people. Very often the homes are not acceptable, and the department gets no thanks for its efforts.

Clause put and passed.
Clauses 10 to 17 put and passed.
Title put and passed.
Bill reported with an amendment.

House adjourned at 9.3 p.m.

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Legislative Assembly

Wednesday, the 12th October, 1966

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The SPEAKER (Mr. Hearman) took the Chair at 4.30 p.m., and read prayers.

QUESTIONS (4): ON NOTICE

OIL

Discoveries: Refining and Price

I. Mr. MAY asked the Minister representing the Minister for Mines:

(1) Will oil produced from Barrow Island and other likely locations in Western Australia be processed at the Kwinana oil refinery?

(2) If so, will it be kept separate from foreign oil processed at the refinery?

(3) If kept separately, will it be sold in Western Australia only; if so, will there be any difference in price as compared with the present price of imported oil retailed in Western Australia?

Mr. BOVELL replied:

(1) The Government's desire is that any oil produced in Western Australia should be processed in Western Australia. The matter of processing Barrow Island oil is currently being discussed.

(2) Oil is not handled that way in a refinery.

(3) Answered by (2).

LAND

Sales Advertised in American and Canadian Newspapers

2. Mr. MAY asked the Premier:

(1) Has he any knowledge of the following advertisement appearing in American and Canadian newspapers offering land for sale in Australia at less than 10 dollars an acre?

Prime land for farming, grazing or to hold for profit.

These prices will never be repeated. All land less than ten dollars per acre.

Many American and European firms have already bought.

Don't miss the opportunity of a lifetime. Minimum purchase 1,000 acres. Terms.

(2) Does he know if this advertisement is in anyway connected with land sales in Western Australia; if so, was the advertisement published with the knowledge and approval of the Government?

Mr. NALDER (for Mr. Brand) replied:

(1) No.
(2) No.

TRAFFIC

Fatal Accidents: Percentage of Alcohol in Victims

3. Mr. GAYFER asked the Minister for Police:

What percentage of road fatalities under the age of 21 years shows an amount of alcohol in the blood stream of the victim in excess of 0.05 per cent.?

Mr. CRAIG replied:

The only figures available relate to the metropolitan area, exclusive of Fremantle and adjoining districts. Of 42 drivers of vehicles killed who were under the age of 21 years, blood tests showed that 19 per cent. had alcohol in the blood above 0.05 per cent.
ROADS
Barradale-Peedamulla to Onslow:
Upgrading

4. Mr. BICKERTON asked the Minister for Works:
What provision is being made to upgrade the Onslow access road from Barradale-Peedamulla to Onslow?

Mr. ROSS HUTCHINSON replied:
The Main Roads Department has not provided any funds in the current programme of works for a new connecting link between the Barradale-Peedamulla Road and Onslow. Considerable investigation is necessary to select a satisfactory alignment for this access road, and because of the higher priority given to the Barradale-Peedamulla section of the North West Coastal Highway it will be some time before this new route can be finalised. In the meantime, funds have been provided for the continued maintenance of the existing route into Onslow.

QUESTIONS (4): WITHOUT NOTICE
PRINCESS MARGARET HOSPITAL
Treatment of Children for Fluoride Allergy

1. Mr. WILLIAMS asked the Minister representing the Minister for Health:
(1) Is it a fact that there are three children in the Princess Margaret Hospital who are allergic to fluoride?
(2) Have any children ever been admitted to this hospital with fluoride allergy?

Mr. Tonkin: Who ever said they were in the hospital?
Mr. Ross Hutchinson: You did.
Mr. Tonkin: No, I did not.
Mr. Ross Hutchinson: Now the tune has changed.
Mr. Graham: No, it has not.
Mr. ROSS HUTCHINSON replied:
(1) and (2) The member for Bunbury was good enough to phone me about this question, so I am in a position to advise that—
Mr. Graham: Or you phoned him.
Mr. ROSS HUTCHINSON: Then you admit there is a reason. I am pleased to be able to supply this information which will satisfy all but the Deputy Leader of the Opposition.
Mr. Tonkin: I will ask the Minister a question without notice if the Speaker will permit me.

