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Newsletter

General Meeting

6:30 – 7:30 p.m. on
2 May 2019 at
Leederville Sports Club.
All welcome.

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Become a member

It costs only \$15 to become a member of FFWA Inc. Please visit the website to join or renew.

Fluoride Free WA Inc.

is a non-profit advocacy organization which explains to governments and citizens why fluoridation of public water supplies must end:

- ◆ lacks dental benefit
- ◆ promotes disease
- ◆ prohibited by law

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FFWA Inc.’s work depends on your donations. Contributions welcome at fluoridefreewa.org

Legislative Council “nanny-State” inquiry

In August 2018, the Legislative Council established a select committee to inquire into economic and social impacts of WA laws restricting personal choice “for the individual’s own good” (see [here](#)). Compulsory fluoride treatment, as purportedly authorized by the *Fluoridation of Public Water Supplies Act 1966* (FPWS Act), is among the measures in question. FFWA Inc. Treasurer John Watt presented FFWA Inc.’s submission to the select committee Chairman Hon. Aaron Stonehouse MLC and pressed for legislative reforms.

FFWA Inc. submitted that fluoridation of public water supplies is a form of compulsory medical treatment which exploits public infrastructure to administer fluoride treatment without dosage control or medical supervision. As the Fluoridation of Public Water Supplies Advisory Committee (FPWSAC) asserts: the measure operates “regardless of age [or] individual motivation”.

The core legal and ethical problem is that medical treatment without informed consent constitutes common law battery. Adult patients are presumed competent to refuse medical treatment. The burden of rebutting this presumption lies on the person who insists on treating a non-compliant patient. In maintaining the FPWS Act in force, Parliament engages in gross disregard of these basic legal principles.

FFWA Inc. particularly reminded the Inquiry of the circumstance that section 109 of the Commonwealth Constitution apparently invalidates core provisions of the FPWS Act because the latter obviously are inconsistent with the mandatory system of controls established by the *Therapeutic Goods Act 1989* (Cth) for ensuring that therapeutic goods used in Australia are medically safe and effective for their indicated therapeutic use.

The Legislative Council published FFWA Inc.’s submission. Read it in full [here](#).

Legislative Assembly type 2 diabetes inquiry

In August 2018, the Legislative Assembly’s Education and Health Standing Committee commenced a wide-ranging inquiry type 2 diabetes (see [here](#)). Measures to encourage healthy eating, defined to include consumption of beverages, e.g. water, form one point of focus. Another is the situation of at-risk groups, such as indigenous people. FFWA Inc.’s current Deputy Chair, Michael Lusk, made a submission to the inquiry.

The submission proceeds from Dr. Geoff Pain’s literature review entitled *Fluoride Causes Diabetes* (available [here](#), update [here](#)). Water fluoridation is a counterproductive public health policy which apparently co-drives the incidence of type 2 diabetes. Australian governments’ capacity to develop evidence-based health policies is impeded by the persistent failure of NHMRC and health departments to deliver unbiased scientific information concerning well-documented adverse health effects of fluoride.

The Legislative Assembly published the submission. Read it in full [here](#).



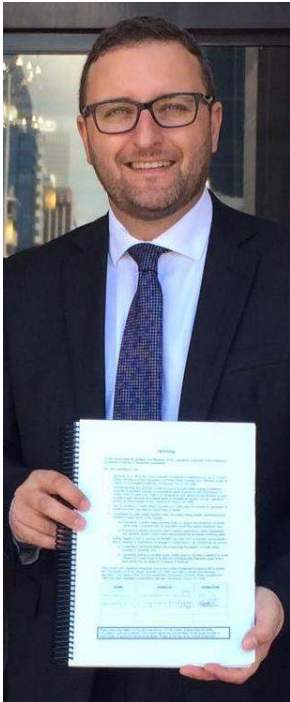
Hon. Aaron Stonehouse MLC



Meetings with three MPs

Vince Catania, MLA for Northwest Central (Nationals)

FFWA Inc. thanks Mr. Catania for his invaluable efforts in raising in Parliament matters of law and policy connected with fluoridation of public water supplies. FFWA Inc. Chair Anne Porter meets regularly with Mr. Catania at his electoral office in Carnarvon.



