

# **Updates on the Fluoride Action Network's Lawsuits Against the EPA and TSCA:**

## **An Interview With Paul Connett**

### **By Dr. Joseph Mercola**

#### **Dr. Joseph Mercola:**

Welcome everyone. It's Dr. Mercola helping you take control of your health. Today we are joined by the founder of the Fluoride Action Network, Dr. Paul Connett, who was motivated and catalyzed, and felt compelled to do something about the fluoride poisoning in our water system. A large part of that was related to the fact that he has a doctorate in chemistry and is very familiar with the chemistry of what's going on. So he's actually been very influential in catalyzing a movement to remove fluoride from the water supplies, not only in the United States, but internationally.

#### **Dr. Joseph Mercola:**

So he's going to join us today to give us an update on what's been happening. So welcome and thank you for joining us.

#### **Paul Connett:**

Thank you, Joe. Happy to be here.

#### **Dr. Joseph Mercola:**

All right, so what's been going on? What's the latest?

#### **Paul Connett:**

Well, let's look at the most important first, our lawsuit. As you know, my son is the leading lawyer in our lawsuit against the EPA (Environmental Protection Agency) and TSCA. Under the Toxic Substances and Control Act, they allow citizens and groups to petition the EPA to end or ban the deliberate – the use of a toxic substance, for special use, so a special purpose. So you can specify the purpose that a toxic substance is being used for and ask for it to be banned by the EPA.

#### **Paul Connett:**

We asked the EPA to ban the deliberate addition of fluoride to the drinking water, and they refused our petition in 2017, but then we took them to federal court and we had our case heard in court. It went on for two weeks and that was in 2019. Of course, we had COVID interrupting everything, but we had a recent hearing in which the judge denied the latest effort by the EPA to get the case dropped. He's ruled in our favor several times now on key decisions.

#### **Paul Connett:**

What he made clear is he's very interested in the science of this issue. He wants to wait before he makes his ruling. He wants to read the National Toxicology Program's final review on fluoride's toxicity, a review incident that we requested in 2016. He wants to wait until that comes out, and

he wants to wait until a risk assessment has been published based upon the latest IQ studies. Well that, what we call a BMD analysis, and I can explain what that is if you're interested in a moment, that came out just a few days ago.

**Paul Connett:**

So half of what the judge wants to see has come out. Now, the result of the BMD analysis is easier to give you than to explain what they do to get it. But basically-

**Dr. Joseph Mercola:**

What is BMD short for? Bone mineral density?

**Paul Connett:**

Benchmark dose.

**Dr. Joseph Mercola:**

Okay.

**Paul Connett:**

Bench mark dose. Basically, what you do is you determine, and this is a standard EPA methodology. You determine what effect that you're interested in studying and what level of that effect that you're interested in. Then look at all your data, your dose response data, and determine the dose that causes that effect. Well, the effect that is chosen and selected, and this is typical of neurotoxic substances, was a loss of one IQ point. So using all your data, what would be the dose, and the dose in this case is measured in the urine of pregnant women.

**Paul Connett:**

So we got a lot of data of the level of fluoride in pregnant women's urine and the associated loss of IQ measured in their offspring. So about 800 dose pairs, single measurements, individual measurements of the pregnant woman and single measurements of the associated offspring of that pregnant woman. So lots of data dose pairs. What they found, they would predict a lowering of IQ in children if the pregnant mother's urine was at 0.2 milligrams per liter. The average, to put that into perspective, the average in north California and in Canada, two studies, is between eight and one part per million.

**Paul Connett:**

So in other words, 0.2, it means-

**Dr. Joseph Mercola:**

Four times more.

**Paul Connett:**

Yeah, four to five times more. What that means is this is a linear relationship. So you could predict, based upon if this is accurate, then the average loss of IQ for children born in the United

States, if their mother drinks fluoridated tap water, it's going to be between four and five points, and that's massive when you look at the impact on a whole population. Massive.

**Dr. Joseph Mercola:**

So what I find really unusual, in light of what's going on in the last year, is that a judge has been assigned to this case that actually seems to be authentically interested in coming up with a fair decision. Most of the time it's all political. They just whitewash it. It's kind of shocking and surprising to see that they're really doing the due diligence.

