

2022 Fluoride Action Network Update

A Special Interview With Paul Connett, Ph.D.,

By Dr. Joseph Mercola

Dr. Joseph Mercola:

Welcome everyone. Dr. Mercola helping you take control of your health, and today we're joined by Dr. Paul Connett who many of you may be familiar with because he's been on this podcast many times previously for his work with the Fluoride Action Network, otherwise known as FAN. He is the founder of that network and I'm not sure exactly what his position is because he had retired and he's back. I think he's back now, but we'll find out.

Paul Connett:

As far as my position is concerned, I'm emphasizing, now, science. Really, my contribution is on the scientific front communicating the science for interviews like this and some writing.

Dr. Joseph Mercola:

Oh good, because I think your son, isn't it, Michael, has taken over the administration [crosstalk 00:00:49]?

Paul Connett:

He did for a while, but now the current director is Stuart Cooper, our former campaign manager. I think you've communicated with Stuart several times. He's now the director.

Dr. Joseph Mercola:

Okay, great. Well, as the scientific adviser and consultant for the organization of the one that you've found, I think you're the perfect person to dialogue with the updates that's happened, because yes folks, it's time again for our annual update on Fluoride Action, what's happened in the last year. And the reason we're doing this is we have identified, I believe it's four primary groups that we support with these types of campaigns, because early on, over a decade now, I remember that meeting very clearly, it was at – not Let Us Entertain You, I remember the restaurant but I can't remember the name. I remember the settings of the restaurant and the room that we were in, and you were there, and I think it was 2011 and Ronnie Cummins and Barbara Loe Fisher, myself, Charlie Brown, and we discussed doing something going forward with respect to just not educating people but really facilitating the removal of the barriers and the blocks to what was impairing their health.

Dr. Joseph Mercola:

And certainly fluoride, we perceived, is one of the major areas. So we've made some progress in the last 10 years. This is almost like a 10-year update, although we certainly didn't update last year. But I guess it would be interesting because it's over 10 years now and we can reflect back on what we've achieved in a decade of this going forward and then certainly get the update what's happened in the last year. So why don't we start there unless you want to interject some other comments before we start?

Paul Connett:

No. I think looking back would be very useful. I feel the current situation is a bit like that play, "Waiting for Godot." For many of us, the science was resolved in 2017. If you remember, in 2017 that was the first of the NIEHS, the National Institute of Environmental Health Science, funded studies. U.S. government agency-funded studies, which confirmed many of these Chinese studies, which have been taking place from the 1980s, late 1980s, which showed an association to an exposure to fluoride and lowered IQ in children. And in 2017, it's to say we've got this first study, the Bashash Study, the element cohort in Mexico City.

And it was a very, very striking study. It was a very, very good study. You'd had to be to get NIEHS funding. But it was based upon individual measurements of exposure and individual measurements of outcome. And the exposure was measured in pregnant women. Pregnant women, they measured the fluoride levels in their urine, which is a very good measure because it gives you a measure of total exposure of fluoride whether it comes from toothpaste, water, food, or-

Dr. Joseph Mercola:

But isn't that only the previous day or 24 hours? It's not a long-term exposure.

Paul Connett:

They measured the fluoride in the urine three times in each trimester.

Dr. Joseph Mercola:

Okay.

Paul Connett:

Yeah. And they found a strong association between the pregnant woman's exposure to fluoride and lowered IQ in children. And they'd taken care of dozens of confounding variables. So all the-

Dr. Joseph Mercola:

How many points did they observe in that reduction?

Paul Connett:

It was 4 to 5 IQ points for 1 milligram increase, 1 milligram per liter increase in fluoride. In fact, the range for that 4 to 5 IQ point-lowering was the same range that you get for pregnant women in the United States in terms of fluoride levels. So that was, if you like, the most striking thing. A was-

Dr. Joseph Mercola:

What was the average fluoride level? You gave the rate as per milligram, but how many milligrams of an increase were there in the average woman?

Paul Connett:

For the range, it was about 1 milligram per liter range, the full range for the women. And so the average level in their urine was 0.87 parts per milligram.

Dr. Joseph Mercola:

Okay, so close to 1 milligram, so it's 4- to 5-point reduction. The reason I say that is because there's evidence now from the pandemic and to social isolation that was done on the children that you won't believe, I don't know if you've seen this data, but they reduced IQ by 20 points, 20 points.

Paul Connett:

20 IQ points?

Dr. Joseph Mercola:

20 IQ points.

Paul Connett:

For what now?

Dr. Joseph Mercola:

For the social isolation as a result of the lockdowns and everything that were implemented for COVID-19 restrictions.

Paul Connett:

Yeah, that's amazing.

Dr. Joseph Mercola:

Yeah, you compound that with fluoride, it's not good. You're looking at 25 points. I mean, you're going from genius to normal or from normal to essentially an imbecile. It's crazy.

Paul Connett:

It is crazy. There's so many things which are crazy today it's difficult to relate to the world. But very, very striking indeed, and in fact, Chris Neurath, who I think you know, is our science director. He estimates now that more IQ points are being lost in America to our children than caused by any other factor. Any other factor at all, including premature birth, including exposure to lead, so fluoride today is causing more loss of IQ points than lead.

Dr. Joseph Mercola:

Well, that may be true for environmental toxins, but it's not true for socially imposed mandates, because as I just referenced it was like five times the reduction just from the social isolation and the masking has reduced it, because you need to see, visually, the interactions with adults, especially in the formative years, under 5 years old. And if you put a mask on everyone, including the kids, look out. It's a disaster.

