



Appendix

Background and evidence base for Te Rōpū Niho Ora's Position Statement on Community Water Fluoridation

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Poor oral health is a major concern for Māori, ranging from tamariki to older Māori.¹ Across all age groups, Māori are consistently and significantly more likely to have had greater lifetime experience of dental caries than non-Māori, and are significantly less likely to be caries free and to have teeth removed as a result of dental caries.²⁻⁴ Of greatest concern is the large proportion of tamariki Māori, especially those under 5y, requiring dental treatment (including often multiple extractions) under general anaesthetic; they are two and a half times as likely as non-Māori children to be admitted to hospital for dental care.⁵ In 2015/16, approximately 11,000 tamariki Māori (aged 1-14y) reported having a tooth removed due to decay in the previous 12 months, almost as twice as likely as non-Māori (RR, 1.7).⁴ Further, a greater proportion of older Māori are retaining their natural teeth, and expected to do in the future.² The annual incidence of dental caries among older Māori, is likely similar to that of adolescents.⁶ Poor oral health and oral health inequalities substantially impact Māori health and well-being, and is associated with substantial personal, social and economic costs.^{2,3,7} Preventing dental caries, improving oral health, and reducing inequalities are key priorities for Māori.¹

Overwhelming evidence demonstrates that community water fluoridation is one of the most effective and efficient means of reducing and controlling the occurrence of dental caries in communities with >1000 people.^{8,9} People living in non-fluoridated areas are significantly more likely to have more dental caries, and greater severity of dental caries, than people living in fluoridated areas.^{8,9} Community water fluoridation reaches all people in the community, and has particular benefits for children and the most vulnerable (Māori are over-represented in the vulnerable population as they are more likely to live in poverty and be impacted by material disadvantage.¹). As such, community water fluoridation improves the oral health of all age groups and contributes to the reduction of oral health inequalities.^{8,9} Such improvements are over and above the use of other fluoridated products such as toothpastes, mouth rinses and varnishes.^{8,9}

Fluoride is naturally present in most water sources. Low levels of fluoride added to the water for the purposes of improving oral health have been shown to be safe.^{8,9} The fluoride derived from the fluorosilicates added to the water for CWF are the same as the fluoride from other products used to benefit oral health.^{8,9}

References

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