity. I will give you an example of the reactions in two cases.

The symptomatology of fluoride hypersensitivity or toxicity mimics many other syndromes and includes the following: dizziness, headache, blurred vision, stuffy nose, sneezing, sore throat, cough, wheezing, chest pain, nausea and vomiting, weakness, neuritis, skin rashes, hives, profound drowsiness, and an uncontrolled desire to sleep.

There is absolutely no question but what our exposure to fluoride, as well as to other chemicals in our food, water and air, should be kept to a minimum. It is of great interest that the steel mill at Fontana recently was reported as producing one ton of gaseous fluorides daily, whereas the engineering estimates were zero. This may well explain the death of our Ponderosa pines and probably some of the adverse effects from smog.

Fluoridation is not scientific: it is not effective: it is a waste of public funds and most importantly it is a menace to health. It is a political drive, perhaps being promoted to save the reputations of prominent scientists who misinterpreted statistics from experimental studies and, therefore, prematurely endorsed fluoridation in 1950. (See Paluev's testimony.) They can be forgiven for their error, but not for perpetuating it with our tax dollars.

The interests of the aluminum and fertilizer industries, which now find an outlet for the disposal of toxic fluoride wastes via human stomachs, can not be disregarded: nor can the sugar industry, which hopefully believes that fluoridation will permit unlimited sugar consumption with less decay.

The primary cause of dental caries is sugar, candy, soft drinks and refined carbohydrates, together with a diet low in protein, minerals and unprocessed

foods. This has been proven beyond doubt through animal experiments, clinical observations and the studies of Doctor Weston A. Price, D.D.S.

He found that natives in all parts of the world before contacting "civilization" had almost no tooth decay, perfect dental arches and robust health. Consumption of sugar and white bread produced marked tooth decay in adults and narrowed dental arches with crowded teeth, as well as tooth decay in their children. When some of these natives returned to their original diets their cavities became inactive! Moreover, children born after their return to previous tribal diets, had perfect dental arches and no tooth decay. The dental hierarchy is, or should be, aware of these facts.

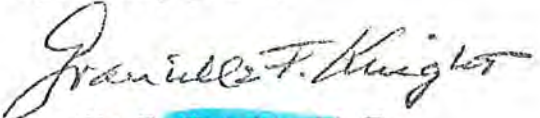
If the Public Health Service and the American Dental Association would spend the millions of dollars wasted in world wide fluoridation promotion, on educational programs for better nutrition, this would be a fundamental approach. The addition of one toxic chemical to public water supplies is not the answer.

We have no axe to grind. Our prime interest lies in preserving personal freedom and preventing harm to a helpless public.

Gentlemen, you have a serious decision to make. We trust that it will be in the best interest of all the people. Damage to a minority of consumers can not be justified by the questionable benefit to children, when other less expensive and voluntary methods are available.

"Compulsion is the key to collectivism."

Respectfully yours,


Granville F. Knight, M.D.

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P.S. Perhaps we should mention also the increased Mongolism in fluoridated cities, as well as the fact that the incidence of deaths from cardiovascular disease has more than doubled in Grand Rapids, Antigo, Wisconsin, and Newburg since these cities were fluoridated almost 30 years ago. In addition, animals in the Philadelphia Zoological Gardens, since drinking fluoridated water, have shown a marked increase in coronary disease and atherosclerosis since 1954.