

Public Health Impact of Community Water Fluoridation



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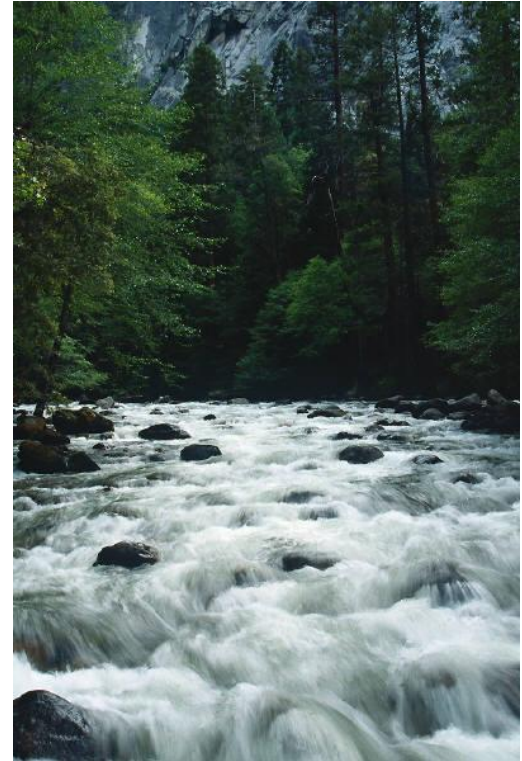
U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention

Significance of Dental Caries

- ❑ **Dental caries (tooth decay) is a highly prevalent chronic disease**
 - One in four children from low-income families had untreated tooth decay (NHANES, 2009–2010)
 - Untreated decay can cause pain, school absences, difficulty concentrating, and poor appearance
 - Decreased quality of life
- ❑ **One measure of tooth decay is the number of decayed, missing, or filled teeth (DMFT)**
 - Used in population surveillance and studies
- ❑ **Key benefit of community water fluoridation (CWF) is the reduction in DMFT**

Fluoride is a Naturally Occurring Mineral

- ❑ **All water contains some naturally occurring fluoride, but usually at levels too low to prevent tooth decay**



Community Water Fluoridation (CWF)

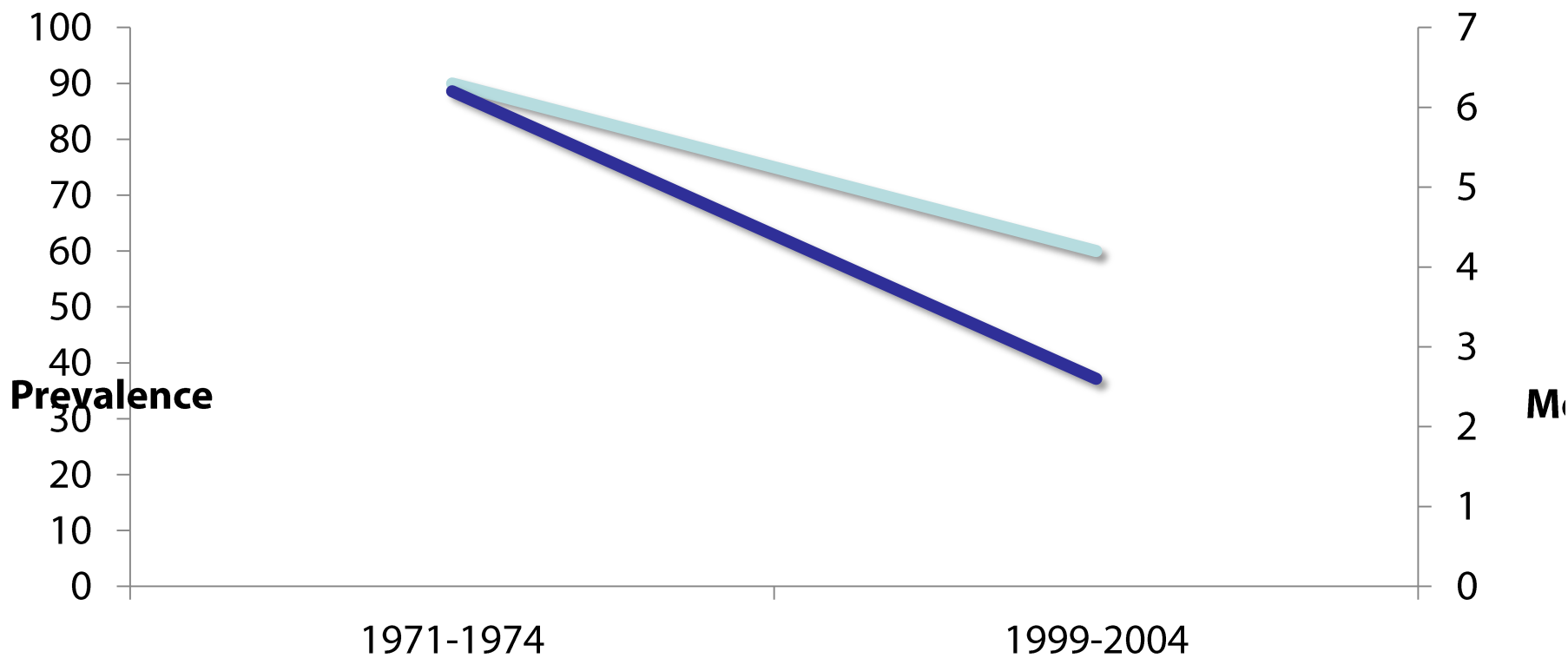
- ❑ CWF is the controlled adjustment of fluoride in a community water supply to an optimal concentration for reduction of tooth decay
- ❑ Optimal concentration of fluoride is approximately 1mg/L (equivalent to 1 ppm)
- ❑ Fluoride inhibits demineralization and enhances remineralization of dental enamel



Changes in Prevalence and Severity of Tooth Decay, 1971–1974 to 1999–2004

Dental Caries among U.S. Adolescents

— Prevalence of dental caries — Mean DMFT



CDC. MMWR.1999;48:933-40
DMFT: decayed, missing, or filled teeth

Effectiveness

- ❑ **Systematic review found that community water fluoridation was effective among adults (20–60 years) (9 studies) (N=7853)**
- ❑ **Meta-analysis of 5 cross-sectional studies published after 1979 and conducted among adults with lifetime residency in F and NF communities (N=2530)**
 - **Tooth decay reduced overall by 27% (95% CI 19–34%)**

