

PROTECT THE PENINSULA'S FUTURE
P.O. Box 1677, Sequim, Washington, 98382

A non-profit corporation dedicated to the wise land use of the North Olympic Peninsula.

January 2, 2008

Washington State Board of Health
c/o Craig McLaughlin, Executive Director
P.O. Box 47990
Olympia, WA 98504-7990

Re: Actual and Constructive Notice of Unlawful Activity, Failure to Warn, Misrepresentation, and Liability

The attached Actual and Constructive Notice and supporting documents are sent to you in your official capacity as a responsible party for an entity with authority over delivery of public drinking water to which hydrofluosilicic acid and its contaminants are added because you have relevant decision-making or administrative duties, including protection of legal, financial, and physical interests of the public.

These documents are also sent to you in your personal capacity to the extent that it may be deemed that you have personal responsibilities and liabilities. Indemnification or hold harmless agreements do not customarily extend personal protection when actions or omissions are associated with non-compliance with State law, non-disclosure of material facts, participation in ongoing patterns of meaningful or willful misrepresentation, failure to warn, and non-disclosure to the appropriate parties of financial risk or impact.

This Notice addresses actions and omissions for which you may have direct control and responsibility. Often at issue for determination of personal liability is whether a party knows, or with reasonable care should have known, and then what action was taken. This Notice establishes a record of your being informed.

While Actual and Constructive Notices are often precursors to the filing of lawsuits, the intent of this Notice is to clarify facts that may have been ignored, concealed from you, or not discovered in your own due diligence, so that should there be any deficiencies in your actions or acts of omission you may remedy them accordingly.

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Core considerations that have been routinely concealed from you may alter your perspective:

- * U. S. EPA states that they cannot identify any chronic toxicological data on hydrofluosilicic acid, or provide empirical scientific evidence of complete dissociation of hydrofluosilicic acid and how it interacts with other elements in the water;
- * To our knowledge, no manufacturer of hydrofluosilicic acid to date has been willing to declare that their specific product is effective at reducing tooth decay when ingested, and safe for the full range of consumption for infants, children, the elderly, and other populations afforded equal protection; and
- * Under-oath testimony taken in 2004 from an NSF expert states that hydrofluosilicic acid certification submissions to NSF have not included the toxicity information required for compliance with ANSI/NSF Standard 60. It appears that product is certified without actually complying with General Requirement 3.2.1 of Standard 60. Hydrofluosilicic acid added to drinking water without actual compliance with Standard 60 is a violation of WAC 246-290-220(3).

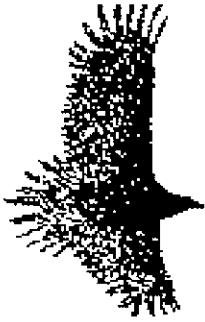
We request your immediate, official and personal attention to the matters disclosed in the attached Notice.

Respectfully,

Eloise Kailin, M.D., Secretary, Protect the Peninsula's Future

ATTACHMENTS:

- A. Press Release (a summary of this submission)
- B. Actual and Constructive Notice (10 pp)
- C. Letter, Chair of Poughkeepsies' Water Treatment Facility Board. Frank Mora, May 9, 2007 to Solvay. (3 pp)
- D. Reply letter, Solvay Fluorides, July 19, 2007
- E, Excerpts from Letter by National Sanitation Foundation's Stan Hazen, March 10, 2004(4 pp)
- F. Adverse Health Effects from Fluoride in Drinking Water, Kathleen Thiessen Ph..D, 8/20/07(5 pp)
- G. Peninsula Pointers (2pp)



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PRESS RELEASE 1/2/2008

Contact: Eloise Kailin M.D., Secretary, PPF
 (360).683-6644, eloisek@olympus.net

Notice Given To Port Angeles That Fluoridation Is Unlawful

Detailed notice was given today to the Port Angeles City Council and other responsible persons, that the fluoridation chemicals (fluosilicic acid (FSA)) and their contaminants presently being added to municipal water are believed to not meet a State required standard known as ANSI/NSF Standard 60.

Protect the Peninsula's Future states in its Notice to the City that an expert witness from the National Sanitation Foundation (NSF) has disclosed under oath that the FSA certification applications submitted to NSF do not include toxicity information on FSA and its contaminants as is required for compliance with Standard 60.

Protect the Peninsula's Future states that it understands that the City Council might not know if the City is putting improperly certified fluoridation chemicals into the City's drinking water. The Notice requests that the City immediately investigate and unless documents can be produced within two weeks showing that the FSA being added complies with the requirements of Section 3.2.1 of Standard 60 that the use of FSA be suspended until compliance can be documented.

The Notice also points out that both decision makers and the general public have been misled by testimonials, organizational "position papers" and advertisements which make unsubstantiated claims that FSA is safe and effective. The Notice points out that many letters have been sent to manufacturers of FSA and, to date, no such manufacturer will state that their specific product is safe and effective at fulfilling fluoridation's legislative intent. Furthermore Protect the Peninsula's Future states that it is unable to find any chronic toxicological studies of FSA. A major review published by the National Research Council in March, 2006 calls for numerous safety studies and presents evidence that municipal water at recommended fluoride concentrations provides overdoses to infants when it is used to dilute formula. This report states that overdoses also occur when kidney function is poor and when water intake is high for any reason. It states that fluoride is known to depress brain, thyroid, and immune functions, and increase blood sugar in diabetics.

Liability for injury to citizens from fluoridation is specifically disavowed by the City's supplier of FSA. Liability for injury to citizens from fluoridation is also placed squarely on the City by the Washington State Dental Foundation (WSDF) in its Agreement with the City mandating fluoridation. PPF believes Section 8.9 of the WSDF Agreement allows the City to stop fluoridation without any financial penalty if the City is unable to meet the terms of the Agreement because it is unable to find FSA that meets Standard 60.

Visit our web site at www.olympus.net/community/oec/ppf.htm

NOTICE OF UNLAWFUL ACTIVITY, FAILURE TO WARN, MISREPRESENTATION, AND LIABILITY

This Actual and Constructive Notice ("Notice") from Protect the Peninsula's Future is directed to responsible parties for entities with authority over delivery of public drinking water to which hydrofluosilicic acid (also referred to as FSA, fluorosilicic, and fluosilicic acid) and its contaminants are added, and is to serve as legal notice to all such parties.

Such parties include, but are not limited to: for the City of Port Angeles ("City"), the mayor and council members, the City Attorney, City Manager, Public Works Director, and Water Superintendent; for the Clallam County Board of Health ("local Board of Health"), members of the Board, Health Officer, and Director; for Clallam County PUD #1 ("PUD"), Commissioners, General Manager, and Water Superintendent; for the State Board of Health, members including the Secretary of Health; and the Director of the State Office of Drinking Water.

Importance of this form to the recipients of this Actual and Constructive Notice

The entities and their responsible parties have various duties to ensure safety and compliance with state law in regard to delivery of public drinking water to which hydrofluosilicic acid and its contaminants are added. In certain circumstances, specific duties to act may not arise until responsible parties receive notice of the danger or violation of law. This Actual and Constructive Notice is provided to you to give you the notice necessary for you to be found to have financial liability. See the following Supreme Court case: McDonald v. Spokane County, 53 Wn.2d 685, 687, 336 P.2d 127 (1959) ("Actual notice consists of express information of a fact. But when a person does not receive such express information, if he does have actual notice of other circumstances sufficient to put a prudent man on inquiry as to the particular fact, and if by prosecuting such inquiry he would learn of such fact, he has constructive notice of the fact itself. The legal effect of that constructive notice is the same as if he had actual notice.")

Statement of issue

The City for the purpose of treating and preventing tooth decay for the drinking water consumer, has since May 18, 2006 added hydrofluosilicic acid, along with its contaminants, to the treated water it delivers both to its residents, and to nonresidents. The latter include visitors, passengers on an international ferry, persons staying at the community regional hospital or jail, as well as over three thousand eastern Clallam County residents who are served by the PUD with a varying mix of City water and water from other sources.

This Notice identifies unlawful activity, failures to warn, and misrepresentations including omissions of material fact concerning the use of hydrofluosilicic acid and its contaminants that can result in liability for the entities and responsible parties notified.

Scope of responsibility for a water supplier delivering hydrofluosilicic acid in its public water supply

This Notice identifies actions and omissions for which a responsible party should recognize he/she has direct control and a duty, but also further clarifies duties a water supplier has when delivering hydrofluosilicic acid and its contaminants in its public water supply within the application of the doctrines of "learned intermediary" and "sophisticated user."

Generally a water supplier delivering hydrofluosilicic acid and its contaminants in its public water supply would be subject to liability under the Washington Product Liability Act (Chapter 7.72 RCW) or alternatively under common law torts including negligence and/or the Consumer Protection Act (Chapter 19.86 RCW). While a manufacturer or supplier of hydrofluosilicic acid might have a duty to provide adequate warnings to a water supplier, such manufacturers or suppliers in a legal action may seek to

characterize the water supplier as a "learned intermediary" or "sophisticated user" to seek to avoid product liability. The water supplier has many duties to the water user. For example, the water supplier has a duty to the water user to give adequate warnings if the water supply is not reasonably safe to the water user.