**Paul Connett:**

It is very [crosstalk 00:06:00]. Yep, we were trepidatious to say the least, but we do seem to have a judge ... and I've been disappointed before, as you have. But in this case, I am really convinced that this judge is not interested in any flannel and BS from the EPA. He wants the science. He's only interested in what the science says. His basis for making the judgment will be this NTP review and the BMD analysis. But you are right to be suspicious because, sadly, there is evidence now, from confidential sources, that there has been pressure put upon the NTP. So that is right now a very, very-

**Dr. Joseph Mercola:**

A surprise.

**Paul Connett:**

-worrying step of this. Once again, we might be confronted with the best science versus politics and public relations.

**Dr. Joseph Mercola:**

Sad but true. It seems inevitable. Almost every federal regulatory agency has been captured by industry.

**Paul Connett:**

Absolutely. A good example is this court case. The EPA that's defending-

**Dr. Joseph Mercola:**

Oh, that's classic.

**Paul Connett:**

-they used exponent. They didn't use their own experts to win their case and prove that fluoride doesn't lower IQ. They used exponent, these consultants who have defended everything for industry, from dioxin to PFOs, everything. They've defended everything, including this. Our experts were not at all impressed when they were asked questions about exponent.

**Dr. Joseph Mercola:**

So worst case scenario, industry gets it. The NTP results are whitewashed and essentially irrelevant, and the judge makes a ruling in favor of the EPA and dismisses the case. But what's

the best case scenario, assuming that the judge is able to sort through all this and give a victorious result? What happens as a result of that?

**Paul Connett:**

The best case is the judge heard the experts, the three top experts that we needed him to hear from. He heard from Philippe Grandjean, who is the world's expert on mercury's neurotoxicity, and Grandjean did the BMD analysis and testified to that effect in court. We had two of the key authors of the IQ studies, Bruce Lanphear, who is the go to person for the EPA when they have a question about lead's neurotoxicity, and we also have Christine Till, who's also a coauthor of two of the key IQ studies.

**Paul Connett:**

It would be worth, I think for your supporters/readers, to be brought up to date on those IQ studies. There have been four key NIH (National Institutes of Health)-funded IQ studies. Fabulous methodology, the best methodology to date. They've been publishing IQ studies from 1988 to the present. These studies all published since 2017, all funded by NIH, done by the top researchers. Not only did they find a strong relation, two of them. One from Mexico City and one from Canada. Strong association to the level of fluoride in mother's urine and the baby's IQ, the offspring's IQ. But another study, which showed taking two groups of children from Canada, a large number of children. I forgot the exact number.

**Paul Connett:**

One group of children was bottle-fed with fluoridated tap water when they were babies, and the other group of children, similar in every other respect you can think of, were bottle fed with non-fluoridated tap water. So the only difference was whether these babies, whether these children got fluoridated tap water in their formula when they were bottle-fed. A staggering 13 IQ points dropped, staggering.

**Dr. Joseph Mercola:**

That's significant. That is quite astonishing.

**Paul Connett:**

Yeah. Basically, going back to Grandjean's BMD analysis again, he said, right now the damage to children's brains in the United States is probably greater for fluoride than it is for lead, arsenic and mercury. Now he's not saying that atom-for-atom fluoride is more toxic than lead, mercury or arsenic. He's not saying that. He's just saying, "If you look at what's happening today, fluoride is doing more damage to our kid's brains than these other well-known neurotoxic substances, lead, mercury and arsenic."

**Paul Connett:**

The reason of course is the exposure. There are millions of children, millions of children that are being exposed to fluoridated tap water on a daily basis. Millions of pregnant women.

**Dr. Joseph Mercola:**

It's probably hundreds of millions.

**Paul Connett:**

Well, worldwide, yes worldwide. So yes, if you look at the total impact of fluoride on children's brains, it's greater now than lead, mercury or arsenic. To think-

**Dr. Joseph Mercola:**

Is that individually or collectively combined?

**Paul Connett:**

Collectively.

**Dr. Joseph Mercola:**

Okay, so that's even more impressive. All those put together, its' still more.

