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A Resolution in Support of Fluoridation of Portland's Water Supply

City Club of Portland (Portland, Or.)

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Club Reaffirms Support for Fluoridation

Should Portland fluoridate its water supply? Since the 1950s, in four separate studies, the City Club has answered, "Yes." Recently, a group of dentists created the Tri-County Fluoridation Forum (TCFF) has raised the issue again. At the request of this group, the City Club Research Board and Board of Governors reviewed the Club's past positions on fluoridation. Board members also reviewed recent scientific information on fluoridation from the Center of Disease Control and other sources. On April 11, 2002, the Board of Governors approved the following resolution, which reaffirms the Club's support for fluoridation of Portland's water supply.

A Resolution in Support of Fluoridation of Portland's Water Supply

(Approved by the Board of Governors on April 11, 2002.)

- WHEREAS, The City Club has supported water supply fluoridation in four studies (1955, 1956, 1962, and 1980).
 Despite this consistent support effort to alleviate a serious health problem, fluoridation and has never been implemented in Portland;
- WHEREAS, Portland is now only one of four of the fifty most populous cities in the U.S. that does not have fluoridated drinking water, or water that naturally has a fluoride concentration of greater than one part per million (the other three are San Antonio, Honolulu, and Wichita, Kansas);
- WHEREAS, There remains a significant reduction in the frequency of "decayed, missing, and filled permanent teeth" (DMFT) in children living in areas with water supply fluoridation (WSF), or with natural fluoride water compared to other children. The difference between such groups of children is now about 25 percent, down from the 55 percent value observed in the 1940s¹. This reduced difference is due in part to better dental care (including fluoridation given as part of that care). This explanation is consistent with the general observation that children of lower socioeconomic status rank higher in DMFT than other children²;
- WHEREAS, There is currently no credible scientific evidence for the causal relationship of WSF to the several serious health problems that have been said to be linked to it^{1,3};
- WHEREAS, The potential lifetime cost savings of WSF to the resident of Portland remains favorable. The estimated 75 year lifetime cost for WSF in Portland is about \$40/person. If one filling/year is avoided by the implementation of WSF, at \$40/filling the saving is about \$3000/ lifetime. The lifetime cost of a dentist-delivered fluoridation program in 2001 dollars can be estimated to be about \$1500/ lifetime—still worth the cost, but not nearly as cost effective as WSF;
- WHEREAS, There has recently been some concern expressed that fluoridated wastewater may cause ecological damage. This concern may bear further general study, but fluoridation to a fluoride concentration of one1 parts per million. is unlikely to cause such damage in the Columbia River, our sewage out fall. Our sewage has an average flow rate of about one thousandth of that of the River at low-flow season⁴. The resulting fluoride concentration added to the Columbia would be about one part per billion, a currently undetectable concentration; and
- WHEREAS, Credible proposals have recently been made that the DMFT observed in the elderly (who tend to visit dentists infrequently) can be significantly lowered by WSF³. The greater exposed tooth surfaces in the elderly are especially susceptible to the tooth destroying bacterial attack which fluoride can moderate.

THEREFORE, BE IT RESOLVED that the City Club Board of Governors reaffirms the City Club of Portland's long-standing support for fluoridation of Portland's water supply.

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1 CDC MMWR, Oct. 22, 1999/48 (41); pp. 933 - 940
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² CDC MMWR, Nov. 26, 1993/42 (46); pp. 887 - 891

³ CDC MMWR, Dec.11, 1992/41 (49); pp. 925 - 927

⁴ Based on data from the Northwest Power Planning Council and the City of Portland Bureau of Environmental Services