

**RESOLUTION NO.**\_\_\_\_\_

**WHEREAS**, in the early 1970's, before any serious longitudinal study of the health effects of water fluoridation was conducted, voters of the City of Austin approved a referendum to fluoridate the municipal water supply; and

**WHEREAS**, research from the 1940's through the 1960's argued that artificial water fluoridation resulted in acid resistant teeth. But conflicting research, namely the 2006 National Research Council's review of 1,100 worldwide epidemiological and laboratory studies, found that to the contrary the current levels of fluoride added to the water results in the following "adverse health effects: moderate dental fluorosis, stage I skeletal fluorosis, decreased thyroid function, and detrimental effects on the brain."; and

**WHEREAS**, a study of release by the Department of Environmental Science at Harvard School of Public Health in conjunction with China Medical University in 2011 urged the results not to be ignored while concluding that the study "supports the possibility of adverse effects of high fluoride exposure on children's neurodevelopment" and also that "children in high fluoride areas have significantly lower IQ scores than children in low fluoride areas."; and

**WHEREAS**, in a letter written in 2006, scientists and other representatives of the United States' Environmental Protection Agency (EPA) pleaded with Congress, and the U.S. Public Health Service to immediately halt the artificial fluoridation of water, citing many studies, one of which from the Harvard School of Dental Medicine, found that "preadolescent boys who drink fluoridated water are at a sevenfold increased risk of osteosarcoma, an often fatal bone cancer."; and

**WHEREAS**, while the benefits and risks of water fluoridation are now under contentious debate, infants, children, the elderly and other with compromised immune systems may be harmed by ingesting fluoride via drinking water; and

**WHEREAS**, scientific studies are too copious to enumerate, but the results of many studies show negative effects including endocrine function, cognitive function, skeletal problems, dental fluorosis, and thyroid impairment; and

**WHEREAS**, when hydrofluorosilicic acid is ingested the fluoride replaces calcium in the bones resulting in an increased susceptibility to certain bone cancers. Dartmouth scientist, Dr. Roger Masters, and chemical engineer, Myron Coplan, published studies in 1999 and 2000 reporting that exposure to fluoridated water was associated with increased blood lead levels in children, and three other published studies in Neurotoxicology and National Institute of Environmental Health Science, 20062007, confirmed these findings; and

**WHEREAS**, Center for Disease Control and Prevention (CDC) and National Center for Health Statistics (NCHS), determined in their study, Prevalence and Severity of Dental Fluorosis in the United States, 1999–2004, that 40.7% of American teenagers have dental fluorosis. The prevalence of fluorosis increased 18.1% since 19871988 survey, and the prevalence of moderate and severe fluorosis increased from 1.3% to 3.6%; and

**WHEREAS**, human breast milk naturally contains very low levels of fluoride (.004ppm) which is 175 times less than the levels in Austin's fluoridated drinking water (.7ppm). As a result, infants drinking reconstituted formula with fluoridated water are far exceeding the recommended dosage for themselves as well as for adults; and

**WHEREAS**, hydrofluorosilicic acid is not a pharmaceutical grade substance but rather a hazardous toxic waste product resulting from strip mining of phosphate for fertilizers and this waste product has strict guidelines for disposal; and

**WHEREAS**, because topical fluoride is available through low cost toothpastes and supplements, stopping the practice of artificially fluoridating the Austin water supply does not deprive citizens of the benefits of fluoride; and

**WHEREAS**, the current cost of opting out of fluoride through avoidance measures such as purchasing reverse osmosis and distillation equipment and un-fluoridated bottled water far exceeds the expense of opting in through topical use or supplementation. With high costs associated with treatment of dental fluorosis and other health care costs, low income families are disproportionately burdened by the negative effects of water fluoridation; and,

**WHEREAS**, during initial fluoridation trials in the 1940's, it was believed that fluoride needed to be ingested, however since the 1980's, there is now a scientific consensus that the primary benefits of fluoride are topical. This new understanding undermines the premise of water fluoridation; and

**WHEREAS**, because all Federal and State agencies and any company providing fluoride to municipalities for water fluoridation relinquish all legal responsibility to the purchasing municipality, the City of Austin is at risk if it is concluded that water fluoridation has specifically caused the ailments it is associated with; and

**WHEREAS**, in recent decades the scientific research has convinced other developed nations that had previously fluoridated their water supply to cease the practice. Those countries include Finland, Sweden, Germany, Czechoslovakia, and Japan; and

**WHEREAS**, it is unethical to force residents to consume any drug or nutrient especially when the condition is not deadly or contagious; **NOW, THEREFORE:**

**BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF AUSTIN:**

That Resolution 72081711 and Resolution 20111215011 be repealed and rescinded and directs the City Manager to cease the addition of artificial fluoride, including hydrofluorosilicic acid, sodium fluoride, sodium fluorosilicate or any other methods of fluoridation, to the City of Austin's water supply by December 1, 2015.

**ADOPTED:** \_\_\_\_\_, 2015

**ATTEST:** \_\_\_\_\_

Jannette S. Goodall  
City Clerk