City of McKinney City Council, (CC: 13 Member City Councils of NTMWD)

I look forward to meeting with you and speaking at the McKinney City Council vote on Fluoridation on Tuesday, March 5th. I am emailing you today because the fact is that your vote - one way or the other - will affect the 1.6 million citizens served by NTMWD. And I think it's only fair to all of us, that you take the time to do your due diligence and research when it comes to such a controversial topic, that so few have been well-educated and informed on. Therefore, I wanted to assist you, by providing you with some of the more profound research I have run across during my 100+ hours of research over just the past month.

While I completely understand the concept that naturally occurring fluoride may end up in the water supply, before and/or after the treatment process, and that it may be the recommendation of the EPA and CDC to add fluoride to the water treatment process, the fact is that NTMWD (North Texas Municipal Water District) adds Hydrofluosilicic Acid to the water. This is a toxic chemical compound from an industrial waste by-product that is a non-FDA approved drug. Since these silicofluorides undergo no purification procedures, they can contain elevated levels of arsenic – more so than any other water treatment chemical, and may also contain mercury, copper, aluminum and cadmium. They are over 80 times more toxic than naturally-occurring calcium fluoride. Also, recent research suggests that the addition of silicofluorides to water is a risk factor for elevated lead exposure, particularly among residents who live in homes with old pipes (like myself & many others). These by-products are considered highly toxic hazardous waste chemicals by the EPA and are a violation of federal law when dumped directly into the environment & doing so is considered an act of terrorism, yet these same by-products are somehow allowed to be added to our water for human consumption, then processed through our wastewater plants, only to find their way into and contaminate our communities streams, creeks and lakes. Hydrofluosilicic Acid is not the naturally occurring fluoride that is referenced by the CDC, EPA or NTMWD.

Definition:

Hydrofluosilicic Acid - <u>an unstable poisonous corrosive acid</u> known primarily in the form of its salts FORMULA: H2SiF6 COMPOSITION: Hydrofluosilicic Acid 20-25% Fluoride 19% Water 75-80%

The CDC Fluoridation Fact Sheet states the following: (http://www.cdc.gov/fluoridation/fact_sheets/cwf_qa.htm)

• What is fluoride?

Fluoride is a naturally occurring mineral that is proven to protect against tooth decay.

• How does fluoride get into tap water?

Fluoride can occur in drinking water naturally as a result of the geological composition of soils and bedrock. Some areas of the country have high levels of naturally occurring fluoride. Fluoride can also be added to community drinking water supplies as a public health measure for reducing cavities. *The decision whether or not to add fluoride to drinking water is made at the state or local level*.

The EPA info sheet regarding fluoride states the following: (<u>http://water.epa.gov/drink/contaminants/basicinformation/fluoride.cfm</u>)

• What is fluoride?

Fluoride compounds are salts that form when the element, fluorine, combines with minerals in soil or rocks.

• Uses for fluoride.

Many communities add fluoride to their drinking water to promote dental health.

• How does fluoride get into my drinking water?

Some fluoride compounds, such as sodium fluoride and fluorosilicates, dissolve easily into ground water as it moves through gaps and pore spaces between rocks. Most water supplies contain some naturally occurring fluoride. Fluoride also enters drinking water in discharge from fertilizer or aluminum factories. Also, many communities add fluoride to their drinking water to promote dental health.

The last point above, implies that it may be possible for a synthetically processed form of fluoride such as Hydrofluosilicic Acid to wind up in our water by various industrial discharge processes, but nowhere on either of these EPA or CDC links, do they recommend, imply or suggest deliberately adding anything but the naturally occurring fluoride to the water treatment process.

In addition, our water treatment processing facility, the NTMWD Fluoride QA PDF suggests the same.

(https://ntmwd.com/downloads/fluoridega.pdf)

• What is fluoride?

The fluoride ion is derived from the abundant, naturally-occurring mineral fluorine. Small amounts of fluoride occur in all raw water sources such as lakes, rivers, and streams.