The Dental Foundation disclaims responsibility

An "Agreement Regarding Gift of Fluoridation System" signed on March 1, 2005 by the City of Port Angeles and on March 18, 2005 by the Washington State Dental Foundation (WDSF) at Section 2.5 disclaims any responsibility of WDSF once the fluoridation facility has been accepted by the City as follows: "WDSF will have no liability with respect to: (A) the quality, nature, adequacy and physical condition of the System; (B) the existence, quality, nature, adequacy and physical condition of utilities serving the system (C) the System's use, habitability, merchantability, or fitness, suitability, value or adequacy of the System for any particular purpose; (D) the zoning or other legal status of the System or any other public or private restrictions on use of the System; (E) the compliance of the assets or the System's operation with any applicable codes, laws, regulations, statutes, ordinances, or any governmental or quasi-governmental entity or any covenants, conditions and restrictions applicable to the System or the fluoridation of a water supply; (F) the presence or absence of hazardous materials on, under or about the System or (J) the health effects related to the operation of the System.. As between WDSF and the City, the City assumes the responsibility and risks of all defects to and conditions in the System"

The supplier disclaims responsibility.

Lucier Industries of Florida supplied hydrofluorosilicic acid, which was received by Port Angeles on or about November 6, 2006 from a tanker truck. Accompanying the shipment was a Certificate of Analysis dated 09/04/06 by J.R. Simplot Company. The Certificate reported test results for contents of rail car # GATX 2035 to be: hydrofluorosilicic acid 24.83%, hydrogen fluoride 0.45%, lead 1.48 parts per million and phosphate zero. Color was 5 on a scale of 100. No other ingredients are mentioned although other unknown ingredients are surely present. The back of this report, copyrighted by LCI, Ltd., at item 4 disclaims responsibility as follows: "Buyer assumes all risk and liability for all loss, damage, injury to person or persons, adverse effect on wildlife and the environment, or failure to comply with any law, regulation or ruling of any governmental body resulting from storage, shipping or handling or from the use of said material in manufacturing processes or in combination with other substances, or otherwise; and buyer hereby holds harmless and shall indemnify LCI against any and all claims arising therefrom. LCI, Ltd. makes no express warranties; there are no implied warranties which extend beyond the description on the face hereof or on the face of any shipment, and there is no implied warranty of merchantability except that the material sold hereunder shall be LCI, Ltd.'s standard quality."

The Materials Safety Data Sheet (MSDS--6 pages) accompanying this shipment disclosed acute effects which might not be apparent for hours and chronic health effects such as : "bone changes, corrosive effect on mucous membranes including ulceration of nose, throat and bronchial tubes, cough, shock, pulmonary edema, fluorosis, coma and death." In closing, the disclaimer is repeated: "no responsibility can be assumed by vendor from any hazards inherent in the nature of the product."

While under the Washington Product Liability Act, a "product seller" is everyone in the chain of distribution (RCW 7.72.010), the doctrines of learned intermediary and sophisticated user have been historically employed as a shifting of the weight of responsibility and liability to entities other than manufacturers in the chain of delivery of their products to consumers.

The doctrine of Learned Intermediary proposes that an entity other than the manufacturer in the chain of delivery has specialized knowledge of the user of the product and is considered to be in a direct position for which the recipient consumer develops a trust that this entity in the chain of delivery will fully inform and warn them of dangers, risks and contraindications.

One of the few exclusions to this doctrine is that the duty to inform and warn is tempered by a

determination that a sophisticated user "could reasonably be expected to know," which also assists in establishing the scope of when an entity MUST inform.

The Wasgington State Supreme Court has ruled that a supplier is subject to liability if the supplier:

- (a) knows or has reason to know that the [product] is or is likely to be dangerous for the use for which it is supplied, and
- (b) has no reason to believe that those for whose use the [product] is supplied will realize its dangerous condition, and
- (c) fails to exercise reasonable care to inform them of its dangerous condition or of the facts which make it likely to be dangerous.

DuVon v. Rockwell International, 116 Wn.2d 749, 758-59, 807 P.2d 876 (1991).

A water consumer CANNOT reasonably be expected to know of risks

Whether a water consumer "will realize [the] dangerous condition" of the direct water additive, hydrofluosilicic acid and its contaminants such as arsenic, or generally of the water supplied using this additive, is easily answered when entities promoting fluoridation misrepresent or omit the existence of evidence of harm and risk in testimonials, advertisements and organization "position papers," continually represent the addition as "fluoride" without public disclosure of the specific nature of the actual product and its contaminants, and continue to provide exaggerated and unsubstantiated assurances of safety and effectiveness.

The City, PUD, and local and State Boards of Health have a duty to perform due diligence and act to correct all unlawful practices, misrepresentations, and omissions

These entities possess the authority and thus have the responsibility, and the duty to assure all statutory and regulatory requirements are fulfilled for the public drinking water distributed including correction of all unlawful practices and misrepresentations or omissions of material fact prior to delivery.

To date, to the best of our knowledge, no manufacturer of hydrofluosilicic acid under request will state that their specific product is safe and effective at fulfilling fluoridation's legislative intent

In example: attached is a May 9, 2007 request from the Chair of the Poughkeepsie Joint Water Board in New York State to Solvay, LLC, a major supplier of hydrofluosilicic acid:

"To assure that this Board has selected a product that is consistent with the legislative intent of safety and effectively reducing the incidence of tooth decay, we request that you or some entity in the chain of delivery provide us with the following declaration for your fluosilicic product:

"This specific product, as it is constituted and inclusive of contaminants, is effective at reducing the incidence of tooth decay when ingested in dilution amounts consistent with fluoridation goals of 0.7 to 1.2 milligrams of fluoride ion per liter, and is safe for the full range of expected human consumption at these dilution ranges, without known or anticipated adverse health effects over a lifetime, including for infants, children, the elderly, and other populations afforded equal protection.

"Please state Yes if each shipment of your product can be accompanied by the above declaration as a condition of purchase.

"Please state No if you, or any other entity in the chain of delivery, are not able to make this declaration for your product."

As the attached July 19, 2007 response by Solvay reveals, Solvay ignores the directed questions posed about their own product, and request for pertinent documents including toxicological data and proof of

meeting American National Standards Institute and National Sanitation Foundation ANSI/NSF Standard 60, and directs the client water district to contact the CDC, which by law cannot represent a manufacturer.

To the best of our knowledge, no government body or promoter of fluoridation can identify a chronic toxicological study on hydrofluosilicic acid, with or without the attendant contaminants

Response to Congressional investigation by the House Committee on Science in considering fluoride when U.S. EPA was asked to identify scientific data on sodium silicofluoride and hydrofluosilicic acid: "In collecting data for the fact sheet, EPA was not able to identify chronic studies on those chemicals."

Robert C. Thurnau, Chief, Treatment Technology Evaluation Branch, Water Supply and Water Resources Division, U.S. EPA National Risk Management Research Laboratory, November 16, 2000: "To answer your first question of whether we have in our possession any empirical scientific data on the effects of fluosilicic acid or sodium silicofluoride on health and behavior, the answer is no."

Disseminating information including safety and effectiveness claims for the addition of hydrofluosilicic acid to drinking water without revealing that there are no chronic toxicological studies on the health and behavioral effects of the substance is a misrepresentation and omission of material fact. We believe that fluoridation by hydrofluosilicic acid is substantially more toxic to humans than alternative forms of fluoridation.

PUD, as a purveyor of hydrofluosilicic acid treated water to be delivered outside City limits, is being forced by their need for water to violate State requirements

Co-mingling of non-fluoridated water with water fluoridated by the City makes it impossible to assure PUD customers of the amount of fluoride being delivered, thus frustrating the intent and ability to follow *WAC 126-290-460 (2) "Where fluoridation is practiced, purveyors shall maintain fluoride concentrations in the range 0.8 through 1.3 mg/ L throughout the distribution system."*

In this case, the City put the burden on the PUD by a declaration in its Wholesale Water Agreement signed 16 August, 2006 (page 7) to supply water to PUD that PUD would bear responsibility for changes in water quality or operating conditions that may result from mixing different sources of water in the PUD's system.

We believe that the City and others adding hydrofluosilicic acid to drinking water are violating State regulations

WAC 246-290-220 Drinking water materials and additives. (3) Any treatment chemicals, with the exception of commercially retailed hypochlorite compounds such as unscented Clorox, Purex, etc., added to water intended for potable use shall comply with ANSI/NSF Standard 60.

Pursuant to WAC 246-290-220, a water supplier such as the City or PUD adding hydrofluosilicic acid to its drinking water supply may only allow chemicals that comply with ANSI/NSF Standard 60. Section 3.2.1 of Standard 60 requires that hydrofluosilicic acid suppliers submit toxicity study information to NSF both on the acid and on the contaminants delivered with their acid in order to comply with this Standard.

