



Legislation Text

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Res. No. 1392

Resolution calling upon the Department of Health to study the effects of fluoride in tap water.

By Council Members James, Comrie, Mealy and Palma

Whereas, Water fluoridation is the practice of adding fluoride compounds to water with the intended purpose of reducing tooth decay; and

Whereas, Fluoridation of drinking water has been common in the United States for more than fifty years, and most of the country's municipalities fluoridate their water supplies; and

Whereas, In 1986, the Environmental Protection Agency (EPA), established a maximum allowable concentration of 4 milligrams of fluoride per liter of water (4mg/L), a guideline designed to prevent the public from being exposed to harmful levels of fluoride; and

Whereas, According to a 2002 study, about two-thirds of the U.S. population and 46 of the nation's 50 largest cities receive fluoride through their community water system; and

Whereas, The Centers for Disease Control and Prevention (CDC) has proclaimed community water fluoridation (along with vaccinations and infectious disease control) as one of ten great public health achievements of the 20th century; and

Whereas, According to the American Dental Association (ADA), water fluoridation reduces dental decay by 40 to 59 percent, and past comprehensive reviews of the safety and effectiveness of fluoride in water have concluded that water fluoridation is safe and it is the most cost-effective way to prevent tooth decay among populations living in areas with adequate community water supply systems; and

Whereas, Concerns have been raised, however, over the quality of the research demonstrating the

efficacy and safety of water fluoridation as growing evidence suggests that it poses serious health risks affecting teeth, bones, the brain and the thyroid gland; and

Whereas, In 2005, the U.S. National Institutes of Health (NIH), a research agency associated with the U.S. Department of Health and Human Services, evaluated 562 dental studies on fluoride use and reported that the studies were small, poorly described, or otherwise methodologically flawed; and

Whereas, In March 2006, the National Research Council (NRC) conducted a study to determine whether the current amount of fluoride allowed in drinking water poses a health risk to Americans; and

Whereas, After reviewing research on various health effects from exposure to fluoride, including studies conducted in the last 10 years, the NRC reported that constant exposure to fluoride at the current maximum level results in severe dental fluorosis (tooth enamel loss and pitting) in children, and increases the risk of bone fractures and skeletal fluorosis (painful stiffening of the joints) in adults; and

Whereas, The NRC concluded that the EPA's current limit for fluoride in drinking water does not protect against adverse health effects, and recommended that the federal government lower its limit because of health risks to both children and adults, but did not indicate what the lower limit should be; and

Whereas, Optimal fluoride levels for drinking water, as recommended by the U.S. Public Health Service and the CDC, range from 0.7 mg/L for warmer climates to 1.2 mg/L for cooler climates to account for the tendency for people to drink more water in warmer climates; and

Whereas, All New York City tap water has been fluoridated since 1966 in accordance with the New York City Health Code, at a concentration of one milligram per liter (1mg/L); and

Whereas, Some researchers question whether even adding 1mg/L of fluoride into tap water is acceptable since there is no universally accepted optimal level for daily fluoride intake and there lacks scientifically valid evidence proving the safety or effectiveness of water fluoridation; and

Whereas, An article published in the *Journal of Public Health Dentistry* in 2003 stated that despite fluoridation, severe tooth decay is responsible for two-thirds of hospital visits by children under six in New

York State; and

Whereas, According to a report by the CDC, proportionately more children in New York City required cavity-related hospitalizations than two-thirds of New York State's largest non-fluoridated counties, Suffolk and Nassau (in Long Island); and

Whereas, Similarly, twenty-one percent of Brooklyn's and twenty percent of Queens' residents have less teeth than non-fluoridated Suffolk and Nassau counties; and

Whereas, Although most fluoridated water contains much less than the EPA limit, studies challenging the safety and effectiveness of fluoridation have raised uncertainty about whether these lower amounts help to prevent health risks; and

Whereas, As there seems to be a significant amount of questionable data on the safety and efficacy of fluoride in tap water, additional extensive studies should be conducted to determine any actual effects; now, therefore be it

Resolved, That the Council of the City of New York calls upon the Department of Health to study the effects of fluoride in tap water.

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