



BERKS COUNTY  
COMMUNITY FOUNDATION

August 12, 2014

Members, City of Reading Board of Health  
Members, City of Reading Environmental Advisory Council  
Reading City Hall  
Reading, PA 19601

Dear Members:

At its meeting of July 23, 2014, the Berks County Task Force for Oral Health unanimously passed the following resolution: "The Berks County Task Force for Oral Health supports the fluoridation of public water supplies as a proven public health measure to reduce dental cavities and to improve overall oral health." The Task Force joins its local voice to those of national and international health agencies and dental associations throughout the world that have endorsed water fluoridation as safe and effective including the Centers for Disease Control and Prevention, the American Dental Society, the World Health Organization, the American Academy of Pediatrics and the American Public Health Association.

The Berks County Task Force was formed this spring by the Berks County Community Foundation, the Wyomissing Foundation and the United Way of Berks County to address oral health, one of the priority needs identified in the 2013 Berks County Health Needs Assessment. The Task Force is composed of 27 physicians, dentists, hospital and medical center administrators, dental hygienists, school nurses, rural health care workers and representatives of the sponsoring organizations. Its purpose is "to plan, develop and implement collaborative efforts to increase oral health literacy and access to oral health services for all age groups, and to identify and advocate for necessary systemic changes to increase oral health in Berks County."

On September 10, 2014, the Task Force and sponsoring organizations – in collaboration with the Berks County Dental Society and the Berks County Medical Society – will hold the first in a series of groundbreaking medical and dental organization gatherings and training sessions on "Returning the Teeth to the Body." The topic of this first session will be "Into the Mouths of Babes: Providing Preventive Oral Health Care for Infants and Young Children" – including fluoride treatments.

The Task Force urges the City of Reading Board of Health and the Environmental Advisory Council to recommend to City Council the continuation of the appropriate fluoridation of public waters, a practice that has benefited generations of City children and adults.

Sincerely,

Karen A. Miller, Senior Fellow, Berks County Community Foundation

On behalf of the Berks County Task Force for Oral Health

# American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN™



July 22, 2014

141 Northwest Point Blvd  
Elk Grove Village, IL 60007-1019  
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E-mail: [kidsdocs@aap.org](mailto:kidsdocs@aap.org)  
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Michelle Katzenmoyer (via email)  
Reading City Council  
Reading, PA

Dear Ms. Katzenmoyer,

The American Academy of Pediatrics (AAP) is a professional organization of 60,000 primary care pediatricians, pediatric medical sub-specialists, and pediatric surgical sub-specialists dedicated to the health, safety, and well-being of infants, children, adolescents, and young adults. The AAP echoes the recommendations of the Centers for Disease Control and Prevention (CDC) and the American Dental Association (ADA) in stating that community water fluoridation is safe, effective, and protective of unnecessary dental disease, a costly and painful condition.

The AAP is particularly concerned with the rising rates of early childhood caries (tooth decay) in the United States and the detrimental effects this disease can have on children. Dental caries, although largely preventable, is the most common chronic childhood disease, 5 times more common than asthma. Dental caries can lead to severe health problems, including serious infection, debilitating pain, dietary and speech problems, and in rare cases, even death. Therefore, the AAP supports community water fluoridation as a way to help protect children's teeth. Several AAP policies and guidelines speak to the benefit of community water fluoridation. For example:

- Regular and frequent exposure to small amounts of fluoride is the best way to protect the teeth against caries. This exposure can be readily accomplished through drinking water that has been optimally fluoridated and brushing with fluoride toothpaste twice daily.<sup>1</sup>
- The delivery of fluoride includes community-based, professionally applied, and self-administered modalities. Water fluoridation is a community-based intervention that optimizes the level of fluoride in drinking water, resulting in preeruptive and posteruptive protection of the teeth. Water fluoridation is a cost-effective means of preventing dental caries, with the lifetime cost per person equaling less than the cost of 1 dental restoration. In short, fluoridated water is the cheapest and most effective way to deliver anticaries benefits to communities.<sup>2</sup>
- Water fluoridation is seen as effective and inexpensive, does not require daily adherence, and promotes equity, because it benefits everyone regardless of socioeconomic status.<sup>3</sup>

The AAP continues its mission to ensure the health and well-being of all children, and, to this end, supports local and state efforts to ensure children have access to safe, optimally fluoridated water. Thank you for the opportunity to provide this statement. If you require more information, please email the AAP at [oralhealth@aap.org](mailto:oralhealth@aap.org).