Effectiveness

❑ **Community Preventive Services Task Force (2013):**

- Found strong evidence that community water fluoridation (CWF) was effective in reducing tooth decay
- Decrease in percent caries free (mean difference)
Median: 14.6%; range -5.0% to 64% (11 studies)
Median: 25.1%; range 19.8% to 31.6% (1 study)
- Decrease in number of DMFT (mean difference)
Median 2.25 teeth; range 0.5 to 4.4 (10 studies)

❑ **Task Force recommended CWF to prevent or control caries in communities**

Cost-Effectiveness

- ❑ **A systematic review by the Community Preventive Services Task Force (2001) found that CWF was cost-saving in all 5 included studies**
- ❑ **Medicaid costs for treatment of tooth decay were significantly lower among children in fluoridated vs. non-fluoridated communities in**
 - Louisiana parishes: preschoolers (1995–96); \$67 (2010 U.S. dollars)
 - New York counties: children and adolescents (2006); \$24

Safety

❑ **Review by Community Preventive Services Task Force (2013) found**

- Clear, dose response relationship between fluoride concentrations in drinking water and dental fluorosis
- No evidence that CWF results in severe dental fluorosis
- No association observed between CWF and
 - Bone fractures or skeletal fluorosis
 - Lifetime exposure to fluoride at higher drinking water concentrations (e.g. 4.0 mg/L) has been associated with bone fractures and skeletal fluorosis
 - Unwanted health effects other than dental fluorosis

Safety

□ Review by National Research Council (2006)

- Focused on naturally-occurring fluoride concentrations in drinking water of 2–4 mg/L
 - Notably higher than recommendations for CWF (~1 mg/L)
- Found substantial evidence only for increased risk of severe dental fluorosis
- Noted that prevalence of severe dental fluorosis was near zero with fluoride concentrations in drinking water of <2.0 mg/L
- Concluded that lifetime exposure to fluoride at drinking water concentrations of 4.0 mg/L is likely to increase bone fractures compared to exposures at 1.0 mg/L