• Why is fluoride added to the water supply?

The addition of fluoride to the treated water supply improves the public's oral health and assists in the prevention of tooth decay.

• What is water fluoridation?

Water fluoridation is the adjustment of natural fluoride in the treated water supply to a level recommend by the World Health Organization. The U. S.

Centers for Disease Control and the American Dental Association endorse fluoridation of drinking water.

Despite NTMWD's implication on their website that the fluoride they use is derived from the abundant, naturally-occurring mineral fluorine - again, the fact is that NTMWD's fluoride is added in the form of Hydrofluosilicic Acid which is supplied to the NTMWD from Mosaic Co. Please take a moment to review Mosaic's MSDS (Material Safety Data Sheet) of the chemical, Hydrofluosilicic Acid. <u>Mosaic's Hydrofluosilicic Acid MSDS</u>

This is my greatest fear and concern... that the majority of us are not educated and informed properly on the specifics and details of the fluoridation process and additives, so much so, that we are blindly standing by a 70 year old unproven myth, thus completely losing perspective of exactly what we are talking about. Please understand, I did not start this communication to criticize, condemn, point fingers or place blame. I started it to provide you with facts and information, educate you and begin the process of working together with you to educate and inform others, to put a stop to this. And most importantly, to see if you are aware of what is <u>truly</u> in our tap water, before voting on whether or not to continue the water fluoridation treatment.

Now, given the Composition of Hydrofluosilicic Acid (listed previously in this email) & the fact that the toxic acid ingredient of this substance is more prevalent than the fluoride ingredient... any and all associated risks and adverse health affects FAR outway any potential benefits, as you can see from the CDC's Agency for Toxic Substance & Disease Registry's Toxicological Profile of compiled studies of the 'fluoride' that is actually put in our water. <u>http://www.atsdr.cdc.gov/ToxProfiles/tp11-c3.pdf</u>

And even any possible benefits of reducing tooth decay, are only subject to certain amounts of fluoride, for certain age groups and certain genders and in some cases, even certain races. Therefore, we need to realize that the addition of fluoride cannot be addressed with a 'one size fits all' approach via our water treatment process.

According to the CDCs very own Toxicological Profile:

The Institute of Medicine (IOM 1997) has derived adequate intake values ranging from 0.01 to 4 mg/day to reduce the occurrence of dental caries. Adequate intake values broken down by age group are:

0-6 months, 0.01 mg/day; 7-12 months, 0.5 mg/day; 1-3 years, 0.7 mg/day; 4-8 years, 1 mg/day; 9-13, 2 mg/day; 14-18 years, 3 mg/day; 19 years and older, 4 mg/day (males) and 3 mg/day (females); pregnancy, 3 mg/day; and lactation, 3 mg/day. Using body weight data reported by IOM (2000), these dietary intakes are equivalent to doses of approximately 0.05 mg/kg/day for ages 6 months to >18 years; the dose in infants 0-6 months is 0.0014 mg/kg/day. (Note: Yet, how many infants consume this fluoride with their formula, in their bottles?)

In addition, without knowing exactly how much fluoride intake each individual is consuming through other means of fluoridation, such as their diet (food/milk) and dental products like toothpaste, mouthwash... and without knowing each individuals specific weight, age and gender - you cannot possibly determine exactly how much 'fluoride' each individual should get. So, again, we need to realize that the addition of fluoride cannot be addressed with a 'one size fits all' approach.

That's like saying that everyone has the potential for depression due to their possible lack of sunshine exposure or Vitamin D3 in their diet and therefore, we'll add some Prozac to the water treatment process based on an average/means of weight/age/gender of the population served. The only difference is that Prozac is actually an FDA approved drug.

Now, once again in going back to look at the Composition of Hydrofluosilicic Acid (what our water is actually treated with)...

The CDC States: The EPA has not established an MCL (Maximum Contaminant Level) for silicates, the second [second to H2O/Water] most prevalent substance in FSA (Hydrofluosilicic Acid) because there are no recognized health concerns. NSF/ANSI Standard 60, however, has a Maximum Allowable Level of 16 mg/L for sodium silicates as corrosion control agents.

