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www.vahealthcatalyst.org**info@vahealthcatalyst.org****EPA's Decision to Review Fluoride in Drinking Water**

Friends,

Across Virginia and the nation, simply turning on the tap delivers more than water—it offers a powerful, evidence-based tool for better health. For nearly 80 years, community water fluoridation (CWF) has consistently reduced cavities, saved families money, and ensured access to preventive oral health care for all—regardless of income or background.

This week, the Environmental Protection Agency (EPA) announced it will “review new scientific information on potential health risks of fluoride in drinking water.”¹ All of us at Catalyst support rigorous scientific review and believe that public health policy should remain rooted in credible, up-to-date science. Sound public health policy depends on rigorous, fact-based science. However, we must also resist reactionary pressures fueled by misinformation and flawed studies. Our concern is that recent statements by leadership at both HHS and the EPA are not rooted in science or fact and that beliefs based on conjecture rather than facts will guide the review.

The body of research on water fluoridation is vast and well-established. At the optimal level of 0.7 mg/L, fluoride reduces cavities in children and adults by approximately 25%.² It is endorsed by the American Academy of Pediatrics and the American Dental Association. Its safety is affirmed by decades of peer-reviewed studies across a range of populations. Recent concerns about fluoride and cognitive development are largely based on studies from countries where fluoride levels far exceed those used in U.S. water systems. Studies from countries such as New Zealand and Australia have found no link between fluoridated water and lower cognitive performance at U.S. fluoridation levels.^{3,4}

Real-world examples further illustrate the consequences of ending this practice. In Calgary, Canada, cavity rates and urgent dental procedures surged after the city

¹ U.S. Environmental Protection Agency. (2024, April 3). *EPA will expeditiously review new science on fluoride in drinking water*. <https://www.epa.gov/newsreleases/epa-will-expeditiously-review-new-science-fluoride-drinking-water>

² Centers for Disease Control and Prevention. (2023, March 7). *Statement on the evidence supporting the safety and effectiveness of community water fluoridation*. <https://www.cdc.gov/fluoridation/about/statement-on-the-evidence-supporting-the-safety-and-effectiveness-of-community-water-fluoridation.html>

³ Do LG, Spencer AJ, Sawyer A, Jones A, Leary S, Roberts R, Ha DH. Early Childhood Exposures to Fluorides and Child Behavioral Development and Executive Function: A Population-Based Longitudinal Study. *J Dent Res*. 2023 Jan;102(1):28-36. doi: 10.1177/00220345221119431. Epub 2022 Oct 9. PMID: 36214232.

⁴ Broadbent JM, Thomson WM, Ramrakha S, Moffitt TE, Zeng J, Foster Page LA, Poulton R. Community Water Fluoridation and Intelligence: Prospective Study in New Zealand. *Am J Public Health*. 2015 Jan;105(1):72-76. doi: 10.2105/AJPH.2013.301857. PMID: 24832151; PMCID: PMC4265943.

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ended fluoridation—prompting a reversal of that decision.⁵ In Israel, the rate of childhood cavities nearly doubled after fluoride was removed from water supplies.⁶

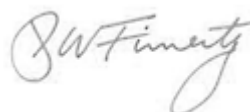
These threats to fluoride access are unfolding alongside troubling trends in federal oral health policy. The recent elimination of key oral health positions and programs at the Department of Health and Human Services—including the CDC’s Division of Oral Health and the Chief Dental Officer at HRSA—weakens the infrastructure needed to ensure access to care, especially for those who are uninsured or medically vulnerable. Combining these actions with attempts to ban fluoride in public water systems, such as the recent law passed in Utah, exacerbates a growing oral health crisis and undermines the public health infrastructure.

At Virginia Health Catalyst, our mission is rooted in equity, access, and facts. It’s critical for both policymakers and the public to keep those values at the center of this review. Science must be scrutinized—but with integrity, not ideology. Public health decisions must be based on sound data, not fear or falsehoods.

As the EPA conducts its review, Catalyst remains steadfast in our commitment to ensuring that everyone in Virginia has access to safe, effective, and trusted public water. Science tells us that fluoridation is part of that promise. And trust—in both our water and our science—is key to keeping it.



Sarah Bedard Holland
CEO



Patrick Finnerty
Board Chair

⁵ Yazdanbakhsh, E., Bohlouli, B., Patterson, S., & Amin, M. (2024). Community water fluoride cessation and rate of caries-related pediatric dental treatments under general anesthesia in Alberta, Canada. *Canadian Journal of Public Health*, 115(2), 305–314. <https://doi.org/10.17269/s41997-024-00858-w>

⁶ Tobias, G., Mordechai, F., Tali, C., et al. (2022). The effect of community water fluoridation cessation on children’s dental health: A national experience. *Israel Journal of Health Policy Research*, 11(4). <https://doi.org/10.1186/s13584-022-00514-z>