

Something in the Water

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INTRODUCTION

THERE'S SOMETHING IN THE WATER

Audrey Adams thought she was doing her son, Kyle, a favor by limiting his fluid intake to just water.

“He didn’t drink anything else. No pop, no milk, nothing — just water,” Adams told our group of clean water activists, which had echoes of a support group on the day she shared her story.

Beginning in his early teens, Kyle was in a state of near constant pain all over his body caused by a rare sensitivity to chemicals, found more frequently in those with autism. After diligently eliminating the most common culprits in Kyle’s diet, and in the household cleaning products she used, Adams heard from the mother of two autistic teens that fluoride in tap water amplified her son’s behavioral problems and may have been responsible for Kyle’s excruciating condition.

The worst of Kyle’s pain went away after Adams discovered and eliminated fluoridated tap water from his diet, although he continued to experience terrible unexplained headaches well into adulthood. It wasn’t for another eight years that Adams uncovered the reality of acute transdermal fluoride poisoning from showering or bathing. She had been told that such poisoning was impossible — and believed it — until the link between Kyle’s morning showers and morning headaches had been established through trial and error beyond any doubt.

We take for granted that advances in municipal water treatment have made our water clean — safe to bathe in and drink. The idea that our water may contain toxic compounds unsafe for human consumption is something we associate with less developed parts of the world. The suggestion that such compounds would be added *intentionally* sounds positively dystopian — so much so that few believe it even after being confronted with ample evidence. Although not

everyone has such extreme sensitivities to chemicals like fluoride, certain people with neurological disorders like Kyle's can be thought of as the canaries in the coal mine — a sign that something is amiss with our water supply, and that that *something* is doing real harm to real people.

Fifteen years prior to Adams's initial discovery, a horse breeder named Cathy Justus and her family were trying to figure out the cause of their horses' chronic colic. In 1978, they had moved to Pagosa Springs — a Colorado municipality famous for its mineral hot springs — and their horses seemed fine at first. It took seven years for the colic to fully reveal itself. Once the symptoms appeared, however, Justus began to try every possible feed and treatment. Yet the ailments just kept getting worse.

"Could it be something in the water?" Justus wondered. All this time, she had assumed their water came directly from the river.

"What could be toxic about pure river water?" she thought. When she called the water department, she learned that their water was not, in fact, pure. It was treated with fluoride and other chemicals.

"Isn't that a good thing?" the worker at the other end of line inquired.

Justus didn't know. She didn't have any verifiable science to answer that simple question in the negative. She only had a theory. Then she remembered something her father, who had studied holistic health and medicine, had told her years before moving to Pagosa Springs.

"Dad told me that the town that I was raised in was non-fluoridated," Justus recalls. "He said, 'Never live in a fluoridated town, because fluoride is poison.'"

After those seven years of drinking the city's treated water, the harm to her horses was now life threatening — just as her father's library of holistic health books predicted it would be.

So Justus consulted veterinarians — and lots of them. She told them about her horses' reproductive problems, their skin problems, and their skeletal problems. Yet as soon as she asked about the possible link between these problems and the fluoride in the water, the vets would look at her as if she were a little strange. Each one would say the same thing: "Judging by the amount the National Academy of Science has declared safe, there is no way that horse could have problems because of fluoride."

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A few years later, north of the border in Canada, a water treatment consultant named Peter Van Caulart would still have endorsed the National Academy of Science's declaration. Van Caulart was responsible for the training and certification of over 30,000 water plant operators in North America and had written extensively on fluoride's alleged safety. He had appeared before almost every council on fluoridation in Ontario to defend fluoride. Then one day, Victor Legault — one of his former students and the water plant operator in Van Caulart's own hometown — came into his office and slammed a stack of VHS tapes on his desk, exclaiming, "No — you're wrong!"

While priding himself on his knowledge of the topic, Van Caulart was not so stubborn that he refused to consider new evidence. He stayed up all night reviewing all four videos. The first one was titled *The Protected Pollutant and the Perversion of Science* and featured the proceedings of a press conference held by several doctors who laid bare the scandal of the government's failure to regulate certain chemicals in our water supply despite known adverse effects, including neurotoxicity, cancer, thyroid dysfunction, and even a reduction in IQ in children.¹ The doctors and scientists noted that lead had been removed from paint and gasoline with less evidence than they were presenting against fluoride, and yet this known pollutant has been protected throughout North America under the guise of public health. Artificial water fluoridation, frequently trumpeted as one of the great public health victories of the past 100 years, goes largely unquestioned by the health establishment and institutions responsible for our water's safety. After a night of being glued to the screen, however, Van Caulart called into question everything he thought he knew.

