

Regulations under the Medicines Act 1981 Consultation
Medsafe
Clinical Leadership Protection & Regulation
Ministry of Health
PO Box 5013
Wellington 6145

askmedsafe@moh.govt.nz

Dear Sir/Madam

Re: Submission on Amendment to the Medicines Regulations made under the Medicines Act 1981 (Re: Fluoride in Drinking Water): Consultation

Thank you for the opportunity to provide a written submission on this consultation document.

Regional Public Health serves the greater Wellington region, through its three district health boards (DHBs): Capital and Coast, Hutt Valley and Wairarapa and as a service is part of the Hutt Valley District Health Board.

We work with our community to make it a healthier, safer place to live. We promote good health, prevent disease and improve the quality of life for our population, with a particular focus on children, Māori and working with primary care organisations. Our staff include a range of occupations such as: medical officers of health, public health advisors, health protection officers, public health nurses, and public health analysts.

We have provided comment on the questions presented for the proposed amendment, and are happy to provide further advice or clarification on any of the points raised in our written submission. The contact point for this submission is:

Barbara Stevenson Health Protection Officer

Email: <u>Barbara.Stevenson@huttvalleydhb.org.nz</u>

Tel: (04) 570-9002

Kind regards

Dr Stephen Palmer Peter Gush

Medical Officer of Health Service Manager

## Question 1: Do you support the proposed amendment? If not, why not?

Tooth decay remains the single most chronic disease amongst New Zealanders of all ages, with consequences of pain, infection, impaired chewing ability, tooth loss and absence from work and school. Tooth decay is an irreversible disease.

Regional Public Health considers dental decay to be an important public health issue, with poorer health outcomes reflective of differences within the community, with regards to ethnicity and socio-economic status.

In many parts of the world, community water fluoridation is used as a preventative measure. It is considered to be the most cost effective public health measure to reduce the burden of dental disease across the whole population.

The fluorine containing compounds used for fluoridation in New Zealand are sodium fluorosilicate or (SSF), and hydrofluorosilicic acid or (HFA). These compounds have all been shown to dissolve fully in water to release fluoride ions, which are identical to those found naturally in New Zealand water at levels (0.1-0.2 mg/L).

The World Health Organisation recognises an adequate lower level of intake and sets an upper limit on the levels of fluoride in drinking water (range 0.5-1.5 mg/L).

In New Zealand, the Ministry of Health (MOH) has similarly recommended that the fluoride content for drinking water range between (range 0.7-1.0 mg/L); and the maximum acceptable value for drinking water has been set at 1.5mg/L.

Regional Public Health supports the addition of fluoride substances into drinking water at the MOH prescribed acceptable levels (0.7-1.0 mg/L), and thus is supportive of the proposed amendment that fluoride substances that are used to treat drinking water are not medicines.

**Question 2:** Are there other fluoride-containing compounds used to treat the community water supplies that should be specifically named in the regulation? If so, what are they?

Regional Public Health supports the incorporation of the named fluoride substances sodium fluorosilicate (SSF), and hydrofluorosilicic acid (HFA), in the regulation. However, it is recommended that the regulations include a requirement for a quality standard, to control the purity of these substances which will be added to drinking water.