

## Policy briefing note – drinking water fluoridation

## The fluoridation of drinking water

Though only made legal in 1985, some drinking water in the UK has been artificially fluoridated for many years. Some other supplies of drinking water are naturally fluoridated.

Much of the country remains untreated, however and, currently, the decision whether to introduce artificial fluoridation in any particular area rests with the Health Authority.

The CIEH supports fluoridation – requiring water undertakers to add fluoride to tap water – subject to consultation with, and the clear agreement of, the communities affected in the cause of reducing health inequalities.

Evidence of reduced health inequalities across social classes was found to be ambiguous in the **Department of Health-sponsored York review**. The data support the conclusion that the fluoridation of drinking water can reduce the prevalence of dental caries to some extent.

While we note that around one in eight consumers is likely to exhibit fluorosis of "aesthetic concern", where

teeth become stained as a result of using fluoridated drinking water (and the CIEH supports the call for more good quality research), the review nevertheless found no conclusive evidence for further adverse effects such as increased incidence of bone fracture or, especially, cancers.

The ethical considerations are complex but include, in addition to the benefit gained from fluoridation and the harm which it causes (above), the availability of effective alternatives such as the use of fluoride toothpastes or other oral supplements and not least the importance of consent.

Compulsory mass fluoridation involves a denial of choice and an invasion into the homes and private lives of the majority who do not expressly consent but who have to consume fluoridated water regardless of its likely benefit to them as individuals – a policy which might also be at odds with modern "better regulation" principles of intervening only proportionately and according to risk.

The Government is proposing to abolish Strategic Health Authorities and primary care trusts, devolving decision-making to local authorities, communities and individuals and the CIEH's policy of fluoridation only with community consent sits well with that intention.

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