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### **Question 5A**

If the 1986-1987 National Survey is not included, why not? If it is included, please provide the rationale for that study using decayed or filled surfaces, rather than decayed, missing or filled teeth, as the reported metric?

### **Response 5A**

The NIDR's 1986-1987 National Survey is included in the list provided in **Response 5** (Brunelle 1990). The survey was designed to measure both the number of decayed, missing, and filled permanent teeth (DMFT) and the more exact number of tooth surfaces affected (DMFT versus DMPS). This additional level of precision allows for more accurate assessment of effect and analysis by surface type. Because the surface-specific analysis was used, we learned that almost 90 percent of the remaining decay is found in the pits and fissures (chewing surfaces) of children's teeth; those surfaces that are not as affected by the protective benefit of fluoride.

### **Question 5B**

If it is included, how does CDC account for scatter among fluoridated, partially fluoridated and non-fluoridated communities with respect to ranking for lowest caries incidence?

### **Response 5B**

CDC continues to analyze the data that indicate a significant "diffusion effect" for non-fluoridated communities. Non-fluoridated communities in regions with a significant number of



Centers for Disease Control  
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AUG 8 2000

The Honorable Kenneth Calvert  
Chairman, Subcommittee on  
Energy and Environment  
Committee on Science  
House of Representatives  
Washington, D.C. 20515-6301

Dear Mr. Calvert:

Thank you for your letter requesting that the Centers for Disease Control and Prevention (CDC) respond to comments and questions regarding the use of fluoride and enamel fluorosis.

CDC has recognized community water fluoridation as one of the great public health achievements of the 20th century in its *Morbidity and Mortality Weekly Report (MMWR)* (copy enclosed). Fluoridation of community drinking water is a major factor responsible for the decline in dental caries (tooth decay) during the second half of the 20th century. Although other fluoride-containing products are available, water fluoridation remains the most equitable and cost-effective method of delivering fluoride to all members of most communities, regardless of age, educational attainment, or income level. The per capita cost of water fluoridation over an entire lifetime can be less than the cost of one dental filling; however, approximately 100 million American children and adults (38 percent of Americans served by public water systems) do not have access to water containing enough fluoride to protect their teeth.

Enclosed are CDC's responses and copies of related publications, studies, and reports. We appreciate the opportunity to discuss the benefits of water fluoridation and hope this information is helpful.

Sincerely,

A handwritten signature in black ink that reads "Jeffrey P. Koplan".

Jeffrey P. Koplan, M.D., M.P.H.  
Director

Enclosures