Protect the Peninsula's Future hereby gives notice that Stan Hazan, an expert witness from NSF, testified on or about March 10, 2004 under oath (portion of testimony attached) that the hydrofluosilicic acid certification submissions to NSF **do not include** this toxicity information required for compliance with Standard 60. Protect the Peninsula's Future understands that the City Council, PUD, and local and State Departments of Health might not know if improperly certified fluoridation chemicals are being added to public drinking water. This Notice requests that the City, PUD, and the local and State Departments of Health immediately investigate and unless documents can be produced within two weeks showing that the hydrofluosilicic acid being added to drinking water complies with the requirements of Section 3.2.1 of Standard 60, that the use of this hydrofluosilicic acid be suspended until compliance can be documented.

If there has not been full compliance with the requirements of Section 3.2.1 of Standard 60, then the use of a hydrofluosilicic acid in drinking water would be unlawful. Because it appears that NSF has issued certifications for hydrofluosilicic acid without full compliance with Section 3.2.1 of Standard 60, any general statement of compliance by NSF should be found suspect unless specific dated, true and correct copies of submitted documents are provided as proof.

Non-compliance with Section 3.2.1 is not a minor oversight. The manufacturer is required to submit a list of known or suspected impurities within the treatment chemical formulation and the maximum percent or parts by weight of each impurity along with a list of toxicological data of the manufacturer's product including all of the contaminants. There are no published exceptions to this General Requirement, which is published by NSF as uniformly applied to all direct water additives.

NSF's statement of omission of this critical data from manufacturers of fluoridation chemicals reinforces the statutory necessity for the responsible parties to confirm compliance from the specific chemical provider.

In addition to the manufacturer/producer, ANSI/NSF Standard 60 also requires other entities in the chain of delivery of a product, including repackagers, to conform to General Requirements and annual inspection.

NSF is not able to discharge any responsibility of the manufacturer or any other party

NSF International is not a government agency, and may have no duty of care to consumers.

NSF Disclaimer: "NSF, in performing its functions in accordance with its objectives, does not assume or undertake to discharge any responsibility of the manufacturer or any other party."

Manufacturer's Safety Data Sheets do not fulfill Washington or NSF requirements

With this Notice the recipients shall also be informed that a Manufacturer's Safety Data Sheet or Materials Safety Data Sheet (MSDS) is not a valid substitute for specific submissions required by ANSI/NSF Standard 60, as an MSDS is not intended to, and does not, address the scope of data required by Section 3.2.1 of Standard 60.

Furthermore, without details of all contaminants, no interested party can determine whether the specific product fulfills the American Water Works Association (AWWA B703) requirement Section 4.3.1 Impurities, General: "The fluorosilicic acid supplied according to this standard shall contain no minerals or organic substances in quantities capable of producing deleterious or injurious effects on the health of those consuming water that has been properly treated with fluorosilicic acid."

This determination is not intended to be made by rhetoric or endorsement. Absent a statement by the manufacturer that their specific product is effective at reducing tooth decay when ingested and safe for all consumers at the range of water they drink, and absent appropriate submissions of data as required, claims of compliance with AWWA B703 should not be found reliable.

EPA and CDC are misrepresented as controlling authority for safety of hydrofluosilicic acid; Inappropriate standards are being applied to determine safety for such water additives

Any statement or inference that hydrofluosilicic acid meets EPA or any other federal agency safety standard is a misrepresentation and omission of fact.

U.S. Maximum Contaminant Levels (MCLs) and Washington MCLs are not intended to be safety standards for direct water additives.

MCLs are concentration points for specific contaminants at which the water operator is to limit a contaminant's concentration in the public drinking water or remediate the excess. MCL's are negotiated

with consideration for the availability of methodology and unique costs of measuring and removing contaminants from source water. They are not an invitation to "fill 'er up".

Maximum Contaminant Level Goals (MCLGs) are the appropriate standards to be used for optional water additives. MCLGs are maximum contaminant levels for which no known or anticipated adverse effects on human health occur including an adequate margin of safety. There should only be invitation to "fill 'er up" to the MCLG. NSF Standard 60 does not provide adequate safety when it allows optional water additives to cause contaminant levels to be raised above the MCLGs.

Hydrofluosilicic acid is a direct water additive. It does not occur in water naturally in its commercially available form, and is processed by the phosphate fertilizer industry without any federal quality control for safety or effectiveness of the product.

On July 7, 1988, by Notice in the Federal Register (53 FR, 25586), U.S. EPA terminated oversight responsibilities for water additives, which at that time was limited to an informal advisory role, in favor of industry-established standards which individual states or water suppliers are free to adopt.

Tudor T. Davies, Director, Office of Science and Technology, U.S. EPA, states in a letter to George Glasser on April 2, 1998, "In the U.S., there are no Federal safety standards which are applicable to drinking water additives, including those intended for use in fluoridating water."

Statements of safety and effectiveness of hydrofluosilicic acid, coming from, or attributed to, Centers for Disease Control are equally misrepresentative, as the CDC has no authority from Congress to determine or endorse the safety or effectiveness of any direct water additive.

Congress has defined a drug as "articles intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease" and "articles intended to affect the structure or any function of the body of man." (21 U.S.C. §321)

Congress has ordered and the United States Food and Drug Administration (U.S. FDA) has replied to Congressional investigation that the FDA is the only government agency with the authority to approve or reject any claim of safety or effectiveness for any product that is intended to cure, mitigate, treat or prevent any disease in man.

Promoters of fluoridation and legislative bodies have attempted to circumvent this status by restricting their claims of safety and effectiveness to the public policy. Any statement that a specific manufacturer's hydrofluosilicic acid is safe and effective thrusts that claim into the jurisdiction of the FDA and requires approval for such claim.

Claims of authority derived from a 1979 Memorandum of Understanding (MOU) between the U.S. EPA and U.S. FDA, in which the two parties appear to agree that U.S. EPA will perform duties concerning water additives, did at no time address water additives intended to perform as medication, treatment, prevention, or in any manner as a drug, so was never on point for the issue of substances intended to treat humans rather than the water.

The 1979 MOU is further not controlling, and non-operative for U.S. EPA's jurisdiction over direct water additives, as on July 7, 1988 U.S. EPA terminated its informal advisory function on additives that was essential to the MOU Terms of Agreement.

Legal actions confirm U.S. Food and Drug Administration authority over safety and effectiveness of a product

The U.S. Supreme Court has confirmed that it is Congress and the language of the statute that controls the jurisdiction of the FDA Act, not a statement by an agency or another governmental entity. FDA v. Brown & Williamson, (529 U.S. 120 (2000)).

In a December 2003 decision of widespread importance, the U.S. District Court ruled, and was not challenged, that even the U.S. government under emergency conditions of war can not force an individual to be medicated with a substance that has not been specifically approved for the purpose it is intended, and especially approved in the manner it is administered.

The Court ruled that the approval of one substance, or manner of delivery, does not translate to an approval of another similar substance or different mode of delivery.

The Court clarified that the fact that the use of the anthrax vaccine was also subject to action by the FDA, and that the FDA had not taken action, did not refute the relevancy of the evidence that the drug was not approved by the FDA, and thus was "arbitrary" and therefore could not be sustained. (Doe v. Rumsfeld, 2003 U.S. Dist. LEXIS 22990 December 22, 2003)

FDA states in their 2000 response to Congressional investigation on fluoride: "Fluoride, when used in the diagnosis, cure, mitigation, treatment, or prevention of disease in man or animal, is a drug that is subject to FDA regulation," and that no fluorine-containing product intended for ingestion for the purpose of reducing tooth decay has ever been approved for safety and effectiveness. Products such as oral drops and tablets of fluoride are on the market under the umbrella of dietary supplements and vitamins and are regulated as such with a general concern for good manufacturing processes and labeling, but without the determination of safety or efficacy required of a registered drug.

American Dental Association (ADA) denies accountability for representations of safety, and omissions of material fact

In the California case of Tolhurst v. Johnson & Johnson, the American Dental Association argues to the Court, and is dismissed from liability for its omissions of material fact and its claims of safety, on the grounds that ADA is a trade association with no duty of care to the general public.

Attributing authoritative claims of safety and effectiveness or a denial of existing evidence without disclosure that such statements are not intended to be reliable representations for which ADA accepts accountability, is a misrepresentation and omission of material fact.

Specific misrepresentations and omissions of material facts about the significant concentrations of arsenic in hydrofluosilicic acid

Washington State has not adopted a Public Health Goal (PHG) or Maximum Contaminant Limit Goal, (MCLG) for arsenic., a contaminant found in hydrofluosilicic acid. California's Public Health Goal (PHG) for arsenic, which represents California EPA's established scientific point of safety for lifetime consumption at the risk rate of one person per million for lung/bladder cancer is 4 parts per trillion.

In the NSF response to Congressional investigation by the House Committee on Science, we understand that NSF International reports an "acceptable" sample of 1.66 parts per billion arsenic contamination of hydrofluosilicic acid after dilution at the manufacturer's declared Maximum Use Level. We understand that this concentration represents a lifetime risk of lung/bladder cancer of more than 1 person per 1000.

This translates to 18 additional lung/bladder cancers in the population served by Port Angeles.