Mr. ROSS HUTCHINSON: Dr. R. C. Godfrey, M.B., B.S., M.R.C.P., M.R.A.C.P., Medical Director of Princess Margaret Hospital for Children—
Mr. Bickerton: That sounds like a registration number.
Mr. ROSS HUTCHINSON: I mention those letters because the Deputy Leader of the Opposition so delights in giving letters after the names of people whom he quotes. To continue, Dr. Godfrey, and Dr. I. C. Lewis, M.D., Ch.B. (Edin.), N.R.C.P., D.Ph., D.Ch., of the Department of Child Health, have both stated categorically that there are no children in Princess Margaret Hospital who are allergic to fluoride, and there never have been.

Mr. Graham: Nobody ever said there was.

TELEVISION FOR COUNTRY CENTRES
Provision by Commercial Interests

2. Mr. EVANS asked the Deputy Premier:
I have been advised by the Kalgoorlie Chamber of Commerce that last December the Australian Broadcasting Control Board was asked to prepare a case for low-powered television stations for areas such as Kalgoorlie and Geraldton. No official statement has been made whether this case has been prepared.

Would the Government, on behalf of the people living in areas now deprived of television, where this facility can be provided by low-powered stations, make a plea to the Postmaster-General that an early announcement be made? Having regard to the offer published in the daily newspaper yesterday that a commercial station in Perth could provide a package station in Kalgoorlie and Geraldton, would the Government make a plea to the Postmaster-General likewise to give favourable consideration to the offer made by the commercial station?

Mr. NALDER replied:
The Government would support any application or move made to allow the extension of television to any area not serviced by this facility in Western Australia.

PRINCESS MARGARET HOSPITAL
Treatment of Children for Fluoride Allergy

3. Mr. TONKIN asked the Minister representing the Minister for Health:
Does the Minister deny that in 1963 a Mrs. King was talking to
Mr. Bonney of the Child Health Department, who subsequently placed her in communication with a person at the Princess Margaret Hospital, when the difficulty Mrs. King had experienced with her child who suffered from an allergy and whose teeth became discoloured within a week of using fluoride was discussed with the hospital, and that Mr. Bonney had arranged for certain tests to be undertaken in connection with this matter?

Does the Minister deny it is recorded at the Princess Margaret Hospital that at least three children were referred to the hospital, their condition discussed at the hospital, and advice given that the condition of those children was recorded as likely to be the result of the use of fluoride; and in at least one case a test was arranged?

Does the Minister deny that with regard to these matters of the possible effect of fluoride, the officer at the Princess Margaret Hospital asked Mrs. King if her baby had previously suffered from jaundice and a liver complaint, when he was endeavouring to establish whether or not fluoride was the cause of the trouble with the baby's teeth?

Mr. ROSS HUTCHINSON replied:

It is difficult to try to follow the trend of the honourable member's questions, but I will try to answer them. I deny that any children who have suffered from the effects of fluoride allergy have ever been in Princess Margaret Hospital.

Mr. Tonkin: Nonsense.

Mr. Court: That is so.

Mr. ROSS HUTCHINSON: There might be a refinement of that, but that is what we were led to believe. This falls into the pattern of what he was saying all through his speech. However, Doctor Godfrey, who is the Medical Director, and Professor Lewis, who is the Professor of Child Health, both deny that any children have ever been in Princess Margaret Hospital as a result of fluoride allergies.

One child was brought along by its mother who said, "Yes, I am only too pleased to have tests conducted"; and when the tests were conducted, on a scientific basis, it was discovered that the child was not allergic to fluoride at all. Indeed nobody in this world can be allergic to it because, in proper quantities it is a part and parcel of our way of life. The human race has lived with it. That was one case; and I find that the lady concerned became very upset at the anti-fluoridationist having led her up the garden path.

