

Re - Opposition to NYC Council Int. No. 1379: Ending Fluoridation of the Municipal Water Supply

On behalf of the New York State Dental Association (NYSDA), we urge the Council to reject Int. No. 1379, which would prohibit fluoridation of New York City's municipal water supply. This bill threatens to dismantle one of the most effective, equitable, and widely endorsed public health measures of the last century.

Fluoridation is Safe, Effective, and Backed by Science

Community water fluoridation at the recommended level of **0.7 mg/L** is safe and has been rigorously studied for nearly 80 years. More than **100 respected health organizations**—including the American Dental Association (ADA), and the American Academy of Pediatrics, support its continued use. Community water fluoridation has been hailed as one of the **ten greatest public health achievements of the 20th century**.

Opponents often cite studies outside the U.S. or those based on **fluoride exposures far above U.S. levels**. In fact, the National Toxicology Program's 2024 report concluded that evidence of harm at U.S. fluoridation levels is **"inconsistent and unclear."** Meanwhile, extensive research shows fluoridated water **reduces tooth decay by 25–30%** across all populations, regardless of income or access to care.

Equity and Access

Unlike supplements—which require individuals to opt in, obtain and administer them properly, and keep them consistent over a lifetime—fluoridated water reaches everyone, every day. It is particularly vital for:

- **Children**, whose developing teeth are most vulnerable to decay.
- **Seniors**, who face higher risk of root decay.
- **Low-income families**, who often lack reliable access to dental care.

Removing fluoride and replacing it with an "on request" supplement program would **increase disparities** in oral health. Experience shows that voluntary programs fail to achieve the same reach or impact as systemic fluoridation. The ADA has estimated that the elimination of fluoride from public water supplies in the US would result in nearly \$10 billion in additional dental spending over five years due to the increased prevalence of cavities.

Public Health and Economic Consequences

The ADA and its partners warn that halting water fluoridation would cause an immediate and sustained **rise in dental decay**, leading to:

- More emergency visits for dental pain and infection.
- Higher demand for surgical and restorative care, beyond what the workforce can manage.

- Increased school absences for children and lost productivity for adults.
- Greater Medicaid and public health spending, as untreated dental disease disproportionately affects vulnerable populations.

New York City has been a leader in public health innovation. Reversing fluoridation would represent a dangerous step backward, undoing decades of progress and leaving millions at greater risk.

Fluoridation Is Preventive Medicine, Not “Forced Medication”

Fluoride is a naturally occurring mineral, adjusted to optimal levels to **prevent disease**, much like iodine in salt or vitamin D in milk. Labeling fluoridation as “forced medication” misrepresents its role as a community-level safeguard proven to reduce harm and improve well-being.

Conclusion

Ending fluoridation would jeopardize oral and overall health for all New Yorkers, particularly the most vulnerable. It would increase costs for families and the health care system, exacerbate inequities, and dismantle one of the city’s most cost-effective preventive health tools.

For the health of every New Yorker, we strongly urge the Council to reject Int. No. 1379 and reaffirm its commitment to community water fluoridation.



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