Paul Connett:

Yeah. Yeah. Wow, wow. So that was, as I said, in 2017. I thought it was over when I saw this government-funded study, all of variables controlled, high-quality study. I thought it was over. And the shock was of course this is exposure to the fetus. We had been focusing on exposure to children and then we get this very early exposure to fluoride that there's no protection.

It crosses the placental membrane, fluoride, and the blood-brain barrier is not fully developed until about 6 months of life. So, no protection. And, so it was thinking terms of fluoridation being a case of putting fluoride into the drinking water, but what we should be thinking of, you're putting fluoride into the amniotic fluid of the fetus from day one, from day one this tiny little pre-human being is exposed to fluoride.

Paul Connett:

And then within a few years, we get another study from Canada this time. From Canada, which shows that the difference between bottle feeding in a fluoridated community in Canada and a non-fluoridated community. That's the only difference, two groups of children, one group of children was when they were babies, was given formula made up with fluoridated water and the other group of babies with non-fluoridated water. And there was a 9 IQ point difference for that. So again, "Waiting for Godot," the science is there, but what we've been doing now for 70-odd years is trying to push the politics back, trying to get people that adopted fluoridation in 1950, that was when it was endorsed by the Public Health Service, to admit that they were wrong, to admit it was a stupid thing to do.

Paul Connett:

I mean, I think it was a stupid thing to do even without the science, but now with the science it's so unconscionable. I think one of the shocks I've had, Joe, over the last few years, since 2017, there really are people out there that I did not think existed, and that is human beings who really believe a small benefit to teeth, if it exists, actually warrants this risk to the brain, that you would take that risk, that you would take that gamble.

You would say, "Reducing tooth decay is more important than protecting children's brains." There are people out there that believe that and unfortunately it includes the U.S. Surgeon General. It includes the most powerful people in public health in England, in Canada, in Australia, in New Zealand and the United States and Ireland, of course, which has mandatory fluoridation. They think that protecting children's teeth is more important than protecting their brains.

Dr. Joseph Mercola:

That type of false narrative and lack of critical thinking skills certainly led the way for what we've seen in the last two years with these COVID jabs, which clearly show if you look at the data carefully and objectively, that for every person who is potentially saved from COVID as a result of the jab, for every one of those people, there's probably a hundred people who are killed by the jab. A hundred to one. So they're willing to sacrifice one for a hundred, and it's even worse when you go down to the younger age groups.

Paul Connett:

Yeah.

Dr. Joseph Mercola:

So it's just this distortion of ethics and conflict of interest that have just permeated the entire medical culture. And this is one of the early components and it's the same thing for vaccinations of course. It was always there, but because it impacted so few the perception wasn't as obvious. And I think the influence on fluoride that they've had, as you said, for the last 80 years now, no 70 years, I'm sorry, it is becoming even more evidence with the even more outrageous actions they've implemented in this last two years.

Paul Connett:

When people ask me why do they fluoridate the water, why do they do this? Why do they take these risks in order to reduce tooth decay? Why, why, why? And I've had to say, "Well, you are asking me to come up with a rational explanation for irrational behavior." It's just not rational. It's not rational. If you want to protect your teeth and you want to use fluoride to do it, you simply brush it on your teeth with a toothbrush and that's universally available and it's cheap.

Dr. Joseph Mercola:

That's still speculative though, isn't it? I mean, is that proven or what's the current status of the science on that? Does that actually decrease the risk of cavities?

Paul Connett:

Well, certainly the evidence for lowering tooth decay with topical application is far superior. I mean, there are 70 RCTs for fluoridated toothpaste. There are no-

Dr. Joseph Mercola:

And RCT is a randomized controlled trial for those who don't know.

Paul Connett:

There are no randomized control trials for swallowing fluoride. So the evidence that swallowing fluoride lowers tooth decay is very, very weak, but much stronger for topical applications, which of course is what most countries in the world do. So there's really no rational explanation, there's no scientific explanation for this practice. And the only thing I could come up with other than obviously there's a lot of money that goes into dental research, millions upon millions, which ends up in ordinarily – all the major universities in the United States are benefiting from government money subsidizing dental research.

And if you say that fluoridation is the best thing since sliced bread, this money keeps rolling in. Obviously, there's a lot of money going into the phosphate fertilizer industry where the fluoridated chemicals come from instead of treating this as hazardous waste it's put in our drinking water. So that's another rational explanation, if you like, as to why it's happening.

Paul Connett:

But the most likely, from my point of view, is bureaucratic inertia. This became public policy in 1950 and the people in charge of this policy were not prepared to admit that they were wrong for fear of losing their prestige, their credibility, that if they admitted that fluoridation was a mistake, then the public wouldn't trust them on other public health practices. And when you look at those other public health practices, the one with the big money label on it, of course, is vaccination.

So, for some time I've felt, and this is only a hypothesis, that really what we were looking at was the defense of vaccination by proxy, that it wasn't worth all that energy and money and angst for the American government to keep pushing fluoridation except for the fact that they did not want to lose vaccination. And of course-

Dr. Joseph Mercola:

That's interesting because when you first joined us 10 years ago, you were a bit reluctant because of our position on vaccinations. I think you were more of a pro-vax person. Am I correct in my memory?

Paul Connett:

Yeah, that is true. The one thing, the one area that I was concerned about with vaccination and had no hesitation of talking about, is the same one that Robert Kennedy Jr talked about. And that was the use of thimerosal, organic mercury as a preservative in vaccines being given to children. And the preposterous situation where, I think it was in the early 2000's when they worked out, or somebody at the CDC worked out, that a child was getting a hundred times more organic mercury from vaccines, all the vaccines added up, than was considered safe to eat by the EPA (Environmental Protection Agency). The EPA was concerned about organic mercury in fish. And so they had advisories on how much fish a pregnant woman should eat to protect her fetus from organic mercury.

