INQUIRY INTO DENTAL SERVICES IN NSW

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Theme:		
Summary		

SUBMISSION TO INQUIRY INTO DENTAL SERVICES NSW

1. ISSUES

- 1. The Mid North Coast area is economically disadvantaged. Dental problems correlate strongly with economic disadvantage. Reintroduction of Government funded dental service is essential if we are to address issues. Safeguards can be implemented to ensure those who can afford private care do not use subsidised services.
- 2. Preventative approach eg Teeth for Life campaign is supported. Funding to be commensurate with scale of problem.
- 3. As part of preventative approach school syllabus needs to highlight issues and continue to educate re healthy diet and personal hygiene.
- 4. State and Federal Government must accept responsibilities. At present Local Government have been forced to fluoridate water supplies at an ongoing cost to Local Government. Dental care is not a Local Government responsibility. Despite calls for review of efficiency, effectiveness and safety of fluoridation the State refuses to fund this. I would recommend that the State pay ongoing costs of fluoridation. If nothing else it may prompt a long-overdue review.
- 5. Fluoridation is not an elegant solution to the dental problem. It is enabled by dated 1957 legislation and is continued without rigorous review. Over 99% of water is not ingested by people. Town water is used in industry, and for washing and gardening. It is overwhelmingly not used for drinking. With bottled water, water filters and widespread availability of sugary drinks, per capita ingestion of untreated town water is decreasing further. The beneficial effects of fluoridation have been diluted by numerous factors to a point where it is increasingly difficult to prove a difference in permanent teeth between fluoridated and non-fluoridated areas. See results of Armfield and Spencer (2004) in South Australia and Armfield and Spencer (2000) for NSW. The latter paper shows rate of decayed, missing or filled teeth on the unfluoridated mid north coast to be generally similar or better than in Sydney, Hunter and Illawarra which are fluoridated.

- 6. As a Councillor I was unimpressed by the Health Department's handling of the fluoridation issue in my LGA. An approach was made offering Council an increased subsidy on the cost of fluoridation equipment. The catch was that a decision had to be made very rapidly or the additional subsidy would be in doubt. In order to get our subsidy our Council had to dispense with public consultation, and make a rapid decision with little chance of fulfilling our legal obligation to make decisions based on full knowledge. I could see no reason why the Health Department could not provide adequate notice of this issue. A letter from Terry Clout, CEO of Mid North Coast Area Health Service did give an indication. The letter (11July 2004) states that the decision on timing was made because the CEO did not wish to raise the issue prior to Local Elections in March and that money spent on a referendum would be better spent on fluoridation.
 - 7. The Health department provided literature and graphic material regarding the safety and effectiveness of fluoridation but failed to provide the only major scientific review into Fluoridation (The York Review 2000). This major document statistically analysed hundreds of studies relevant to a number of questions. Its conclusions often differed significantly from the material supplied by the Health Department. I have included a brief summary of the York Review.
 - 8. I have concerns about environmental effects of adding a toxic waste product to a water supply. Much of this water is used for gardening or finds it's way to waterways. Fluoride and associated contaminants are cumulative poisons. There has never been an EIS despite the vast quantities of waste discharged.
 - I have concerns re health risks. These have not been proven (and may be impossible to prove) but the York Review repeatedly comments on the low to moderate quality of data that safety conclusions are based upon.
 - 10. I have concerns re ethical issues of medication with an uncontrolled dose and no consent.

2.RECOMMENDATIONS

- 1. State/Federal dental service for disadvantaged.
- 2. Continued education on healthy diet and dental hygiene.
- 3. Public Inquiry into effectiveness, efficiency, safety and environmental safety of fluoridation.
- 4. Moratorium on expansion of fluoridation program until Inquiry in (3) completed.
- 5. State to meet ongoing costs of fluoridation.
- 6. Binding poll to be held before a community is fluoridated.
- 7. Review of Fluoridation Act 1957 to include safeguards for democracy.

SUMMARY OF FINDINGS OF BRITAIN'S YORK REVIEW INTO FLUORIDATION, 2000

The York Review is the most definitive work on fluoridation of public water supplies. It was set up to answer the fluoridation question in Britain. The study found 3200 papers of which 734 were relevant to questions posed. 254 studies from various countries met criteria for answering at least one of the Objectives posed in the Review. These studies were statistically analysed to produce data on the effectiveness or otherwise of fluoridation

OBJECTIVE 1

What are the effects of fluoridation of drinking water supplies on the incidence of caries (tooth decay)?

26 studies were relevant.

Available Evidence suggests fluoridation does reduce the level of caries. The studies were of moderate quality but of limited quantity. The Review cautioned that "to have clear confidence in the ability to answer the question the quality of the evidence would need to be higher". The Review suggested that six people would need to receive fluoridated water for one to remain caries free.

OBJECTIVE 2

If water fluoridation is shown to have beneficial effects, what is the effect over and above that offered by the use of alternative interventions and strategies?

9 studies were relevant

Due to poor data the ability to answer this objective is similar to the ability to answer Obj.1.

OBJECTIVE 3

Does water fluoridation result in a reduction of caries across social groups and between geographical locations, bringing equity?

13 studies were relevant

The small quantity of studies, differences between these studies, and their low quality suggest caution interpreting results. Inconclusive.

OBJECTIVE 4

Does water fluoridation have negative effects?

88 studies dealt with fluorosis, 26 with cancer, 29 with bone fractures and 33 with other effects.

Other than fluorosis the review did not establish a clear link between fluoride and other health effects. However, the Review cautioned about poor data. The Review cautioned that long term effects may not have been captured by these studies.

Fluorosis is estimated to occur in 48% of people if fluoride level set at 1ppm. 12.5% of people would have fluorosis of concern.

Bone fracture studies were of poor quality. Some showed increased fracture risk some did not.

Cancer studies showed no definite trend, some showed increased cancer risk, others did not.

Studies on other negative effects such as Down's Syndrome and Alzheimer's Disease were not conclusive. Caution given as to quality of data and the inability to draw conclusions from it.

The Review did not review any data on effects of fluoride on laboratory animals.

The Review did not answer whether fluoridation of public water supplies should be undertaken nor did it answer whether such fluoridation was economically worthwhile.

The Review made no comment on the ethical issues associated with medication without consent.

The Review did not discuss environmental issues such as impacts on waterways receiving fluoridated discharges and runoff.

FOR FURTHER INFORMATION CONTACT Cr GAVIN SMITHERS 8-8-2004