

ADA INC ADOPTS NEW POLICY ON WATER FLUORIDATION

A new policy on water fluoridation was adopted at the Australian Dental Association's Federal Council meeting recently. Dr John Matthews, President of the ADA, said, "Our Federal Body recognises that the fluoridation of public water supplies has proven to be one of the most significant public health initiatives in Australia and our policies have been further developed to reflect this."

Clear solid scientific evidence exists that water fluoridation has proven to be an efficient, effective and equitable public health measure for reducing the prevalence of dental decay in all age groups.

Recent Australian research includes:

1. The publication of the *2004-06 National Adult Oral Health Survey* which has shown that members of the 'fluoride generation' (those born after 1970) have about half the level of decay that their parents' generation had developed at about the same age.¹

2. In New South Wales, a major 2005 study conducted by Jason Armfield from the Australian Research Centre for Population Oral Health, which examined the dental records of nearly a quarter of a million schoolchildren aged 3-15, and found that those living in areas of fluoridated water were significantly less likely to have decayed, missing or filled teeth than children living in areas without added fluoride in the drinking water.²

3. A cross-sectional study of 973 Australian Army recruits in 2002-2003 which found that those with no exposure to water fluoridation had significantly more filled, missing or decayed teeth than recruits who had grown up with fluoridation.³

Yet, many community water supplies are still not fluoridated. Today, it is estimated that 31% of Australian adults remain without access to fluoridated public water. Sadly, much of this is due to decisions made at Local and State Government level which have become politically motivated rather than based on scientific fact.

Most recently, the issue of water fluoridation has gained prominence in the cities of Ballarat, Geelong and Warrnambool in Victoria, Mount Gambia in South Australia, and Lithgow in New South Wales. Unfortunately, it has been a divisive issue. In some cases discussions and public meetings have ensued, in others the debate has intensified to become a 'battleground for

or against fluoride'. Whilst certain local councils are getting involved, in others they are standing back and arguing it is a State Government issue.

The claims of those opposing fluoridation are based on outdated information and selective studies that support their case. However, no convincing or credible scientific evidence exists that fluoride, when supplied at the optimum level (1 part per million) in drinking water, causes any adverse health effects.

Fluoridation has proven to be highly successful in preventing dental disease and Local Governments must be encouraged to see the benefits. State and Territory Governments must accept that it is they that must take responsibility for seeing the benefits of fluoride reach all members of their community. For example, less than 5% of Queenslanders have access to fluoridated public water, and tooth decay in children in this State is higher than the national average.⁴ Furthermore, children in Townsville, one of the few Queensland towns to begin fluoridation (in

1964), have 45% less tooth decay than their counterparts in Brisbane, a city of nearly 1.8 million people that refuses to fluoridate its public water.⁵

The ADA remains a strong advocate of water fluoridation along with other highly reputable and respected international and Australian health, research and education organizations. These include the World Health Organization, the International Association for Dental Research, the US-based Centers for Disease Control and Prevention (CDC), the British National Health Service, the National Health and Medical Research Council, the Australian Institute of Health and Welfare, the Public Health Association of Australia and the Australian Medical Association.

To maximize the primary prevention of dental caries leading to subsequent benefits to health, Commonwealth, State, Territory and Local Governments should adopt water fluoridation as part of their health policy. A government not only has a right to introduce water fluoridation, it has a responsibility to do so.

An entire section is devoted to fluoride/fluoridation on the ADA's website called 'Fluoride Now':
www.ada.org.au/oralhealth/flnfront.aspx



References

1. Australian Institute of Health and Welfare. Slade GD, Spencer AJ and Roberts-Thomson KF (2007) *Australia's dental generations - The National Survey of Adult Oral Health 2004-06*, DSRS No. 34, p. xvi.
 2. Armfield J (2005) *Public water fluoridation and dental health in New South Wales*. ARCPOH, Australian and New Zealand Journal of Public Health, Vol. 29, No. 5, p. 477.
 3. Hopcraft M and Morgan MV (2005) *Dental caries experience in Australian Army recruits 2002-2003*. Australian Dental Journal, Vol. 50, No. 1, p. 16.
 4. Robertson (2006a) in Australian Institute of Health and Welfare, op cit, p. 58.
 5. Slade et al (1996) in Australian Institute of Health and Welfare, op cit, p. 58.
- 