Dr. Andrew Harms – Interview Transcript

Interview conducted by

Jaya Chela Drolma

Transcribed by

Rosemarie Zalec & Peter Trinick

November 2010

(Robert Gammal My Emphasis)

Dr. Harms: Hello my name is Dr. Andrew Harms. I'm a practicing dentist from Adelaide, in South Australia. I'm a Former President of the Australian Dental Association, and in the mid-nineties, I supported fluoridation and I facilitated the introduction of fluoridation programs into South Australian country areas. I deeply regret this, and I feel that it was a bad mistake. I didn't read the science and when I did read the science about 10 years ago, I started to get serious concerns. My concerns were based around the fact that I didn't realise that we weren't using natural fluoride, so-called natural fluoride or calcium fluoride, but we were using a common industrial waste. This industrial waste is mainly coming from the superphosphate industry, but also recently from industrial waste from China, of which we don't have a really good idea of the origins.

I didn't realise that fluoridation involved dumping about 700 tonnes of industrial waste, mainly for the superphosphate industry, into Adelaide's water supply and it's not a pharmaceutical grade, it's an industrial grade. [00:01:47] Some of the contaminants are aluminium, mercury, low levels of uranium, beryllium, cadmium and this has quite shocked me, because there are no long-term studies looking at the effect of dosing millions of people with hundreds of tonnes of chemicals every year for a very, very small change in the tooth decay rate. This tooth decay rate change is minimal.

I tried in my dealings with the ADA to make people aware of what I'd found out and to my amazement, when I tried to raise the issue with the Dental Association, whom I thought were interested in the science and were interested in integrity, **there was no interest**. [00:02:29] In fact there was a lot of pressure against me to say anything at all. There was a great concern about upsetting our principle sponsors, the toothpaste manufacturers, who heavily compromise our university and I even particularly tried to raise the issue of the warning bulletin that was given to nursing mothers in America and the United States and in Canada and this warning said that... it was given to all dentists, in those two countries, **to avoid mixing infant formula for children under the age of 12 months with fluoridated water**. When I raised this issue, it was immediately dumped from the agenda and as a consequence, in view of the anger about that, I resigned from the Dental Association. I have taken no part in it since. I am concerned about the long-term effects of this particular measure on our young children.

[00:03:23]

Jaya: Dr. Harms, what are your concerns about this chemical in relation to affecting children?

[00:03:28]

Dr. Harms: I am concerned that in our particular dental community there is a pervasive attitude that fluoride is a 'nutrient' and that fluoride has no possible side effects, of which I obviously disagree. We are now telling children, and this is right endemic through our whole dental industry, that swallowing toothpaste is acceptable, that fluoride gels to be swallowed are affective and even extending on into that, I am very, very concerned about a recent change of this idea that there is no maximum dose of fluoride. [00:04:02]

I've actually become aware that a residential care program in South Australia has now gone national and what we are now telling the nursing homes, and this is regulation now, this is not just an idea, it's actually gazetted and is promulgated as the recommended way to handle the oral care of elderly people, and that is to **brush their teeth twice a day with 5000 parts per million toothpaste** and then to ask the residents, the elderly people just to spit out a bit and then to **swallow the rest**. This is how far this lunacy of fluoride has gone in our community and the universities need to step up and examine the long-term health consequences of systemic ingestions... ingestion of fluoride. [00:04:52]

Jaya: At what effects do you think 5000 parts per million, close to the brain stem, what do you think would be a concern that needs to be looked into?

[00:05:02]

Dr. Harms: I'm very concerned about high levels of fluoride being absorbed, particularly in elderly people. Elderly people who have poor kidney function, have poor neurological status, because we know that the central nervous system effects, gastrointestinal effects, will be amplified by giving such extraordinary doses to elderly people, with no research or any care about safety issues.

[00:05:27]

Jaya: What are one of the big effects that happen to children with this sort of systemic ingestion?

[00:05:32]

Dr. Harms: One of the interesting effects that really invalidates a lot of the fluoride research, is that I became aware that 5 years ago that **water fluoridation delays tooth eruption**. It delays tooth eruption enough to give a **distorted issue**, a distorted reading, on the decay rates of say 12-year-old children. I am concerned particularly looking at the data, which is used to spruke water fluoridation. Say for example, on 12-year-olds. If we look at 12-year-old children and their decay rates in fluoridated areas. Yes, they will show an improvement of about 25 to 33 per cent in tooth decay rates.

