

FLUORINE AND TEETH [III]

(Written for "The Listener" by DR. MURIEL BELL, Nutritionist to the Department of Health)

IN New Zealand the number of dental fillings required and the number of artificial teeth are probably greater than anywhere else in the world. We naturally are very interested in anything which points the way to improvement in the resistance of teeth in the new generation of children.

Note that in the previous examples quoted, the degree of dental caries was reduced, but it was not entirely eliminated by the presence of what appeared to be optimal amounts of fluorine. Thus it seems to the writer that it is likely to be only one of the factors concerned with the prevention of dental caries. However, it is natural that we should want to know what part it plays in regard to dental decay in New Zealand teeth, and what must be done before any amelioration can be brought about.

We must know in the first place how much fluorine is present in our water supplies. Work that has been done on this point will, so we understand, shortly be published. We should know whether our New Zealand teeth contain much or little fluorine; and how much is taken in altogether in our food and drink per day. In wartime it is not easy to get these things done, what with the shortage of chemists, of chemicals and of apparatus.

Then, if we consider that there is evidence of shortage of fluorine in New Zealand, there is the problem of what measures we should adopt to remedy the matter. It is not as though we are all living in towns in New Zealand—40 per cent live in rural areas. We may, therefore, have to make suggestions as to the way to provide individuals with suitable amounts of fluorine and the way to alter our water supplies to bring them to a suitable fluorine content. I have said enough in the previous articles to give a warning that fluorine is not without its dangers, and I am inclined to think that the articles in certain publications that have provoked the articles in this series, are a little premature. A recent paper in the American Journal of Public Health emphasises the need to demonstrate the safety of low fluorination of water supplies as it might relate to other aspects of the community's health. The author suggests that the next step in their programme for investigation is to choose two cities in each of which there is a population of about 50,000 obtaining fluoride-free water from the same source. The idea would be to bring the water supply of the one town up to one part of fluorine per million, and study for some years the teeth of the population of both cities born subsequent to the change.

Thus we end on a note of interrogation which implies the necessity for further research.

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