Enamel Fluorosis: Clinical Presentation



Unaffected to Questionable



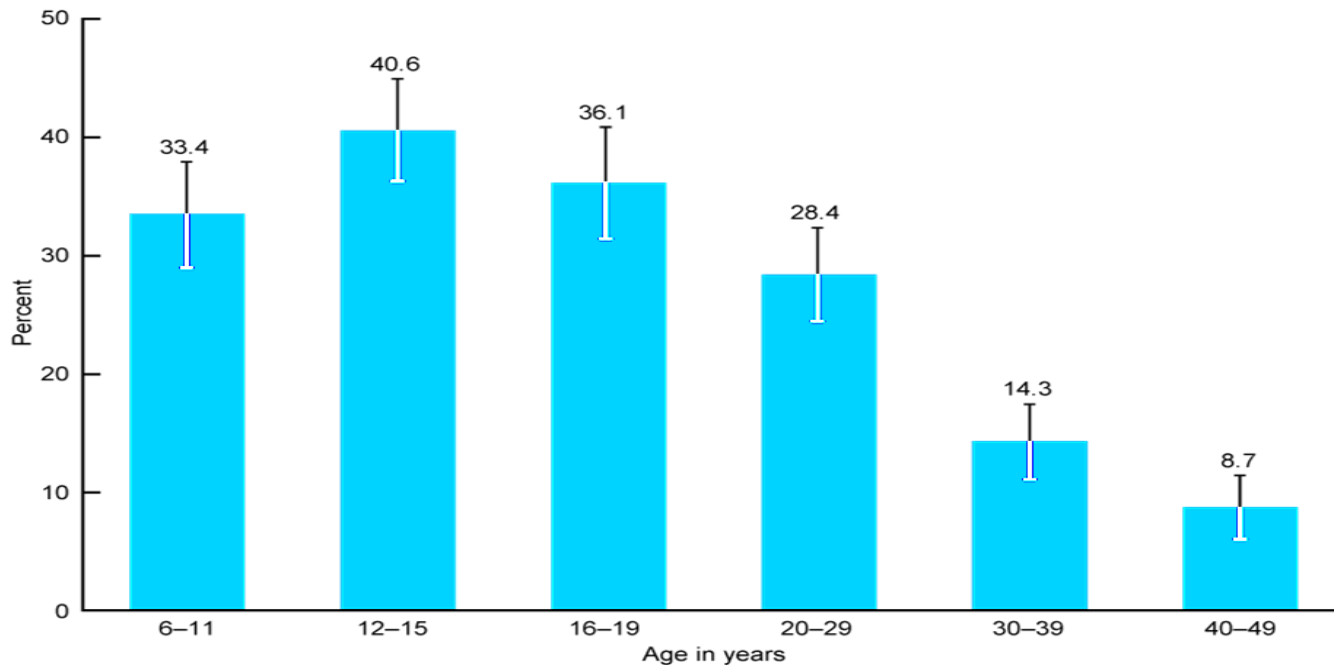
Very Mild to Mild



Moderate and Severe



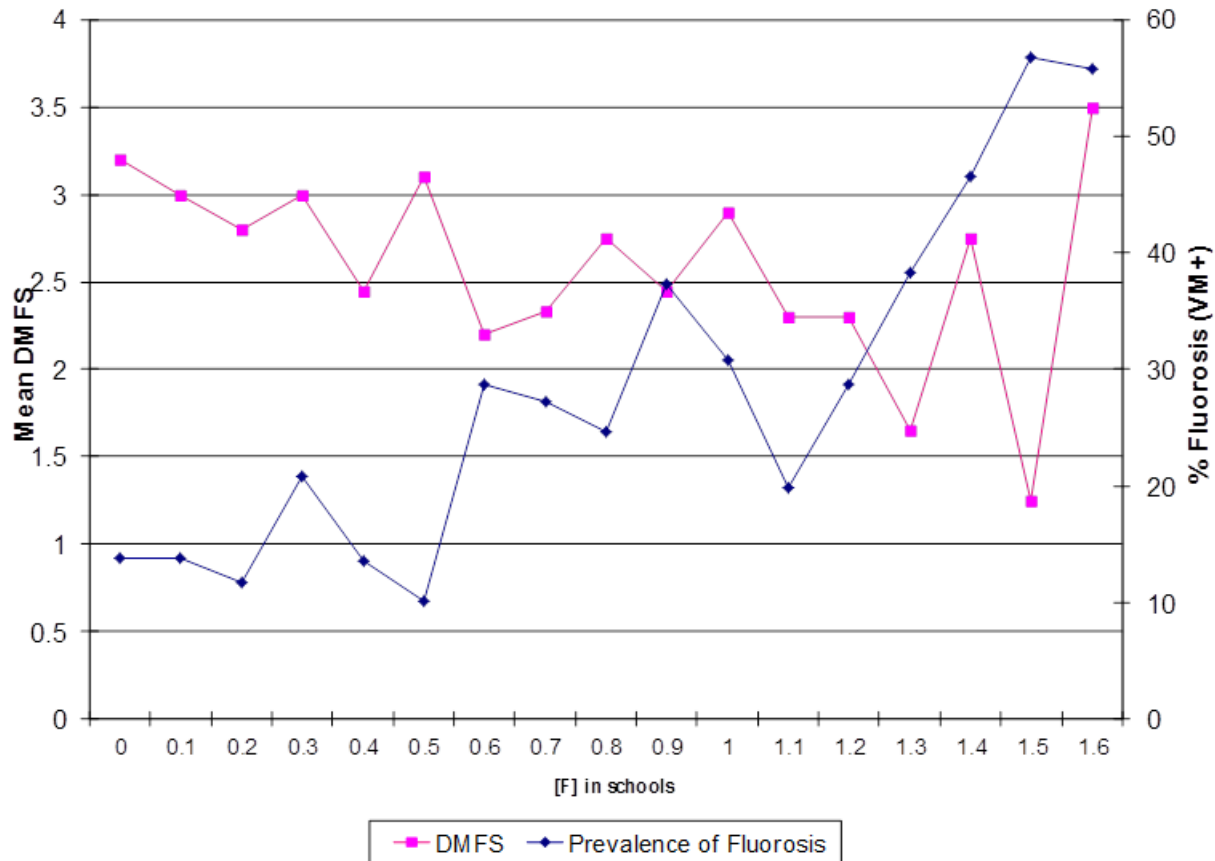
Prevalence in Enamel Fluorosis, Ages 6–49, 1999–2004



92% very
mild to mild



Dental Caries and Dental Fluorosis at Varying Water Fluoride Concentrations



Key finding:
decline in caries as
fluoride content
increased to 0.7 mg/L

Community Water Fluoridation Recommendations

- ❑ **Recommendations established by the U.S. Public Health Service (1962): 0.7–1.2 mg/L water**
- ❑ **Proposed HHS recommendation (2011): 0.7 mg/L water**
- ❑ **Current Status**
 - Public comments addressed based on relevant science
 - External peer review completed
 - HHS final review pending
- ❑ **Release of recommendation expected early in 2014**

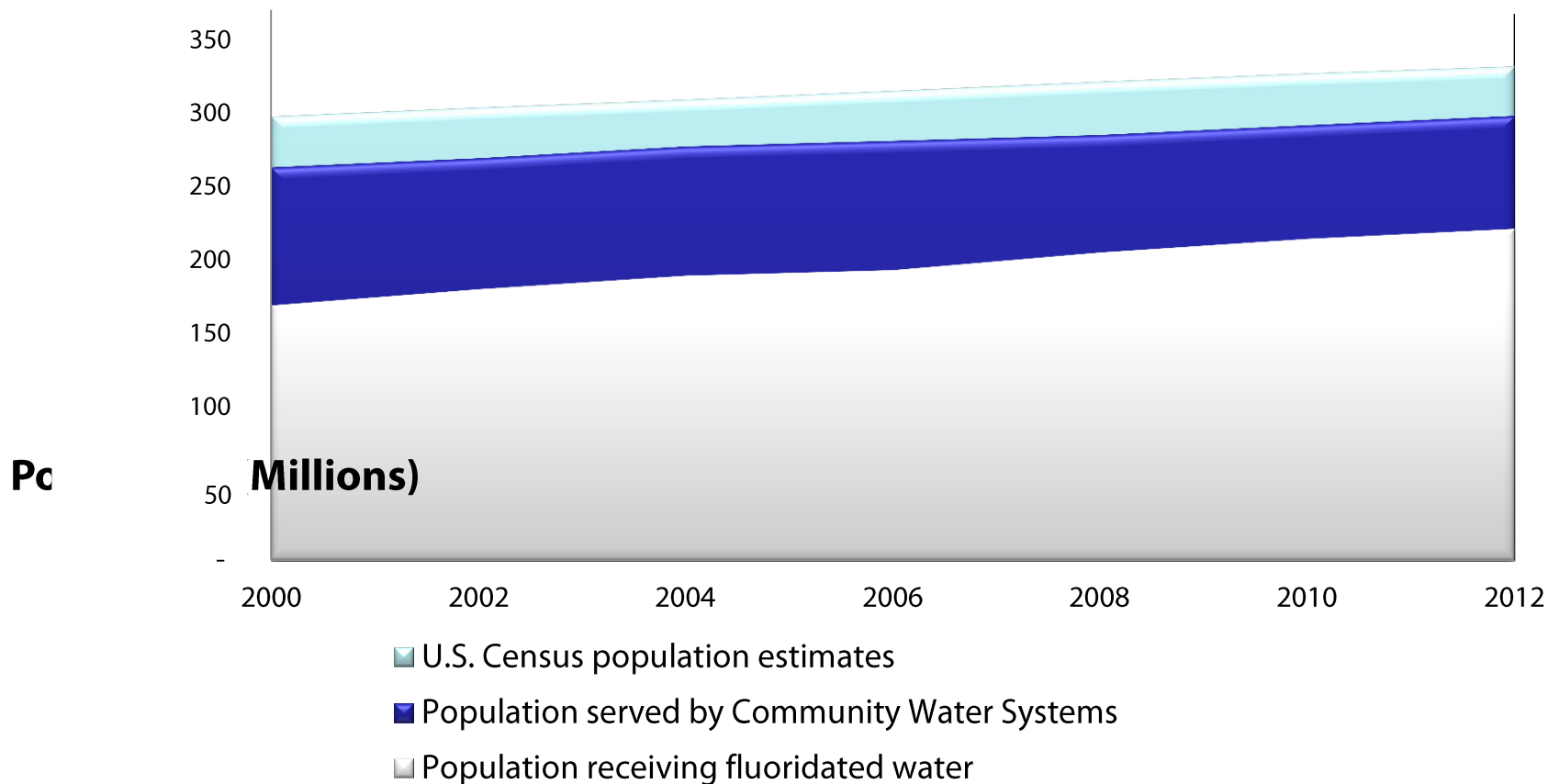
mg/L: milligrams per Liter

Main Reasons for Proposed Change In Fluoridation Recommendations

- ❑ Drinking water is now one of several sources of ingested fluoride**
 - Fluoride toothpaste
 - Fluoride supplements
 - Commercial foods and beverages
- ❑ Increase in prevalence of dental fluorosis**
- ❑ Likelihood that caries prevention can be maintained while reducing risk of fluorosis**
- ❑ Lack of important differences in water intake by outdoor temperature**