**Paul Connett:**

Yes. Yes, all those put together, it's still more. Obviously fluoride has reached the same level as we had in lead when I was involved – it's my first environmental health topic was lead's neurotoxicity back in the late 70s. Fluoride is following the same trajectory as lead because basically, whether or not you found a neurotoxic effect for lead was simply a function of how well-designed your study was. The better your study was designed, the more likely you were to find that lead was lowering IQ.

**Paul Connett:**

The same thing is happening with fluoride. Of course, the big difference since 2017 is looking at the impact on the fetus. All the arguments we've used to say, look, when you're exposed to a toxic substance, it's worse for a child than for an adult, and it's worse for a baby than a child. Well now, of course, it's worse for a fetus than a baby. It's worse for a fetus than a baby or an infant or a child. So it's extraordinary. The chickens of bad policy are really coming home to roost because they took a gamble back in the 1950s that, even though they knew that fluoride would cause dental fluorosis in children who drank fluoridated water, they knew that, but they thought it was a trade-off for lowering tooth decay.

**Paul Connett:**

The gamble was to assume that, even though you could damage the enzymes involved in formation of the enamel, a systemic effect, an internal effect, biochemical effect, you wouldn't be impacting any other tissue in the body. Well, now, of course, to protect that ridiculous hypothesis or notion, the protected it by not doing the studies. Now, led by China starting in the late 1980s when they were looking at the health impacts in endemic fluorosis areas, they found that fluoride not only damaged the teeth, dental fluorosis, damaged the bone, skeletal fluorosis, and damaged the brain.

**Paul Connett:**

So soon we'll be talking about brain fluorosis as a well effective impact of fluoride.

**Dr. Joseph Mercola:**

So I want to take this back to the lead. I'm wondering if you are familiar with Claire Patterson and his advocacy.

**Paul Connett:**

Absolutely.

**Dr. Joseph Mercola:**

You seem to be the 21st century version of Claire. Why don't you relate it, because my memory might be a bit flawed. What's shocking to me is that almost every bit of evidence, there were some marvelous video documentaries that really described in great detail what the process was and they've all been scrubbed from the internet.

**Paul Connett:**

Yeah, it's shocking. The Nation ran a very good exposé on all the shenanigans that went on. From my view of it, back in the late '70s, they were attacking the credibility of any scientist who raised the question of, well if lead brings patients, children ... If parents bring children to hospital with overt symptoms of brain damage, isn't it likely that lower levels of lead that did not lead parents to come to hospitals could be damaging their brains in a subtle way?

**Paul Connett:**

There was huge controversy about this and they were doing experiments, doing these epidemiological experiments. They were finding that prisoners had higher levels of lead. Violent prisoners had higher levels of lead than nonviolent prisoners, and they were finding that kids in New York City schools were more hyperactive, less able to concentrate than kids not exposed to lead. But all of these were attacked by the lead industry and the gasoline industry, all in an effort to keep lead in paint in the beginning, and then lead in gasoline.

**Paul Connett:**

Eventually, Herbert Needleman of course, did the classic study in Boston where he found a very strong association with measures of hyperactivity, concentration, behavior in school with the level of lead in their dentin, all double blind studies. Remarkable correlations with 10 different behavior classifications and the level of lead in the distichous teeth. That was the beginning of the end. It still took a few more years. Of course then, as you know, as they phased lead out of gasoline, the level of lead in the air of cities went down in a parallel fashion, and the level of lead in children's blood went down in a similar parallel fashion.

**Paul Connett:**

It was Claire Patterson on, I think it was a National Research Council panel. Lone voice on this panel, who's work had shown that if you look at cores in the ice in the Arctic, if you drilled down in the Arctic and look at the cores, and then did wafers, sectioned it off, and that can be related to time. So the further you go down in your ice core, the further back in time you go. He established we have no lead exposure essentially in the middle ages. It was only after the industrial revolution that we begin to see the lead in the environment go up and up and up and up.

**Dr. Joseph Mercola:**

Yeah, and the primary motivation for keeping it in the environment was the use of lead in gasoline.

**Paul Connett:**

Yeah.

**Dr. Joseph Mercola:**

They had this incredible marketing campaign. It's like they even gave it the name of a woman, Ethyl, ethyl lead, which is chemistry are very familiar with what ethyl means. They ascribed it to a woman.