These three stories from the International Fluoride-Free Teleconference are vastly different, yet in each of them we find experts in their own right who notice something amiss — something in the water. Unfortunately, that is where the questioning ends for most people. They dismiss their symptoms or are discouraged by official experts because their anecdotal experience does not match the socially accepted narrative that fluoride is safe and effective.

There are many reasons to fight for water that is truly *just* water. Why is it so hard to take that "something" *out* of the water, and let

¹ Video of a press conference at the National Press Club, in Washington, DC (59 Minutes; June 1999)

individuals decide whether to obtain the alleged dental benefits of fluoride from alternative sources, as is the case in most countries? My personal interest in the fluoride debate began because I cared about health and wellbeing, as well as personal choice. However, after spending several years in the trenches with other fluoride-free activists who have shared so many heart-wrenching and maddening stories, I have an additional reason. Now, it's a battle over plain rationality. I'm fighting for sanity as much as anything else.

This book is meant to educate and persuade ordinary people around the world to stand up and counter the mass medication experiment that has been taking place for the better part of a century under dubious scientific pretenses. The corruption of science behind artificial water fluoridation has been explored in other volumes, such as Dr. Paul Connett's *The Case Against Fluoride*² and Christopher Bryson's *The Fluoride Deception*.³ While these books can be considered prerequisites for the dedicated fluoride-free activist, simply knowing science and history is insufficient for leading a successful campaign to end fluoridation. Many naïve activists — myself included — have at one point thought that ending fluoridation would be as easy as educating the public and helping them see the light.

I'm sorry to say that hasn't worked. We must go deeper and become sophisticated campaign leaders who understand both the surface level of the debate as well as the deeper motivations behind the distortion of science that keeps this controversy alive.

Fluoride's Pathway to Your Tap

This process begins with a journey deep within the earth. Fluoride is mined from the ground before making its way through various industrial processes. From there, it goes into our water supplies, and, finally, into our bodies where it poisons everything from our teeth (which fluoride is alleged to protect), to our bones and skin, as well as the endocrine organs that regulate our hormones, and, alarmingly, even our brain and nervous system.

² Connett, P. H. (2011). *The case against fluoride: How hazardous waste ended up in our drinking water and the bad science and powerful politics that keep it there*. Chelsea Green.

³ Bryson, C. (2006). *The Fluoride Deception*. Seven Stories.

The primary source of fluoride is phosphate ore, a type of rock that is mined and then refined into one of the key nutrients in fertilizer, along with potassium and nitrogen. These phosphate rocks are fed into a reactor along with sulfuric or phosphoric acid to purify the phosphate from other compounds like calcium fluoride. The outflows from that reaction go up into an industrial scrubber that collects the unusable waste material and separates it from the now-purified phosphate.

Doug Cragoe, a fluoride-free activist from Los Angeles, speaking to the IFFT in a session about the EPA's enforcement failure in September 2020, explains that the old term for the fluoridation chemical, which came out of phosphate fertilizer plants, was "scrubber liquor." "When the CDC found out that the plant operators used that term, they said, 'Don't call it scrubber liquor — that doesn't sound good.' But that's what it was. It came out of pollution scrubbers, and it still does."

That phosphate or phosphoric acid can now be processed into chemical fertilizers that are vital to growing food at scale. But what does the industry do with byproducts like fluoride?

Here's a math quiz to see if you can think like a Captain of Industry. Your industry produces 223 million metric tons of product a year, valued at roughly \$22 billion, but the process you use also generates hundreds of thousands of tons of hazardous waste.⁴ There are two options. You could pay about two dollars per gallon to dispose of it by trucking out to some remote place where it's far away from people and animals. Or you could market it as a valuable "co-product" and sell it for \$1,500 a ton to municipal water districts. If you chose the latter, you might just have what it takes to succeed in big business.

