

Coventry City Council rebuffs anti-fluoridation pressure group

Since the summer of 2011, Coventry City Council has twice rebuffed anti-fluoridation campaigners' efforts to generate controversy and concern on this public health issue.

The West Midlands Against Fluoridation (WMAF) pressure group, based in the city, was trying to persuade the City Council's Health and Social Care Scrutiny Board to adopt a negative approach to fluoridation. On two occasions – in June 2011 and later in January 2012 – the Scrutiny Board rejected the WMAF arguments.

Coventry's water supplies were progressively fluoridated between the early and late 1980s, with the whole of the city having been covered by around 1989. The move to fluoridate Coventry was supported at the time by the City Council.

Benefits of fluoridation for Coventry's 5-year olds

At the June 2011 meeting of the Council's Scrutiny Board, Coventry consultant in dental public health Jonathan Iloya presented data comparing children's dental health in the city with that of children from other local authorities with similar levels of social deprivation.

Mr Iloya cited figures from the 2007-08 national survey of children's teeth showing that 5-year olds in Sheffield, Hyndburn, Redcar & Cleveland, Wigan, Rotherham, Barnsley, Wakefield and Leeds had between 33% and 105% more decayed, missing and filled teeth than their counterparts in Coventry (see Table 1).

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Table 1: Number of teeth affected by decay per 100 five-year olds in **fluoridated Coventry** and **8 non-fluoridated PCTs** with **similar levels of social deprivation to Coventry**

Based on results of 2007/08 national survey

Coventry	103 teeth per 100 five-year olds
Wakefield	137 teeth (+33%)
Barnsley	149 teeth (+45%)
Wigan	157 teeth (+52%)
Leeds	161 teeth (+56%)
Sheffield	166 teeth (+61%)
Redcar	167 teeth (+62%)
Kirklees	201 teeth (+95%)
Hyndburn	211 teeth (+105%)

Benefits of fluoridation for Coventry's 12-year olds

In addition, Mr Iloya reported figures from a 2008-09 survey showing that 12-year olds in eight local authorities with similar deprivation levels to those of Coventry had between 50% and 147% more teeth affected by decay than 12-year olds in the city (see Table 2).

Mr Iloya further explained that both Coventry 5 year olds and 12-year olds had better teeth than their counterparts in a number of non-fluoridated areas with much lower levels of social deprivation. For example, 12-year olds in Richmond and Twickenham, Kingston upon Thames, Bournemouth and Poole, Norfolk, Bromley, Devon, Somerset, Leicestershire and Rutland and Northamptonshire have, on average, between 11% and 42% more decayed, missing and filled teeth than those in Coventry.

The message for Coventry councillors was loud and clear – that Coventry's children have benefited significantly from fluoridated water, which has given them a much better level of dental health than they would otherwise have enjoyed.

Anti-fluoride group claims about Australia shown to be incorrect

At the meeting, anti-fluoride speaker Mrs Joy Warren claimed to possess both published and unpublished data from the University of Adelaide confirming that, according to a 2003-04 survey, Australian children's teeth erupt in the mouth up to two years later in fluoridated areas than in non-fluoridated areas.

This, she argued, meant that children's teeth in fluoridated areas were likely to have less decay because they would not have been exposed to the causes of decay for as long as the teeth of children of the same age in non-fluoridated areas.

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Table 2: Number of teeth affected by decay per 100 twelve-year olds in **fluoridated Coventry** and **8 non-fluoridated PCTs** with **similar levels of social deprivation to Coventry**

Based on results of 2008/09 national survey

Coventry	60 teeth per 100 twelve-year olds
Kirklees	90 teeth (+50%)
Sheffield	97 teeth (+62%)
Rotherham	99 teeth (+65%)
Barnsley	101 teeth (+68%)
Leeds	108 teeth (+80%)
Wakefield	110 teeth (+83%)
Redcar	114 teeth (+90%)
Wigan	148 teeth (+147%)

Following the meeting, officials from the West Midlands health services made contact with the University of Adelaide, which provided documents to show that Mrs Warren's claims were based on erroneous data being used by Australian anti-fluoride groups.

Minimal variations in tooth eruption times between fluoridated and non-fluoridated areas of Australia

Information provided to NHS West Midlands by the University of Adelaide demonstrated that, according to the 2003-04 survey cited by Mrs Warren, there were minimal variations in tooth eruption times between fluoridated and non-fluoridated areas of Australia.

Highest overall level of tooth decay in mainly non-fluoridated (at the time) State of Queensland

Mrs Warren had also claimed that, in the early 2000s, children in the then mainly non-fluoridated State of Queensland had lower levels of tooth decay than those in the mainly fluoridated parts of Australia.

However, analysis of 2003-04 Australian figures revealed that Queensland children between 5 and 12 years old had the highest overall levels of tooth decay in their deciduous and permanent teeth of any of the areas of Australia included in the survey.

Since 2008, the Queensland government has embarked upon an ambitious fluoridation programme. Between then and now, the proportion of Queensland residents supplied with fluoridated water has increased from under 5% to around 92%, including those who live in Brisbane, the State capital.

Average number of teeth decayed, missing and filled per 100 five to 12 year old children - Australian national oral health survey 2003/04

Queensland -	202 teeth affected
Northern Territory -	184 teeth affected
Tasmania -	166 teeth affected
South Australia -	146 teeth affected
Australian Capital Territory -	140 teeth affected
Western Australia -	131 teeth affected