



**FDI World Dental Federation**  
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12 March 2006

To Whom it May Concern

Dear Sir/Madam

**Proposal for a Regulation of the European Parliament and of the Council on the Addition of Vitamins and Minerals and of certain other substances to foods**

We have been made aware of a draft recommendation for second reading (PE 367.862v02-00) of the Committee on the Environment, Public Health and Food Safety where certain amendments impacting on the availability of fluoride in food and water have been proposed.

The FDI World Dental Federation is the global federation of national dental associations with the aim of promoting optimal oral and general health for all people. We share the view of the World Health Organization (WHO) that oral health is an integral part of general health and wellbeing and a basic human right.

Equitable and optimal oral health in society must be primarily based on prevention and health promotion. The addition of fluorides to toothpaste, food (milk, salt) and drinking water has provided major positive impacts on public health. The *FDI Policy Statement on Fluorides and Dental Caries* states that “over 50 years of extensive research throughout the world has consistently demonstrated the safety and efficacy of fluoride in preventing dental decay. The scientific basis for the use of fluoride and its safety has been accepted by numerous scientific bodies, expert groups and government agencies. The use of fluoride has resulted in a substantial decline in the incidence and prevalence of dental decay and has improved the quality of life for millions of people” (1).

The FDI World Dental Federation urges all members of the Committee on the Environment, Public Health and Food Safety to reject the proposed amendments 23 and 24 which, if accepted, would prohibit the addition of scientifically accepted levels of fluoride to food and water. We join the World Health Organization and the European Council of Chief Dental Officers who have strongly opposed to the proposal to exclude fluoride from the permitted food additives.

Dietary fluoride intake plays a major role in the prevention of dental caries. Banning fluoride addition to food and water would contribute to increasing oral health inequalities between and within EU Member States. Existing milk, salt and water fluoridation programmes in Europe would be severely affected by such a decision that would also prevent other EU Member States from adopting this approach in the future. Furthermore, the EU directives affect the rest of the world since EU directives and standards are often adopted or copied by other regions.

There is no evidence that the addition of appropriate levels of fluoride to food poses any risk to the public. Given the fact that oral health is an integral component of general health, any proposal that negatively impacts on public oral health would be detrimental to the public's general health at large.

The FDI World Dental Federation remains at your disposal for any further information needed.

Yours sincerely

A handwritten signature in black ink, appearing to read "Dr. JT Barnard". The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

Dr JT Barnard  
Executive Director

1. *FDI Policy Statement on fluoride and dental caries*, adopted by the FDI General Assembly: Nov 2000; available at [http://www.fdiworldental.org/federation/3\\_0statements.html](http://www.fdiworldental.org/federation/3_0statements.html)



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To: Presidents of the three FDI Member Associations in Belgium (address them by name - if you have that info)

Dear Colleagues

Like everybody with an interest in dental public health, we have been following the debate on the Public Health List Server and in the press, regarding the developments around the fluoride issue in Belgium.

Unfortunately, there is so much information (and disinformation) going around, it is almost impossible to determine the exact state of affairs and the facts of the matter. It would be interesting to receive feedback from you regarding what has been said (and not said) and what the final outcome of the debate was. This would certainly make very interesting reading for our Member Associations.

We believe that this saga will probably continue for some time to come and therefore I wish to offer the assistance of the FDI. We could provide you, through the FDI Science Manager, with references and scientific information which you might need to present the case of the dental profession in Belgium. The FDI will not directly become involved in the debate, certainly not with the anti-fluoride lobbyists, but I believe that we have the duty to assist our Member associations in matters such as these to the best of our ability.

Should you feel that you require any information on any aspect of fluoridation, please contact our Science Manager, Prof Asbjørn Jokstad, at [science@fdiworldental.org](mailto:science@fdiworldental.org). He will be delighted to give assistance.

We wish you every success with the continuing debate and trust that it would be possible for the dental profession, through your offices, to repair some of the harm that was done by this debate that was taken out of all proportion.

With kind regards

Yours sincerely

JTB



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Dear Sir/Madame

We have been made aware of an approaching meeting in the European Commission Committee on the Environment, Public Health and Food Safety where certain proposed amendments on the availability of fluoride in food and water will be discussed.

We take the liberty to address you since we are a global organization with the aim to promote optimal oral and general health for all peoples. The Federation Dentaire Internationale (FDI) is the international federation of national dental associations. We share the view of the World Health Organization (WHO) that oral health is an integral part of general health and wellbeing and a basic human right.