Sincerely,

Handwritten signature of James M. Perrin in black ink.

James M Perrin, MD, FAAP  
President

JMP/lb

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<sup>1</sup> Bright Futures Guidelines for the Health Supervision of Infants, Children, and Adolescents, 3<sup>rd</sup> Edition, 2008.

<sup>2</sup> Preventive Oral Health Intervention for Pediatricians. *Pediatrics*. 2008;122:1387-1394.

<sup>3</sup> Early Childhood Caries in Indigenous Communities. *Pediatrics*. 2011;127(6):1190-1198.

## Michelle Katzenmoyer

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**From:** Thomas Maroon [pakidsdoc@gmail.com]  
**Sent:** Tuesday, July 22, 2014 11:47 PM  
**To:** Deborah Hoag; Michelle Katzenmoyer; jdethoff@comcast.net; andrew\_molteni@hotmail.com; bcoyle@mjureider.com; cwhite@libertyenviro.com; cathleen.myers@alvernia.edu; drb@beanellc.com; Marcia Goodman-Hinnershitz; piershaffer@gmail.com; Linda Kelleher  
**Subject:** Water fluoridation in Reading

To the City Council and other concerned citizens of Reading,

It has come to my attention that consideration is being given to removing fluoride from the community water supply of Reading. I would consider that to be a serious mistake. The CDC considers community water fluoridation to be a great public health triumph. Few public health measures can claim to have improved health in such a cost effective manner as has water fluoridation. Fluoridation of a community's water costs a tiny fraction of the amount that restorative dental care would cost for the same population if fluoride were to be removed from the water supply.

The addition of fluoride, a naturally occurring element in the water in many areas, has not been shown to cause significant fluorosis when the concentration is regulated in the range of 0.7 parts per million. Data from areas in Asia and Africa where the level of fluoride ranges from 8 times higher than this up to dozens of times higher do not have any relevance when considering the safe levels of fluoride used in this country.

Roughly 75 percent of the U.S. population benefits from water fluoridation and enjoys a lower risk of dental caries because of this. Please do not take this important benefit away from the people of Reading.

Sincerely,

Thomas J. Maroon, M.D.  
Children's Community Pediatrics  
Greensburg, PA

## Michelle Katzenmoyer

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**From:** Wang, Karen, MD [Karen.Wang@readinghealth.org]  
**Sent:** Wednesday, July 23, 2014 8:32 AM  
**To:** Deborah Hoag; Michelle Katzenmoyer; jdethoff@comcast.net; andrew\_molteni@hotmail.com; bcoyle@mjreider.com; cwhite@libertyenviro.com; cathleen.myers@alvernia.edu; drb@beanellc.com; Marcia Goodman-Hinnershitz; Linda Kelleher  
**Subject:** Fluoridation of Reading water

Dear City Council members

I am writing to you as a local pediatrician to implore you to do whatever you can to ensure that the Reading water continues to be fluoridated.

I have worked for Reading Health System for the last 7 years, as a general pediatrician, taking care of children who live in poverty, the vast majority of whom live in the city of Reading.

Dental caries are epidemic in my patients, largely due to parental practices with nighttime feeding and dental care, exacerbated by a lack of local dentists who take Medicaid and who feel comfortable caring for young children.

I can only imagine how much worse the problem would be if the water in Reading was not fluoridated. The levels of fluoridation currently in place are appropriate for good dental health that the system currently employs, and far below the levels that cause fluorosis. Fluoridated water is one of the triumphs of modern public health practices, and I would hate to see our city lose this marvelous benefit.

