



STATE OF HAWAII
DEPARTMENT OF HEALTH
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Testimony in OPPOSITION to H.C.R. 42
REQUESTING THE DEPARTMENT OF HEALTH TO CONDUCT A STUDY ON THE
VOLUNTARY USE OF FLUORIDE SUPPLEMENTS BY CHILDREN AND PREGNANT
WOMEN IN THE STATE OF HAWAII AND WHETHER THE VOLUNTARY TAKING
OF FLUORIDE SUPPLEMENTS SHOULD BE ENCOURAGED BY THE STATE.

REPRESENTATIVE JOHN M. MIZUNO, CHAIR
HOUSE COMMITTEE ON HEALTH & HUMAN SERVICES
Hearing Date: March 8, 2018 Room Number: 312

1 **Fiscal Implications:** The Department of Health does not have the resources to complete a study
2 as recommended in the resolution and defers to the Governor's Supplemental Budget Request for
3 appropriations priorities.

4 **Department Testimony:** The Department of Health opposes House Concurrent Resolution 42
5 which requests the Department of Health to conduct a study on the voluntary use of fluoride
6 supplements by children and pregnant women in the state of Hawaii and whether the voluntary
7 taking of fluoride supplements should be encouraged by the State.

8 The Department of Health appreciates the intent of the resolution and supports the use of
9 fluoride to reduce dental decay. The Department's Oral Health Program is currently organizing a
10 community-based state-wide oral health strategic plan that includes the increased use of fluoride
11 as a means of reducing dental decay.

12 The Centers for Disease Control and Prevention's "*Recommendations for Using Fluoride*
13 *to Prevent and Control Dental Caries in the United States (August 17, 2001)*" reports that
14 scientific studies have not shown that pregnant women who take fluoride supplements have
15 children with fewer dental caries (cavities). Also, there are mixed study results regarding the
16 caries-reducing efficacy of fluoride exposure in infants, prior to the eruption of their first teeth.
17 However, among individuals with erupted teeth, studies show that fluoride supplements reduce
18 caries experience on those teeth.

1 The Department of Health will continue to collaborate with oral health stakeholders and
2 community partners to find effective and appropriate uses of fluoride—in its various forms—to
3 reduce dental decay in Hawaii residents.

4 Thank you for the opportunity to testify on this bill.



Hawaii Dental Association

To: The House Committee on Health and Human Services
Time/Date: 9:30 a.m. March 8, 2018
Location: Capitol Conference Room 312
Re: HCR42 HR 30

Aloha Chair Mizuno, Vice Chair Kobayashi and members of the committee! The Hawaii Dental Association (HDA) is a statewide professional membership organization representing dentists practicing in Hawaii and licensed by the State of Hawaii Board of Dental Examiners. HDA members are committed to protecting the oral health and well-being of all of the people of Hawaii, from keiki to kupuna and everyone in between.

HDA supports HCR42 HR30, which requests the Department of Health to conduct a study on the voluntary use of fluoride supplements by children and pregnant women in the State of Hawaii and whether the voluntary taking of fluoride supplements should be encouraged by the State.

In 2015, the Hawaii State Department of Health reported Hawaii's children have the highest prevalence of tooth decay in the United States. Providing our community with an opportunity to support fluoridation is an important step toward addressing our state's oral health needs.

Mahalo for the opportunity to testify.

HCR-42

Submitted on: 3/7/2018 8:23:58 AM

Testimony for HHS on 3/8/2018 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Melodie Aduja	OCC Legislative Priorities Committee, Democratic Party of Hawai'i	Support	No

Comments:

PRESENTATION OF THE
OAHU COUNTY COMMITTEE ON LEGISLATIVE PRIORITIES
DEMOCRATIC PARTY OF HAWAII
TO THE COMMITTEE ON HEALTH & HUMAN SERVICES
THE HOUSE OF REPRESENTATIVES
TWENTY-NINTH LEGISLATURE
REGULAR SESSION OF 2018
Thursday, March 8, 2018
9:30 a.m.

Hawaii State Capitol, Conference Room 312

RE: Testimony in Support of **HCR42**

To the Honorable John M. Mizuno, Chair; the Honorable Bertrand Kobayashi, Vice-Chair and the Members of the Committee on Health and Human Services:

Good morning, my name is Melodie Aduja. I serve as Chair of the Oahu County Committee ("OCC") Legislative Priorities Committee of the Democratic Party of Hawaii. Thank you for the opportunity to provide written testimony on **HCR42** relating to a request to THE DEPARTMENT OF HEALTH TO CONDUCT A STUDY ON THE VOLUNTARY USE OF FLUORIDE SUPPLEMENTS BY CHILDREN AND PREGNANT WOMEN IN THE STATE OF HAWAII AND WHETHER THE VOLUNTARY TAKING OF FLUORIDE SUPPLEMENTS SHOULD BE ENCOURAGED BY THE STATE.

. The OCC Legislative Priorities Committee is in favor of **HCR42** and supports its passage.

HCR42 is in alignment with the Platform of the Democratic Party of Hawai'i ("DPH"), 2016, as it requests the Department of Health to conduct a study on the voluntary use of fluoride supplements by children and pregnant women in Hawaii to ensure that medical and dental standards for fluoride intake and use are based on conditions where local water supplies are not fluoridated, to assess the public health benefits of taking fluoride supplements, and to determine whether the taking of fluoride supplements should be encouraged by the State.