Paul Connett:

And at the same time, the Centers of Disease Control (and Prevention) was quite happy to see babies being injected with a huge amount of organic mercury. And I think it's absolutely absurd. I mean, unconscionable. Robert Kennedy wrote an extremely important book on that. And our trajectories were the same.

I mean, our concern about organic mercury in those days was environmental, mine from incineration, one of the big sources of mercury going into lakes and ponds and then forming methyl mercury in the sediments and then getting into fish and then getting into human beings. That was his same trajectory. I think he even had lawsuits as an environmental lawyer.

Dr. Joseph Mercola:

The burning of coal is what you're referring to for creation of energy, electricity. It was the primary culprit there.

Paul Connett:

In some states, Florida being one, more mercury was going into the environment from trash-burning than from coal-burning. But overall in the country, more organic mercury, or mercury

coming from coal burning, than other sources, but in some states with a lot of incinerators, like Florida, then it took over it.

Dr. Joseph Mercola:

I think that may be related to the fact that we have nuclear power plants as opposed to coal-burning power plants in this state mostly.

Paul Connett:

Ah, maybe. You're saying that some states had not only less coal-burning, but they also had – I guess because they had less nuclear, but they also had more-

Dr. Joseph Mercola:

They had to get it from somewhere.

Paul Connett:

So trash-burning was considered a major source of organic mercury.

Dr. Joseph Mercola:

Interesting. So I want to backtrack a little bit to one of your earlier statements when you said that there were 70 studies supporting the use of topical fluoride for the reduction of tooth decay. So that could be implied as an endorsement for someone brushing their teeth with fluoride toothpaste. And I'm sure you're not recommending that because the issue is, even though it may reduce the dental decay, almost everyone, almost everyone's going to swallow that toothpaste and get a toxic dose of fluoride. So why don't you expand on that just to not confuse people on the endorsement?

Paul Connett:

I haven't used fluoridated toothpaste since 1996 from the moment I started seeing the toxic effects, long-term toxic effects of fluoride. I mean, we focus now on the brain because we think that's the most important and it's certainly the most important for children. But for adults, I think it's what fluoride does to your bones and your thyroid gland and other things. So, when I started reading that literature in 1996, it was the fluoride's impact on the bones which was extremely striking and I decided that I didn't want to have any more fluoride going into my body, thank you very much, and stopped using fluoridated toothpaste. So that's over 30 years now of not using fluoridated toothpaste. No, no, not quite.

Dr. Joseph Mercola:

26 years actually.

Paul Connett:

26, there we go.

Dr. Joseph Mercola:

The reason I know is that we started our website in '97 and we're celebrating our 25th anniversary this year.

Paul Connett:

Yeah, okay. Yes. And of course the trouble with the fluoridated toothpaste is for young children who don't have a good reflex about swallowing. So as soon as you start using toothpaste if you're very young, you're going to swallow it and that's not good, especially that the evidence now is even stronger. So the studies are certainly a big threat to the use of fluoridated toothpaste with children and for pregnant women.

Now that we know that there's no protection, any fluoride that the pregnant woman takes in is going to go to her fetus, going to go to the fetus, so she should stop using fluoridated toothpaste when she's pregnant and possibly before. And certainly not be drinking fluoridated water. But those warnings are not going out. And we begged the Centers of Disease Control (and Prevention) with saying, "Look, look, we know it's going to take you time to stop your support of this policy, but at least warn pregnant women to avoid fluoridated water and to tell parents who bottle-feed their infants not to use fluoridated water."

Paul Connett:

They won't do it. Won't do it. We wrote several letters to the head of the CDC, and then Dr. Hacker who's head of one of the divisions there, we asked them to listen to experts. We got experts of some of these IQ studies, Philippe Grandjean, Ph.D., Dr. Bruce Lanphear. Christine Till, Ph.D., gave a 30-minute presentation to Dr. Andrew Hacker at the CDC. This was all private, no one was watching except us, for 30 minutes and they had no questions, no questions whatsoever.

And here we're talking about the notion that the substance that they encourage children all over the United States, and parents all over the United States to give their kids, and put in the drinking water, encourage communities all over the United States to put this stuff in the drinking water, and they listen to people telling them, the high-quality science funded by the NIEHS, and no questions and they continue to promote fluoridation as the best thing since sliced bread.

Paul Connett:

In fact, they're planning right now to increase the number of people potentially getting fluoridated water by 19 million because they've developed a tablet system, like the tablets you put into urinals, big tablets, like sodium fluoride, and these are injected with a sort of plastic tubes. It's a very cheap delivery system which is suitable for small communities.

So, 19 million people have been living in rural areas, who've been protected here too because it was too darn expensive to put in all the usual equipment, now have the "wonderful" benefits of these fluoride tablets. And this is going on, this promotion of this new delivery system is going on all the time that the science is coming out that this is lowering the IQ of children and increasing symptoms of ADHD (attention deficit hyperactivity disorder). And the study, the study from-

Dr. Joseph Mercola:

I just wanted to mention that the recommendation to, or the lack of a recommendation to not use fluoridated water and infant formulas is fortunately somewhat attenuated now because of this massive shortage of infant formula that has been engineered and rigged by the government to shut down one of the major suppliers of this. And my understanding is that 75% of the infant formula is not available now, forcing mothers into choosing other alternatives, hopefully much healthier than infant formula reconstituted with fluoridated water.