Care of caries is costly, caries are painful, and potentially can cause life-threatening infections. Don't be misled by the anti-fluoride activists and their propaganda. The evidence is clear that fluoride works, and for those who are truly concerned, they can drink bottled water.

Please feel free to email or call me at my direct line below if you would like to discuss the matter further, or have other questions or concerns that you think a general pediatrician may be helpful with.

This website from the American Academy of Pediatrics also provides some helpful information

<http://www.healthychildren.org/English/healthy-living/oral-health/pages/Water-Fluoridation.aspx>

Thank you for your consideration of this matter.

Karen

### **Karen Eisenhart Wang, MD, FAAP**

Staff Pediatrician – Children's Health Center | 484-628-9988

Pediatric Clerkship Site Director – Clinical Assistant Professor of Pediatrics

Thomas Jefferson University School of Medicine

[karen.wang@readinghealth.org](mailto:karen.wang@readinghealth.org) | [readinghealth.org](http://readinghealth.org)



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July 25, 2014

Mayor Vaughn D. Spencer  
Mr. Francis Acosta  
Mr. Christopher Daubert  
Ms. Marcia Goodman-Hinnershitz  
Mr. Dennis M. Sterner  
Mr. Stratton Marmarou  
Ms. Donna Reed  
Mr. Jeffrey S. Waltman, Sr.  
815 Washington Street  
Reading, Pennsylvania 19601

Dear Mayor Spencer and Council Members:

I write on behalf of the Pew children's dental campaign to share information about water fluoridation as you explore this topic in your community.

Having worked with many lawmakers and experts committed to dental health for children, we welcome the opportunity to provide you with information that we hope will be of use to you in your deliberations. Untreated tooth decay can undermine children's ability to eat, sleep, grow, and learn.<sup>1</sup> A 2011 study found that schoolchildren with oral health problems are more likely to miss class and perform poorly.<sup>2</sup> A 2012 study revealed that teens with toothaches were four times more likely to have a low grade point average than their peers.<sup>3</sup>

Fluoridation benefits people of all ages, including adults.<sup>4</sup> Seniors benefit from fluoridation partly because it helps prevent decay on the exposed root surfaces of teeth—a condition that especially affects older adults.<sup>5</sup> In fact, the Florida Department of Elder Affairs has noted:

*"Because older Americans are now keeping their teeth longer, fluoride will continue to be even more important for preventing tooth decay in this age group. Older Americans are especially susceptible to tooth decay because of exposed root surfaces and mouth dryness that may result from many of the medications they might be using to treat certain chronic conditions."<sup>6</sup>*

Fluoridation reduces the incidence of decay by about 25 percent over a person's lifetime.<sup>7</sup> As you may know, fluoride is a mineral that exists naturally in water.<sup>8</sup> Fluoridation is simply the process of adjusting fluoride to the optimal level that prevents tooth decay. Fluoride counteracts tooth decay and strengthens teeth from harmful acids and helps draw calcium and other minerals back into the enamel. Drinking water is an ideal vehicle for fluoride because it offers these benefits without requiring families to spend extra money or change their routine. At a time when many families lack dental insurance, this form of decay prevention is especially crucial.

Even in an era when fluoride toothpaste is widely used, fluoridated water still provides critical, added protection. Research from the past few years demonstrates this benefit:

- Within the past four years, studies in Alaska and New York have demonstrated that fluoridated water helps to protect teeth from decay.<sup>9</sup> The Alaska study revealed that children living in non-fluoridated areas had a 32 percent higher rate of decayed, missing or filled teeth than kids in fluoridated communities.
- A 2010 Nevada study examined teenagers' oral health and found that living in a non-fluoridated community was one of the top three factors associated with high rates of decay.<sup>10</sup>
- A 1998 study of communities in Illinois and Nebraska found that children in the fluoridated town had a tooth decay rate that was 45 percent lower than the rate among kids in the non-fluoridated communities. This benefit occurred even though the vast majority of children in *all* of these communities were using fluoridated toothpaste.<sup>11</sup>