People Reached by Community Water Fluoridation

Trends in population receiving fluoridated water — U.S. 2000–2012



Community Water Fluoridation: Progress at the Population Level

- ❑ **Since 2000, 48 million people in the United States have received fluoridated water for the first time**
- ❑ **More than 6 million people were added between 2010 and 2012**
 - Percentage coverage increased from 73.9 to 74.6

Healthy People 2020: Community Water Fluoridation

- ❑ **Objective:** Increase the proportion of the U.S. population served by community water systems with optimally fluoridated water
- ❑ **Target:** 79.6%
- ❑ **Baseline:** In 2010, 73.9% of the U.S. population was served by community water systems with optimally fluoridated water
- ❑ **Status:** As of 2010, 23 states have met the Healthy People 2020 target

Fluoridation: Ongoing Public Health Initiatives

- ❑ **Science: update estimates of effectiveness of CWF in the current context of multiple fluoride exposures**
- ❑ **Policy: track policy changes on CWF through partners**
 - www.fluidlaw.org: funded by CDC, database maintained by academic partners
- ❑ **Communications: Educate the public, health care providers, and decision makers**

Communications Challenges and Approaches



Shelly Spöeth, BS
Health Communications Specialist
Hager Sharp, Inc.

Expert Consensus: Professional Organizations Supporting CWF



Academy of Nutrition
and Dietetics



Pew Children's Dental Campaign available at <http://www.pewstates.org/projects/childrens-dental-policy-328060>
CWF: community water fluoridation

Supported by Public Opinion

- ❑ **Public opinion polls have consistently showed that 70% or more U.S. adults supported fluoridation**
- ❑ **An analysis of 2009 HealthStyles Survey data showed more than 50% of respondents**
 - Agreed that water fluoridation was safe (55%)
 - Believed there was some benefit to their health (57%)
- ❑ **In Arkansas in 2010, a survey of 500 voters showed more than half (54%) favored legislation to mandate water fluoridation in communities larger than 5,000 residents**

Policy Background

- ❑ **No federal requirement to fluoridate**
- ❑ **States and communities considering whether to fluoridate must weigh the risks and benefits**
 - These decisions often are made by elected officials or by a public vote
- ❑ **Role of CDC is to monitor the benefits and risks of community water fluoridation and promote its public health benefits**
- ❑ **CDC communications focus on the facts and summarize the latest scientific evidence**

A Polarizing Issue



Photo courtesy of Mark Colman
Fluoride Action Network

Professional Association Partners



ADA American Dental Association®
America's leading advocate for oral health

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ADA News

April 22, 2013

Surgeon general endorses fluoridation

Huntsville, Ala.—U.S. Surgeon General Regina Benjamin, M.D., April 22 officially endorsed community water fluoridation as “one of the most effective choices communities can make to prevent health problems while actually improving the oral health of their citizens.”

Dr. Benjamin made her endorsement via a letter read at the opening ceremony at the National Oral Health Conference in Huntsville.

“Fluoridation’s effectiveness in preventing tooth decay is not limited to children, but extends throughout life, resulting in fewer and less severe cavities,” Dr. Benjamin wrote. “In fact, each generation born since the implementation of water fluoridation has enjoyed better dental health than the generation that preceded it.”

Every surgeon general for the past 50 years has endorsed community water fluoridation of community water supplies as a safe and effective weapon in the war against tooth decay.

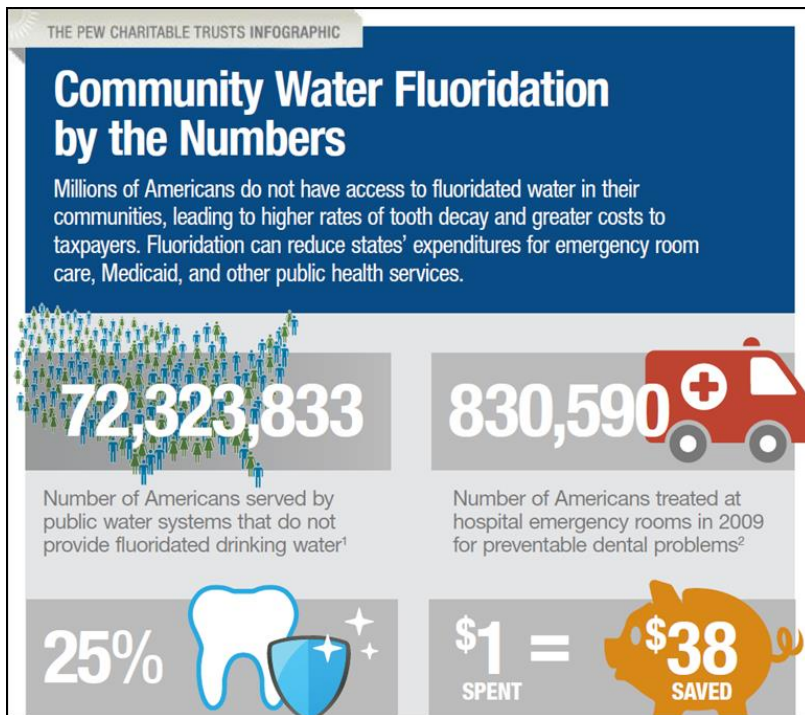
The American Dental Association has supported fluoridation since 1950.

“The ADA’s policies regarding community water fluoridation are based on the best available science showing that fluoridation is a safe, effective way to prevent dental decay,” said ADA President Robert A. Faiella. “The ADA, along with state and local dental societies, continues to work with federal, state and local agencies to increase the number of communities benefiting from this very effective public health measure. We applaud Dr. Benjamin for making this public endorsement of fluoridation.”

Dr. Regina Benjamin

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Public Health Partners



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what's needed?

Fluoridation

Access

Education

The power of fluoridation

Adding fluoride to community water supplies reduces tooth decay — significantly. Even if you brush with fluoridated toothpaste, you'll get a lot more cavity protection with fluoridated water. Surprised?

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U.S. Surgeon General Endorses Community Water Fluoridation

U.S. Surgeon General Regina Benjamin, MD officially endorsed community water fluoridation on April 22, 2013 as "one of the most effective choices communities can make to prevent health problems while actually improving the oral health of their citizens."

