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Sent: June 12, 2021 4:42 PM

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Subject: BREAKING: Study Shows Fluoride Harms at 0.2ppm – FAN Lawyer Sends Copy to TSCA Judge

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CAUTION: EXTERNAL MAIL. DO NOT CLICK ON LINKS OR OPEN ATTACHMENTS YOU DO NOT TRUST.

To: Justin Trudeau, Doug Ford, Kieran Moore, Bonnie Crombie, Patrick Brown, John Tory, and other men and women who serve as Mayors, Councillors, Medical Officers and anyone else involved in fluoridation of public water (for which you are **personally** liable under common law):

I require and request that this communication be added to the agendas for the next meetings of your respective bodies.

Many of you copied on this email profess to care about public health, to the extent of irrationally encouraging experimental injections to protect against an imaginary virus.

Some of you have harassed, bullied, terrorized, charged and/or arrested members of the public in connection with the contrived public health emergency. Several of you have claimed to be exercising an "abundance of caution".

Now is an opportunity to demonstrate whether or not you actually have the slightest interest in protecting public health. And whether or not you have any interest whatsoever in upholding the law.

Via Fluoride Action Network:



Christine,

A landmark study by [Grandjean et al.](#) has just been published confirming that very low levels of fluoride exposure during pregnancy impairs the brain development of the child, and at a population level may be causing more damage than lead, mercury, or arsenic. **The paper's authors ultimately concluded that a maternal urine fluoride concentration of 0.2mg/L was enough to lower IQ by 1 point, that even this impact is likely underestimated, and:**

"These findings provide additional evidence that fluoride is a developmental neurotoxicant ... and the benchmark

results should inspire a revision of water-fluoride recommendations aimed at protecting pregnant women and young children."

A urinary fluoride (UF) concentration of 0.2mg/L is far below what a pregnant woman in a fluoridated community would have, as confirmed by two recent studies. A study of pregnant women in fluoridated [San Francisco, California](#) found a mean UF concentration of 0.74mg/L, and one with participants in fluoridated communities [across Canada](#) found a mean UF concentration of 1.06mg/L. Both levels were significantly higher than those found in women in non-fluoridated communities.

Grandjean et al.'s study, published in *Risk Analysis* was a pooled benchmark dose (BMD) analysis of the National Institutes of Health funded ELEMENT and MIREC birth cohorts in Mexico and Canada. These are the birth cohorts that were used in the studies that found exposure to low-levels of fluoride during pregnancy is linked to cognitive impairment in children ([Bashash, 2017](#); [Thomas, 2018](#); [Green, 2019](#); [Till, 2020](#)).

A Benchmark Dose is used to identify a dose (or concentration) that has a good probability of causing a pre-determined amount of harm. For this BMD analysis, the pre-determined harm was an average predicted IQ drop of 1 point. **What makes this paper so important is that BMD is part of the US Environmental Protection Agency's (EPA) risk assessment methodology, and the paper's authors used a 1 IQ point drop as the adverse effect amount because the EPA has used this same level of IQ loss in their own risk assessments and has recommended use of such a level. It has been well established that a loss of one IQ point leads to a reduced lifetime earning ability of \$18,000. Summed over the whole population we are talking about a loss of billions of dollars earning ability each year.**

Moreover, it's important to point out that **in risk assessments using BMD methodology, it's standard practice to apply a safety factor on top of the calculated BMD in order to determine a safe reference dose (RfD) to protect the whole population (including the most vulnerable) from harm. If that safety factor used was the standard safety margin of 10, to account for the variables in population-wide sensitivity, then the EPA might conclude that any urine fluoride concentration above 0.02 mg/L would be unacceptable and "unsafe". This is 35-times lower than what the American Dental Association and Centers for Disease Control recommends for fluoridated communities.**

This paper is also incredibly important because the National Toxicology Program (NTP) is in the midst of finalizing their monograph on fluoride's neurotoxicity for humans, and one of the main recommendations to the NTP from the National Academies of Science, Engineering, and Medicine's peer review of the NTP's report was to conduct a BMD before any conclusions could be made about harm from fluoride concentrations lower than 1.5 ppm. NASEM wrote:

"Little or no conclusive information can be garnered from the revised monograph about the effects of fluoride at low exposure concentrations (less than 1.5 mg/mL). NTP therefore should make it clear that the monograph cannot be used to draw any conclusions regarding low fluoride exposure concentrations, including those typically associated

with drinking-water fluoridation. Drawing conclusions about the effects of low fluoride exposures (less than 1.5 mg/mL) **would require a full dose–response assessment...**"

Now that this BMD analysis has been completed, and has established a loss of ONE IQ point associated with mother's fluoride urine level 0.2 ppm, which is well below the average urinary levels of pregnant women in fluoridated communities (in Canada and the USA and other fluoridated countries) it should put to an end to the false claims from fluoridation promoters (including the CDC's Oral Health Director) that neurocognitive damage only occurs at concentrations above the fluoride levels used in fluoridation programs (0.7 to 1.2ppm). The very best human studies on fluoride's neurotoxicity have actually been done in fluoridated communities at 0.7 ppm or below or equivalent doses as measured in mothers' urine (Bashash, 2017, Green, 2019 and Till, 2020). And it was the pooled data from these studies that was used in this important BMD analysis.

Michael Connett, the lead lawyer for the plaintiffs in the lawsuit against the EPA has sent a copy of this BMD analysis to the Judge in our federal TSCA trial against the EPA. On August 20 the judge indicated he was waiting to see this analysis as well as the final version of the NTP review.

Help Spread the Word!

Please help FAN share this landmark study. We can't count on the mainstream media or the public health authorities to tell the public or decision makers about this research. It's up to us! We've sent it to the Court, and now we will start the process of sending it to the media, to elected officials at every level, and to public health and scientific professionals.

Please share this study with your own contacts and local policy makers. We will be putting out a press release in the coming days that you will also be able to share with your local media.

Fundraising Update

In the first several days we have raised **\$4,900 from 46 donors** on our way to reaching our goal of \$50,000 from 500 donors. REMINDER: One of our "Super Angels" has **pledged to give us another \$1000 if we reach 80 donors** by this Monday at midnight. We are only 34 donors away from reaching this target. Can you help us?

Thank you to all who have donated, as well as those who have worked countless hours to end fluoridation in your own community, state, or as part of our worldwide movement.

How to Make a Tax-Deductible Donation:

- **Online**, using our secure server.
- **Or by Check**, payable to the Fluoride Action Network. Mail your check to:

Fluoride Action Network
c/o Connett
104 Walnut Street
Binghamton NY 13905

We greatly appreciate your continued support and efforts to end water fluoridation throughout the world.

Thank you,

Stuart Cooper
Campaign Director

[Fluoride Action Network](#)

Christine
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Peterborough,
ON