There is no denying that fluoride has numerous industrial uses. It's used to treat metal surfaces, to process textiles, to harden masonry and ceramics, and to sterilize brew tanks. In the next chapter, we'll examine how the military played a large role in building and securing the infrastructure to produce hundreds of thousands of tons of fluoride each year. As Bryson tells it in *The Fluoride Deception*, the campaign to fluoridate America's water supply began as an attempt to cover up and

⁴ Pistilli, M. (2022, September 14). *10 top phosphate countries by production*. INN. <https://investingnews.com/daily/resource-investing/agriculture-investing/phosphate-investing/top-phosphate-countries-by-production/>

deflect from the human injuries caused by exposure to fluoride. It had become obvious to the military following extensive use of fluoride in building the atomic bomb and other WWII munitions. It wasn't until after World War II, precisely when lawsuits over exposure to industrial fluoride began to arise — both for workers in factories using it, and neighboring residents who were exposed to the effluent — that the suggestion to add it to the drinking water *en masse* began to be taken seriously. By rebranding fluoride as a miracle chemical that made teeth resistant to cavities, the parties responsible for the growing number of poisonings could make a stronger case in court that exposures below a certain level were not only harmless but perhaps even beneficial.

However, this deception did not make it all the way around the world. The U.S., Canada, England, Ireland, Australia, New Zealand, Brazil, and a handful of other countries are unique among the nations in the world in their decision to mass-medicate the population with fluoride via the water supply. Only 2% of Europeans drink artificially fluoridated water, while just 0.04% of Africa is fluoridated. Singapore and Malaysia are the only Asian countries where a majority of people get fluoridated water.⁵

Cragoe notes that we also get a lot of our fluoridation chemicals from China, and yet even China does not allow water fluoridation. People in the United States, he observes, don't want to look at what's happening elsewhere in the world. "The fact is, most of the world rejects water fluoridation. Only 23 of 295 nations in the world practice water fluoridation, and 11 nations have stopped it completely."

Before we turn to the rationale behind this massive, ongoing public health experiment, let's continue our journey tracking fluoride from the phosphate rock into our bodies.

Once the shipment of fluoride is received at the water treatment facility, the equipment for disseminating it into our drinking water is quite simple. Since you cannot simply pour fluoride into the water, water operators flood a calcium or sodium fluoride bed with water to create a concentrate. The concentrated solution is stored in a tank and slowly released into the water stream with a metering pump.

Peter Van Caulart, the water engineer who changed his mind about fluoride midway into his career, gives us an idea of how the dosage is

⁵ For the latest statistics, see "Countries That Fluoridate Their Water," <https://fluoridealert.org/content/bfs-2012/>

controlled at the treatment plant. He says most of the water treatment plants are controlled by a supervisory control and data acquisition system called SCADA. A SCADA-controlled plant has a computer screen showing a graphic. “You simply click on a concentration setting and the pump has a speed regulation and a stroke distance setting,” he explains. “As you change the volume, the pump adjusts its settings for speed regulation and stroke distance to increase or decrease the volume that is pumped in each stroke. A residual analyzer — a sort of sensor — controls the concentration downstream in minute intervals after the water is saturated with fluoride.”

These data points then determine how much of the fluoride solution the pump will feed into the water stream at any point. In many plants, that process may already be automated, meaning software will decide how to vary the concentration based on water flow.

We would be mistaken to blame the actual operator, though — he’s just following detailed specifications given to him by the relevant governmental authority (usually a municipal water district). In fact, water workers are among the worst victims of fluoridation, since they come in contact with the harsh chemicals in much larger quantities than the average citizen. Once the operator leaves his control room, he steps into the treatment rooms. If the reacting chemicals aren’t vented correctly out of the building, the fugitive emissions accumulate here. Operators must constantly remind themselves not to touch anything.

Van Caulart tells us what we should expect if we were to take a tour of the fluoridation room in a water plant: “You’re about to go into an area where the level of fluoride vapors in the air is higher. They’re going to attack your throat and eyes, and you’re going to feel the scratch in the back of your throat. Your eyes will start to itch,” he says. “You may even start to tear up profusely. That is very common in a lot of fluoridation rooms where hydrofluorosilicic acid is stored. Consequently, if anybody from the public is taken on a tour, the facility managers will just say, ‘That’s where the fluoride is added. Let’s keep moving.’”

“The risk of going into the room to an individual visitor is quite high because an uninitiated person doesn’t have the safety knowledge not to touch something that might be dripping if it was leaking.”