Paul Connett:

Yeah. Well, we hope so.

Dr. Joseph Mercola:

Yeah. So you had filed a lawsuit, I think, when we talked last year, against the EPA. Wasn't that the case?

Paul Connett:

Yes, against the EPA. It started off as a petition in 2016. This is before these major studies came out. This was based upon the wealth of material, particularly from China, which we're finding these studies weren't as strong as the U.S.-funded studies, and they were in communities with high natural levels of fluoride, and they may not that high, very close to the concentrations we use in some instances. But based upon that evidence, we petitioned the EPA under TSCA, under the Toxic Substances Control Act, to stop the deliberate addition of fluoride to the drinking water. It's moots on naturally occurring fluoride.

We just said, "EPA has the requirement under TSCA to ban a specific use of a chemical substance if it's shown to pose an unreasonable risk to the health of the American people," including vulnerable subsets. And here we have a policy, which we now know at the levels at which we fluoridate, has a lowering of IQ.

Paul Connett:

In fact, Dr. Philippe Grandjean did a risk assessment using the Canadian study and the Mexico City study, the Bashash and the Green studies, and estimates that the benchmark is 1 IQ point. So what level of fluoride in mother's urine, which is approximately the same level as in the water, if you're in a fluoridated community, what level of fluoride in mother's urine lowers IQ by 1 IQ point of a child, of the offspring? 0.2 parts per million, and now the average in the United States is about 0.8 in a fluoridated community. It's 0.8, 0.9.

Dr. Joseph Mercola:

It's lower. It used to be higher, right? They just lowered it a few years ago.

Paul Connett:

Yeah, yeah. 0.7 is the recommended level to put in the water. I'm talking about the level in mother's urine, which is approximately the same level. But in Canada, they measured it as 0.91. So if it's 0.2 it lowers it by 1 IQ point, this relationship is linear, so 0.8 would lower the IQ by 4 IQ points. 0.9 would be 4.5 IQ points.

Dr. Joseph Mercola:

Sure, sure. So you took a tangent there, I'm wondering if you could update us on the results of the lawsuit with the EPA because it's been a year since we got the last update.

Paul Connett:

Yeah. This is the "Waiting for Godot." The "Waiting for Godot," because the lawsuit occurred over two weeks during COVID, June 2020. We had the leading experts in the world testify on our behalf, and the EPA, believe it or not, used experts from Exponent, a consulting company called Exponent that does the dirty work for Dow, DuPont and all the other dreadful chemical companies, does all their dirty work. They've defended dioxins, PCBs, Monsanto's what's it – what's that stuff they-

Dr. Joseph Mercola:

Roundup, glyphosate.

Paul Connett:

Yeah, Roundup. They defended all those. So they tried to show in court that none of those things are harmful. It's all in our imagination. And they tried to do the same with fluoride but the judge at the end was clearly impressed with the evidence and said – he didn't make his ruling in June of 2020. He did interrupt the lawyer from the EPA who was giving her testimony when she was trying to argue that we didn't even meet the first criteria, which is to show that fluoride is a hazard. You have to show it's a hazard.

Then you have to show it's a hazard at the current exposure levels. Then you have to show it's an unreasonable risk. So hazard, risk and unreasonable risk, those were the three hurdles that we had to cross and the EPA was trying to argue that we haven't even shown that fluoride was a hazard, that at any level it would lower IQ. And he interrupted and said, "Surely, no, no, no. I think we can clearly," I can't remember his exact words but the gist of what he said was it is clear that it's a hazard.

Paul Connett:

And the other striking thing in the trial is that these consultants, these industry friendly consultants, Exponent Inc., admitted that the studies that we were citing and the experts who we were using were the best studies, the best studies conducted to date. And so he said, "I want to see two things." Well, actually he said, "I want to see three things. I want to see this BMD analysis published." That was by Philippe Grandjean it's since been published, the result I mentioned, 0.2 parts per million, loss of 1 IQ point. "I want to see the NTP final report, the National Toxicology Program, final report. And I want to see if there's any other studies which have taken place, which contradict what we've heard."

Paul Connett:

Well, he's got the BMD analysis from Grandjean, but we are still waiting, "Waiting for Godot," for the National Toxicology Program to finalize. And this is, if you like, this is the final act of politics versus science in the whole fluoridation fiasco. For 70 years they really haven't had decent science demonstrating benefits and certainly not decent science showing it was safe.

They've avoided the studies showing harm. Finally, we've got those studies. This is the final act, but clearly something is delaying that NTP report and we think it's the dark forces behind fluoridation, the dental lobby and the other people with perhaps economic interest who cannot bear to see this practice go. For them, protecting this policy is more important than protecting the health of our people, and that's a scary thing. I think we've seen it in other areas of public health. Policy is king.

Paul Connett:

And when policy is king, science is a slave, and that's what we're seeing. Superb science, the best science that we've ever seen, that I've ever seen in 26 years, better science than there is saying it protects teeth and better science even than when they were banning lead from gasoline and paint. The evidence that lead was neurotoxic is not as strong as the evidence that we have today that fluoride, drinking fluoridated water lowers IQ, impacts the brain. But despite that, the politics is clinging on, clinging on. And again, it's still not certain what is driving that politics.

Dr. Joseph Mercola:

I'm not sure if it's fair to describe it as politics. I think more accurate might be a captured federal agency, which clearly the NTP is. And it's a common strategy that industry uses. And so many of these federal agencies are just completely captured.

Paul Connett:

There, I agree with you.