But the issue is not comparing 12 year olds fluoridated with 12 year olds unfluoridated. If you factor in the one-year delay in tooth eruption and then so you

compare 13 year olds that are fluoridated to the 12 year olds that are unfluoridated, there is no difference in the decay rates. So studies that show or purport to show major benefits from fluoridation are bogus and the researchers have known this, and the people who should know better, have known this for the past 50 years and I have actually sighted studies back from the forties showing one of the early effects of fluoridation was to delay tooth eruption. [00:06:51]

My challenge to the dental profession is to show some scientific integrity and when they present data purporting to show the benefits of water fluoridation that they give valid comparisons and that is comparing fluoridated to non-fluoridated communities with this data correction of the year's delay in tooth eruption. Without that, the scientific community has no integrity. **Continuing to present data comparing especially 12 year olds, fluoridated, non-fluoridated, is just bogus**. And we have no part in a modern scientific debate by presenting bogus data that the public are not aware of. There is an effort in the scientific community to trivialise the concern shown by a lot of scientists and other health professionals about the effects of fluoridation. [00:07:47]

What I would like to say is that these chemicals are all significant carcinogens and one example of the suppression of the evidence of carcinogenicity was the Bassin Study. Elise Bassin's study in 2001, clearly showed a link in teenage boys to osteocarcoma in fluoridated communities. There has been no study to refute the Bassin evidence and yet it is trivialised and it is ignored by our Australian scientific community. I've great concerns when we say that things are scientifically validated and yet we have such fraud going on and an example of that is the fraud about the carcinogenicity of fluoride, particularly the bone cancer risk.

I am very concerned that if fluoridation was on safe scientific grounds, then a professional debate would be an easy thing to do but instead there's enormous amount of effort by governments and the Dental Association to trivialise the debate, and in fact to fail to show up to any debates when people want to talk about it, and that to me shows a great deal of lack of integrity. It shows that **the fraud of fluoridation doesn't stand up to scientific scrutiny** and if people are afraid to expose themselves to the public and to expose themselves to another view, then they've obviously got something to hide. [00:09:23]

Most people who find out that fluoridation is carried out by dumping seven hundred tonnes, say in Adelaide, 700 hundred tonnes of industrial waste into the water supply, are quite horrified, even dentists and dental hygienists that I talk to have no idea that it is an industrial waste. When actually they can hear that fact alone, they stop and think. That's how serious the fraud is in this whole area. I have particular concerns in South Australia, especially in Adelaide, of where this fluoridated chemical waste goes, because **only 5% of that 700 tonnes ends up in people's bodies.** [00:10:03] The rest is excreted and flushed down our drains. So 95%, at least, of this 700 tonnes goes to our sewage plants and the big issue is, ok that goes to sea and they've managed to sanitize the waste and get away with it and get it out of the reaches of the EPA. What I am concerned about is the thousands upon thousands of litres of this sewage waste that goes through treatment plants and . If

this fluoridated waste containing the arsenic, uranium, the beryllium, the cadmium and other products, other heavy metals, ends up in being a treated waste water going to produce Adelaide's vegetables, I have concerns that there may be health implications from that and I am going to in the future investigate that issue.

[00:11:00]

Jaya: Perhaps you might just give us a little bit of information about the book that you're holding.

[00:11:08]

Dr. Harms: Yes, look it's a fantastic new book co-authored by Professor Paul Connett: "**The Case Against Fluoride,**" and this book is just fantastic and I am going to trawl through it several times but I commend everybody to get a copy of this and have a thorough read. The other book that's very good is "**The Fluoride Deception**" by Chris Bryson and that was the book that showed the skulduggery of the American government, the United States government and ALCOA and other industrial groups, in pushing fluoridation into the community in the forties and fifties. Chris Bryson's book was my turning point and when I saw the extent of the fraud and the 'funny money' that went to validate fluoridation, I realised that there was a problem. [00:12:00] This book now follows on from that and I think it'll be very useful for people to have a good read and to look at it carefully and realise what's been going on.

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Java: Thank you very much, Dr. Harms.

[00:12:15]