The other two children concerned came along with their mothers and, as might be expected in this fine hospital, the mothers were asked if they would submit their children to sensitivity tests and have the necessary experiments conducted to see whether they were—obviously it is of no use trying to treat children for a complaint if they are not suffering from it—but neither of the mothers would submit their children to the tests that were involved. So I think therein lies the answer to the honourable member's question.

Mr. TONKIN asked the Minister representing the Minister for Health:

4. When the Minister for Works says that these children were never in hospital, does he mean they were never actually in the building or that they were never in bed in the building?

A member: Don't answer it.

Mr. TONKIN: I want to get it clear.

The SPEAKER: I think this will be the last question on this subject. We are not going to have a cross examination on it.

Mr. ROSS HUTCHINSON replied:

If I do reply I can imagine the story that will build up in the
honourable member's mind. I meant treated at the hospital as an in-patient or as an out-patient.

**BILLS (2): THIRD READING**

1. Corneal and Tissue Grafting Act Amendment Bill.
2. Health Act Amendment Bill.

Bills read a third time, on motions by Mr. Ross Hutchinson (Minister for Health), and passed.

**PERTH MEDICAL CENTRE BILL**

*Second Reading*

**MR. ROSS HUTCHINSON** (Cottesloe—Minister for Works) [4.50 p.m.]: I move—

That the Bill be now read a second time.

This very important measure, as the title implies, is a Bill for an Act to enable a medical centre to be established at Hollywood, by reserving certain lands, and constituting a body corporate for the development, management, and control of such lands, and for incidental and other purposes. It is an important Bill because of the impact it will have on the future of medicine in Western Australia. It represents a significant development of an enlightened policy in our health and hospital services.

The passing of the legislation will enable the Government and the University to embark on a collaborative programme of extending and creating first-class facilities for diagnosis and treatment, not only of the physically and mentally ill, but also of patients in need of rehabilitation, day care, long-term care, etc. It will enable the extension of teaching facilities not only for doctors and medical students, but for nurses and other ancillary workers, and the extension of research in all areas related to disease and patient care.

The concept of the proposed centre, and the coming together of all branches of the medical profession, with the full cooperation of the Government and the University, is probably unique in this country and will, of certainty, be of great benefit to medicine in general. Our existing hospital system is a tremendous, expensive, and expanding enterprise. This must necessarily be so.

Existing legislation providing for the health and hospital services of our State has served the community well. In so far as our hospitals are concerned, the present Act, namely, the Hospitals Act, 1927-55, replaced a pioneer law passed originally in 1894. It is a far cry since then.

The long title of the Hospitals Act describes it as an Act to amend the law relating to public hospitals and to provide for the establishment, maintenance, and management of such institutions, and other relevant purposes. This Act, in the main, is concerned with our hospital system.

The legislation I now introduce dramatically emphasises the progress which has been made over the last decade or so, by which the preventive as well as the curative aspect of our health services has progressed.

I do not think I can emphasise that aspect enough. The whole trend has been to place emphasis just as much on the preventive side of medicine as on the curative side.

Mr. Brady: It is very important these days.

Mr. ROSS HUTCHINSON: It may well be said that the proposal for the establishment of the medical centre as it is set out in this Bill, gives living expression to the enterprise and research of experts in all fields of health and medicine.

Apart from this aspect, it would be hard to believe that the generation of ideas for the establishment of the proposed complex at Hollywood started a decade or so ago, but it was not until 1964 that I, as Minister for Health, was able to give the all clear to a firm plan of development, having in mind the general progress which had been made in the upgrading of our hospital services throughout the State.

In 1964, discussions on the planning of the centre began in earnest. This followed the appointment of a committee, known as the Medical Centre Joint Planning Committee, consisting of representatives of the Department of Public Health, the University, and the Sir Charles Gairdner Hospital. They have been able to co-opt as necessary.

