

HEALTH & WELLBEING BOARD

Date: 13 July 2017

Water Fluoridation in Northumberland

Report of the Interim Chief Executive/DCS

Cabinet Member Councillor Veronica Jones, Adult Wellbeing and Health

Purpose of report

This paper sets out the background and context of water fluoridation, including the legislation; provides an overview of the scientific evidence in relation to water fluoridation; and uses local information on oral health and oral health care to provide a context for the population of Northumberland.

Recommendations

The Board is recommend to:

1. Note the contents of the report;
2. Discuss and agree that an extension of the current water fluoridation scheme should be supported in principle.

Key issues

Tooth decay is the most common oral disease affecting children and young people in England, yet it is largely preventable.

The most significant impact of dental disease on an individual is the need to have teeth removed under general anaesthetic due to the consequences of dental disease. For the year 2015/2016, in Northumberland, 420 children aged under 19 were admitted to hospital to have teeth taken where decay was the primary diagnosis.

In 2015 the Public health England coordinated survey of children's oral health in Northumberland found that over 25% of 5 year old children examined had evidence of dental decay experience.

An emergent issue is the challenge posed by an ageing population who are retaining natural teeth and ongoing prevention of dental caries should be a priority across the life course. By 2030 Northumberland will experience the largest increase in the proportion of the population over 65 years old in the North East.

Evidence from the last Adult Dental Health Survey in 2009 and secondary analysis of the data related to life expectancy demonstrates; that those elderly who retain their teeth have an increased life expectancy compared to those who lose all their teeth who have a shorter life expectancy. Consequently Northumberland will see the greatest increase in dentate elderly in the North East who will have more teeth at risk of decay and more complex treatment needs due to increased levels of morbidity in the elderly population such as dementia, strokes and Alzheimer’s disease. Treating dental disease in this group of patients is both complex, challenging and upsetting for patients who are unable to comprehend what is happening to them.

Background

Fluoride is naturally present in water supplies. In a number of areas the level is adjusted to improve oral health. This process is governed by primary and secondary legislation. Since April 2013 decision-making regarding fluoridation rests with upper tier and unitary local authorities.

Systematic reviews of the scientific evidence have reported that water fluoridation reduces levels of tooth decay in both child and adult populations served by this measure. There is also evidence that water fluoridation is associated with improved outcomes such as reduced levels of child hospital admission for tooth extraction.

A small minority of children in both non-fluoridated and fluoridated areas of the UK have noticeable dental fluorosis, though severe dental fluorosis is rare.

Systematic reviews of the scientific evidence have found no differences in general health between communities that could be attributed to fluoride in water at a concentration of 1 part per million, whether naturally occurring or added. Public Health England’s own analysis of a range of key health indicators from all the fluoridated and non-fluoridated areas of the country has found no evidence of harm to the health of people in fluoridated areas.

Policy	This briefing paper is for information for members to aid discussion. The Council does not currently have a policy on water fluoridation but continues to fund fluoridation schemes, the responsibility for which transferred to the LA in April 2013
Finance and value for money	N/A
Legal	N/A
Procurement	N/A
Human Resources	N/A
Property	N/A
Equalities (Impact Assessment attached) Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	An equalities impact assessment can only be undertaken when the scope of any change to existing schemes has been decided.
Risk Assessment	N/A
Crime & Disorder	N/A
Customer Consideration	N/A

Carbon reduction	N/A
Wards	Wards will not be affected by this decision.

Report sign off

Finance Officer	N/A
Monitoring Officer/Legal	N/A
Human Resources	N/A
Procurement	N/A
I.T.	N/A
Interim Chief Executive/DCS	Daljit Lally
Portfolio Holder(s)	Councillor Veronica Jones

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