The next problem along our pathway arises once the new shipment of chemicals arrives at the water plant. The distributors of fluoride

cannot always guarantee consistency. As Van Caulart points out, “Once it’s up and running, the accuracy is fairly tight. The problem, however, comes when you get a new shipment of chemicals arriving at the plant. It’s not the same as the previous shipment.” That means, for every shipment, the operator needs to recalibrate the entire system in order to get the concentrations right.

With such small safety margins and so many openings for error, we might wonder how many water systems are accidentally overdosing the population — even if only for a short window of time. In May of 1992, one man died and 260 were poisoned in Hooper Bay, Alaska, because of both human and mechanical failures. Residents were unknowingly drinking water with fluoride at 40 times the official limit.⁶

Treatment plant workers are uniquely exposed. They cannot simply exchange a brittle hose the way you would a sink pipe at home. They need to wear special protective gear. Hydrogen fluoride, the emissions that escape from the mixture in the tank, aggressively seek and destroy glass and metal surfaces. The effect on living tissues is of even greater consequence where accidental poisoning is concerned. If hard, inert surfaces react so negatively to the fluoride atom, what do you think happens once fluoride is consumed and starts to react with both hard and soft tissues within a complex living organism?

Dr. David Kennedy, DDS — an orthodontist and past President of the International Academy of Oral Medicine and Toxicology (IAOMT) — attributes much of the pain experienced by the aging population as a symptom of a lifetime of fluoride accumulation. He notes that fluoride accumulates in your lower lumbar spine and says that’s where you get the lower back pain. “You don’t get to live your full lifespan free from pain,” he says. “Pain is the first thing that tells you you’re poisoned with something, and joint pain is one of the very first symptoms.”

“Think about it: you go to the grocery store, and you look at all the medications for pain sitting on the checkout stand. We’ve got a world in pain, so why don’t we address the cause of that pain?”

Small amounts of fluoride consumed over a lifetime eventually turn into a large, accumulated amount in our bodies. Those who have suffered from acute exposure to fluoride often end up with particularly

⁶ The New England Journal of Medicine, January 13, 1994
N Engl J Med 1994; 330:95-99

debilitating symptoms, including an enhanced sensitivity to future exposure to smaller amounts of fluoride in the water.

Before she became a political whistleblower, Susan Kanen was briefly poisoned by high levels of fluoride while working in the basement of a water treatment plant in Washington, D.C.

“When I came up, my lungs hurt and my face smelled. I thought it was chlorine gasses, but it was fluoride gasses coming off of water tanks,” Kanen recalls.

Kanen believes that her lifelong exposure to fluoride led to her diagnosis of degenerative hip and spine disease: “I had my hip bone measured for fluoride, and it came out to 1,500 parts per million of fluoride.”

This is considered abnormally high and serves as strong evidence that her ailments are related to the poisoning event in the early 2000s. Although she has had difficulty getting a reliable medical diagnosis of fluoride poisoning issues, Kanen devised her own experiments to measure fluoride absorption through the skin, which has clearly linked her daily fluoride consumption and absorption with the severity of her symptoms.

Adding insult to injury, Kanen has found little sympathy for her work-related poisoning.

“When you share information the public deems unpopular, most of society reacts in a negative fashion,” she laments, “They make fun of you; you could even lose your job. That’s the downside. Yet, for me, these are temporary downsides we all need to endure.”

Fluoride Is Not Found in Biology

This book is not a compendium of the latest science on the chemistry of fluoride or the known harms it causes. However, knowing some of the science will help you understand what you’re up against if you choose to do something about this issue of slow-motion poisoning.

Chemists know how uniquely aggressive the fluorine ion (F^-) is. It will always react with other chemicals to create new fluoride compounds. That is how phosphate miners end up with *hydrofluorosilicic acid* when they separate naturally occurring calcium fluoride from ore. That is also why gasses exuding from hydrofluoric acid attack glass and metal. It is literally impossible for it not to react. In that process, it also expands tremendously because a fluorine ion is relatively small, whereas a fluoride compound is large. Just as everything Midas

touched turned into gold, everything fluorine touches turns into fluoride.