Dr. Joseph Mercola:

The CDC, the EPA and now the NTP, and they're using this NTP, federal agencies have been captured by the industry to put a roadblock in your lawsuit and prevent them. Is there any limit to the time that the NTP has to respond or is it just they can respond in 50 years like Pfizer tried to get away with?

Paul Connett:

Well, the NTP does not have any obligation to respond to the judge. The judge wants to see this. I mean, after all, they spent five years looking at the science. My own view is the scientists have done a damn good job with their NTP review. And the results in the end of science in the NTP review is very strong. But the pro fluoridation people are putting pressure on them. It's a small agency, but if they prevail, if politics does prevail here, and either this report is watered down to lose the science – I mean, the science is there. They can't take the science away.

But so far they've been able to get the NTP to say, "We're not going to draw any conclusions." Even that will work for us in our lawsuit. If they have a report which fairly summarizes the science, gives an indication of the quality of each study that they're looking at, we can still give that to the judge and I think persuade him that we are right, that this practice poses an unreasonable risk to the developing brain of millions and millions of children in the United States.

Paul Connett:

But how strong are those pressures? I mean, you've got to remember these pressures have kept this bloody practice going for over 70 years in the United States. And they've come through thick and thin. They've come through concerns about cancer, which were raised in the 1970s, animal studies which shows that fluoride increased the risk of osteosarcoma in rats, and in some human studies, bone studies.

I wanted to stress in 2021 we had an excellent study from Sweden. Excellent study. A very well-designed study, which showed that at 1 part per million, there is an increase in hip fractures in Sweden. Now Sweden is not fluoridated, but they have ranges of natural fluoride, which goes from 0 to 1 part per million in Sweden, and based upon that they found an increased risk of hip fracture in post-menopausal women which is what the majority of the studies were looking like when I reviewed them during the York review back in 2000.

Dr. Joseph Mercola:

Is it because of the increased levels of fluoride?

Paul Connett:

Yes, exactly, yeah. I mean, fluoride accumulates in the bone. So we've known since the 1950s that the first symptoms of skeletal fluorosis, that's literally poisoning of the bone by fluoride, are symptoms just like arthritis. Pains in the joints, stiffness in the joints. And so we believe that fluoride, the first thing it does is attack the connective tissue in the developing bone, the collagen and stuff.

But as the fluoride continues to accumulate in the bone, it makes the bones harder, harder, but more brittle. And the concern of course, is the bone in the hip, that joint, the femoral head, that bone it's like a ball with a thin section and then the thigh bone, I don't know, the femur is it, whatever.

Dr. Joseph Mercola:

It's the femur, it's the greater trochanter you're referring to.

Paul Connett:

Yeah, that bone is very, very vulnerable and fluoride makes [crosstalk 00:36:25] it more vulnerable. So this is all very rational.

Dr. Joseph Mercola:

So the NTP has been captured and they're preventing this lawsuit from going forward to stop or at least put a hold or reduce the amount of fluoride that's being introduced. But the evidence is pretty strong, but there's even stronger evidence for a greater crime, which is administering the COVID jab to kids, certainly 5 to 11, but kids under 5, which is virtually zero, zero risk of dying from COVID, zero risk.

And yet, they're introducing, forcing, mandating these vaccines in some cases, that's their goal, on kids under 5. They're sacrificing human lives for profit and with absolutely no scientific support and using the excuse of an emergency use authorization, which should have been

stopped a year ago because there is no emergency. But that they're using that as a pretense to get away with murder. We live in crazy times.

Paul Connett:

We do, yes.

Dr. Joseph Mercola:

This fluoride, putting a halt on this is clearly not good, but there's exponentially more science to stop them and prevent them from murdering children and nothing is being done.

Paul Connett:

Well I read Robert Kennedy Jr's book on Dr. Fauci and-

Dr. Joseph Mercola:

Is it "The Real Anthony Fauci" or "The Truth About Anthony Fauci," something like that.

Paul Connett:

Yeah, yeah, and absolutely fascinating. The thing that I found so striking was the discussion of AIDS (acquired immune deficiency syndrome) and the use – and I remembered back to those days when these treatments, when AIDS occurred and the treatments, and what was the-

Dr. Joseph Mercola:

AZT, AZT.

Paul Connett:

AZT. Now at that time I was a biochemist, as you probably know, that was my main field, and I was into DNA and all that stuff. And what I knew about AZT just blew my mind. I mean, the whole way that AZT is based on is it prevents DNA from replicating because it pretends to be one of the bases. And if it's incorporated into a growing DNA chain, it stops right there. And this is the way they sequence DNA, incredibly.

One guy got two Nobel prizes in biochemistry. His name was Frederick Sanger. He got a Nobel Prize for the first person to sequence a protein and he got a second Nobel Prize for developing this method of sequencing DNA. And he used this AZT, or four of them, and so by ending the DNA chain each time you – well, I won't go into the details. I'm sure no one-

Dr. Joseph Mercola:

But end result was Dr. Fauci manipulated everything. He got AZT recommended and approved and he killed over 330,000 people because he convinced them that AZT was the best thing since sliced bread.

Paul Connett:

Yeah, and I remember-

Dr. Joseph Mercola:

HIV never caused the problem. It was just like a catalyst. It's saying like sunlight causes skin cancer. It doesn't, you have to have preexisting dispositions to get skin cancer like a lot of linoleic acid. If you don't have linoleic acid, you can have the sun exposure and you're not going to get skin cancer. So it was the other things that they were doing, like increasing nitric oxide through these poppers that they were using when they're going to these gay parties, so that's what was killing them from AIDS. It wasn't HIV.