READ MORE

Report: Falling Short: Most States Lag On Dental Sealants

January 11, 2013

Pew's report finds that most states are not doing enough to use sealants, which are plastic coatings that are brushed onto molars — the most cavity-prone teeth among children. Sealants prevent 60% of tooth decay at only one-third the cost of a filling. The use of sealants are endorsed by the Centers for Disease Control and Prevention.

READ MORE

About Us

The Campaign for Dental Health was created to ensure every American has access to the cheapest, most effective and most basic oral health intervention — fluoridation. We are a

Our Allies

News & Reports

11/8/2013

New Educational Video: Fluoridated Water—Tap into it!

11/6/2013

Join the Conversation

Spread the Word

The Pew Charitable Trusts
Pew Children's Dental Campaign

The Doubt Virus



The Doubt Virus

- ❑ **Tends to “infect” some communities more than others**
- ❑ **Appears quite suddenly — sometimes without warning**
- ❑ **Can spread from person to person**
- ❑ **Prevention is the best approach**

The Doubt Virus: A Public Health Response

Surveillance – Monitor states and communities so we know where the “virus” is most likely to threaten fluoridation

Prevention – Educate the communities before the “virus” takes hold

Treatment – Move quickly to contain the “virus” by educating stakeholders and mobilizing them to help preserve fluoridation



Assessment of the Communications Environment

Literature
Review

Media
Audit

Stakeholder
Interviews

Website
Audit

Online Search

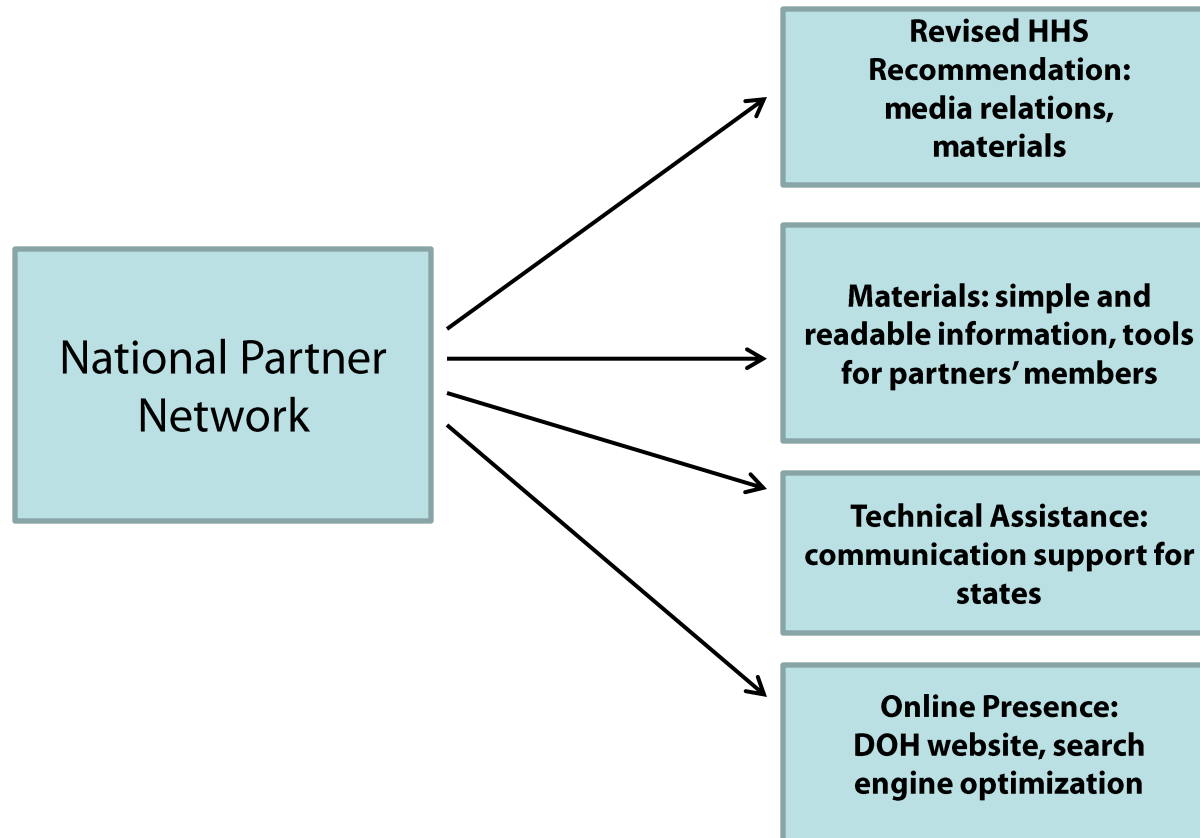
Sample of Messaging: Pros and Cons

Messages in support of CWF	<ul style="list-style-type: none">• Fluoride prevents tooth decay.• CWF is widely accepted in the U.S. with an estimated 204 million (74 percent) of those on community water systems drinking fluoridated water.• CWF has been used in the U.S. for nearly 70 years.• CDC says CWF is one of “10 great public health achievements of the 20th century.”• Every \$1 invested in CWF saves \$38 in annual dental costs.
Messages against CWF	<ul style="list-style-type: none">• The recommendation to change water fluoride levels suggests it is unsafe.• There are too many unknowns when it comes to CWF.• CWF has shown to have negative impacts on IQ in children, as well as cause bone fractures, bone pain, and tenderness (with citations to non-scientific studies).• Fluoride is a by-product of pesticide or a prescription drug.• CWF is a means of government intrusiveness, and it inhibits personal autonomy.

Findings from Environmental Assessment

- ❑ **Online information is "king"**
- ❑ **CWF is**
 - Not THE key priority for any one organization
 - Difficult to explain and understand
 - A contentious issue
 - Typically a local issue, with national roots
- ❑ **Local spokespeople and local media drive community decisions**
- ❑ **CWF lacks a single recognized national leader**

Evidence-Informed Communications Approach



Developing Clear and Convincing Messages



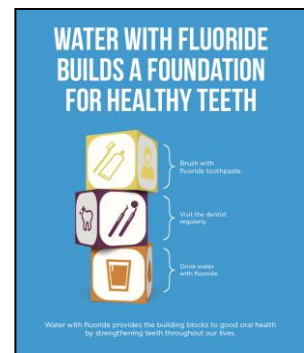
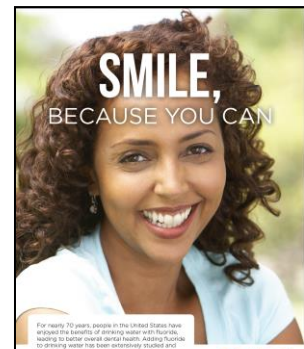
- Simple to understand
- Feature the benefits of CWF
- Use “kitchen table” or “back-fence” conversation
- Incorporate the long-standing history of water fluoridation



Key Messages

❑ Found to be effective with consumers, dentists, and pediatric health care providers:

- For nearly 70 years, people in the United States have benefitted from drinking water with fluoride leading to better overall dental health
 - Combined with photo of smiling person
- Building blocks–water with fluoride builds a foundation for healthy teeth
 - Paired with visual of building blocks



Additional Message Content: What People Want to Know About Fluoridation

- ☐ Use data and facts to show that water fluoridation is safe, effective, and beneficial**
- ☐ Address the issue of “side effects”**
- ☐ Explain that fluoride is a naturally-occurring mineral**
- ☐ Address concerns about costs to consumers**
- ☐ Clarify which organizations that have reviewed the science supporting fluoridation**

Overall Communications Approach

So what can
we do?