At 0.5 ppb arsenic concentration after dilution, we understand that the data presented by the NRC Report on Arsenic that prompted the lowering of the U.S. MCL and California PHG for arsenic calculates that one person in 3000 will risk lung/bladder cancer because of the addition of hydrofluosilicic acid.

Reporting these risks as non-detected or representing them as non-significant is a misrepresentation of material fact.

Failure to inform that ingestion of 1 liter of fluoridated water per day increases fluoride dosage over currently allowable prescription for children and EPA Reference Dose (RfD) for fluoride.

The City has included flyers in utility bills announcing addition of fluoride to municipal water but these flyers have never addressed the need to restrict intake of the fluoridated water by infants and small children. This failure to inform recipient water consumers of a material fact that the increased concentrations of the fluoride ion in the drinking water delivered by the City will result in a higher expected dosage of fluoride to children under 6 years of age than their family doctor can now prescribe.

Current limitations on prescription dosages of fluoride per day are: none for infants, 0.25 mgs for 6 months of age to 3 years, and 0.5 mgs for children 3 to 6 years of age. Just two cups of fluoridated water (16 ounces total) now contains approximately 0.5 mgs of fluoride.

The Integrate Risk Information System (IRIS) Reference Dose (RfD) for fluoride is 0.06 mg/kg/day.

Failure to inform that the expected dosage from the addition of hydrofluosilicic acid will exceed the RfD of fluoride for a significant percentage of children is a misrepresentation and omission of material fact. A 22 lb. child will receive the allowable fluoride dose from approximately 2 cups of water/day. Other sources of fluoride in food will then cause the allowable dose to be exceeded.

Representations that critics of the use of hydrofluosilicic acid "claim" that some children will receive excessive dosages as a result of water fluoridation is a misrepresentation and omission of material fact. It is also an omission of material fact that the incidence of dental fluorosis is higher in fluoridated communities than in non-fluoridated communities.

Failure to inform of increased arsenic exposure

The City likewise has failed to disseminate information on hydrofluosilicic acid's attendant contaminants, resulting in a failure to inform recipient water consumers and health professionals of a material fact that the addition of hydrofluosilicic acid will be accompanied by an increase of arsenic and other contaminant exposures, over waters that were previously delivered.

Failure to comply with U.S. Safe Drinking Water Act requirements for Consumer Confidence Reports

Failure to disclose on annual water quality reports the material fact that a source of arsenic or other contamination in the water is the hydrofluosilicic acid additive is not in compliance with the U.S. Safe Drinking Water Act for Consumer Confidence Reports.

Misrepresenting the dangers, and specific failures to warn

Recipients of public drinking water are captive consumers in that the water is delivered to the consumer's home with assurances of safety. Without warning of material facts, including absorption of fluoride from dermal exposures (bathing, swimming etc.), the consumer does not have the information to consider whether abandoning the water supply, re-treating their specific water supply, or otherwise protecting themselves from harm, is necessary or appropriate.

Nondisclosures by water suppliers in the chain of delivery by not revealing that susceptible populations, and effects of susceptibility, are already identified in government scientific literature, including the Acute Toxic Substances Disease Registry (ATSDR) and the December 2006 NRC report on Fluoride, do not allow the consumer the opportunity to assess whether the product consumed is safe for their specific health conditions, and constitutes a specific failure to warn.

Blanket denials of the existence or relevance of evidence of harm that can occur from consumption of water containing hydrofluosilicic acid and its contaminants, from dosages received from water alone, or in combination from other sources, are misrepresentations and omissions of material fact.

Nondisclosure that any statement of safety is based on limited consumption of water containing hydrofluosilicic acid and its contaminants is a misrepresentation and omission of material fact.

Denial of warning to parents of an infant's susceptibility to dental fluorosis and other diseases if water containing hydrofluosilicic acid is mixed with infant formula or juice concentrates constitutes a negligent failure to warn.

Insufficiency in public warning

Attempts to evade public disclosure consistent with the universality of exposure to public water for drinking and bathing by providing information and warnings that are accessible only after the economic burden of owning or using a computer to check a water supplier's web site, or consulting a health professional for that specific purpose, can hardly be deemed sufficient when the stated purpose of delivering hydrofluosilicic acid through the public water system is that the target recipients are the indigent and those that do not have economic access to a health professional.

Providing notice at the initiation of fluoridation does not adequately inform parents of newborns who may not have anticipated any interest, or new residents, and constitutes a failure to properly warn.

Addition of hydrofluosilicic acid to municipal water is not the traditional utility function which has led to consumer expectations of professional control of a vital resource.

The proposed addition of hydrofluosilicic acid is not treatment of water. It is added to water, after treatment of water, for the sole purpose of treating humans.

Furthermore, the decision to fluoridate is not an administrative duty such as all other treatment decisions, i.e., using aluminum as a flocculating agent, or using chloramines in place of chlorine in the secondary stage of disinfection.

Each decision to add fluoridation chemicals to water by any entity in the State of Washington has been made separately and distinctly as a legislative act to affect the bodily functions of humans to be more resistant to tooth decay. At no time has there been a claim that it increases the potability of water, nor that it improves the production, storage, supply, or distribution of water.

It appears that uneven distribution, and various combinations of blending will result in only some of PUD's residents receiving fluoridated water, yet without separate costs per delivery line, some residents will be paying for the pass-through associated costs of fluoridating the water without receiving the claimed benefit. Each person paying for the associated proportional share of the pass-through fluoridation costs cannot be charged for said costs unless the person is actually receiving his proportional share.

Personal liability

We also hereby provide formal notice that as the water operator is a learned intermediary delivering a purchased product for delivery to constituents, any actions or omissions that do not heed these aforementioned violations of code and misrepresentation or omissions of material fact may expose the water operator to liabilities for which you as a responsible party may not have provided adequate disclosure of known or reasonably anticipated risks to financial auditors for the purpose of establishing appropriate credit ratings, or securing adequate insurance coverage to cover the breadth of potential claims.

Failure to address the risks inherent in noncompliance with State law in a timely fashion, and omissions of your disclosure, may trigger exceptions to the normal hold-harmless protections of individuals acting in a governing body's behalf.

City's Agreement with WSDF is not breached if improper hydrofluosilicic acid use is stopped

There is widespread belief that fluoridation of municipal water in Port Angeles is a "done deal" because the City signed an Agreement with Washington State Dental Foundation which may require the City to pay back to the Foundation the \$433,000 cost of building the fluoridation facility unless fluoridation continues for 10 years.

The Agreement which was entered into March 1, 2005, at Section 2.2, requires the City to perform "all obligations relating to the operation and ownership of the System." One such obligation of the Agreement is for the City to comply with WAC 246-290-220 and only add hydrofluosilicic acid that fully complies with Section 3.2.1 of ANSI/NSF Standard 60. If neither NSF nor a manufacturer can timely provide the City with documentary proof of compliance with Section 3.2.1 of Standard 60 regarding toxicity studies for the hydrofluosilicic acid and all of its contaminants, the City for reasons beyond its control is prevented by State regulation from continuing to add hydrofluosilicic acid to the public water supply. Section 8.9 of the Agreement provides that the City will not be deemed in violation of the Agreement if it is prevented from performing any of its obligations under the Agreement for any reason beyond its control.

Summary

This Actual and Constructive Notice provides you with statements of fact concerning the selection, administration, and dissemination of information concerning hydrofluosilicic acid and its contaminants; appraises you of misrepresentations and omissions; clarifies authority and acceptance of liability; informs you of unlawful activity and noncompliance with Washington regulations; and informs you of the risk of your ignoring your own responsibilities for effecting corrective action.

With this notice, any reliance on a statement by the chemical provider, or reliance on a possibly faulty NSF certification, without specific proof that the source of fluoridation chemicals, and any other re-packager or other entity in the chain of delivery that is so required, has fulfilled all of the requirements stated in Standard 60, including General Requirement 3.2.1, or any failure to meet the Standard by any entity in repackaging or any other aspect of distribution, including annual inspections, is contrary to your duties as a learned intermediary.

Responsible parties have the authority and duty to either personally correct, or demand correction, of misrepresentations, omissions, and unlawful or noncompliant actions.

We thus hereby provide you with formal notice that any action on your part to accept delivery of water that has been subject to the addition of any fluoridation chemical supplied by a manufacturer that has not fully complied with all ANSI/NSF Standard 60 requirements for certification is in violation of Washington law.

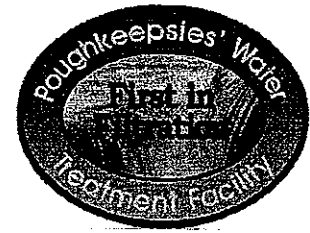
You of course have the right, and we suggest the duty, to confirm the factual representations herein, but this Notice hereby asserts that from this point forward, you know or with reasonable care should know of the facts set herein before you, and that any further actions that you may effect, including any inquiry that a prudent person may institute to confirm statements made herein, are deemed to be performed with this knowledge. If we can be of assistance in providing you with documents referenced, please contact us.

