

Testimony
House Bill 1605
House Human Service Committee,
Monday February 3, 2025
Rolette County Public Health District

Good morning, Chairperson Ruby, and members of the Human Services Committee. My name is Barbara Frydenlund, I am a Registered Nurse and the administrator of Rolette County Public Health. Rolette County Public Health District serves Rolette County located in District 9.

I am here today in opposition of HB 1605.

The practice of adding fluoride to public water systems began in Michigan, in 1945. This initiative aimed to combat tooth decay, which was a prevalent public health issue at the time. Since then, numerous studies have demonstrated the effectiveness of fluoridation in reducing dental caries (tooth decay), leading to widespread adoption of water fluoridation across the country.

One of the primary benefits of fluoridated water is its significant impact on dental health. Fluoride helps to re-mineralize tooth enamel, making it more resistant to acid attacks from plaque bacteria and sugars in the mouth. Studies have shown that communities with fluoridated water experience a 25% reduction in dental caries among children and adults.

This is particularly beneficial for low-income, underserved communities and counties such as Rolette County, where access to dental care is extremely limited and almost impossible for the Medicaid population.

Rolette County Public Health District has one of the largest Medicaid Health Tracks programs, in the state. We see 700-900 children per year in this program. In the past year alone 48% of the children that participate in our program do not have a dental home and have need from prompt or immediate dental care. Many of these children have astronomical cavities, pain and dental work that is so great that IV sedation or general anesthesia is needed to complete the dental care. Sedation itself is NOT without risk. We too often see children with 10-16+ cavities in 20-28 teeth. Considering fluoride can decrease dental caries by 25% these children need access to fluorinated water at minimum. Due to the lack of dental providers accepting Medicaid clients, limited Indian Health Service dental providers less than 20% of these identified children received needed or timely dental care. This issue has only grown over the past 3 years.

Fluoridation is one of the most cost-effective methods for preventing tooth decay. The Centers for Disease Control and Prevention (CDC) estimates that every dollar spent on water fluoridation saves approximately \$38 in dental treatment costs.

Fluoride varnish is applied to approximately 90% of the children we see in our public health office. This, however, leaves many children within our county NOT receiving fluoridation outside of drinking water and a toothbrush/toothpaste for many is a luxury. Our public health nurses provide fluoride varnish applications in our school-age students in the school setting two times during the school year upon consent of the parent or guardian. Obtaining consent from parents/guardians is a monumental task that

often involving a telephone call to the said parent /guardian of whom notoriously will reply they forgot to return the form and “yes, I give you my consent to apply the fluoride varnish and thank you.”

Water fluoridation provides oral health benefits to all individuals in a community, regardless of age, socioeconomic status, or access to dental care. This ensures that even the most vulnerable populations receive SOME protection against tooth decay.

According to ND Health and Human Services, 96.5% of North Dakota residents have access to fluorinated drinking water. Literature from The American Dental Association confirms that water fluoridation is an effective public health measure for preventing and sometimes reversing tooth decay in children, adolescents, and adults. Water fluoridation is considered one of the most studied public health measures of the past, present and future.

If fluorosis, due to excessive fluoride is your concern, then please consider working with the municipal water supplies that are potentially using excessive fluoride compounds. No one knows their community health needs better than the people who live in the community, please let water fluoridation be a local decision rather than a statewide prohibition effort.

As a public health official and advocate, I fail to understand why proven public health measures have become so controversial. If individual freedom of choice is of concern, regarding fluoridated water, then drink bottled water. Common sense and the desire for the greater good needs to prevail. Every decision we make personally and at the government level has intention and unintended consequences. I do not want the unintended consequence to be the further decline of the dental health of vulnerable residents of my county and North Dakota. Effective public education and transparent communication about the benefits and safety of fluoridation are essential in addressing individual concerns.

In conclusion, the fluoridation of public water supplies in the USA has played a crucial role in improving dental health and reducing the prevalence of dental caries. The levels of fluoride used in water fluoridation are deemed safe by reputable health organizations. The benefits of fluoridated water, including its cost-effectiveness and equitable distribution of health benefits, make it a valuable public health measure.

In 2011 Calgary Alberta, chose to remove fluoride from their city water supply, now 13 years later they are reversing that decision. The unintended consequence of Calgary removing fluoride from their drinking water was increased decalcification of teeth at the gum line, increased children needing general anesthesia for treatment of dental caries doubled, increased hospitalization surrounding infections, stemming from decay, and requiring IV antibiotics for treatment increased by 700%. Children being affected the most. Dental decay can have lifelong consequences and cost. Prevention is simple and cost effective.

Please keep in mind that every resident of North Dakota does not have a dental home and cannot afford dental care. Every day in my community we see residents who do not know where they will sleep tonight let alone worrying if they have a toothbrush and toothpaste...drinking water may be their only source of fluoride.

Thank you for the opportunity to provide testimony on the health value of fluoridated water supply in North Dakota. I will stand for questions.

Sincerely,

Barbara Frydenlund, RN
Rolette County Public Health District
Administrator