## Cédric Drouin, csss@assnat.qc.ca

April 17<sup>th</sup>, 2013

To M. Drouin and the Health Commission:

My non-profit organization, Second Look, has a tag line that reads, "A rational approach to controversial public policy issues". While we don't address the political issue of water fluoridation, we do present the science behind this issue, in part by listing a huge Bibliography of Scientific Literature on Fluoride (<u>http://www.slweb.org/bibliography.html</u>). This Bibliography (to be updated very soon) lists references from mainstream medical, dental, and science journals (virtually all of them pertaining to fluoride's health effects), and it includes links to abstracts and whole papers. In recent years, our work has been focusing on the effects of fluoride overexposure in individuals through our program, the Fluoride Toxicity Research Collaborative (FTRC).

Fluoride/fluorine exposure can come from many sources, including air, soil, pesticide residue on produce, processed foods, dental treatments and substances, household chemicals, industrial uses, many common pharmaceuticals, and, of course, from water, both naturally and artificially fluoridated. Fluoride is bioaccumulative, and when an individual is exposed chronically, over a lifetime, effects can grow slowly and insidiously and be mistaken for ailments from other causes. As chronic fluoride poisoning increases, the more likely it is that one or two larger exposures, such as to a fluorinated pharmaceutical, will bring the person to a tipping point, after which symptoms will increase in types and severity to the point of being debilitating. Medical professionals are simply uninformed of these effects, and are likely to attempt to treat the patient with pharmaceuticals that will only exacerbate the situation. This is a scenario that plays out over and over.

Any fluoride poisoned individual who lives in a fluoridated community will have a much more difficult time living with these health effects and trying to detoxify from them than those living in an unfluoridated community. Detoxification from fluoride illness is slow and difficult in any case, but made exceedingly more difficult (and expensive) for those living with fluoridated water.

We are contacted all the time by people who suspect they are fluoride poisoned. We help them determine whether they may be, indeed, fluoride poisoned and then suggest certain types of health practitioners to see, and other things they can do help themselves feel better. By the time people discover our website, they are usually in great desperation, having exhausted themselves and their money by looking for help and relief from doctor after doctor, only to discover that their doctors can't help them and often give them pharmaceuticals that make them even sicker. These people are sick, helpless, hopeless, often jobless due to their disabilities, and too many times not even believed by doctors and sometimes their own families.

I have found a disturbing similarity in the stories of these individuals who cannot find relief and support in the medical community, and then have to face detoxification along with water fluoridation. It is too often overwhelming for them in many ways. Those who do not have fluoridated water are much more likely to succeed in eliminating all exposure to fluoride (which they need to do for true detoxification and healing) than those who live with fluoridated water. Further, individuals who have fluoride illness, even when recovered, more often than not will be fluoride sensitive for the rest of their lives. Any exposure to fluoridated water will make them ill, sometimes for days. Also, people with other types of chemical sensitivities will often be sensitive to fluoridated water.

Please consider these facts when making any decision regarding water fluoridation in Québec. Thank you very much for your time and your consideration of this information.

Very sincerely,

Deborah E. Moore, PhD Executive Director, *Second Look*