Respectfully, on this 2nd day of January, 2008 in Clallam County, Washington,

Eloise Kailin, M. D.
Secretary, PPF
P. O. Box 1677
Sequim, WA 98382

Poughkeepsies' Water Treatment Facility

3431 North Road
Poughkeepsie, New York 12601
(845) 451-4173



May 9, 2007

Solvay Fluorides, LLC
PO Box 27328
Houston, TX 77227-7328

Re: Fluoridation

Dear Sir or Madam:

I am writing to you as Chairman of the Poughkeepsies' Joint Water Board. I am not addressing this letter to a particular person because I do not know who to address it to. I spoke to your receptionist at the 800-765-8292 phone number and she would not provide her name or transfer me to a manager.

As you may or may not be aware, our Board has been reviewing factors relating to the re-institution of our fluoridation program that was temporarily suspended approximately 18 months ago. As you may imagine we have received endorsements, claims, counter claims, and counter counter claims on the public policy, but little information on the actual substance normally used, so we now turn to you for a specific response and additional data on your exact substance intended for our use.

With the publication of the National Research Council Report on Fluoride in December 2006, including evidence of thyroid impairment at fluoride levels below expected consumption levels of "optimally" fluoridated tap water without considering other exposures, new recommendations from the American Dental Association for not using fluoridated tap water to mix infant formula, a shift in the scientific determination of the mechanism by which fluoride may benefit oral health, and an unresolved scientific question of complete dissociation of fluosilicic products, questions of safety and effectiveness are once again before us.

1. To assure that this Board has selected a product that is consistent with the legislative intent of safely and effectively reducing the incidence of tooth decay, we request that you or some entity in the chain of delivery provide us with the following declaration for your fluosilicic product:

Solvay Fluorides, LLC
May 9, 2007
- Page 2 -

"This specific product, as it is constituted and inclusive of contaminants, is effective at reducing the incidence of tooth decay when ingested in dilution amounts consistent with fluoridation goals of 0.7 to 1.2 milligrams of fluoride ion per liter, and is safe for the full range of expected human consumption at these dilution ranges, without known or anticipated adverse health effects over a lifetime, including for infants, children, the elderly, and other populations afforded equal protection."

Please state Yes if each shipment of your product can be accompanied by the above declaration as a condition of purchase.

Please state No if you, or any other entity in the chain of delivery, are not able to make this declaration for your product.

2. Please provide our Board with a list of all of the published chronic toxicological studies on your fluosilicic acid product, with or without commensurate contaminants. If you are not able to provide a list conforming to this request, please state so. If you are able to provide a list conforming to this request for toxicological studies on long term health effects for fluosilicic products, please identify the manufacturing sources of the product.
3. As the U.S. EPA has stated in several instances since 2000 that it cannot produce empirical scientific data confirming the complete dissociation of fluosilicic acid products, please provide any studies (rather than reviews) published in recent years that state unequivocally that fluosilicic acid products completely dissociate.
4. To assure that this Board has selected and will be administering a direct water additive product that meets all New York codes and regulations, please provide a dated copy of the approved application that was in force at the time of your contractual agreement to sell fluoridation chemicals to the Poughkeepsies' Water Treatment Facility that the manufacturer, or any other entity in the chain of delivery such as re-packager, is required to submit to NSF, International in order to achieve manufacturer's or re-packager's certification. This document production shall include the dated

C-3

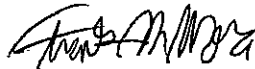
Solvay Fluorides, LLC
May 9, 2007
- Page 3 -

submission that meets General Requirement 3.2.1 of ANSI/NSF Standard 60, as published, by including:

- a) A proposed maximum use level for the product;
- b) The composition of the formulation (in percent or parts by weight for each chemical in the formulation);
- c) The reaction mixture used to manufacture the chemical if applicable;
- d) Chemical abstract number (CAS number), chemical name, and supplier for each chemical present in the formulation;
- e) A list of known or suspected impurities within the treatment chemical formulation and the maximum percent or parts by weight of each impurity;
- f) A description or classification of the process in which the treatment chemical is manufactured, handled and packaged;
- g) Any selected spectra (e.g. UV/visible, infrared) that has been required; and
- h) A list of published and unpublished toxicological studies relevant to the treatment chemical and the chemical and impurities present in the treatment chemical.

Thank you.

Very truly yours,



Frank M. Mora
Chairman

FMM/ecw

cc: Water Board Members
Dutchess County Department of Health



SOLVAY FLUORIDES

A SUBSIDIARY OF SOLVAY CHEMICALS, INC.

D-1

July 19, 2007

Frank M. Mora, Chairman
Poughkeepsies' Water Treatment Facility
3431 North Road
Poughkeepsie, NY 12601

Re: Fluoridation

Dear Mr. Mora:

In regard to your letter dated May 9, 2007 questioning the safety of the products used to fluoridate water supply, Solvay Fluorides, LLC recommends that you contact the Centers for Disease Control and Prevention (CDC) with your questions. The CDC is the leader in knowledge of these products and their safe use. Kip Duchon is the contact at the CDC. His contact information is:

Kip K. Duchon
National Center for Chronic Disease Prevention and
Health Promotion Division of Oral Health
4770 Buford Highway, MS-F10
Atlanta, GA 30341
Ph: 770-488-6076
Fax: 770-488-5575
cfx3@cdc.gov

Please feel free to contact me if you should have any further questions.

Thank you,

Jill Garde
HFS Administrator

Solvay Fluorides, LLC
A Subsidiary of Solvay Chemicals, Inc.
3333 Richmond Avenue, Houston, Texas 77098
Tel: 713.525.6700 FAX: 713.525.7805
www.solvaychemicals.us



Responsible Care
Good Chemistry at Work

UNDER OATH DEPOSITION OF STAN HAZAN
DATED: March 10, 2004

Page 1

4 BY MR. NORDREHAUG:

5 Q. Good afternoon, Mr. Hazan, I appreciate your
6 coming to the office for your deposition. I'm Kyle
7 Nordrehaug. I represent the plaintiffs in this case.

Page 2

17 Could you state your name for the record.

18 A. Stan Hazan.

19 Q. And with whom are you employed currently?

20 A. NSF International.

21 Q. How long have you been employed by NSF
22 International?

23 A. Fifteen years.

24 Q. Okay. And what is your position there?

25 A. Currently I am the executive director for the

page 3

1 Center for Public Health Education --

2 Q. Okay.

3 A. -- which is the training and education arm of
4 NSF.

5 Q. Okay.

6 A. And what does the -- I'm sorry -- training and
7 information branch, did you say?

8 A. Center for Public Health Education.

9 Q. What is their function generally at the
10 NSF International?

11 A. To provide training and education in standards,
12 testing, variety of food safety issues, and we're else
13 responsible for the conferences and seminars that NSF
14 puts on.

15 Q. Okay. And is that just with respect to water
16 additives or substances other than water additives?

17 A. Substances other than water additives as well.

18 Q. Okay.

19 A. So --

20 Q. But water additives would fall within
21 that --

22 A. Correct.

23 Q. -- within your sphere of what you do at
24 NSF International?

25 A. Yes.

Page 5

8 Q. Okay. Now, if I could ask you, what is your
9 educational background?

10 A. I have a degree in chemistry and biochemistry
11 from the University of Toronto.

12 Q. Okay.

13 A. And an MBA from the University of Michigan.

21 Q. Okay. I want to ask you a little bit --
22 you've been designated as an expert in this case. And
23 if I could just ask you how you've been designated and
24 if I could -- it says here that Stanley Hazan will
25 testify regarding the scope of NSF ---.

Page 6

1 standards 60 drinking water chemicals health effects.

2 Is that something you are going to -- you

3 intend to give an opinion on in this case?

4 A. Yes.

5 Q. Okay. And I'll get to the substance of your

6 opinions.

7 A. Okay.

13 Q. It says you're also going to testify regarding

14 the NSF certification procedures.

15 Is that another matter you're going to give an

16 opinion on in this case?

17 A. Yes.

Page 48

13 Q. Okay. So 3.2.1 has not been applied in the

14 case of HFSA? Are you aware?

15 A. I'm rereading the question. I want to see if

16 the reference is still current. Because that's a 1999

17 standard. 342. The current requirements, general

18 requirements of the 3.2, which is 3.2.1 specifically,

19 manufacturer shall submit at a minimum the following

20 information for each product, a proposed maximum use

21 level for the product which consistent with requirements

22 of an exhibit *[SFPLT/]. A complete formulation

23 information which includes the composition of the

24 formulation. The reaction mixture and that's if

25 applicable. Chemical abstract number, chemical name

Page 48

- 1 supplier for each chemical present in the formulation.
- 2 A list of known or suspected impurities within the
- 3 treatment chemical formulation and the maximum percent
- 4 or parts by weight of each impurity. Description or
- 5 classification of the process in which the treatment
- 6 chemical is manufactured, handled and packaged. And
- 7 then there are a couple more selected *spectra and then
- 8 when available list published and under published tox
- 9 studies relevant to the treatment, et cetera.