Paul Connett:

I know, but I was fascinated by this controversy at the time. But when I saw the use of this... I said, "Don't do that. You don't give AZT to a kid and prevent the DNA from replicating. It's terrible." And so the thesis I think you are referring to now, is the notion that more people died from AZT than were dying from AIDS.

Dr. Joseph Mercola:

Absolutely. Just like more people are dying from the jab than dying from COVID. No question. It's unequivocal, indisputable facts. So a sad world we're living in, and we've both been around for a long time, well before this COVID mess, but-

Paul Connett:

If anybody told me that I would be alive and see a major power shelling civilian populations, today in 2022, that we would still have people being allowed, kids allowed to get automatic guns and go into supermarkets and kill, or schools, 20 people at a time, that we would have a government which would tolerate adding fluoride to the drinking water even when they were given evidence and their own agencies were producing evidence it lowered IQ. I mean, what is there to hang onto? I mean, the trouble is there's no shock value. People just-

Dr. Joseph Mercola:

Yeah well, it's not the guns, it's the psychopathology that's been induced from all this propaganda and brainwashing and the depression and all the mental trauma that's been induced on vulnerable populations. So it's hard to blame the people or the kids who are doing these shootings because of what they've gone through. So it has almost nothing to do with the guns, maybe the availability in someone under 21, but it's-

Paul Connett:

Why isn't this happening in other countries?

Dr. Joseph Mercola:

Well, because we've got a very effective propaganda system in the United States, it's actually worldwide, but they've really been very clever. I mean, the number of deaths from mental disturbances has radically increased and this is due to the psychopathology from the introduction of all the lockdowns and the masks and the mandates. So it's a big, big, big challenge, no question.

Paul Connett:

Well, I don't think it's an easy world to live in these days.

Dr. Joseph Mercola:

No, but we do have some hope. Those of us who been around for a while and we know the truth, and fortunately about 10% of the population has not been hypnotized into mass formation, what Mattias Desmet refers to. And we can be a light to others for the people who are still in a quasi-hypnotized state to help them come out of this. So I think that's the calling, because it's pretty desperate times and it's obvious.

I mean, they were bad before COVID, as you are one of the pioneers in helping people understand what they were doing and trying to get away with the industries capturing these federal regulatory agencies and the damage that they can do. But it's just gotten blown up exponentially since then.

Paul Connett:

Yeah. Well, I'd like to return to that for a second because the NIEHS has been an agency that I've really had some hope for. It is not a regulatory agency. It does the science for other regulatory agencies including the NTP, the National Toxicology Program, which is part of NIEHS. It does these studies for other federal agencies and they're not supposed to be dealing with policy, but they've done very, very good science and they did very, very good science on this fluoride issue.

And it will be tragic, tragic now, with having done this science, they are pressured to dilute the whole darn thing. Since from 2009 to 2019, the NIEHS was led by Dr. Linda Birnbaum, who I got to know during dioxin days when I was fighting incinerators. I went to these international symposia on dioxin in different countries.

Paul Connett:

I met her several times and she led the EPA's review of dioxin and did a darn good job with that and had to withstand enormous industrial pressure. In fact, I remember hearing her give a talk on this review of dioxin's toxicology and saying in effect, "It's worse than we thought." We were concerned with cancer, but now we see it's an endocrine disrupting chemical. It was the prototype of the endocrine disruptors.

She articulated this in front of one of these international symposia. And afterwards she was grilled by the industry. The industry was asking her questions and she was responding brilliantly. She says, "Well, according to this study, this study, this study, this study, what you're saying is wrong." And afterwards I went up to her and I said, "Linda, I am so glad you are who you are and you're doing what you're doing," intimating that I thought she had enormous courage. And she said, "Look at my back." She literally took her hand and went to her back and said, "Look at my back." Meaning-

Dr. Joseph Mercola:

She pulled out some arrows, right?

Paul Connett:

Yeah, yeah, exactly, exactly. So when I knew that she was head of NIEHS, I was very hopeful that she would look at this science. And in fact, the in-house journal of the NIEHS is called Environmental Health Perspectives, I don't know if you know it, it's a very good journal, one of the best in environmental health.

And they published several important studies on fluoride before 2000, including the Harvard review in 2012 by Choi, and Philippe Grandjean was involved in that, and they reviewed 27 of the Chinese IQ studies. And so, one of the things that she obviously did was to approve the funding of these US studies, the studies done in Mexico City and Canada by these top teams. And that's the very good news.

Paul Connett:

You said there is some good news, since we started 10 years ago or 20 years ago, the good news is that the top people in neurotoxicity are involved now in the research on fluoride. So whether we win now or in a few years from now, I don't think they can reverse this because the best brains in neurotoxicity know the story and more and more scientists are getting involved in research on fluoride on all the tissues, but particularly on the brain. And studies are coming out every week. I think there've been over 20 studies since 2017 on IQ.

Dr. Joseph Mercola:

So we've got a lot of new information, documentation that supports the toxicity of fluoride and supports a basis for excluding it from human population. So, I'm wondering if you can – we opened up, and perhaps giving a 10-year retrospective now as to what we've seen, not so much in the documentation of the studies but what we've been able to do to help people limit their exposure to fluoride in the U.S. and across the world.

Paul Connett:

Well, it's still paddling uphill if you don't get rid of fluoridation in your community. The biggest source of fluoride for most people is fluoridated water. And over 70% of the U.S. public drinking water supplies are drinking fluoridated water. So that's the top priority, to stop the stupid practice. That will be helped greatly when we win our lawsuit. When the NTP finally comes out and we win our lawsuit. I think that's going to happen, I still do.