But on the contrary, the CDC's Toxicological Profile goes into great detail with a significant amount of studies performed over the last 70+ years, showing where mice, rats, guinea pigs, hamsters, rabbits, cats, dogs, monkeys and sheep have endured an exorbitant amount of detrimental and toxic effects from exposure at various levels and in various methods to this 'fluoride', up to and including - death.

So, if the NSF/ANSI has a Maximum Allowable Level of 16 mg/L for toxic silicates, yet we do not test for it... & even if we did, how would we know we're not exceeding that level and causing detrimental and toxic effects to the citizens of the community without knowing what their 'fluoride' intake is from other sources?

According to the National Academy of Sciences, fluoride is not an essential nutrient and no amount of fluoride is necessary in the human body. All water treatment chemicals, with the exception of fluoride, are added to make drinking water safe and pleasant to consume. Fluoride is the only chemical added to treat the people who consume the water, rather than the water itself. Fluoridating water supplies can thus fairly be described as a form of mass medication.

Fluoride is a proven neurotoxin; it causes birth defects, impairs the immune system, causes muscular weakness, gastrointestinal symptoms, bone disease, ulcers, and joint symptoms; it suppresses thyroid function, calcifies the pineal gland, causes infertility, reduced IQ and permanent disfiguration of teeth - to name a few. Fluoride is also a cumulative poison. While small amounts taken on a daily basis may not be noticeable, the long term effects will certainly affect a person's quality of life as it builds up in the body. Fluoride is a non-FDA approved drug with side effects.

2/27/13

I think in order for you to make a well-educated and informed decision, it would also be important for you to take the time, over the next week, before the vote, to watch the following videos:

PROFESSIONAL PERSPECTIVES ON WATER FLUORIDATION

This video presents a powerful indictment of the water fluoridation program through interviews with a Nobel Laureate in Medicine, three scientists from the National Research Council's landmark review on fluoride, as well as dentists, medical doctors, and leading researchers in the field.

http://www.youtube.com/watch?feature=player_embedded&v=88pfVo3bZLY#

The Fluoride Deception

The latest mini documentary from Mike Adams, executive director of the Consumer Wellness Center. Through the use of animation and motion graphics, it exposes the truth about where fluoride really comes from: The toxic byproducts of the phosphate mining industry. http://www.youtube.com/watch?v=LEZ15m-D_n8

FLUORIDEGATE - An American Tragedy

This new documentary is a film by Dr. David Kennedy that reveals the tragedy of how the United States government, industry and trade associations protect and promote a policy known to cause harm to our country and especially to small children who suffer more than any other segment of the population. While government motivation remains uncertain, the outcome is crystal clear: the fluoridation policy is destroying our nation.

http://www.fluoridegate.org/the-film/

Dentist who Formerly Supported and Advocated for Water Fluoridation

Public Access program featuring an interview with dentist, Dr. Bill Osmunson, provides a wealth of information demonstrating why he changed his position. http://www.youtube.com/watch?feature=player_detailpage&v=laMKQF3ARWk

Again, I am emailing you today because the fact is that your vote - one way or the other - will affect the 1.6 million citizens served by NTMWD. And it's only fair to all of the citizens, that you take the time to do your due diligence and research. I appreciate you taking the time to read this email and I thank you for your attention to this matter, and again, I look forward to meeting with you and speaking at the McKinney City Council Meeting to Vote on Fluoridation.

I would also like to take this opportunity to encourage the remainder of the 13 Member Cities of the NTMWD to propose a resolution to end fluoridation, as I have been advised by NTMWD to do. After reading this email and reviewing the data, I do believe that many of you will certainly have a new outlook and perspective on water fluoridation. I look forward to hopefully meeting each and every one of the City Councils in the near future.

Sincerely,

Nichole Hagen

Facts don't cease to exist because they are ignored. ~ Aldous Huxley