The American Academy of Pediatrics, the American Dental Association, the Institute of Medicine and many other respected medical and health organizations support fluoridation.<sup>12</sup> The U.S. Centers for Disease Control and Prevention (CDC) has praised water fluoridation as one of “10 great public health achievements of the 20th century.”<sup>13</sup> The American Water Works Association points out that “water providers undergo thorough and extensive training to safely apply fluoride in the amount recommended by the world’s most respected public health authorities.”<sup>14</sup>

Compare these credible, science-based sources with the kinds of assertions that anti-fluoride groups make. For example, some claim that the fluoride added to water is a “toxic” waste by-product, but the evidence does not back them up. First, all fluoride additives are required to meet strict quality and safety standards.<sup>15</sup> Second, PolitiFact—an independent fact-checking service—investigated the “toxic” claim and two other common arguments used by anti-fluoride activists. PolitiFact found that each one of these claims was deceptive.<sup>16</sup>

Many of the studies cited by anti-fluoride groups were conducted in other nations under conditions that do not reflect how water is fluoridated in the United States.

For example, anti-fluoride groups claim that fluoride causes lower IQ scores in children, but many of the studies they cite were from areas in China, Mongolia and Iran in which the *natural* fluoride levels were at least four or five times higher than the level used to fluoridate water in Reading. One study included fluoride levels that reached as high as 11.5 milligrams per liter—a concentration that is roughly 10 times higher than the level that is used to fluoridate American communities. In addition, the Harvard researchers who examined these IQ studies found that each of the studies “had deficiencies, in some cases rather serious, which limit the conclusions that can be drawn.”<sup>17</sup> Furthermore, the Harvard researchers publicly distanced themselves from the way that anti-fluoride groups were misrepresenting these IQ studies, noting that the results do not allow one to make any judgment regarding possible risk from fluoridation in the U.S.<sup>18</sup>

As the Centers for Disease Control and Prevention notes, “For many years, panels of experts from different health and scientific fields have provided strong evidence that water fluoridation is safe and effective.”<sup>19</sup> Residents of St. Louis, Denver, Chicago, and many other U.S. cities have consumed fluoridated water for more than 50 years. If the safety concerns raised by anti-fluoride groups were valid, researchers would likely have seen ample evidence of it by now.

In these tough fiscal times, cities and states are increasingly looking for ways to save money. Research shows that water fluoridation offers perhaps the greatest return-on-investment of any public health strategy. By reducing the need for fillings and tooth extractions, fluoridation saves money for families and taxpayers. Consider these facts:

- A Texas study in 2000 confirmed that the state saved \$24 per child, per year in Medicaid expenditures because of the cavities that were prevented by fluoridated water.<sup>20</sup>
- For most cities, every \$1 invested in water fluoridation saves \$38 by reducing the need for fillings and other dental treatments.<sup>21</sup>
- A 2003 study estimated that Fort Collins, Colorado—which then had a population of nearly 101,000—saved about \$429,000 each year by fluoridating its water.<sup>22</sup> Researchers estimated that in the same year, Colorado saved nearly \$149 million in unnecessary health costs by fluoridating public water supplies: an average savings of roughly \$61 per person.<sup>23</sup>
- By protecting the enamel of teeth, fluoridation makes it less likely that decay will occur and develop into more serious dental problems that drive people to hospital emergency rooms (ERs)—where treatment is expensive and taxpayers shoulder much of this cost. More than 830,000 Americans were treated in ERs during 2009 for preventable dental conditions.<sup>24</sup>

It's important that everyone understand the solid scientific evidence that supports fluoridation. More facts about this public health practice are available at [www.iLikeMyTeeth.org](http://www.iLikeMyTeeth.org)—a website supported by a coalition of more than 60 organizations, including Pew and the American Academy of Pediatrics.

If you have any questions or need additional information, please feel free to contact me or Pew's Kristen Mizzi at 202-540-6636 or [kmizzi@pewtrusts.org](mailto:kmizzi@pewtrusts.org). Thank you very much for your consideration.