That will give a boost and I think what we will be able to do, the EPA will drag its heels for years and years and years as far as implementation is concerned, but meanwhile, we should be able to stop it at the state level. There's still 12 states in the United States that are fluoridated and they can be stopped. They have mandatory fluoridation: Georgia, Illinois, Indiana, even California. We should be able to get this stopped at the state level if we get a positive ruling.

Dr. Joseph Mercola:

That would give jurisdiction back to the local municipality then and whether or not they want to continue with that.

Paul Connett:

Yeah, we want it back to the local jurisdiction, but I don't want – I'm too old to try to win this in all the thousands of communities. We want it stopped at the national level. That's what the lawsuit is about. But meanwhile, let's get it stopped at the state level and get literally hundreds of communities in one blow. We should be able to fight this out in state legislatures, I believe.

Dr. Joseph Mercola:

All right, so thank you for accurately summarizing the most significant exposure for everyone, which is their tap water, unfiltered tap water. So from your perspective as the head of this foundation, FAN, and a biochemist, can you just summarize the most pragmatic way if you live in, if you're one of the 70% in the United States that has fluoridated municipal tap water, what's the best way to remove it from your water?

Paul Connett:

I'll tell you what we do. What we do is we get our water from a local spring, a local spring. And you do have companies that deliver spring water to your household. If you can afford it, that is the best way. If you have it done by a company that does that, they will tell you how it's tested and you will be secure knowing that you're not drinking fluoride. I think that's the single best investment. Get fluoridated spring water-

Dr. Joseph Mercola:

Non-fluoridated.

Paul Connett:

Non-fluoridated, spring water without fluoride, use that for cooking, tea, coffee, etcetera, etcetera and drinking.

Dr. Joseph Mercola:

And then I'm assuming request documentation, objective, independent laboratory testing to confirm that it was fluoride-free.

Paul Connett:

Exactly. Then the other thing you can do is obviously avoid fluoridated toothpaste. Avoid mechanically deboned meat, patties, where they mince up the meat using a machine, because fluoride accumulates in animal bone, in bone. And so that's where you're going to get the fluoride.

Dr. Joseph Mercola:

That's an interesting one that I'm not familiar with. So can you dive a little further in how you would identify that in your producer?

Paul Connett:

Yeah. When you mechanically debone meat, you get little chips, little tiny particles of bone.

Dr. Joseph Mercola:

Sure.

Paul Connett:

That's going to contain a lot, those particles, those little chips are going to contain a lot of fluoride. So if you're going to eat meat, eat meat whole, whole food. I mean whole steaks and whole chickens and whatever, the whole thing, not minced up. So avoid the beef burgers and the chicken burgers and the pork.

Dr. Joseph Mercola:

And the ground meat, the ground meat.

Paul Connett:

The ground meat, avoid the ground meat.

Dr. Joseph Mercola:

Is it possible to ground meat without these mechanical deboners?

Paul Connett:

Well, I'm not an expert. I would think if you were going to do it, use the least vigorous machine that you can have. I remember in the old days when my mom would take the joint from Sunday and put it in one of these things turn a handle and it would make mincemeat. And it's hard to believe that such a primitive mechanical device would put many bone chips into it as opposed to some monstrous machine with blades and things which cuts through big chunks of meat or carcasses, really.

Dr. Joseph Mercola:

Yeah, yeah. That's good advice because I happen to eat a lot of ground meat and I'm clueless as to how they actually – if they use these types of devices, so I'm going to have to do some phone calls.

Paul Connett:

And the other thing is of course, fish. Tinned fish, pilchards, sardines, salmon, the bones in those tinned fish tend to be very soft. I remember sardines, when I had made a sardine sandwich when I was growing up, you'd spread it on toast. You'd spread it out and the bones would come with it and the bones are very soft so you'd eat the bones. And similarly with pilchards and-

Dr. Joseph Mercola:

Is there much fluoride in fish bones?

Paul Connett:

Oh yeah, oh yeah.

Dr. Joseph Mercola:

Really?

Paul Connett:

Well, sea fish. In the sea, it's 1.4 parts per million, so the fish-

Dr. Joseph Mercola:

Oh my gosh, it's the same as tap water. Is that natural fluoride or is that contaminations that-

Paul Connett:

Well no, it's natural fluoride, but for 20-odd years I've been trying to tell people the fluoride ion is the toxic thing. When we talk about the damage done in India and China, that's not being done by hexafluorosilicic acid, it's not being done by chemicals from industry, it's being done from lovely chemicals from nature.

So, there's nothing safe about natural fluoride. The only thing about natural fluoride in the U.S. context is when you get it, you usually get a lot of other minerals as well including magnesium and calcium, and they, in turn, to be protective against fluoride. So if you get 1 part per million of fluoride but you get a hundred parts per million of calcium or magnesium, that will help you to protect against that fluoride ion taking up.

Dr. Joseph Mercola:

So you mentioned this study earlier, done I think in 2016 or '17, that was really pivotal in providing the evidence and that was in pregnant women where they measured their urine three times in the pregnancy. So, I'm wondering if you could recommend for most people out there any commercial lab that they could measure their urine to see just how much fluoride they've got in it.

Paul Connett:

Oh, straightforward. It was cheap. It's cheap. I think you could probably get it done for 20 bucks. It would not be expensive. But if you wanted to do it for a court case, do make sure-

Dr. Joseph Mercola:

Oh no, no, just for the average person.

Paul Connett:

Yeah, no, I don't have any connections at all to any commercial-

Dr. Joseph Mercola:

How does one find a lab that would do that?

Paul Connett:

I would go online and just put in a lab that measures fluoride in water.