Get the facts right

**Acknowledge
people's concerns**

**Use metaphors
and stories**

**Personalize
the story**



Innovative Approaches to Advance Community Water Fluoridation in New York State



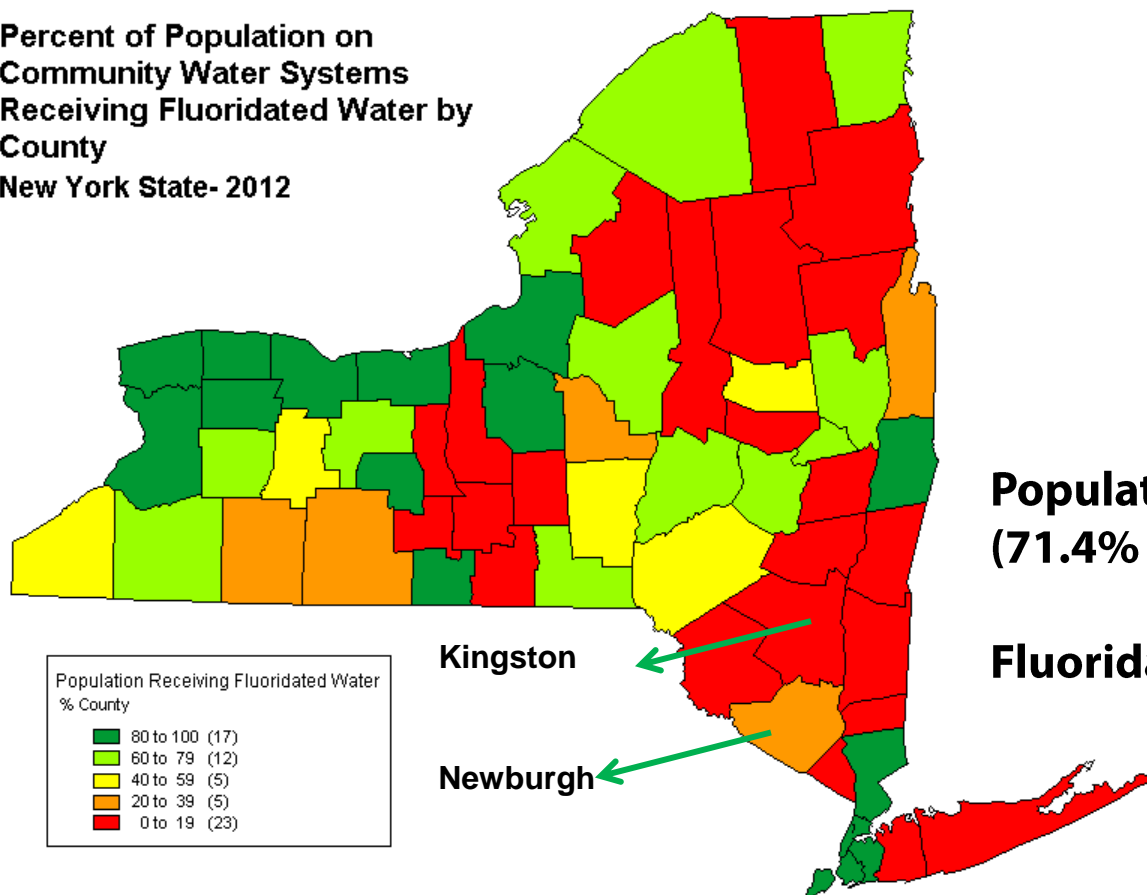
Jayanth Kumar, DDS, MPH

Director, Bureau of Dental Health

New York State Department of Health, Albany, NY

Fluoridation in New York State (NYS)

Percent of Population on
Community Water Systems
Receiving Fluoridated Water by
County
New York State- 2012



**Population served: 12.9 million
(71.4% of NYS residents)**

Fluoridating systems: 123

Recent Developments in NYS Affecting Fluoridation

 **In the last 5 years, several local water systems have reconsidered fluoridation due to**

- Financial constraints
- Availability of other fluoride sources
- Increased cost of fluoridation
- Need to upgrade or replace fluoridation equipment