Sincerely,



Shelly Gehshan, Director  
Pew children's dental campaign

## Sources:

- <sup>1</sup> "Poor Oral Health Can Mean Missed School, Lower Grades," Ostrow School of Dentistry of the University of Southern California, August 2012, <http://dentistry.usc.edu/2012/08/10/poor-oral-health-can-mean-missed-school-lower-grades/>.
- <sup>2</sup> S.L. Jackson et al., Impact of Poor Oral Health on Children's School Attendance and Performance," *American Journal of Public Health* (October 2011), Vol. 101, No. 10, 1900-1906, <http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2010.200915>.
- <sup>3</sup> "Poor Oral Health Can Mean Missed School, Lower Grades," Ostrow School of Dentistry of USC, August 2012, <http://dentistry.usc.edu/2012/08/10/poor-oral-health-can-mean-missed-school-lower-grades/>.
- <sup>4</sup> S.O. Griffin, E. Regnier, P.M. Griffin and V. Huntley, "Effectiveness of Fluoride in Preventing Caries in Adults," *The Journal of Dental Research*, (2007), Vol. 86, No. 5, 410-415, <http://www.ncbi.nlm.nih.gov/pubmed/17452559>.
- <sup>5</sup> "Achievements in Public Health, 1900-1999: Fluoridation of Drinking Water to Prevent Dental Caries," *Morbidity and Mortality Weekly Report*, Centers for Disease Control and Prevention, (October 22, 1999), Vol. 48, No. 41, 933-940, <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm4841a1.htm>.
- <sup>6</sup> "Fluoride Helps Prevent Tooth Decay," *Elder Update*, Florida Department of Elder Affairs (November-December 2005) 5, accessed on August 29, 2011 at <http://www.doh.state.fl.us/family/dental/senior/ElderUpdateNovDec05.pdf>.
- <sup>7</sup> "Community Water Fluoridation: An Overview," Centers for Disease Control and Prevention, <http://www.cdc.gov/fluoridation/benefits/background.htm>.
- <sup>8</sup> J. Fawell et al., "2.1 Fluoride distribution in water," *Fluoride in Drinking-Water*, World Health Organization (2006), 6, [http://www.who.int/water\\_sanitation\\_health/publications/fluoride\\_drinking\\_water\\_full.pdf](http://www.who.int/water_sanitation_health/publications/fluoride_drinking_water_full.pdf).
- <sup>9</sup> J.V. Kumar, O. Adekugbe and T.A. Melnik, "Geographic Variation in Medicaid Claims for Dental Procedures in New York State: Role of Fluoridation Under Contemporary Conditions," *Public Health Reports*, (September-October 2010) Vol. 125, No. 5, 647-54; "Dental Caries in Rural Alaska Native Children – Alaska, 2008," *Morbidity and Mortality Weekly Report*, Centers for Disease Control and Prevention, (September 23, 2011) Vol. 60, No. 37, 1275-1278, [http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6037a2.htm?s\\_cid=mm6037a2\\_x](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6037a2.htm?s_cid=mm6037a2_x).
- <sup>10</sup> M. Ditmyer, G. Dounis, C. Mobley and E. Schwarz, "A case-control study of determinants for high and low dental caries prevalence in Nevada youth," *BMC Oral Health*, (2010), Vol. 10, No. 24, <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2989299/>.
- <sup>11</sup> R.H. Selwitz et al., "Dental caries and dental fluorosis among schoolchildren who were lifelong residents of communities having either low or optimal levels of fluoride in drinking water," *Journal of Public Health Dentistry*, (Winter 1998) Vol. 58, No. 1, 28-35, <http://www.ncbi.nlm.nih.gov/pubmed/9608443>.
- <sup>12</sup> "Protecting All Children's Teeth (PACT)," a training module by the American Academy of Pediatrics, accessed on Jan. 20, 2011 at [http://www.aap.org/oralhealth/pact/ch6\\_intro.cfm](http://www.aap.org/oralhealth/pact/ch6_intro.cfm); "Fluoride & Fluoridation," American Dental Association, accessed on Jan. 12, 2011 at <http://www.ada.org/fluoride.aspx>; *Improving Access to Oral Health Care for Vulnerable and Underserved Populations*, Institute of Medicine (2011), 63, [http://books.nap.edu/openbook.php?record\\_id=13116](http://books.nap.edu/openbook.php?record_id=13116).
- <sup>13</sup> "Ten Great Public Health Achievements – United States, 1900-1999," Centers for Disease Control and Prevention, *Morbidity and Mortality Weekly Report*, April 2, 1999, Vol. 48, No. 12, 241-243, accessed on January 25, 2011 at: <http://www.cdc.gov/mmwr/preview/mmwrhtml/00056796.htm>.
- <sup>14</sup> "AWWA backs best science on fluoridation," a statement by the American Water Works Association, January 7, 2011, accessed on February 10, 2011 at <http://www.awwa.org/publications/breakingnewsdetail.cfm?itemnumber=55972>.
- <sup>15</sup> "Water Fluoridation Additives," Centers for Disease Control and Prevention, accessed on October 9, 2012 at [http://www.cdc.gov/fluoridation/fact\\_sheets/engineering/wfadditives.htm](http://www.cdc.gov/fluoridation/fact_sheets/engineering/wfadditives.htm).
- <sup>16</sup> Austin resident says fluoride compound added to local water supply is "toxic waste," Austin American-Statesman, April 19, 2011, <http://www.politifact.com/texas/statements/2011/apr/19/mike-ford/austin-resident-says-flouride-compound-added-local/>; "Truth about fluoride doesn't include Nazi myth," PolitiFact, *Tampa Bay Times*, October 6, 2011, <http://www.politifact.com/florida/statements/2011/oct/06/critics-water-fluoridation/truth-about-fluoride-doesnt-include-nazi-myth/>; "Milwaukee alderman says fluoride in toothpaste is a poison," PolitiFact, *Milwaukee Journal-Sentinel*, July 9, 2012, <http://www.politifact.com/wisconsin/statements/2012/jul/09/jim-bohl/milwaukee-alderman-says-fluoride-toothpaste-poison/>.
- <sup>17</sup> A.L. Choi et al., "Developmental Fluoride Neurotoxicity: A Systematic Review and Meta-Analysis," *Environmental Health Perspectives*, published online July 20, 2012, <http://ehp03.niehs.nih.gov/article/fechArticle.action?articleURI=info%3Adoi%2F10.1289%2Fehp.1104912>.

