

# Texas Should End Forced Medicalization with Fluoride

## The Problem

The issue of forced medicalization—using government power to enforce medical interventions on the public—has long been a contentious topic in the United States. This debate reemerged during the COVID-19 pandemic, with mandates on vaccines and other medical measures stirring strong opposition. However, the problem of coercive medicalization extends beyond COVID-19 and encompasses practices like the fluoridation of drinking water, which impacts millions of Americans daily. While some health officials and organizations continue to support fluoridation, growing evidence and public skepticism are raising serious questions about its safety, effectiveness, and necessity.

Economist and philosopher Murray Rothbard explained in 1992 that the deployment of government power to force medication on citizens resulted from “an alliance of three major forces: ideological Social Democrats, ambitious technocratic bureaucrats, and Big Businessmen seeking privileges from the State.” He continued:

*It has always been a bit of a mystery to me why left-environmentalists... who hate every chemical additive known to man, still cast their benign approval upon fluoride,*

*a highly toxic and probably carcinogenic substance.*

Fluoridation, initially introduced in the mid-20th century, is defended as a low-cost method to reduce dental cavities, particularly in children. However, fluoride is a highly toxic substance that can cause adverse health effects at elevated levels. As public awareness of these risks grows, many Americans, including citizens of Texas, are asking whether the benefits of fluoridation truly outweigh its risks.

## The Situation in Dallas

In Dallas, the debate over the fluoridation of public drinking water resurfaced last year during discussions at the Dallas City Council. Proponents of fluoridation, such as representatives from the Dallas County Dental Society, argued that fluoridation is essential for those who may not have regular access to dental care. However, opponents, including Dr. Griffin Cole, contended that fluoridation is both unproven and unnecessary, noting that there is no clear correlation between fluoride levels in water and the incidence of tooth decay.

Several city council members expressed skepticism about the continued practice of fluoridation. While the council did not vote to remove fluoride from Dallas’s water supply, the debate highlighted a grow-

ing concern among local leaders about the safety and ethics of this public health measure.

### **The Science**

In August, the National Toxicology Program (NTP), a division of the U.S. Department of Health and Human Services, released a comprehensive peer-reviewed study on the effects of fluoride exposure. The study reviewed decades of scientific literature and found that most high-quality research showed a significant association between fluoride exposure and lower IQ, ADHD, and other cognitive or neurodevelopmental outcomes in children.

Another study found that “excess fluoride exposures can have deleterious effects on the expecting mother and fetus and is associated with adverse pregnancy outcomes,” including “anemia, miscarriage, abortion, and still birth.”

Concerns about fluoridation increased when, on September 24th, 2024, U.S. Federal Judge Edward Chen ruled that the risk posed by fluoride in drinking water is high enough to warrant a regulatory response from the Environmental Protection Agency (EPA). Judge Chen stated that there is little disagreement on whether fluoride can be hazardous, and noted “scientific evidence has increasingly identified a link between fluoride exposure and adverse cognitive effects in children (reduced IQ).” EPA experts conceded that

fluoride exposure poses health risks at certain levels.

In his decision, Chen also noted that “evidence [has] increasingly established fluoride’s connection to adverse effects, including severe enamel fluorosis, risk of bone fracture, and potential skeletal fluorosis.” And he emphasized the need for federal regulatory agencies to reassess their stance on fluoridation in light of these findings.

### **The Costs of Fluoridation**

Proponents often argue that fluoridation is a low-cost public health measure, estimating that it costs approximately \$1.32 per person annually. With 214 million Americans consuming fluoridated water, this translates into more than \$282 million each year.

### **The Solution**

Fluoridating drinking water is a dangerous, slippery slope to medical tyranny. As of 2012, only 6% of the world’s population lived in countries that fluoridated water; almost half of those were in the United States. For decades, the rest of the world has understood the toxicity of fluoride in water and banned the practice—including 97% of the countries in Europe. With recent scientific evidence suggesting that fluoridation may be less effective in reducing cavities than originally thought and that fluoride can affect the health of children and pregnant women, Texas

must act. State and local leaders should save taxpayer money by eliminating this archaic practice that unquestionably poisons children. We must create safeguards against any form of coerced medical treatment being pushed by lobbyists

who don't have the public's interest at heart. It's time for officials to prioritize the health, welfare, and liberty of Texans by rejecting outdated policies that are poisoning citizens. Texans deserve nothing less.



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