Elevating Fluoridation as a Priority in the NYS Health Agenda

❑ Recommended strategies

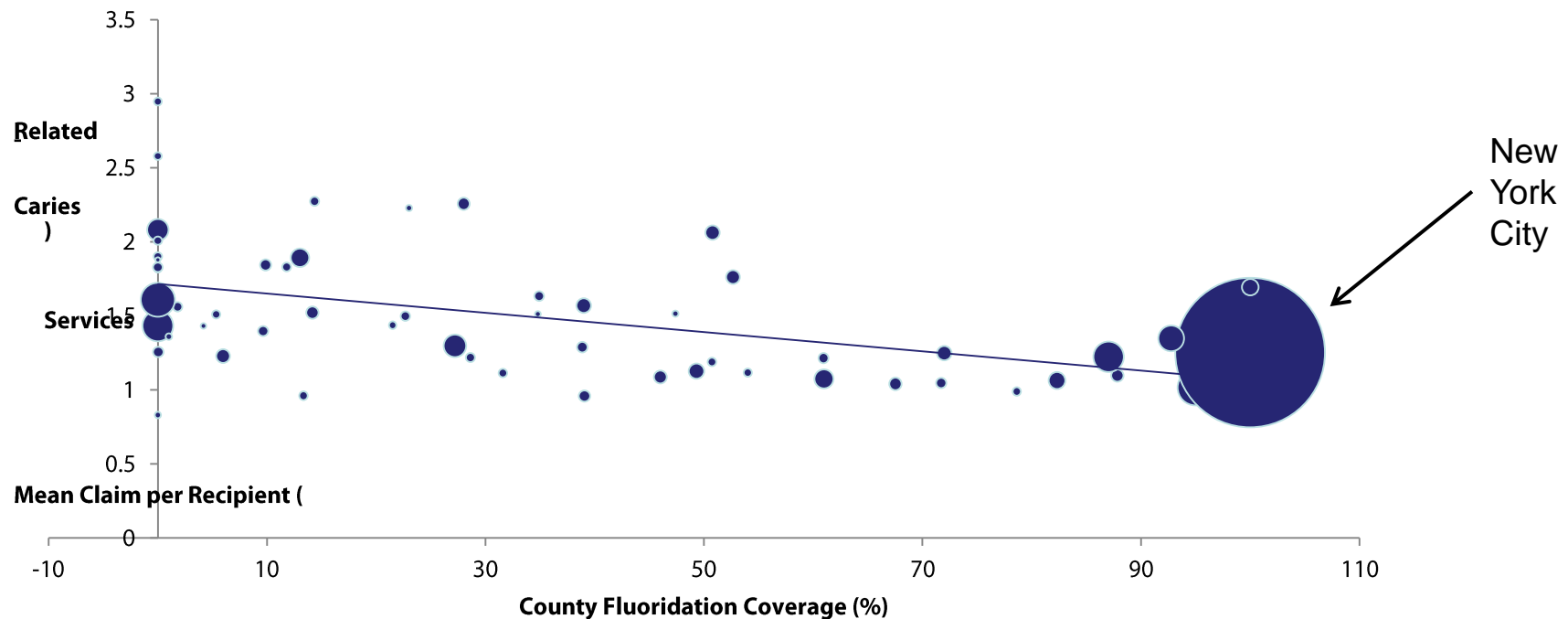
- Build support—internal and external
- Engage partners and stakeholders
- Explore financing options
- Develop resources
- Provide training

❑ Challenges

- Fluoridation expenditures typically borne by water systems, but savings occur in health care
- Need for data showing local-level benefits

Geographic Variation in Medicaid Claims for Dental Procedures in NYS

Average child in a higher-fluoridation county incurred \$23.65 less in Medicaid dental expenditures, compared with a child in a lower fluoridation county



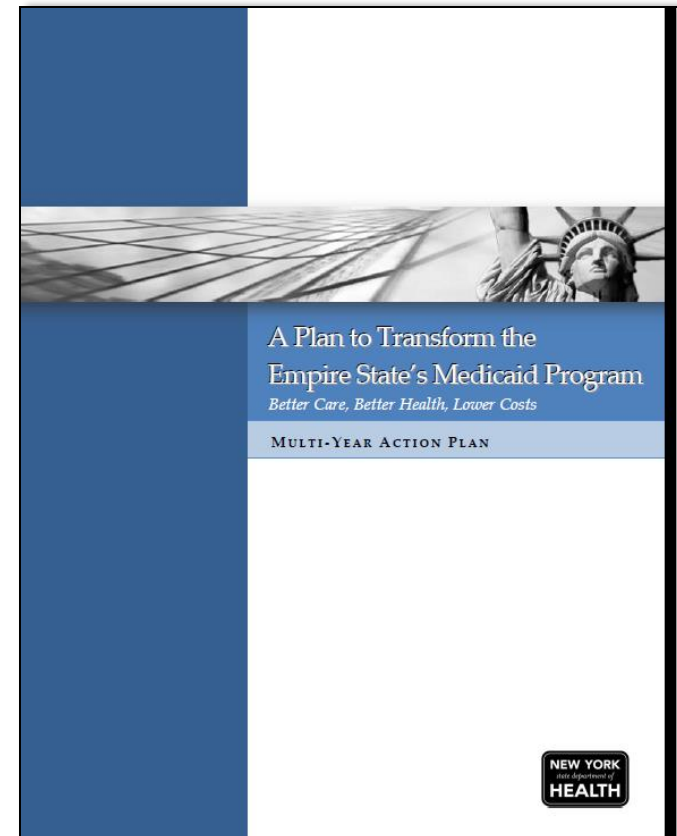
Addressing Questions About Fluorosis: A Comprehensive Scientific Response

- ❑ **NYS has actively pursued answers to questions raised in communities**
 - 1988 – Is dietary fluoride intake in NYS children a concern?
 - 1999 – Does the prevalence of dental fluorosis increase after the implementation of fluoridation in NYS?
 - 2009 – Does dental fluorosis increase or decrease the risk for caries at the individual level?
- ❑ **Key finding: advanced fluorosis is extremely rare in fluoridated communities, even those that have been fluoridating for over 50 years**
- ❑ **The NYS Department of Health concurs with CDC that optimally fluoridated water has not been shown to cause adverse health effects**

NYS Medicaid Redesign Team Recommendation for Water Fluoridation

- ❑ *“Medicaid reform must be about more than health care system redesign and payment reform. Medicaid reform – and broader reform of the entire New York health system – must also be about improving overall population health.”*

Panel recommended new fiscal incentives to support community fluoridation



NYS Prevention Agenda 2013–2017

❑ **Goal: Reduce the Prevalence of Dental Caries Among NYS Children**

- Reduce prevalence of tooth decay among NYS children by 10%
- Increase proportion of NYS children who have dental sealants by 10%
- Increase proportion of NYS children who receive regular dental care by 10%
- Increase percentage of NYS population receiving fluoridated water by 10%



Key Partners for Promoting Prevention Agenda

- ☐ **NYS Association of County Health Officials**
- ☐ **NYS Dental Foundation**
- ☐ **Schuyler Center for Analysis and Advocacy**
- ☐ **NYS Health Foundation**
- ☐ **Health Foundation for Western and Central New York**
- ☐ **NYS Oral Health Coalition**

Support for State Fluoridation Efforts

CDC

- Surveillance and performance management
- Technical assistance
- Training of water system operators
- Resources for water systems

HRSA Workforce

- Training of professionals to be advocates
- Websites for information dissemination
- FluorideScience
- Ilikemyteeth.org

Federal MCH Block Grant

- Community support through Oral Health Center for Excellence
- Promotion of best practices
- Resources for local health departments
- Grants for equipment replacement

Partners

- Local infrastructure development to promote oral health
- Education of public and policymakers
- Community mobilization

