

Support of Fluoridation of Thunder Bay Water Better Oral Health in Long Term Care Homes

Summary of deputation to Thunder Bay City Council July 20,2009

I had no intention of actively entering the F debate. I have been involved in several, beginning with the campaign in Toronto in 1962 when I was a 1st year dental hygiene student. Part of our student initiation was to promote the benefits of water fluoridation. I know, and have seen the benefits of water fluoridation. And the safety of water fluoridation continues to be supported by current science.

However a patient at the office raised questions in the minds of two of my knowledgeable workmates, when she told them that F used in water comes from smoke stacks. Then I decided to join the debate. I realized not much has changed in 47 years since that first F campaign in Toronto. Emotions still run high and there is a lot of distortion of facts, fear mongering and threats.

There three reasons for bringing this deputation in favour of fluoridation of the water in Thunder Bay.

One: There is a lot of misleading information being circulated through the web and the 'grapevine' such as F is from ash from smokestacks. Other presenters will address these concerns. We want to state that water fluoridation can be considered environmentally friendly. The current source for London Ontario's is an ore that is mined and processed in Florida, rich in fluoride and phosphorus. Processing involves separating the fluoride and the phosphorus. The raw material for this process is a natural resource, rocks excavated for their mineral content. Water fluoridation ensures maximum utilization of these natural resources, and reduces waste. Therefore it could accurately be described as environmentally friendly.

Two: And an extremely important for reason us, is the need to improve the oral health for residents in long term care homes Water fluoridation is not the whole answer but it will help. This lack of oral care is a major concern for me. I have worked in LTC homes for 10 years and see devastation of teeth. Decay from poor oral hygiene, abundant plaque/biofilm, too much sugar and refined carbohydrates and lack of care. Such destruction of teeth ought not to

happen.



All the dark areas are decay, inter proximal and root caries. The whitish areas are plaque/biofilm and decalcification. In next photo can see front tooth that was decayed has broken off.



This is preventable. It need not happen.

Water fluoridation is not whole answer but it will help. Griffin's study shows that water fluoridation reduces caries/decay in adults.

Dental decay is becoming a more important health issue for older adults as they retain their teeth. Not only are they keeping their teeth, also many have invested large sums of money in expensive oral prosthetics such as crowns, bridges and implants. This investment in their mouths needs to be protected.

Note the picture of this radiograph taken of a woman who lives in a long term care home. The dark areas around the crowns are decay. These teeth will eventually break off at the roots and she won't have much to chew with on that side.



As a society Thunder Bay can help maintain these investments by providing the benefit water fluoridation.

Others will speak to the advantage for children. But we want to say that residents of long term care homes and toddlers are similar with regards to oral care. Both groups of people are dependent on others for care. Proper daily biofilm/bacterial removal from teeth and gums is essential to maintain a healthy mouth and dentition. And the caregivers need to know; what, how, and why mouth care must be done.

So thirdly: We see water fluoridation as a social justice issue. Water fluoridation is known to be one of the greatest public health and disease preventive measures. It protects everyone. It is easy to deliver. It is safe, equitable and economically efficient. Society benefits by reduced tooth decay. Tooth structure is preserved and much pain, infection, tooth loss and restorative treatments are prevented. Dental decay can result in serious and sometimes life threatening infections requiring costly hospital and medical care. Not everyone in society can afford or access professional dental or dental hygiene offices. But everyone regardless of education, economic status, age, ethnicity, or access to professional oral health care, can benefit from fluoride.

Drinking fluoridated water in the municipal water supply is not a discretionary. It is available to all, not just those who know the benefits, are able to pay, and able to access professional care. Tooth decay is an infectious disease and is preventable. As a society we must not be intimidated by this task. It is doable and leads to health equity, and well-being. The most vulnerable in our society, such as the residents in long

term care homes, benefit the most when local public policy supports municipal water fluoridation.

The safety and efficacy of water fluoridation continues to be supported by current science. Canadian and international studies, including those of the World Health Organization agree that water fluoridated at optimum levels does not cause adverse health effects. We speak on behalf of the vulnerable, the folks in long term care homes who are not getting oral care. All people of all ages, not just those able to access oral health professionals, can benefit from municipal water fluoridation.



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The status of water fluoridation in Canada The U.S. Centers for Disease Control and Prevention have recognized water fluoridation as one of the ten great public health achievements of the twentieth century. In Canada, provincial and territorial governments are responsible for the safety of drinking water. In collaboration with their municipalities, they decide whether or not to fluoridate and the amount of fluoride to be added. The Office of the Chief Dental Officer (OCDO) has completed a scan of the areas in Canada that are fluoridated. This information was collected from Provincial or Territorial Environment Ministries and then verified by the Dental Directors of each province and territory.

Provincial and Territorial Estimates for Community Water Fluoridation Coverage

Province	Total Population	Population with Fluoridated Water	Population without Fluoridated Water	Percent With Fluoridated Water
British Columbia	4,055,195	159,070	3,896,125	3.9%
Alberta	3,124,923	2,329,857	795,066	74.6%
Saskatchewan	978,993	310,677	668,316	31.7%
Manitoba	1,103,695	807,793	295,902	73.2%
Ontario	12,392,721	8,707,055	3,685,666	70.3%
Quebec	7,509,928	519,309	6,990,619	6.9%
New Brunswick	729,498	139,550	589,948	19.1%
Nova Scotia	936,025	419,000	517,025	44.8%
Newfoundland	515,946	17,969	497,977	3.5%
Prince Edward Island	137,864	32,245	105,619	23.4%
Nunavut	26,745	1,899	24,846	7.1%
Yukon	29,967	0	29,967	0.0%
Northwest Territories	42,810	23,036	19,774	53.8%
National Totals	31,584,310	13,467,460	18,116,850	42.6%



Federal, Provincial and Territorial Dental Working Group
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