Page 50

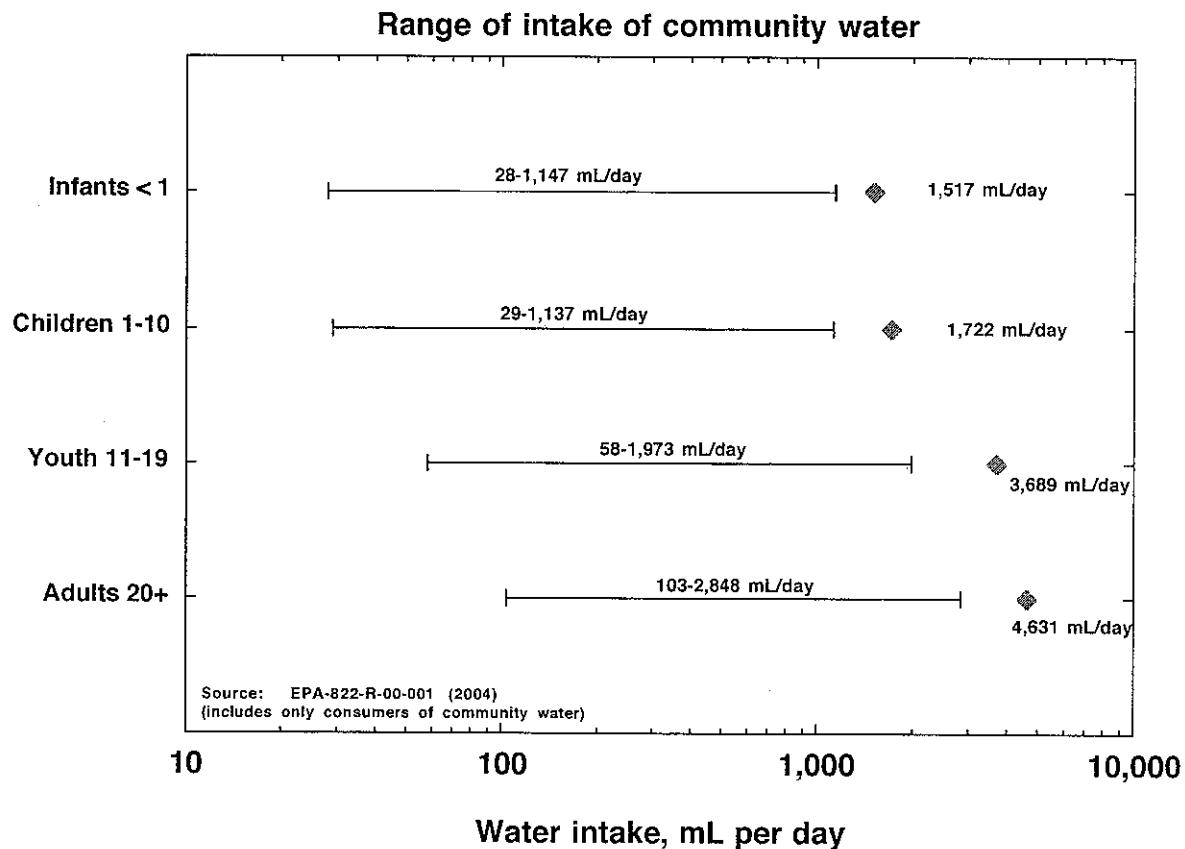
- 5 so my question is, is HFSA one of those products?
- 6 A. HFSA is one of the products listed in the
- 7 standard that has designated contaminants to be tested
- 8 for.
- 9 Q. Okay. But does it have -- prior to approving a
- 10 manufacturer, does NSF require the manufacturer to
- 11 provide a list of published and unpublished
- 12 toxicological studies relevant to HFSA and the chemical
- 13 * impurities present in HFSA?
- 14 A. I would say that the HFSA submissions have not
- 15 come with the tox studies referenced.
- 16 Q. Okay.
- 17 A. However, that is -- since that is not my
- 18 department, I probably should defer that to the people
- 19 in that department.
- 20 Q. Okay.

Adverse Health Effects from Fluoride in Drinking Water

Comments to the Metropolitan Water District
Los Angeles, California
August 20, 2007

Kathleen M. Thiessen, Ph.D.
SENES Oak Ridge, Inc., Center for Risk Analysis
Oak Ridge, Tennessee

Slide 1

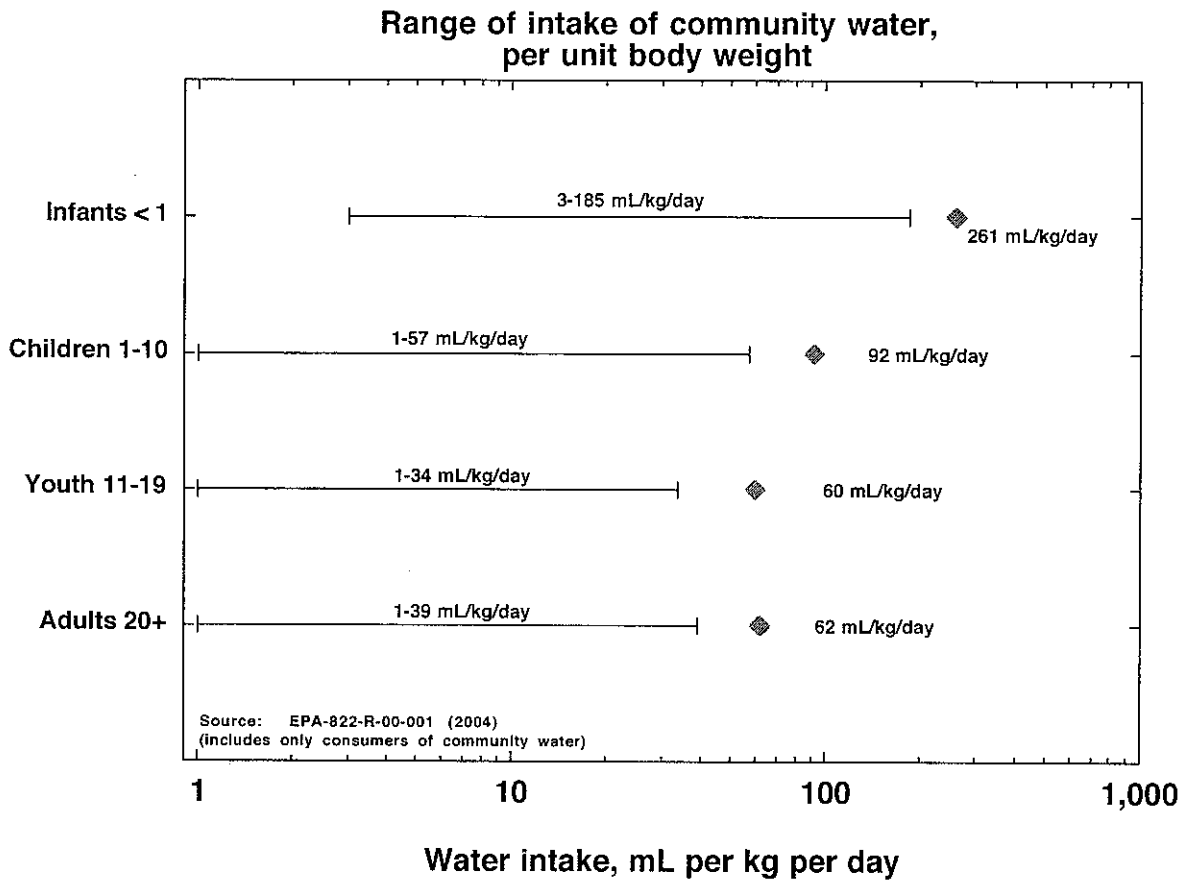


The first graph illustrates the expected range of consumption of community water (public tap water) for various age groups, in quantities of milliliters per day (mL per day). The ranges include only people who actually consume tap water. Note that some people consume substantially more tap water than the usual range. This information is from an EPA report published in 2004.

The total consumption of community water shown here is not to be confused with total fluid consumption or total water consumption. It does not include well water, bottled water, or

commercial beverages. It does include water consumed directly and water used to prepare household or restaurant foods and beverages.