**Paul Connett:**

Here's some food for the cynical because the cynical would tell you that it wasn't the America's final realization that they were damaging children's brains with lead. What really ended lead in gasoline was that they found it was poisoning the catalyst in cars in California. California was way ahead of regulations because of Los Angeles smog and so on. So they were regulating to get that smog out, and they were using a very precious metal in the catalyst in the converter at the end of the tailpipe, and the lead was poisoning that catalyst. So they stopped. They forbid the use of leaded gasoline.

**Dr. Joseph Mercola:**

Yeah.

**Paul Connett:**

So it was protecting our catalyst, not protecting our kid's brains, which was the final straw.

**Dr. Joseph Mercola:**

Yeah, that's an interesting story. As I understand it too, lead's not removed from all fuels. I think it's still in aviation fuel.

**Paul Connett:**

Yeah. Even when we knew all this, we still continued to export leaded gasoline.

**Dr. Joseph Mercola:**

Oh yeah, to foreign countries. Sure.

**Paul Connett:**

Yeah.

**Dr. Joseph Mercola:**

It's reprehensible, criminal behavior. Knowing that we did that not too long ago, it's no surprise that we're seeing similar behavior in this epidemic of COVID-19. So no surprise. But your

valiant efforts to minimize this neurotoxicity, which is a surprising bit of information. Actually, it's astonishing. I was not aware that it was that much more toxic. They based on dose exposure that most people have.

**Paul Connett:**

Yeah.

**Dr. Joseph Mercola:**

All of those mercury and lead and arsenic combined, that's just crazy.

**Paul Connett:**

Again, it just underlines the preposterousness of water fluoridation, because none of those other things, lead, mercury and arsenic, are deliberately added to the drinking water. If they did, then fluoride-

**Dr. Joseph Mercola:**

Yet. Yet. Who knows what crazy new strategy they're going to have to drop on us? Who knows? But in the meantime, we know this is definitely something that should be avoided at all costs, so the key thing is to protect yourself first. If you live in a community that's fluoridated with water, as most of us do, it's really hard to find one that's not. But if you do, then your tap water should not be consumed unless you go through appropriate filtration, and most filters will not get the fluoride out. So maybe you can address that. There's only a few types of filtration, like reverse osmosis and very specific types of carbon filtration, which is a minority of carbon filters.

**Dr. Joseph Mercola:**

So maybe you can talk about that, just some things people can do to protect themselves from this exposure, and their family.

**Paul Connett:**

My preference on that front, and this is what they do, is that we drive 20 miles every few weeks to pick up about 40 gallons of spring water.

**Dr. Joseph Mercola:**

Oh, that's the best.

**Paul Connett:**

Yeah, that's what we're able to do. So I would advise people that, before they do anything else, they check to see if they've got a local spring and have it tested if it's **[inaudible 21:49]**. But we're very happy with that. We've been drinking this water now for nearly 10 years. We use it for drinking and cooking. As I said, very happy with that.

**Dr. Joseph Mercola:**

How often do you have to fill that up, the 40 gallons?



**Paul Connett:**

For us, it's every few weeks. We take 40-gallon jugs. Unfortunately, it's plastic. We did switch to some glass bottles, but it's pretty heavy.

**Dr. Joseph Mercola:**

You should get some big 5-gallon ones.

**Paul Connett:**

Yep.

**Dr. Joseph Mercola:**

Get eight of them. You've just got to be careful. You break a 5-gallon water jug, it's a deadly piece of glass. You could die on it.

**Paul Connett:**

Well, when I testified before the National Research Council, which did its landmark review of fluoride's toxicology published in 2006, probably the most important day of my involvement in this issue, the big issue for us at that time ... We were conscious of the neurotoxicity studies, but we were very early into that. Only about five of the IQ studies had been published then. Now we have 69 IQ studies which are found to lowering of IQ.

**Paul Connett:**

But in those days, the big issue was what fluoride might be doing to the bones. Now we knew about skeletal fluorosis in India and China, and we knew there were some studies which showed an increased in hip fracture. But these were kind of balanced out by other studies which didn't find it. So it was a kind of wash. But what we testified then was, "Look, look at the levels of fluoride in animal bone which lead to fracture." They take the animal bone and they subject it to mechanical testing, and they know exactly what the level of fluoride in parts per million is in those animal bones when they break. Charles Turner's work.

