

February 25, 2025

The Honorable Spencer Cox
Governor, State of Utah
350 N. State Street, Suite 200
P.O. Box 142220
Salt Lake City, UT 84114-2220

Dear Governor Cox,

On behalf of the 159,000 members of the American Dental Association, we urge you to veto House Bill 81 that would cease community water fluoridation in Utah. Utah would be the only state to end this preventive health practice that has been in place for over three quarters of a century. House Bill 81 would adopt public policy that is in complete opposition to the mission of the ADA which, along with many other health organizations, endeavors to promote disease prevention in the most effective, efficient and equitable ways.

The [Utah Department of Health and Human Services](#) reports that the state was only 2% fluoridated prior to voter approval of fluoridation in two of the state's three largest counties (Salt Lake and Davis 1.5M residents) around 2000. While pockets of the state remain without community water fluoridation, voters in these counties, representing nearly half of the population, moved the rate to 52% thanks to citizen support for the public health benefit. Another look by the [department](#) shows that most of the non-fluoridated counties experienced an increase in dental disease where Salt Lake showed a drop in disease to nearly the lowest level in the state after fluoride was added per the voters' request. The overall state reduction was led by the counties choosing to fluoridate.

Even with the many preventive health advancements in the 20th century, community water fluoridation is held out among them as one of the best. Water fluoridation is listed as one of ten great public health achievements of the last century by the US Centers for Disease Control and Prevention, in line with vehicle safety measures, healthier mothers and babies and reduced deaths from coronary heart disease. We urge you to preserve this achievement. The state's continued oral health, the lack thereof has been linked to several other chronic diseases, including cardiovascular disease, low birthweight and diabetes, depends on you.

The Utah measure proposes to take the unprecedented step of ending one of the most trusted and tested public health strategies in the arsenal of preventive medicine. In one of the few cities where fluoridation was stopped, dental disease increased to a point where the decision to return fluoridation was sought and approved. Winsor, Canada voted fluoridation out in 2013. A 2018 report of the [Windsor-Essex County Health Unit](#) showed the percentage of children with "decay and/or requiring urgent care" in 2016/2017 increased by 51 per cent compared to 2011/2012. Winsor voted it back in in 2018. The trend toward greater dental disease also presented in [Calgary](#) where fluoride was stopped. The magnitude of increased decayed teeth was greater in Calgary (F-cessation) than in Edmonton (F-continued) after cessation in 2011.

Most significant was the experience in Juneau, Alaska where misinformation resulted in a fluoride cessation in 2007. Juneau's location made for a unique situation to witness the actual impact of

ending fluoridation since they are situated where no other fluoridated water sources could provide some protection. Results show significant negative impact that cannot be ignored:

- Dental caries-related procedures and treatment costs for children from low-income families increased.¹
- The mean caries-related treatment costs per patient were also significantly higher for all age groups, ranging from a 28 to 111% increase among the suboptimal CWF cohorts after adjusting for inflation.²

A similar bill in New Hampshire, which was voted down in committee, came with a [predicted cost increase](#) for the state between \$1,000,000 to \$3,000,000 if community water fluoridation ended in the same fashion as proposed in Utah. The budgetary impact included the cost of treating increased dental disease along with shifting costs to prescribing supplements, an inefficient method of preventive care.

According to CDC estimates, providing optimally fluoridated water to US communities for one year save \$6.5 billion in dental treatment costs and offers a return on investment of \$20 for every \$1 spent on water fluoridation. On average, communities with water fluoridation experience 25% fewer cavities, saving \$32 per person annually by avoiding dental treatment costs and leading to fewer missed work and school days. Please consider the [Fast Facts](#) with scientific citations to see how fluoridation prevents painful and potentially deadly oral health maladies.

The evidence of reduced disease and cost implications provide a compelling reason to strongly consider the ramifications of ending community water fluoridation. With the weight of the evidence and nearly universal support of community water fluoridation in all corners of the health care sector, we urge your veto of HB 81.

Sincerely,



Brett Kessler, DDS
President, American Dental Association



Elizabeth A. Shapiro, DDS, JD
Interim Executive Director, American Dental Association

cc: Dr. Val Radmall, executive director, Utah Dental Association
Dr. Jeffrey Kahl, ADA Fourteenth District Trustee

¹ [The Impact of Water Fluoridation on Medicaid-Eligible Children and Adolescents in Alaska](#)

² [Consequences of community water fluoridation cessation for Medicaid-eligible children and adolescents in Juneau, Alaska](#)