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<sup>18</sup> Dion Lefler, "Harvard scientists: Data on fluoride, IQ not applicable in U.S.," *Wichita Eagle*, September 11, 2012, <http://www.kansas.com/2012/09/11/2485561/harvard-scientists-data-on-fluoride.html#storylink=cpy>.

<sup>19</sup> "Community Water Fluoridation: Safety," Centers for Disease Control and Prevention, accessed November 9, 2011 at <http://www.cdc.gov/fluoridation/safety.htm>.

<sup>20</sup> Texas Department of Oral Health Website. [www.dshs.state.tx.us/dental/pdf/fluoridation.pdf](http://www.dshs.state.tx.us/dental/pdf/fluoridation.pdf), accessed on August 1, 2010.

<sup>21</sup> "Cost Savings of Community Water Fluoridation," U.S. Centers for Disease Control and Prevention, accessed on March 14, 2011 at [http://www.cdc.gov/fluoridation/fact\\_sheets/cost.htm](http://www.cdc.gov/fluoridation/fact_sheets/cost.htm).

<sup>22</sup> "Report of the Fort Collins Fluoride Technical Study Group," (April 2003), <http://www.fcgov.com/utilities/what-we-do/water/water-treatment/treated-drinking-water/drinking-water-fluoridation/fluoride-technical-study-group-report>.

<sup>23</sup> O'Connell J.M. et al., "Costs and savings associated with community water fluoridation programs in Colorado," *Preventing Chronic Disease* (November 2005), accessed on March 12, 2011 at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1459459/>.

<sup>24</sup> Pew Center on the States. (2012) "A Costly Dental Destination," <http://www.pewstates.org/research/reports/a-costly-dental-destination-85899379755>.