Vince Catania MLA

On 15 August 2018 Mr. Catania tabled in the Assembly a petition signed by 412 Western Australians calling for repeal of the *Fluoridation of Public Water Supplies Act 1966*. FFWA Inc. member Beverley Gay and Treasurer John Watt presented the petition at Parliament House (left). The ALP government's control of the Assembly impedes FFWA Inc.'s efforts towards procuring passage of a motion to refer the petition to the Legislative Assembly Education and Health Standing Committee.

On 9 October 2018 Mr. Catania addressed two Questions on Notice to the Minister for Health, Hon. Roger Cook MLA. One Question concerned the statutory basis of Dr. Richard Lugg's persistent claims to be the "Chairman" of the Fluoridation of Public Water Supplies Advisory Committee ("FPWSAC"). The other Question sought the reason why WA Health has taken the exceptional step of not disclosing FPWSAC's membership in its past three annual reports. The Minister answered the Questions, but not to FFWA Inc.'s satisfaction (see separate article).

Sean L'Estrange, MLA for Churchlands (Liberal)

On 5 November 2018 FFWA Inc.'s Treasurer John Watt met with Shadow Health Minister Sean L'Estrange to update him regarding two recent scientific publications relating to neurotoxic effects of low-dose fluoride intake. John gave Mr. L'Estrange a copy of Bashash et al. (2017). This landmark study demonstrates significant dose-dependent negative impact on cognitive ability (IQ) of 6–12 year old children prenatally exposed to fluoride via maternal fluoride intake. John further referred to the recent publication of Till et al. (2018). It records fluoride

concentrations in urine of pregnant women in Canadian localities supplied with drinking water "optimally" fluoridated at rates near 1.0 mg/L, i.e. about the rate used in Perth. The latter study established that fluoride concentrations in maternal urine sampled in Canadian localities substantially match fluoride concentrations in maternal urine sampled in Mexico City by Bashash *et al.* Reading these two reports together supports an inference that cognitive development of Canadian – and hence also Australian – children is negatively impacted by fluoride exposure via maternal fluoride intake.

Explaining that FFWA Inc. previously has provided Health Minister Cook with a copy of Bashash *et al.* (2017), John requested Mr. L'Estrange now to ask Minister Cook the following parliamentary question: Would the Minister state whether he has any notice of FPWSAC revoking a recommendation for fluoridation of any public water supply since publication of Bashash *et al.* (2017)? This question is not party political. It concerns the conduct of the supposedly expert statutory committee charged with medical and scientific oversight of fluoridation of public water supplies. While Mr. L'Estrange did not rule out asking such a question, he indicated that he first would need the approval of his party leader – because water fluoridation is a Liberal Party policy.

On 23 November 2018 FFWA Inc. wrote to the Liberals' leader Dr. Michael Nahan, MLA for Riverton, requesting that he put to Minister Cook the parliamentary question previously discussed with Mr. L'Estrange. To date FFWA Inc. has received no response from Dr. Nahan.

Hon. Michael Murray, MLA for Collie-Preston (ALP)

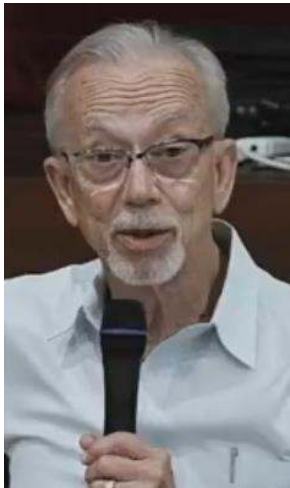
On 1 February 2019 FFWA Inc. member Simon Torrissi of Bunbury personally met with his local member, Hon. Michael Murray MLA, to update him concerning the important findings reported by Bashash *et al.* and Till *et al.* (see above). Simon also emphasized the compulsory aspect of treating a person with fluoride delivered via a public water supply. Mr. Murray suggested petitioning Parliament. He might not have been aware that the Legislative Council – the House most usually petitioned – last year refused to consider any further petitions against fluoridation of public water supplies, indicating that such petitions had become too numerous (petitions 16, 23, 33, 45 and 55 in the 40th Parliament).

It is essential that Mr. Murray, the Minister for Seniors and Ageing, become aware that the aged, like infants, are a vulnerable population in relation to the neurotoxic effects of fluoride intake. The incidence of old-age dementia in Australia is increasing. Government should refrain from exacerbating this difficult situation.



Will WA prosecute Dr. Lugg?