Although it is a naturally occurring element, you will not find the fluorine ion (F^-) in the biological kingdom. Dr. Paul Connett, the prominent fluoride-free activist and the longtime executive director of the Fluoride Action Network, says we need to get a lot of basic facts across to the next generation of dentists and scientists about the harsh biological realities of having fluoride in our bodies.

“One of them is for every chemist and biologist to know that nature has never used fluoride. There is no substance inside the body or the teeth that is purely fluoride. The biochemistry of animals doesn’t involve any fluoride. It’s not used as a co-factor; it is not present in any molecule, any enzyme, or any protein. Nature has not used it.”

Dr. Connett notes that nature has, in fact, developed a whole series of defense mechanisms against fluoride in different tissues. He cites a series of publications in 2012 from a Yale scientist named Ron Breaker, who found that certain bacteria have “fluoride-exporting” genes. In other words, when these single-celled organisms are exposed to fluoride, they can switch on the production of proteins that pump that fluoride out of the cell. Other researchers have found supporting evidence in a variety of organisms, including fungi, indicating a general hostility to fluoride across the spectrum of living things.

The level in mother’s milk, even when the mother has consumed fluoride, is nonetheless incredibly low. This suggests that nature has ruled that the baby doesn’t need fluoride, and likely even needs to be protected from it.

So why didn’t nature choose to use fluoride in the mainstream of biochemistry? Dr. Connett argues, “Nature didn’t have many nonmetals to choose from to work with: hydrogen, oxygen, nitrogen, sulfur, phosphorus, chlorine. Surely that should intrigue chemistry and biochemistry teachers. We know the answer is pretty simple — it’s because fluoride is toxic. That’s why nature has kept it away from our brains and endocrine systems.”

First and most visibly, fluoride attacks the body part that it is supposed to protect: your teeth. Dental fluorosis is the disease that causes anything from permanent white patches to severely damaged, or “mottled” teeth — which may be more resistant to cavities but are also more brittle. Ingesting too much fluoride in childhood can damage

the cells in your gums responsible for creating precious tooth enamel. But the damage doesn't stop there.

Once that fluoridated water gets past your teeth and into the stomach, it reacts with digestive acid. Your stomach is the gateway to your bloodstream, so this highly reactive chemical now passes to your organs and skeleton and disrupts important biochemical processes.

Skeletal fluorosis results when fluorine incorporates into your bones and makes them more brittle.

Hypothyroidism, a decrease in thyroid activity, results from fluoride's dominance over iodine. Fluoride's effect on your parathyroid gland pulls calcium from your bones and dumps it in your bloodstream, leading to further problems like arterial calcification.

In the brain, fluoride disrupts the pineal gland, which regulates the hormones responsible for your mood and sleep.

There is no body part that fluoride won't affect. Worse, fluoride keeps accumulating in your body — reacting with every cell it touches.

Not everyone notices. Some won't notice symptoms for years. Some just aren't as sensitive to fluoride as, say, Adams' son, Kyle. Over a long enough period of time, however, the cumulative effects of fluoride start to become more apparent.

"These are the facts that we need to give to young scientists who are looking for a career," Dr. Connett says, adding, "We're all being told fluoride is good for our teeth, and that's where the discussion ends."

But the discussion need not end there. Your voice can be one of a growing number of activists who have added fluoride to the list of toxins like lead, mercury, and asbestos that are tightly regulated and carefully avoided in all developed nations.

Whether you're already afflicted with mysterious symptoms that fit the descriptions in this chapter, or you're simply trying to live a healthy, self-determined life and avoid future problems, I hope you will be moved by these stories of how fluoride poisons our collective water supply and, ultimately, our bodies.

In the next chapter, you will hear in more detail the perverse tale of private greed and public apathy that has brought us to this place. Many people, upon hearing this story, will be inclined to throw their hands up and try to forget what cannot be easily forgotten. Instead, I urge you to take a different path. Choose to be empowered by this knowledge. Seek more knowledge and organize with people who are

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awake and aware. Add your voice to the growing chorus of concerned citizens seeking to end this regressive and anti-scientific project, which has tarnished the whole enterprise of science along with the so-called experts who claim to represent public health.

It's a bitter pill to swallow, but there is a sweet coating in the pages that follow. Once you understand the nature of the fluoridation conspiracy, you can begin to work to correct this crime against humanity. Join us in taking responsibility for your own health and clean drinking water, and build a campaign to add your city or region to the list of places that are fluoride free.