Equitable and optimal oral health in society must be primarily based on prevention and health promotion. The addition of fluorides to food and drinking water has repeatedly provided major and positive impacts on public health and especially amongst the growing generations. The benefit to oral health and the lack of risks of danger to the public is well supported by evidence from scientific research which has taken place over many decades. A vast number of scientifically based recommendations support the notion of a safe and efficacious public health intervention (1).

The WHO has recommended the use of fluorides in foods and water, which is detailed in documents and resolutions of that body and approved by member countries of WHO at the WHO general assembly.

Also the FDI general assemblies has made statements on the use of fluorides in dentistry. The essence of the current latest statements is: *"Over 50 years of extensive research throughout the world has consistently demonstrated the safety and efficacy of fluoride in preventing dental decay. The scientific basis for the use of fluoride and its safety has been accepted by numerous scientific bodies, expert groups and government agencies. The use of fluoride has resulted in a substantial decline in the incidence and prevalence of dental decay and has improved the quality of life for millions of people.\*"*

Dietary fluoride intake plays a major role in the prevention of dental caries. Administration of fluoride via salt intake is used as an alternative where the local situation is not suitable for water fluoridation. Studies in Europe and elsewhere have produced consistent data indicating its effectiveness in reducing dental decay. Also fluoridated milk has been used as a fluoride source, especially for young children through school programmes. A number of studies have shown it to be effective. Banning such fluoride additions to foods will contribute to upholding current oral health inequalities between and within EU Member States. The existing milk and salt fluoridation programmes in Europe will be severely affected by a decision to exclude fluoride from the permitted food additives and it will also prevent other EU Member States from adopting this approach in the future.

In many countries of the world the only practical and affordable way the large public can become exposed to fluorides is through milk and salt. The alternative fluoride exposure route is by using fluoride-containing toothpastes. Although this may be considered affordable for the great majority of citizens in Europe, this is not the case on a global basis. Affordable fluoride toothpaste for all is an ideal aim, but unfortunately this seems not to be a realistic aim.

The EU directives affects the rest of the world directly and indirectly, and especially the underserved countries. Large volume fabrication of products can be associated with lower production costs and banning sales of food products containing fluorides from the EU will impact on prices elsewhere. Moreover, EU directives and standards are often adopted by less affluent countries because resources are usually not available for undertaking extensive analyses of gains and benefits of implementing policies in own countries. There is no evidence that the addition of fluorides to food raises any risk of danger to the public. Rather, bearing in mind that oral health is an integral component of general health, any proposals that will reduce public oral health is detrimental to the public general health.

1. List of scientifically based recommendations and statements on the use of fluorides as a preventive measure against caries.

[http://www.fdiworldental.org/resources/assets/guidelines/waterfluoride\\_1.html](http://www.fdiworldental.org/resources/assets/guidelines/waterfluoride_1.html)

[http://www.fdiworldental.org/resources/assets/guidelines/fluorides\\_1.html](http://www.fdiworldental.org/resources/assets/guidelines/fluorides_1.html)

2. FDI Statement on fluoride adopted by the FDI General Assembly: Nov 2000.

English:

[http://www.fdiworldental.org/federation/assets/statements/ENGLISH/Fluoride/Fluoride\\_dental\\_caries.pdf](http://www.fdiworldental.org/federation/assets/statements/ENGLISH/Fluoride/Fluoride_dental_caries.pdf)

German:

[http://www.fdiworldental.org/federation/assets/statements/GERMAN/Fluoride/Fluoride\\_Zahnkaries.pdf](http://www.fdiworldental.org/federation/assets/statements/GERMAN/Fluoride/Fluoride_Zahnkaries.pdf)

Spanish:

[http://www.fdiworldental.org/federation/assets/statements/spanish/Fluoruro/Fluoruros\\_y\\_caries\\_dental.pdf](http://www.fdiworldental.org/federation/assets/statements/spanish/Fluoruro/Fluoruros_y_caries_dental.pdf)

French:

[http://www.fdiworldental.org/federation/assets/statements/FRENCH/Fluor/Fluor\\_et\\_caries.pdf](http://www.fdiworldental.org/federation/assets/statements/FRENCH/Fluor/Fluor_et_caries.pdf)

**Prepared by: Professor Asbjørn Jokstad, DDS, PhD**  
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