Dr. Joseph Mercola:

Okay.

Paul Connett:

I think you'll come up with a local lab. Any lab that does monitoring of water. I mean, in rural areas people are getting their water tested all the time for things like arsenic, lead and [crosstalk 00:55:57]. So those companies, those same companies would monitor for fluoride.

Dr. Joseph Mercola:

OK, good. That's good to know. So we've got a lot of good pearls here as to how we can protect ourselves because many people are drinking bottled water and have a really good filtration, because a really good filter is the other way to protect it. But most don't, especially for the carbon, you need a really large carbon filter, almost the size of a typical water tank, that big. And/or reverse osmosis would also get the fluoride ion out.

So, unless you're doing one of those, and you're doing one of those you're thinking that you're eliminating your exposure to fluoride but you might be eating ground meat or canned tuna, not tuna, hopefully not eating canned tuna because of the mercury, but canned sardines or mackerel and getting some exposure in that way. So it'd be really good to have an objective test to show you exactly where you're at.

Paul Connett:

Absolutely, absolutely. As you say, you've got to protect your own health. You've got to look after your own body.

Dr. Joseph Mercola:

So what's on the agenda for this year coming up the end of '22 and the next year in 2023?

Paul Connett:

It's still "Waiting for Godot." And the expectation is when the NTP report comes out, we were expecting it in March and then April, then May, and now we're into June, so we're still hoping that this report will come out in June. When it does, we will go back to the court. The judge will have the report in his hands. And then what we think is going to happen, he'll want to hear experts from both sides analyze this report. He will read it, but he will want experts from both sides to convince him that the NTP is saying what we think it says, that the best studies, the best studies that show that fluoride lowers IQ, most of them had been done at levels now either at 0.7 parts per million, where we fluoridate our water, or less than 1.5 parts per million.

Paul Connett:

The NTP, if we go back the NTP has had two draft reviews. And in those draft reviews, we found, according to Chris Neurath who's analyzed it, all 27 studies which they classified as high-quality, meaning low risk of bias, if you go to their report you'll see these tables and diagrams. They're colored from green to red and this is a scale. The green studies are low risk of bias. The red are high risk of bias.

If you look at those studies, and of those 27 of the high quality studies, of those 25, found a lowering of IQ and two did not. So 25 out of 27. Of those 25, 11 were done at less than 0.7 parts per million or equal to 0.7. That's the level at which we fluoridate. I think it was 4 or 5 at less than 1.5 and the rest, I think it was 9, over 1.5.

Paul Connett:

So the majority of the high-quality studies, as far as the NTP is concerned, their systematic review found a lowering of IQ at less than 1.5 parts per million. And 1.5 parts per million is what the EPA considers to be relevant as far as any study pertaining to water fluoridation. If you get an effect at 1.5, remember you've got to deal with things like margin of safety. If IQ is lowered at 1.5, there is no margin of safety to protect children drinking 0.7, because some could drink twice as much water as other children so they would be getting the equivalent of 1.5 in terms of dose.

Paul Connett:

And then you've got the range of vulnerability of those children. So less than 1.5 parts per million fluoridation would have to end if it lowered IQ. That's if you lived in a world which was rational and in which science had a chance of actually functioning in the regulatory bodies. But as you've said, most of them are captured by industry. The CDC captured by the drug industry, the EPA captured by the pesticide industry, the chemical industry, the FDA until recently, the mercury people.

Dr. Joseph Mercola:

The drug industry too. The drug industry actually pays the FDA's salary.

Paul Connett:

Yeah, yeah, yeah.

Dr. Joseph Mercola:

So it's been captured for a long time now. All right. Well, I really appreciate all your insights and your feedback and giving us an update. And we look forward to supporting your work to help eliminate mercury from the municipal water supplies of so many-

Paul Connett:

The fluoride, fluoride, not mercury.

Dr. Joseph Mercola:

Oh, I'm sorry. Mercury, too.

Paul Connett:

Don't give them any ideas, Joe. Don't give them any ideas.

Dr. Joseph Mercola:

Well, the mercury we're working out with Charlie Brown for the dental component. So yeah, it just kind of gets mixed up sometimes. But Charlie's made some pretty darn good progress, and

many of the strategies are pretty similar. I think we've even got some insights from it to identify the toxin as an environmental pollutant where there's a lot more leniency, a predisposition to acting favorably because of environmental concerns.

Paul Connett:

One thing to keep your eyes open for is my wife has been busily researching the whole role of the National Institute of Dental and Cranial Facial Research, NIDCR. You may know that this agency came into existence as the NIDR in 1948, and it came into existence on the back of the water fluoridation program and literally became the conduit for a huge amount of taxpayer's money to go into dental research, much of that siphoned into fluoridation. So fluoridation was the justification for the gravy train.

My wife has been going into that gravy train and I have a hunch that what we are looking at right now is the battle between two agencies. The NIEHS that is concerned about fluoride's neurotoxicity in particular, and the NIDCR that does not want to see fluoridation go down the tubes. And as you know, the sugar lobby has been very, very significant in corrupting, corrupting – and that's probably a better word than politics by the way – corrupting the NIDCR's research, the sugar lobby.

Dr. Joseph Mercola:

Yeah. Well, thank you for that. And thank you for all that you're doing. And we look forward to seeing your eventual vindication and the ultimately released report by the NTP, which will facilitate the judge to rule in your favor with the EPA lawsuit. So thanks so much.

Paul Connett:

Hopefully you will be at a party next year.

Dr. Joseph Mercola:

Yes, indeed.

Paul Connett:

When we win our lawsuit. Thank you, Joe.