Resources

New York State Department of Health

- Water Fluoridation Manual
- Fact sheets, posters, presentation materials

Rural Water Association

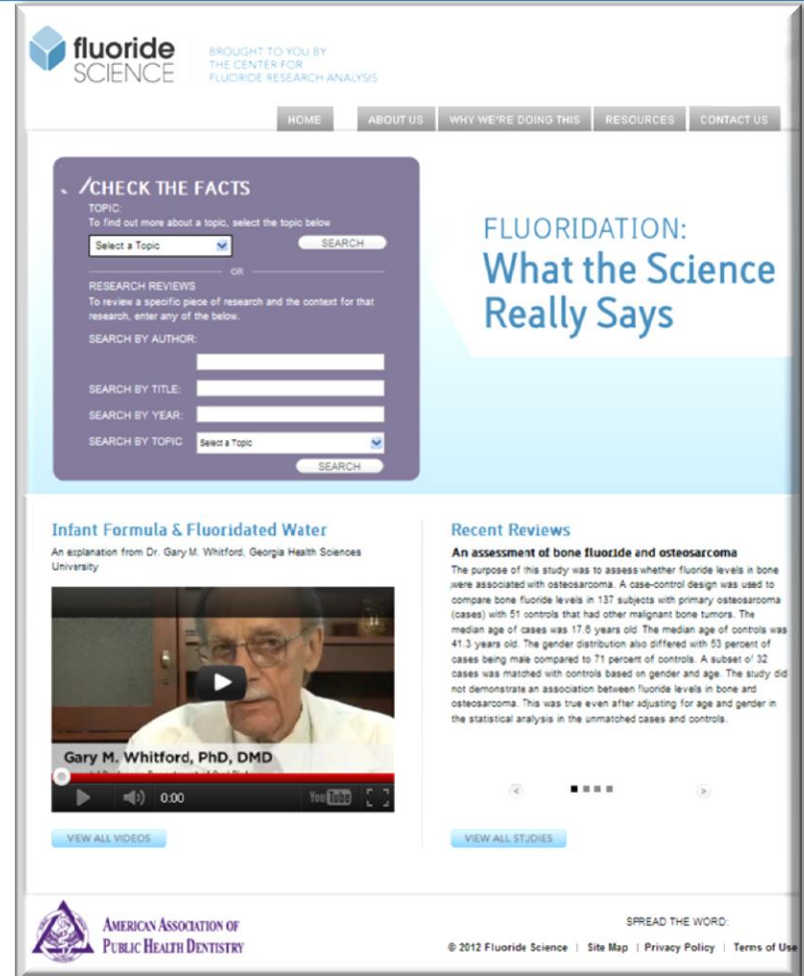
Technical Assistance Center in Rochester, NY

- Newyork.ILikeMyTeeth.org: statewide partnership
- FluorideScience.org

Oral Health Technical Assistance Center Rochester, NY

Fluoridescience.org

- Topic summaries
- Critical appraisals of research and online content
- Videos featuring fluoride researchers



The screenshot shows the Fluoridescience.org website. At the top, the logo for "fluoride SCIENCE" is displayed, along with the text "BROUGHT TO YOU BY THE CENTER FOR FLUORIDE RESEARCH ANALYSIS". Navigation links include HOME, ABOUT US, WHY WE'RE DOING THIS, RESOURCES, and CONTACT US. The main content area features a "CHECK THE FACTS" section with a "Select a Topic" dropdown and a "SEARCH" button. Below this is a "RESEARCH REVIEWS" section with a "SEARCH BY AUTHOR:" field and a "SEARCH BY TITLE:" field. There are also fields for "SEARCH BY YEAR:" and "SEARCH BY TOPIC:". To the right of the search section is a large blue box with the text "FLUORIDATION: What the Science Really Says". Below the search section, there is a video player titled "Infant Formula & Fluoridated Water" featuring Dr. Gary M. Whitford, PhD, DMD. The video player shows a play button and a progress bar. Below the video player is a "VIEW ALL VIDEOS" button. To the right of the video player is a "Recent Reviews" section titled "An assessment of bone fluoride and osteosarcoma". The text describes a case-control study comparing bone fluoride levels in 137 subjects with primary osteosarcoma (cases) with 51 controls that had other malignant bone tumors. The median age of cases was 17.6 years old. The median age of controls was 41.3 years old. The gender distribution also differed with 53 percent of cases being male compared to 71 percent of controls. A subset of 32 cases was matched with controls based on gender and age. The study did not demonstrate an association between fluoride levels in bone and osteosarcoma. This was true even after adjusting for age and gender in the statistical analysis in the unmatched cases and controls. Below the text is a "VIEW ALL STUDIES" button. At the bottom of the page, there is a logo for the "AMERICAN ASSOCIATION OF PUBLIC HEALTH DENTISTRY" and a "SPREAD THE WORD:" section with links for "© 2012 Fluoride Science", "Site Map", "Privacy Policy", and "Terms of Use".

Summary: Promoting CWF in NYS

❑ In addition to traditional approaches such as surveillance of CWF, the state has also pursued

- Targeted research demonstrating local benefits
- Collaborations with public health and non-public health partners, including developing and responding to online materials
- High-level policy attention to fluoridation

❑ Actions intended to help New York State make further progress towards achieving the Healthy People 2020 fluoridation objective

- HP 2020 target: 79.6% of population served by optimally fluoridated water system
- NYS, 2012: 71.4% of population served

Fluoridation: A Population Health Priority



Peter Briss, MD, MPH

Medical Director

National Center for Chronic Disease Prevention
and Health Promotion, CDC



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention

Oral Health in Public Health

- ❑ **Oral health an essential part of general health**
- ❑ **Fluoridation recognized as one of the ten greatest public health achievements of the last hundred years**
- ❑ **Some groups including poor children, the elderly, and members of racial and ethnic minority groups are experiencing avoidable morbidity**
 - Dental caries one of most prevalent childhood chronic diseases
 - Preventable dental conditions (including caries) resulted in >800,000 ED visits in 2009

Importance of Implementing Community-based Oral Health Interventions

❑ Individual interventions insufficient

- Only 44.5% of all persons and 46% of Medicaid-enrolled children visit a dentist annually

❑ Community interventions such as fluoridation needed to

- Promote better oral health of all persons
- Reduce oral health disparities

❑ Other strategies that target underserved populations include school-based dental sealant programs

- Dental sealants are thin plastic coatings that are applied to the back teeth to protect them from tooth decay
- Sealants do not replace fluoride for cavity protection

Refining and Evaluating Community-based Oral Health Interventions

- ☐ **The PHS is revising its guidelines to assure that water fluoridation provides the best balance of benefits with potential harms**
- ☐ **Additional research and surveillance will address issues such as overall exposure to fluorides and prevalence of fluorosis**

CDC PUBLIC HEALTH GRAND ROUNDS

Community Water Fluoridation: A Vital 21st Century Public Health Intervention