Then followed the sending overseas of an investigating committee of three, comprising Dr. H. J. Rowe, Assistant Principal Medical Officer of the Medical Department, Professor E. G. Saint of the University Medical School, and Mr. M. Fairbrother, an architect of the Architectural Division of the Public Works Department. They undertook a detailed study of architectural and hospital engineering developments in Israel, Denmark, Britain, and the United States of America, and made other inquiries into all aspects concerned with the centre of this nature.

Some of the fundamental principles involved in the centre are—

(a) First and most importantly, that the facilities of the hospital complex should be available to all sections of the community and medical profession.

I would like to emphasise that all the facilities of the hospital complex should be available to all sections of the community: that it should, in brief, be a community hospital in so far as the medical profession is concerned, and that it should
not, in effect, become a closed university hospital. Further principles involved are—

(b) That the centre should provide a comprehensive diagnostic and therapeutic service for a population likely to number 250,000.

That, of course, is a group of the metropolitan population—

(c) That emphasis should be placed on the provision of smoothly-operating and efficient out-patient diagnostic services sparing the load on in-patient facilities.

(d) That hospital buildings, communications, and services should be designed in accordance with the requirements of both patients and staff. Areas of the hospital are clearly designated for acute care, for the care of moderately ill but bedridden patients, and for patients in need of rehabilitative and occupational activities.

The SPEAKER: Order! There is far too much talking going on.

Mr. ROSS HUTCHINSON: To continue—

(e) That adequate facilities for both the acute and long-term care of elderly patients should be provided.

(f) That the centre should be designed to permit future expansion of the medical school and of the Public Health Laboratories.

(g) That laboratory buildings should be designed to permit easy subsequent modification of function and expansion.

The plan and model provides for the accommodation of the following facilities and interrelated institutions—

(a) A 600-700 bed general hospital with a full range of diagnostic and out-patient facilities.

(b) A radiotherapy institute, augmented in size.

(c) Government public health laboratories.

(d) A relocated medical school, with departments of medicine, surgery, psychiatry, pathology, and microbiology.

(e) A large nurses' training school.

(f) Quarters for resident nurses and doctors.

(g) Parking facilities for patients, their relatives, and staff.

The orientation of buildings permits easy access for patients and visitors by public transport from all quarters of the metropolitan area.

Areas have been earmarked on the site for a dental school, future hospital expansion, and a private hospital wing, should any such private hospital be interested. It is hoped that this will be more than a possibility in the not too distant future.

Hospital building is planned to take place to the north of the existing Sir Charles Gairdner block, whilst laboratory buildings will feature on the southern end of the site. Hospital building will include—

(a) New emergency and diagnostic x-ray departments.

(b) An augmented operating theatre block.

(c) A separate low-level out-patient polyclinic lying near to the eastern access road.

(d) A new 240-bed block lying to the north and parallel with the existing Sir Charles Gairdner wing, for intensive and high density nursing care.

(e) A series of low-level blocks of attractive styling lying further to the north, for the care of patients requiring rehabilitation. These wards will be related to a physiotherapy department, and to a day centre for ambulant patients.

The medical school buildings will include a library, lecture theatres, staff officers, and teaching and research laboratories, articulating with both the southern pole of the hospital and the public health laboratories.

Building is planned on a phased basis. The urgent need is for the new public health laboratories and for low-level beds to relieve the heavy load on existing hospital beds. If these facilities are provided, the "heavy" building will proceed over the next decade in a stepwise manner.

The concept of a centre—the idea of a common purpose uniting professional and community, Government and University interests—has dominated thought in planning, leading to what is believed to be the most efficient set-up of its kind for such an important role in medicine.

As I have indicated, the plan permits phased growth and development, in relation to the availability of funds from two sources, Government and University. Thus the building of the public health laboratories, low-level psychiatric and rehabilitative beds—which will include University facilities—may commence in early 1968, to be followed by emergency department and polyclinics, and later, other bed accommodation. Into this programme doubtless the medical school buildings will be integrated.

The earliest stage at which building will commence on the site will be concerned with a nurses' training school to be started in the second half of this financial year. Every effort is being made to start on extra ward accommodation within the next 12 months.

