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November 18, 2003

To: City Council of Port Angeles
Re: Fluoride and public water systems

Dear Council Members:

It has come to my attention from one of your local pediatric groups (Penninsula Children's Clinic) that there is some concern about fluoride in public water systems and allergies. I have also heard that statements have been made concerning the opinions of my national specialty organization, the American Academy of Asthma, Allergy and Immunology (AAAAI), concerning this issue. I hope that this letter will clarify the positions of Washington State Allergists and the AAAAI on fluoride and allergies.

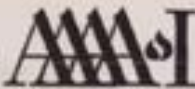
The AAAAI published a position statement in 1971 stating that "There is no evidence of allergy or intolerance to fluorides as used in the fluoridation of community water supplies." This statement was recently retired by the AAAAI "due to its age and, with no contrary published findings, irrelevancy to the field of allergy and established community water treatment practices." It was not rescinded because of new evidence, as has been stated by some in your community.

I have recently researched the literature on this issue, as has the chair of the committee of the AAAAI responsible for the position statement, and there are no published scientific studies documenting any relationship between fluoride in water systems and allergies.

I am enclosing a letter from the President of the AAAAI, and a copy of the old statement, for your information.

Sincerely yours,

Paul V. Williams, MD
Clinical Professor, Pediatrics and Environmental Health
University of Washington School of Medicine
Immediate Past-President, Washington State Society of Allergy, Asthma & Immunology



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November 13, 2003

Paul V. Williams, MD, FAAAAI
Northwest Allergy and Asthma Center
120 N 17th Street, Suite A
Mount Vernon, WA 98273

Dear Dr. Williams:

You recently requested that the American Academy of Allergy, Asthma and Immunology (AAAAI) investigate its research information on the use of fluoride in public water supplies and any detrimental effects regarding fluoride allergies. I have reviewed the original AAAAAI statement and subsequent published medical data (PubMed) since 1971, and there is nothing substantive to add to the JACI Vol. 47, No. 6, June 1971, p. 347 position statement from the American Academy of Allergy.

It should be noted that the original statement was retired by AAAAAI due to its age and, with no contrary published findings, irrelevancy to the field of allergy and established community water treatment practices. If there are any published medical studies that would provide any new data on this issue our organization would be very willing to review that information on your behalf.

Thank you for bringing this matter to our attention and please let me know if there is any additional assistance AAAAAI might provide to you and your community.

Sincerely,

Eric Macy, MD, FAAAAI
Chair, Committee on Adverse Reactions to Drugs and Biologicals
Eric.m.macy@kp.org

A Statement on the Question of Allergy to Fluoride as Used in the Fluoridation of Community Water Supplies

A request to the American Academy of Allergy has been made by the United States Public Health Service for an evaluation of the question of allergy to fluoride as used in the fluoridation of community water supplies. It was further requested that such an evaluation include a review of clinical reports of allergy to fluoride and express an opinion whether or not such reports constitute valid evidence of a hypersensitivity reaction.

The response to this request has been handled as follows:

Reports of allergic reactions have been reviewed. First, these reports were evaluated in an attempt to determine whether or not there is sufficient clinical or scientific information to classify any case of presumed fluoride allergy in one of the four major classes of hypersensitivity reaction (types I to IV).¹ These immunologically mediated reactions are the anaphylactic or reaginic, the cytotoxic, the toxic complex, and the delayed-type reactivity.¹ Second, the reports were evaluated to determine whether or not there was sufficient clinical evidence to support the possibility that intolerance or allergy to fluorides might occur as one of the less-well understood types of drug reactions that may or may not be immunologically mediated.²

The reports of fluoride allergy reviewed³⁻⁷ listed a wide variety of symptoms including vomiting, abdominal pain, headaches, scotomata, personality changes, muscular weakness, painful numbness in extremities, joint pain, migraine headaches, dryness in the mouth, oral ulcers, convulsions, mental deterioration, colitis, pelvic hemorrhages, urticaria, nasal congestions, skin rashes, epigastric distress, and hematemesis.

The review of the reported allergic reactions showed no evidence that immunologically mediated reactions of the types I to IV had been presented. Secondly, the review of the cases reported demonstrated that there was insufficient clinical and laboratory evidence to state that true syndromes of fluoride allergy or intolerance exist.

As a result of this review, the members of the Executive Committee of the American Academy of Allergy have adopted unanimously the following statement:

"There is no evidence of allergy or intolerance to fluorides as used in the fluoridation of community water supplies."

K. Frank Austen
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Richard S. Farr
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E. Middleton, Jr.
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P. P. Van Arsdell, Jr.

February 18, 1971

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JACI Vol. 47, No. 6, June 1971, p. 347