In giving evidence on 9 May 2018 to the Legislative Assembly Education and Health Standing Committee's (EHSC) Oral Health Hearings, Dr. Richard Lugg purported to appear as "Chair, Fluoridation of Public Water Supplies Advisory Committee, Department of Health".



Dr. Richard Lugg

As a matter of fact and law, Dr. Lugg was not even the *Acting* Chair of FPWSAC on that occasion. The *Fluoridation of Public Water Supplies Act 1966* (FPWS Act) is perfectly clear on this point. By section 5(4) of the FPWS Act, the Chief Health Officer (currently Dr. Tarun Weeramanthri) is *ex officio* Chair of FPWSAC. Section 5(4) empowers him to *designate* any person to *act* as Chairman *at a meeting of FPWSAC* which he for any reason is unable to attend.

By appearing before EHSC in the purported capacity of Chair of FPWSAC, Dr. Lugg evidently committed an offence against section 87(2) of The Criminal Code. That provision makes it an offence to impersonate a public officer or to attend any place for the purpose of doing any act of such public officer.

Dr. Lugg attended Parliament and gave the following false evidence: "I am [Dr. Weeramanthri's] delegate and I exercise [the position of Chair of FPWSAC] at his pleasure". Dr. Lugg afterwards lodged with EHSC a written statement containing the following false information: "I have delegated authority from the Chief Health Officer ... to act as Chair of [FPWSAC], and for the record, I enclose a copy of my current instrument of delegation". Actually attached is a copy of an Instrument of *Designation* made under section 5(4) of the FPWS Act.

Dr. Lugg's appearance before EHSC did not take place during a meeting of FPWSAC. Even if it had (it did not), Dr. Lugg still would not have been permitted to use the title "Chair" of FPWSAC on that occasion. Parliamentary documents linked in this note establish a *prima facie* case that Dr. Lugg on 9 May 2018 committed an offence against section 87(2) of The Criminal Code. The indicated evidence is admissible and there are reasonable prospects that Dr. Lugg would be convicted if charged, prosecuted and tried accordingly. In FFWA Inc.'s view, the Crown has a duty to charge and prosecute Dr. Lugg.

TGA fails to answer questions

Fluoridated water is "therapeutic goods" as defined in section 3(1) of the *Therapeutic Goods Act 1989* (TG Act) because it is represented to be for the therapeutic use of preventing dental caries. It follows that water supply authorities which produce fluoridated drinking water, like other pharmaceutical manufacturers, must comply with the system of controls established by the TG Act.

On 28 November 2018 Port Macquarie-Hastings Council (PMHC), a NSW water supply authority, put very specific questions to the Therapeutic Goods Administration (TGA) regarding its 11 April 2014 "behind the news" website statement on fluoridated water. The latter note contains the TGA's position statement that fluoridated drinking water is not "therapeutic goods" as defined in the TG Act. PMHC asked whether the TGA's position relates to reticulated fluoridated water and, if so, which of paragraphs (c)–(h) in the definition of therapeutic goods the TGA relies upon in support of its position.

Dr. Tony Gill signed the TGA's written response dated 21 December 2018. It fails to answer PMHC's crucial second question. Dr. Gill wrote only: "I confirm that the TGA's position as stated on our website refers to fluoridated reticulated drinking water. I also confirm that the TGA considers fluoridated reticulated drinking water not to be therapeutic goods within the meaning of the Act. The TGA will consider making this position clear in an instrument under section 7AA of the Act".

By failing to answer the crucial question, Dr. Gill as good as admitted that the TGA's position lacks any legislative basis. His failure to answer may be compared with WA Attorney-General John Quigley's written response dated 19 December 2017 to similar questions put by Hon. Matthew Swinbourn MLC. As Legislative Council Standing Orders required Mr. Quigley to answer Mr. Swinbourn's questions, he ventured to suggest that fluoridated drinking water may fall outside the scope of "therapeutic goods" by virtue of paragraph (f) of the definition – i.e. goods which, in Australia or New Zealand, have a tradition of use as "foods for humans". The latter suggestion is nonsense because the ordinary meaning of "food" does not include drinking water.

The TGA apparently engages in serious misconduct in this matter. It *actively* and *materially* has misled water supply authorities on a matter of law and thereby procured commission of offences against the TG Act. One water supply authority now has asked questions that the TGA cannot answer. In response, the TGA hints it may ask the Minister for Health to change the law.