**Paul Connett:**

Anyway, we showed that humans would reach these same levels. A lifetime consumption of fluoridated water, or earlier, would reach those levels. Now, earlier this year, there was a study published in Sweden by I think her name is Helte, 2021. What they found in Sweden, they don't fluoridate their water, but they have natural levels, and they looked at 4,000 Swedish women. They looked at them from 2004 to 2017, and they had individual measurements of their fluoride exposure. So they worked out their individual exposure to fluoride and, lo and behold, they found that postmenopausal women drinking the same range of water that we have in fluoridated communities in the United States, had a 50% increase prevalence of hip fracture.

**Paul Connett:**

As you know, hip fracture is very serious. We have about 300,000 hip fractures in the elderly in the United States and 30% of those women who get those hip fractures are dead within a year. Many of them do not regain an independent existence. So hip fractures, I'm sure most people

know this. Hip fractures is a very serious issue for elderly people. So we may be damaging people from womb to tomb. Damaging the fetus and then damaging our bones over a lifetime, which has fatal consequences when you reach old age.

**Dr. Joseph Mercola:**

So getting back to the ruling that the judge is going to make, if he rules in your favor, will that likely set a process in place to lower the amount of fluoridation or eliminate it?

**Paul Connett:**

This is a very good question. What it does is it will force ... If he rules in our favor, it will force the EPA to do a risk assessment.

**Dr. Joseph Mercola:**

Ahhh. It might take 20 years.

**Paul Connett:**

That's right, exactly. If you want to give a highest rating of equality to the EPA, it is its ability to drag its feet when they don't want a result. So yes, that could be serious. What we feel it will do, it will help other countries stop it, countries like New Zealand and Ireland, and the U.K. that are not ruled by our EPA. We could use it, I think, at the state level.

**Dr. Joseph Mercola:**

Local level, too.

**Paul Connett:**

Local level yes, but we can do that now. That is happening now, but at the state level, especially in the states that have mandatory fluoridation, to take that judges ruling to them and say "Why are you encouraging this? Why are you mandating this? Why are you-"

**Dr. Joseph Mercola:**

That's a good point. Sorry to interrupt you, but could you elaborate on this, because I'm confused. I thought that the ultimate jurisdiction resided locally, but you're implying there are states that mandate it statewide and it doesn't matter what the local ruling on it is.

**Paul Connett:**

Yeah, that's right. That's exactly right.

**Dr. Joseph Mercola:**

Wow. How many states are there that do that?

**Paul Connett:**

Twelve. I can't remember them all off the top of my head.

**Dr. Joseph Mercola:**

Yeah. Okay.

**Paul Connett:**

Illinois, Minnesota, believe it or not, California, would you believe, Georgia, Kentucky. There's quite a-

**Dr. Joseph Mercola:**

Okay, so there's 12. I did not know that.

**Paul Connett:**

Yeah. So here's the thing. When you're pushed to shove EPA, in other words, and you go higher up the ladder, typically they come back – here, if you approach a senator or a representative in congress, they will say, "Oh, well this is not under our jurisdiction. This is a local decision. This is made by communities." Well, not correct. In 12 states, it's made by the state. Here's the thing. Even though the federal government does not mandate fluoridation, it promotes it. It's been promoting it ever since the U.S. Public Health Service endorsed it in 1950.

**Paul Connett:**

Today, the promotion is under the mantle of the Oral Health Division of the CDC (Centers for Disease Control and Prevention). Now let me explain who they are. There's only about 30 people who are interested in teeth, and they're nearly all dentally trained, and they work hand in hand with the ADA (American Dental Association). So they're a self-fulfilling prophecy in terms of supporting fluoridation, and they heavily influence local decisions. So although the federal government doesn't accept responsibility of it, they're encouraging communities to do it. Just a few days ago, the CDC gave a huge grant to Mississippi to promote fluoridation.