Slide 2

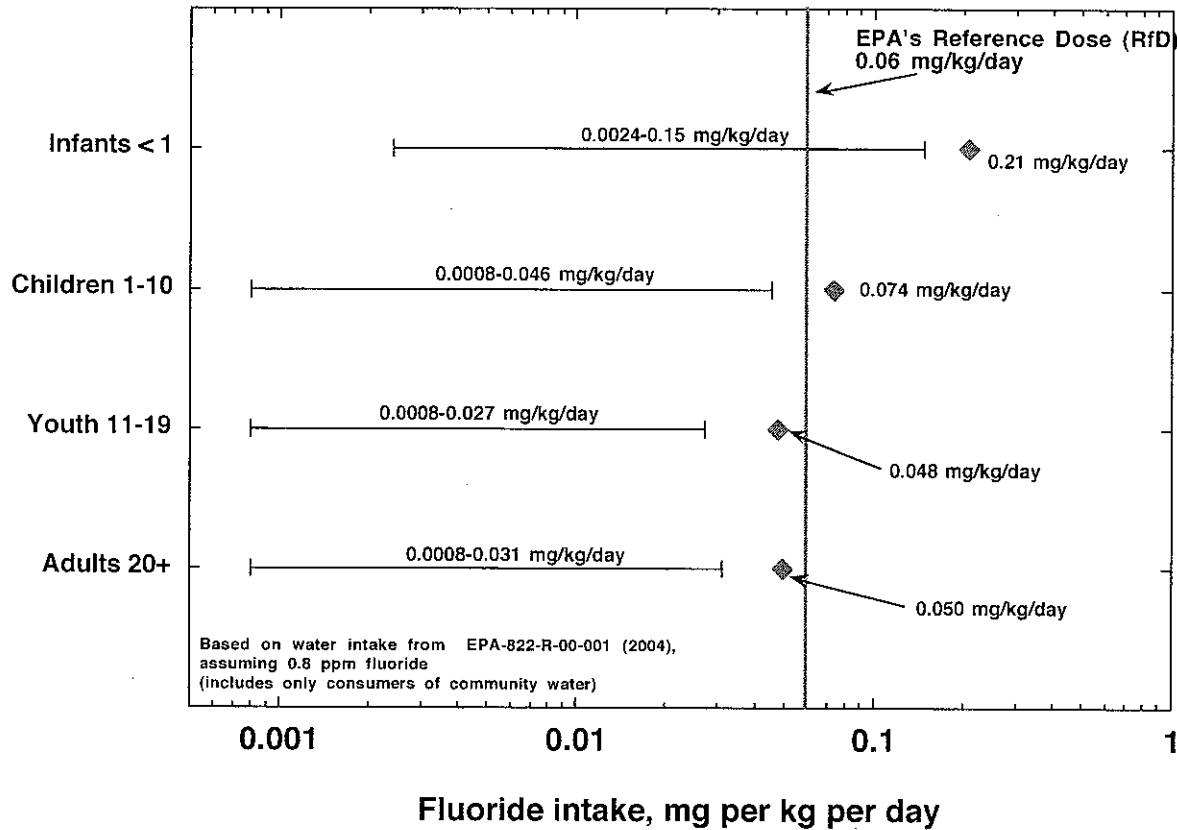


The second graph shows the same information as in the first slide, but in terms of water intake per unit body weight (milliliters of community water intake per kg of body weight, or mL per kg per day). Note that infants have the highest tap water consumption per unit body weight, with some infants reaching more than 250 mL per kg per day.

In general, the people with the highest tap water intakes include babies fed formula made with tap water, people with certain medical conditions (e.g., diabetes insipidus, diabetes mellitus) or taking certain medications (e.g., lithium), people in unairconditioned residences in hot climates, people who work outside in hot climates or do heavy physical labor, and athletes.

Slide 3

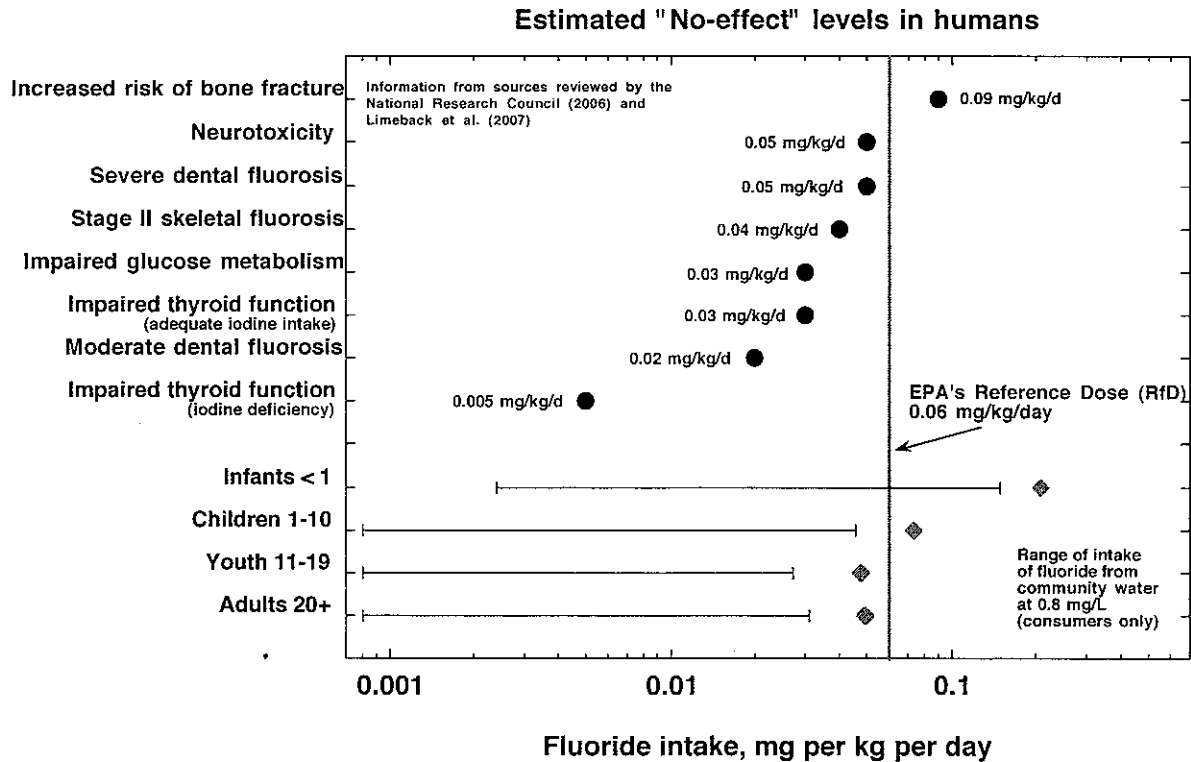
Range of fluoride intake from community water, assuming 0.8 ppm fluoride in the water



The third graph shows estimated fluoride intakes for each age group (mg of fluoride per kg of body weight per day), assuming the range of tap water intakes shown in Slide 2 and a fluoride concentration in the tap water of 0.8 ppm (0.8 mg fluoride per liter of water). Also shown is EPA's reference dose, which is defined as "an estimate of a daily oral exposure to the human population (including sensitive subgroups) that is likely to be without an appreciable risk of deleterious effects during a lifetime." For fluoride, the reference dose is 0.06 mg per kg per day. As seen in the graph, many infants have a fluoride intake just from tap water that exceeds EPA's reference dose for fluoride. The children (ages 1-10) with the highest water consumption also exceed EPA's reference dose. Older children (youth) and adults with the highest water consumption are very close to EPA's reference dose.

Note that this graph shows estimated fluoride intakes only from tap water. These estimates do not include fluoride intakes from other sources, such as commercial beverages (which are often made with fluoridated tap water), toothpaste, tea, or food. When these other sources of fluoride intake are included, total fluoride intakes for many members of all age groups exceed EPA's reference dose.

Slide 4



The final graph shows the estimated fluoride intakes from tap water from Slide 3, plus estimates of the "no-effect" levels for various adverse health effects. These "no-effect" levels represent fluoride intakes at or below which most people are not expected to experience any harmful effects. Note that these are estimates based on average exposures of study populations; these estimates do not include any margin of safety, and they might not be protective for all individuals. Intakes above these levels cannot be considered safe.

Note also that most of these "no-effect" levels are lower than EPA's reference dose for fluoride. In other words, EPA's reference dose is not protective for most of these health endpoints.

Note also that most of these "no-effect" levels are exceeded by many members of the population, of all ages, just from fluoride at 0.8 ppm in community drinking water. When other fluoride sources are included, even more people are expected to exceed the "no-effect" levels. In order to be "safe" for all members of the population, fluoride intakes for all people must be kept below the lowest "no-effect" levels, with all sources of fluoride intake are included, and with an adequate margin of safety.

This list of adverse health effects does not include cancer. A carcinogenic (cancer-causing) effect of fluoride cannot be ruled out from the available data, and at the very least, a cancer-promoting effect is likely. For carcinogenic substances, the risk of cancer increases with the amount of exposure, such that even a very low exposure carries with it some cancer risk.

In conclusion, I would like to quote from the Director of Laboratories, Department of Water Supply, Gas and Electric, of the City of New York, from a presentation made in 1956 but still relevant today:

The continued promotion of water supply fluoridation in [the] face of mounting adverse evidence an criticism requires some evaluation. It seems that the proponents hit upon an idea years ago which appealed to them, and which they felt was sound. As their claims for safety were progressively discredited, rather than acknowledge this, they persisted in condoning such evidence. At the same time they were lending their prestige to such equivocation. Certainly the proponents of fluoridation are not intent upon poisoning or harming anyone, however, the dilemma of prestige is a very difficult matter to resolve.

The proponents have tried to demonstrate various factors of safety which are patently naïve. . . . It has been customary to consider a minimal factor of safety of not less than 10 for substances which may be admitted to water supplies. This would mean that ten times the amount of the proposed substance when present in the water supply would be definitely without harm to human or beast. It is obvious from the knowledge of fluoride toxicity that such factor of safety cannot be established when fluoride is added to the public water supply at the level recommended by the proponents of fluoridation. In view of the fact that the range of water consumption may vary over a ratio of 20 to 1 the insistence upon a factor of safety of 10 is exceedingly moderate.