Australind and Eaton targeted

A WA Health [media release](#) dated 19 October 2018 states that the Water Corporation-operated public water supply for the southwest WA communities of Australind, Eaton, Burekup, Brunswick Junction, Pelican Point, Picton and Roelands “will” be fluoridated by mid-2020.

WA Health indicated it will not seek to have fluoride treatment imposed on residents of nearby Dallyellup at this time. Such a measure is “being investigated”. The same announcement foreshadows less definite plans for fluoridation of the Bunbury Water Supply, which is operated by Bunbury Water Corporation (Aqwest).

The former Governess of the Nanny-State of Western Australia, Hon. Kerry Sanderson AC, apparently did not care to check references when appointing Hon. Roger Cook MLA as Health Nanny. Mr. Cook had spent much of the previous decade as Shadow Health Nanny. During that time, he made no effort to prevent successive Health Nannies from allowing WA Health’s in-house population-poisoner, Dr. Richard Lugg, to poison those in his care with fluoride, one community at a time.

Since Mr. Cook became Health Nanny in 2017, he has shown enthusiastic support for recommendations made by the Fluoridation of Public Water Supplies Advisory Committee (FPWSAC). He deliberately continues former Health Nanny Hon. Dr. Kim Hames’ 2013 policy of keeping FPWSAC’s membership secret. FFWA Inc. conjectures that since 2001 no statutory chairperson of FPWSAC has attended even one FPWSAC meeting. It appears – but WA Health, in contravention of the *Freedom of Information Act 1992*, so far has refused to give access to information which may confirm – that ever since 2001 statutory chairpersons of FPWSAC have designated Dr. Lugg as the Acting Chair in relation to every one of 23 successive FPWSAC meetings.

Despite the method in the WA’s water fluoridation madness, it is by no means certain that the Australind and Eaton Water Supply would be fluoridated if the community were to apply strong political pressure against the proposed measure. Since the 1950s the National Health and Medical Research Council (NHMRC) has advocated the principle that fluoridation of a public water supply should not be forced through against strong public opposition. WA Health applied this principle in June 2012, when organized public protest in Carnarvon caused it to back away from its longstanding intention to fluoridate the Carnarvon Water Supply.

To get involved in keeping Australind and Eaton fluoride free, please contact southwest@fluoridefreewa.org.

Don’t fluoridate baby formula

According to a [WA Health FAQ](#), the National Health and Medical Research Council (NHMRC) advises that “infant formula sold in Australia is “safe for ... infants when prepared in accordance with the manufacturer’s instructions ... and reconstituted using fluoridated tap water”. That advice evidently is not reliable.

A recent paper in the *Journal of Clinical Pediatric Dentistry*, “[Fluoride Intake of Infants from Formula](#)”, indicates otherwise. Harriehausen *et al.* report: “[s]ignificantly more infants, particularly those under six months old, will exceed the [tolerable upper intake level, UL] when consuming formula reconstituted with 0.7 [mg/L fluoride] water, increasing their risk of developing dental fluorosis”.



Dr. Claudia Harriehausen

Harriehausen *et al.* found that 4.4% of infants exceeded the UL for fluoride defined by the U.S. National Academy of Sciences even when consuming formula reconstituted with minimally (0.0– 0.3 mg/L) fluoridated water. They *calculated* that 36.8% of infants *would* exceed the applicable U.S. UL for fluoride *if* they were to consume formula reconstituted with water containing 0.7 mg/L fluoride. Readers may infer that the ethics committee did not permit experimental testing at 0.7 mg/L fluoride.

By comparison, WA Health *recommends* reconstituting baby formula with water containing 1.0 mg/L fluoride – without any medical supervision. *How dare* it do so? Part of the answer is that in November 2016, NHMRC’s CEO Prof. Anne Kelso approved new guidelines dramatically increasing *Australian* ULs for fluoride. Those guidelines increased the UL for fluoride applicable to 4–8 year olds, for example, by 100% (from 2.2 to 4.4 mg/day) – i.e. to *double* the corresponding U.S. value.

Prof. Kelso is culpable for increasing Australian ULs for fluoride to unsafe levels and WA Health is culpable for recommending that infants *routinely exceed* the fluoride intake level elsewhere recognized as the limit of safety.

Farewell, Dr. Moolenburgh!

The victorious Dutch water fluoridation opponent Dr. Hans Moolenburgh passed away on 6 November 2018, aged 93 years. Read two moving tributes [here](#).