**Paul Connett:**

Of course, our gripe, and we've just written a letter to the new head of the CDC, Dr. Rochelle Walensky. Being a new face, a new mind, a new brain, telling her about these latest IQ studies, asking her to put a halt on the program until it's been resolved. Most importantly, let's have a separate group of people at CDC that have credentials which are meaningful. There are neurotoxicologist or epidemiologists, or medical doctors, or whatever. The Oral Health Division only has, as I said, dentally trained people. They have one Ph.D. and one M.D., that's it.

**Paul Connett:**

So they don't have specialists keeping up with the literature like these IQ studies. So let's have a level playing field here. Let's have a group at the CDC that promotes fluoridation based upon what they think it does for teeth, and let's have another group of people that, regardless of promotion, is looking very carefully at all the evidence which indicates harm to the bone, to the brains and so on. It took us about eight weeks, but we finally got a response from Dr. Karen Hacker, who is head of a division. I'm trying to find the name. It's the National Center for Chronic Disease Prevention and Health Promotion.

**Paul Connett:**

So the important point for us is that we've now got engagement at the CDC above the Oral Health Division. We don't get these platitudes about how wonderful it is for teeth. By the way, this Oral Health Division has worldwide influence. There's not a day that goes by that somebody, some doctor, some dentist, some public health official, some politician is saying, "The CDC says that fluoridation is one of the top public health achievements of the 20th century." So enormous influence, but no responsibility for harm.

**Paul Connett:**

One more juicy bit, which I'm sure you'll love in the context of other things which are happening right now, we caught the head of the Oral Health Division in a lie.

**Dr. Joseph Mercola:**

Oh, I can't believe it. I can't believe it.

**Paul Connett:**

A bear-faced lie. He said, "These NIH funded studies were done at levels much higher than the water fluoridation programs." Absolutely nonsense. They were done either at doses equivalent to what people in fluoridated communities get, or they were actually done in fluoridated communities themselves. We used that as a hook to reach out to Walenski. We weren't after punishment of Casey Hannan, the head of the Oral Health Division. We were after a change of policy. He's only doing what all the previous heads of the Oral Health Division have done, which is to promote fluoridation as being safe and effective, safe and effective, safe and effective.

**Paul Connett:**

I think their pay was based upon how many times they said that in public.

**Dr. Joseph Mercola:**

Yeah. Well, that's right. So going forward, I guess we're celebrating Fluoridation Week at Mercola.com. So we're requesting people who believe in the mission you've started about seeking to, I guess really, credentialize this, which is so hard to do in the government and even the academic institutions to acknowledge that this damage exists. Why don't you tell us what the funds will be used for so they can continue to promote this mission?

**Paul Connett:**

Okay, well number one of course, in the anticipation that we'll have to bring in expert witnesses to give their commentary on the finer results of the NTP, which might be critical of this political manipulation, and of course the BMD analysis. So we are anticipating a little mini trial to come up, and that will require some funding in the thousands, maybe as much as \$10,000 or \$20,000. So I wasn't a Boy Scout, but I do agree that you should be prepared. You should be prepared. So we want to fundraise now so we have the money in hand should that be necessary.

**Paul Connett:**

We're also revamping our website. We have the most fantastic website, FluorideAlert.org. But there's so much material, it's difficult for ordinary citizens, and even people knowing what they want, to find it. So we're going to revamp that website and make it more accessible for people to use. We have the largest health database in the world, bigger than many governments, maybe all governments, on the health effects of fluoride. We want to make that more accessible and then we shall continue to do our education, our motion.

**Paul Connett:**

We've been for 20 years, trying to take truth to power. Our vehicle is to keep people with an open mind informed about the science. Make the science accessible to the public. This is included, incidentally, over the past, translating many of those Chinese studies. The Chinese have been way ahead of the United States in understanding this neurotoxicity issue. We helped by translating a dozen of those papers, which brought it to the attention of Western researchers. And generally helping communities. If a community, like right now, Spokane, is trying to keep fluoridation out, I think for the fourth time.

**Paul Connett:**

Calgary is trying to put it back in. That was one of our biggest victories to stop fluoridation was in Calgary. That's a population of 1.3 million. They're trying to take this victory away from us, away from the people by bogus studies. They're claiming that tooth decay has gone up dramatically in Calgary since they stopped fluoridation, and it's simply not true. As a scientist, I'm just appalled that we have scientists on this planet who would twist the science in order to suit their masters, the paymaster. I never thought that.

