In 2015, I nominated Fluoride to the OHAT/NTP/BSC for Developmental Neurotoxin, Cancer, and Thyroid Reviews. Neurotoxin is just one of over 20 risks and known harm from fluoride. Thank you NTP and OHAT team for 8 years of your lives to one risk.

May 2023

Bill Osmunson DDS, MPH
Washington Action for Safe Water &
King County Citizens Against Fluoridation
I, and other dentists, treat dental fluorosis a known cosmetic and functional harm, about 30 times more cost of damage than the alleged treatment prevented.

NHANES reported 2 out of 3 children have dental fluorosis.

Few dentists diagnose the harm, we simple treat the damage and paid to give even more fluoride.
In summary, we hold that fluoridation is an unreasonable risk. That is, the toxicity of fluoride is so great and the purported benefits associated with it are so small - if there are any at all – that requiring every man, woman and child in America to ingest it borders on criminal behavior on the part of governments.

[That is you and me when we protect the toxin]

-Dr. J. William Hirzy, Senior Vice-President, Headquarters Union, US Environmental Protection Agency, March 26, 2001

May 1, 1999
WHY EPA'S HEADQUARTERS UNION OF SCIENTISTS OPPOSES FLUORIDATION
See Handout.
BSC Working Group Recommendations, p 9 & 10 are an excellent start on protection of the developing brain and every cell of the body.

Additional recommendations (See written document for more details and references:

1. Fluoride is highly toxic with a Probable Toxic Dose estimated at 5 mg/kg body weight. Fluoride is a known neurotoxin, the question is dosage. What is the “no effect” dosage? What is the Benchmark Dose?

Fluoride is exempt from toxic and poison laws when regulated as a pesticide or drug. Topical fluoride in toothpaste went through the drug approval regulatory process and gained approval with a label on dosage referring to 0.25 mg. (equals water at 0.25 mg/L)

The Drug Facts, include warning, "keep out of reach of children under 6 years of age. If more than used for brushing is accidentally swallowed, get medical help or contact a Poison Control Center right away. Directions: adults and children 2 years and older: . . . Do No Swallow, to minimize swallowing use a pea-size amount in children under 6, supervise children’s brushing until good habits are established.”
2. “The US Food and Drug Administration defines a drug in part, as intended for use in the diagnosis, cure, mitigation treatment, or prevention of disease. Fluoride is well known to the public to have intent to prevent dental caries. Topical fluoride has FDA CDER NDA approval with a label “do not swallow” reasonably consistent with the Monographs M-A and most meta-analyses.”

3. "Mothers who are pregnant or want to become pregnant and children under the age of six should, when possible, avoid drinking water with fluoride concentrations over 0.2 mg/L, do not swallow fluoridated toothpaste, and avoid foods and beverages high in fluoride. Caregivers of infants should avoid mixing formula with water containing more than 0.01 mg/L of fluoride.
4. the NTP recommend an uncertainty & intraspecific factor of 10. NTP needs to protect more than just the statistical “mean.” Some are chemically sensitive, don’t excrete fluoride as well as the “mean.” Some are ingesting too much other toxic chemicals. Some drink 10 times as much water as the “mean” etc.

5. the NTP reconcile the disconnect or "disagreement" between the SoS as "safe" < 1.5 mg/L and the M-A data as "not safe" and the FDA at 0.25 mg as not safe, do not swallow. Concentration is not dosage. Another example, infant formula made with 1.5 mg/L fluoride in water is about 350 times higher dosage of a highly toxic unapproved drug than mother's milk. Mother’s milk is not deficient in fluoride.

NTP and reviewers do not have significant objections to fluoride >1.5 mg/L in water as a developmental neurotoxin. Thus, the question is no longer whether fluoride is a known developmental neurotoxin but at what dosage. The M-A and FDA answer that question. Do not swallow.