It must be concluded that the fluoridation of public water supplies is a hazardous procedure, people are bound to get hurt, it remains to find out how many and when. I do not believe the water supply fraternity is interested in demonstrating this with wholesale experimentation on populations.


References (Provided in written submission):

EPA 2004 (water consumption)
EPA (IRIS—the RfD)
NRC 2006
Limeback et al. 2007
Nesin (1956)

G-1

G-1

FLUORIDE
new limits
needed



The U.S. Environmental Protection Agency (EPA) sets standards for contaminants in public water. The Maximum Contaminant Level Goal (MCLG) is the concentration at which no adverse health effects are expected to occur.

In 1986, EPA set both the enforceable MCLG and an enforceable MCL for fluoride at a concentration of 4 milligrams per liter (mg/L) or 4 parts per million. In March, 2006, scientists convened by the National Research Council reported unanimously that the present MCLG should be lowered.

"Lowering the MCLG will prevent children from developing severe enamel fluorosis and will reduce the lifetime accumulation of fluoride into bone that the majority of the committee concluded is likely to put individuals at increased risk of bone fractures and possibly skeletal fluorosis."

"With more severe forms of fluorosis, caries risk increases because of pitting and loss of the outer enamel."

Ref.: Fluoride in Drinking Water: A Scientific Review of EPA's Standards, National Research Council, March 2006. Pgs. are 1, 2, 299, 87. www.nap.edu/catalog/11571.html
Protect the Peninsula's Future. P.O. Box 1677, Sequim, 98382. www.olympus.net/community/oc/pf.htm

FLUORIDE
stains
teeth



Too much fluoride swallowed before age 8 stains and pits teeth. This abnormality appears in milk form in from 12 to 45% of residents of non-fluoridated areas, and in from 20 to 75% where water is fluoridated. (Ref. 1)

Some children develop fluorosis even at water fluoride concentrations as low as 0.4 mg/L. (Ref. 2, p. 65) Port Angeles' levels are 0.8-1.3 mg/L.


Severity ranges from mild white discoloration to severe brown staining and pitting. It is estimated that approximately 2% of U.S. schoolchildren might experience perceived aesthetic problems from exposure to fluoride (at levels similar to Port Angeles' water). (Ref. 2, p. 98)

"The council concluded that the cosmetic effects of enamel fluorosis could lead to psychological and behavioral problems that affect the overall well-being of the individual." (Ref. 2, p. 14)

"Treatments include bleaching, microabrasion, and the application of veneers or crowns... Crowns are usually used as a last resort." (Ref. 2, p. 88)

Ref. 1 Pg. 19 Environmental Checklist City of PA, Municipal Water Fluoridation, 3/9/04
Ref. 2 National Research Council, Fluoride in Drinking Water: A Scientific Review of EPA's Standards. www.nap.edu/catalog/11571.html
PROTECT THE PENINSULA'S FUTURE. P.O. BOX 1677, SEQUIM 98382. www.olympus.net/community/oc/pf

FLUORIDE
NOT SAFE FOR
BABIES



Thanks to National Research Council's publication last March, of "Fluoride in Drinking Water: A Scientific Review of EPA's Standards" (Ref. 1), first the Federal Food and Drug Administration (Ref. 2) and the American Dental Association (ADA) issued warnings that infants should avoid fluoridated water.

The ADA on Nov. 9th stated that only water free of or very low in fluoride should be used to prepare formula for infants and said that breast milk is the most complete form of nutrition for infants. (Ref. 3).

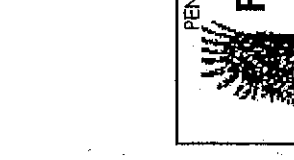
Breast milk contains only about 1/100 the fluoride now in city water. Ref. #1 p. 27-33

Scientists suspect fluoride puts babies and small children at increased risk for bone fractures and for forming abnormal tooth enamel (fluorosis). Ref. #1, p. 69-70

Water fluoridation not safe for everyone

Ref. 1 www.nap.edu/catalog/11571
Ref. 2 US FDA/CFSAN - Health Claim Notification 10/31/06
Ref. 3 ADA.org
PROTECT THE PENINSULA'S FUTURE. P.O. BOX 1677, SEQUIM 98382 www.olympus.net/community/oc/pf

FLUORIDE
MAKES YOU
FAT?



Don't laugh! Fluoride poisons enzymes that regulate many hormones, including your thyroid. (Ref. pp. 192-198)

"The chief endocrine effects of fluoride exposures in experimental animals and in humans include decreased thyroid function..." (p.7) This makes you burn fewer calories, so you store more fat.


Decreased thyroid function, even when very mild, ("sub-clinical"), is associated with increased blood cholesterol, increased risk of heart disease, depression, cognitive dysfunction, and, in pregnant women, decreased IQ of their offspring. (p. 198)

Even doses of fluoride well below those in P.A. drinking water are thought to lower thyroid function. (p. 193)

Water fluoridation not safe for everyone

Ref. 1 Fluoride in Drinking Water: A Scientific Review of EPA's Standards. www.nap.edu/catalog/11571
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FLUORIDE
EFFECTS ON
DIABETICS



The National Research Council's 2006 Report to EPA on drinking water fluoridation finds:

"...sufficient fluoride exposure appears to bring about increases in blood glucose or impaired glucose tolerance in some individuals and to increase the severity of some types of diabetes..." (p. 217)

"...In addition, diabetic individuals will often have higher than normal water intake, and consequently will have higher than normal fluoride intake for a given concentration of fluoride in drinking water. An estimated 16-20 million people in the U. S. have diabetes mellitus..." (p. 217)

Water fluoridation not safe for everyone

Ref. 1 Fluoride in Drinking Water: A Scientific Review of EPA's Standards. www.nap.edu/catalog/11571
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A-5

12-17-06
A-4

12-24-06
A-9

5-2

1-2

PENINSULA POINTERS

FLUORIDE

new limits
needed

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Ref.: Fluoride in Drinking Water: A Scientific Review of EPA's Standards, Council, March 2006. Pgs. are 1, 2, 299, 87. www.nap.edu/catalog/11571.html
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PENINSULA POINTERS

FLUORIDE

stains
teeth

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"Treatments include bleaching, microabrasion, and the application of veneers or crowns... Crowns are usually used as a last resort." (Ref. 2, p. 88)

Ref. 1 Pg. 19 Environmental Checklist City of PA, Municipal Water Fluoridation, 3/9/04
Ref. 2 National Research Council, Fluoride in Drinking Water: A Scientific Review of EPA's Standards. www.nap.edu/catalog/11571.html
Protect the Peninsula's Future. P.O. Box 1677, Sequim 98382. www.olympus.net/community/oc/pfp.htm

PENINSULA POINTERS

FLUORIDE

NOT SAFE FOR
BABIES

Thanks to National Research Council's publication last March, of "Fluoride in Drinking Water: A Scientific Review of EPA's Standards" (Ref. 1), first the Federal Food and Drug Administration (Ref. 2) and the American Dental Association (ADA) issued warnings that infants should avoid fluoridated water.

The ADA on Nov. 9th stated that only water free of or very low in fluoride should be used to prepare formula for infants and said that breast milk is the most complete form of nutrition for infants. (Ref. 3).

Breast milk contains only about 1/100 the fluoride now in city water. Ref. #1 p. 27-33
Scientists suspect fluoride puts babies and small children at increased risk for bone fractures and for forming abnormal tooth enamel (fluorosis). Ref. #1, p. 69-70

Water fluoridation not safe for everyone

Ref. 1 www.nap.edu/catalog/11571
Ref. 2 US FDA/CFSAN -- Health Claim Notification 10/31/06
Ref. 3 ADA.org
Protect the Peninsula's Future, P.O. Box 1677, Sequim 98382 www.olympus.net/community/oc/pfp.htm

PENINSULA POINTERS

FLUORIDE

MAKES YOU
FAT?

Don't laugh! Fluoride poisons enzymes that regulate many hormones, including your thyroid. (Ref. pp. 192-198)

"The chief endocrine effects of fluoride exposures in experimental animals and in humans include decreased thyroid function..." (p.7) This makes you burn fewer calories, so you store more fat.

Decreased thyroid function, even when very mild, ("sub-clinical"), is associated with increased blood cholesterol, increased risk of heart disease, depression, cognitive dysfunction, and, in pregnant women, decreased IQ of their offspring. (p. 198)

Even doses of fluoride well below those in P.A. drinking water are thought to lower thyroid function. (p. 193)

Water fluoridation not safe for everyone

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PENINSULA POINTERS

FLUORIDE

EFFECTS ON
DIABETICS

The National Research Council's 2006 Report to EPA on drinking water fluoridation finds:

"...sufficient fluoride exposure appears to bring about increases in blood glucose or impaired glucose tolerance in some individuals and to increase the severity of some types of diabetes..." (p. 217)

"...In addition, diabetic individuals will often have higher than normal water intake, and consequently will have higher than normal fluoride intake for a given concentration of fluoride in drinking water. An estimated 16-20 million people in the U. S. have diabetes mellitus..." (p. 217)

Water fluoridation not safe for everyone

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