Specifically, the Platform of the Democratic Party of Hawai'i provides that "[w]e support community health initiatives that provide opportunities for the overall health of communities through strategic projects and programs focusing on increased interaction and physical activities among all age groups, as well as on better nutrition." (Platform of the DPH, P. 7, Lines 378-380(2016)).

Given that **HCR42** requests the Department of Health to conduct a study on the voluntary use of fluoride supplements by children and pregnant women in Hawaii to assess the public health benefits of taking fluoride supplements, and determine whether the taking of fluoride supplements should be encouraged by the State, it is the position of the OCC Legislative Priorities Committee to support this measure.

Thank you very much for your kind consideration.

Sincerely yours,

/s/ Melodie Aduja

Melodie Aduja, Chair, OCC Legislative Priorities Committee

Email: legislativepriorities@gmail.com, Tel.: (808) 258-8889

Petition to Submit Testimony in Support of HCR42/HR30

Petition summary and background:	<p>As Registered Dental Hygienists in the state of Hawaii, we SUPPORT HCR42/HR30.</p> <p>We have seen high rates of dental decay in both keiki and adults which could be a result from NO fluoride in our community water system. The Federal government mandates all military installments to provide fluoride in their water system. Statistics show how effective it has been to those living on base and have access to fluoridated water. This bill is requesting the Department of Health to conduct a study on the voluntary use of fluoride supplements by keiki and pregnant women in Hawaii.</p> <p>Encouraging parents to give fluoride drops/chew tabs to their keiki from a young age helps to increase the chance of developing healthy teeth in the future.</p>
Action petitioned for:	<p>We, the undersigned, are concerned citizens who urge our leaders to act now to SUPPORT HCR42/HR30 and help to improve the overall dental health of keiki and pregnant women in Hawaii.</p>

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HCR-42

Submitted on: 3/8/2018 2:38:34 AM

Testimony for HHS on 3/8/2018 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Carol Kopf	Individual	Oppose	No

Comments:

Fluoride Supplements are not FDA approved - Never Proven Safe or Effective

The FDA regulates fluoride in toothpaste only for topical application but has never safety tested fluoride ingestion for safety or effectiveness. The FDA considers fluoride supplements as unapproved drugs. See: <https://www.fda.gov/iceci/enforcementactions/warningletters/2016/ucm483224.htm>

The e-mail correspondence [included in the following link] between this writer and the FDA shows that fluoride supplements were "grandfathered in" before the 1938 law was enacted requiring drug testing.

<http://fluoridedangers.blogspot.com/2005/12/fluoride-never-fda-approved-for.html>

So, products on the market before 1938 were presumed safe by the FDA who allowed grandfathered drugs to be sold without any testing. Once a drug is on the market for any reason, doctors can use them to treat any disease or condition.

Unbelievably, sodium fluoride was on the market pre-1938, not to stop cavities and not for any medical reason, but as a rat poison.

So, in effect, the FDA says - since sodium fluoride safely and effectively killed rats before 1938, the FDA considers it is safe to give to little children to prevent tooth decay.

From a 1951 American Dental Association brochure:

"There is no proof that commercial preparations such as tablets, dentifrices, mouthwashes or chewing gum containing fluorides are effective in preventing dental decay. Unfortunately such preparations are being offered to the public without adequate scientific evidence of their value."

In the early 1980's, Robert Wood Johnson Foundation research first revealed fluoride tablets and mouth rinses failed to reduce tooth decay.

Reference: <https://www.rwjf.org/content/dam/farm/books/books/2001/rwjf37199>

In 2011, the Cochrane Oral Health Group reported on fluoride supplement research and wrote, " We rated 10 trials as being at unclear risk of bias and one at high risk of bias, and therefore the trials provide weak evidence about the efficacy of fluoride supplements."

Reference: <http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD007592.pub2/abstract>

A 2008 Journal of the American Dental Association systematic review reported that fluoride supplements deliver no benefits to primary teeth but increase dental fluorosis risk - white spotted, yellow, brown and/or pitted teeth

Reference: [http://jada.ada.org/article/S0002-8177\(14\)63899-X/fulltext](http://jada.ada.org/article/S0002-8177(14)63899-X/fulltext)

A meta-analysis in Community Dentistry and Oral Epidemiology (2/99) reported: "In non-fluoridated communities, the use of fluoride supplements during the first 6 years of life is associated with a significant increase in the risk of developing dental fluorosis."

"It is therefore concluded that the risks of using supplements in infants and young children outweigh the benefits...fluoride supplements should no longer be used for young children in North America," writes Burt (Fall 1999 Journal of Public Health Dentistry).

Reference: <https://www.ncbi.nlm.nih.gov/pubmed/?term=The+case+for+eliminating+the+use+of+dietary+fluoride+supplements+for+young+children>.

Belgium stopped selling fluoride supplements in 2002 because documentation revealed that fluoride can cause physical and neurological harm with little evidence of decay reduction. Reference: <https://yaleglobal.yale.edu/content/belgium-bans-gum-tablets-and-drops-fluoride>