**Paul Connett:**

I got to a point when I was teaching science, Chemistry at St. Lawrence, that I bumped into the Spanish teacher. He said, "How are you Paul? How are you?" Only crossing in the quadrant. Normally what you'd do, Joe, I'm sure you do, "Oh, I'm fine. I'm fine. How are you?" And you walk on. But this time, I was so mad. I said, actually ... What was his name? "Actually, I am absolutely-" what did I say? "No, I'm absolutely very, very, very upset. Very, very upset. I'm so upset I want to stop teaching chemistry. I don't want to teach chemistry anymore."

**Paul Connett:**

He goes, "Why do you say that? Why do you say that?" I said, "Well, I don't want to teach students, young people, all about the scientific method, and then they take everything I teach and they go and apply it in the real world to some consulting company or some government, etc, only to have their own government tear it up in front of them." I said, "I know this is happening. I don't want to be part of it anymore. I don't want to be part of the first part, to show the illusion of scientific integrity, the scientific method, get the facts and so on."

**Paul Connett:**

So it's really, I suppose I was very naïve. I think this fluoridation issue has removed every last shred of naivety from me. Anyway, our mission is to get this information to as many people as possible, so with their help we can take this information to the power structures. We're doing it in

federal court and we're doing it with our website. Right now, we're doing it by engaging with people above the Oral Health Division at the CDC.

**Dr. Joseph Mercola:**

All right. Well, thank you for the summary and description of what these funds will be used for. I think we're matching, so everyone who donates something, I'm going to be personally donating to match that, to provide the support-

**Paul Connett:**

That could be quite a bit of money, Joe. Are you serious about that? Usually you set a limit. Why don't you be fair-

**Dr. Joseph Mercola:**

All right, well we'll look at it. I typically do.

**Paul Connett:**

All right. You've been so incredibly generous to us over many years. I don't think, without your support, we wouldn't be where we were today.

**Dr. Joseph Mercola:**

So yeah, we'll figure that out. But the key point is that we can help support you. We all need clean water. Fortunately or hopefully you understand this and are implementing strategies to make sure. I doubt many are going to the extreme that Paul is in, gathering 40 gallons every few weeks from a natural spring. That is the optimal ideal. I don't do that. Most of us rely on filtration systems to do it, but the key is you cannot expose you and your family to fluoride.

**Paul Connett:**

Absolutely.

**Dr. Joseph Mercola:**

It's a toxic poison. We've talked about mercury, and Charlie Brown has been so effective in removing potential amalgams. But as you heard, definitely mercury is a poison.

**Paul Connett:**

Yes.

**Dr. Joseph Mercola:**

But the practical real world experience that nearly everyone in this country has collectively a significantly higher exposure to fluoride because it's mandated in most communities to put in the water system. So this is something that desperately needs to be changed. We're making progress, so your continued support would be deeply appreciated.

**Paul Connett:**

Yeah, we want clean water, clean science, honest science and clean politics. Boy, that's a tough triple.

**Dr. Joseph Mercola:**

Yes, it is. But we can always hope.

**Paul Connett:**

Thank you, Joe, very, very much.

**Dr. Joseph Mercola:**

All right, well thanks for all your work and your perseverance, and coming back because I neglected to mention this, but you were not only the founder, but you were the executive director, I believe, or you ran the whole show. Then you retired.

**Paul Connett:**

[inaudible 00:40:20] I've been back for a few years now. I'm still the director.

**Dr. Joseph Mercola:**

Oh, I didn't realize that. I'm sorry. I didn't know that. Because I know you had retired for a little while and let your son Michael take over.

**Paul Connett:**

Yeah.

**Dr. Joseph Mercola:**

But now you're back. That's great because the world needs you.

**Paul Connett:**

Thank you. Thank you very much. The world needs you too.

**Dr. Joseph Mercola:**

All right, well teamwork is what makes it work.

**Paul Connett:**

Absolutely.

**Dr. Joseph Mercola:**

All right, so we appreciate your support for this noble mission to limit the population's exposure to this toxic poison.