

From: [Russinof, Hollis](#)
To: [Water Utility Board](#)
Subject: American Academy of Pediatrics Support for Community Water Fluoridation
Date: Monday, August 24, 2020 8:58:08 AM
Attachments: [Madison Water Utility Board 8.24.20.pdf](#)

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Good Morning Chairperson McLinn-

I am contacting you at the request of local advocates in Wisconsin.

The American Academy of Pediatrics supports community water fluoridation as a cost-effective means of preventing tooth decay throughout the lifespan and joins with other major medical and health organizations in advocating for this common sense public health policy.

Many people don't realize that tooth decay, although preventable, is the most common chronic childhood disease, 5 times more common than asthma. All too often, it leads to countless hours out of school and work, needless pain and suffering, and costly visits to the emergency room.

We support community water fluoridation because it is backed by a solid base of scientific evidence and over 70 years of practice and because it is safe and effective.

Attached you will find our letter of support. We invite you to visit our website, ILikeMyTeeth.org, for additional information.

Respectfully submitted,

Hollis Russinof, MUPP
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90 Years of Caring for Children—1930–2020

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August 24, 2020

Gene McLinn, Chair
Madison Water Utility Board
(via email)

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Dear Chairperson McLinn,

On behalf of the American Academy of Pediatrics (AAP), a non-profit professional organization of 67,000 primary care pediatricians, pediatric medical sub-specialists, and pediatric surgical specialists dedicated to the health, safety, and well-being of infants, children, adolescents, and young adults, I write to support 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 prevents unnecessary dental disease, a costly and painful condition.

The AAP is particularly concerned with the high 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, five 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.

The AAP supports community water fluoridation to help protect children's teeth. 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.¹ The delivery of fluoride includes community-based, professionally applied, and self-administered modalities. Community-based water fluoridation intervention optimizes the level of fluoride in drinking water, resulting in pre-eruptive and post-eruptive 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 one dental restoration. In short, fluoridated water is the cheapest and most effective way to deliver anti-caries benefits to communities.² Water fluoridation is seen as effective and inexpensive, does not require daily adherence, and promotes equity, because it benefits everyone regardless of socioeconomic status.³

The AAP continues its mission to ensure the health and well-being of all children, and, to this end, supports local and state efforts for children to have access to safe, optimally fluoridated water. If you require additional information, please contact Hollis Russinof, hrussinof@aap.org.

Sincerely,

Sara H. Goza, MD, FAAP
President

SHG/hr

¹ Bright Futures Guidelines for the Health Supervision of Infants, Children, and Adolescents, 4th Edition. 2017.

² Fluoride Use in Caries Prevention in the Primary Care Setting. *Pediatrics*. 2014;134(3): 626-633.

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