However, as will be observed by members as they pass through this area, work on the site has already started; there is a web of roads close to the Sir Charles Gairdner Hospital and, indeed, near the University.
This work may be described as preliminary to the major project which, when it gets under way, will involve the closing of University Avenue, which cuts through the centre and runs alongside the Sir Charles Gairdner Hospital.

On present calculations, it is estimated that the expenditure involved will be approximately $33,000,000, of which $8,000,000 will be found by the University. The programme which develops will depend on the availability of loan funds. The total concept is expected to spread over a period of 12 to 15 years.

Dealing with the Bill itself, I have already indicated that the long title proposes to establish a medical centre by reserving certain lands and constituting a body corporate for the development, management, and control of the reserve. In the first place, the Bill sets out that it will come into operation on a date to be fixed by proclamation.

There is the usual definition clause, which indicates that the term "medical centre" includes the aggregate of any medical school, hospital, and any other place whatsoever bull. on tlo :ezaarvc or incidental to any such medical school, hospital, or place.

The term "medical education" includes the instruction of medical and dental students, nurses, and students of any services ancillary to medical or dental treatment. It will be noted that the word "medical" is used rather than the word "means," thus implying that the terms "medical centre" and "medical education" are not restrictive, but can cover anything that can be described by those particular terms.

The Bill then goes on to say that the land described in part I of the schedule, which, in the main, is owned by the University, shall be revested in Her Majesty as of her former estate, and on the necessary publication of an Order-in-Council, all land subject to this particular clause shall be removed from the operation of the Transfer of Land Act. It is then reserved for the purpose of establishing and maintaining thereon a medical centre and is classified as an "A"-class reserve and shall be known as the Perth Medical Centre Reserve. It is thereby given the title of a Crown-in-Council, and the proceeds will be found to members, cannot be altered unless by Act of Parliament. The total area involved is approximately 70 acres.

The Bill further proposes that there shall be a trust, known as the Perth Medical Centre Trust, consisting of five members whose functions shall be to undertake the development, control, and management of the reserve.

One of these members will be a person appointed by the Governor on the nomination of the Minister and the Senate of the University, to hold office during the Governor's pleasure. The Bill proposes that this person shall become the chairman. The other four members will comprise two nominees by the Minister, to hold office during the Governor's pleasure; and two persons appointed by the Senate of the University, to hold office during its pleasure.

There is provision that the trust shall be a body corporate, with perpetual succession; shall have a common seal; and shall be capable, subject to section 13 of this Bill, of acquiring, holding, and disposing of real and personal property and of suing and of being sued in its corporate name.

There then follows in the Bill various clauses concerned with quorums, procedure to be followed in the event of vacancies arising—in fact, the procedure one finds in Bills of a similar nature. It also covers the calling of meetings of the trust. There is also reference to the functions of the trust and, as I have already indicated, these are concerned with the development, control, and management of the reserve.

It should be here noted that these functions are not concerned with the management of the medical centre itself; as, for instance, the management of the Sir Charles Gairdner Hospital, or the Radiotherapy Institute. These will continue to operate in co-operation with the trust under their respective boards of management, and under their relevant Acts; that is, the Hospitals Act and the Cancer Council of Western Australia Act. It could well be that in time these managements will merge, but, for the present, it is felt they should retain their identity and their separate areas of control.

By this clause, the trust is empowered, with the approval of the Governor, to borrow moneys on such terms and conditions as the Treasurer approves; and the Treasurer is authorised to guarantee on such terms and conditions as he thinks fit, the repayment of any money borrowed by the trust under this particular clause.

The trust is also empowered to employ in developing, controlling, and managing the reserve, any sum provided for those purposes by Parliament and any funds arising from profits, fees, penalties, or otherwise coming into the hands of the trust in the course of developing, controlling, and managing the reserve.

There is an important provision in this clause which says the trust shall not sell or, without the consent of the Governor, lease, mortgage, charge, or otherwise deal with any land forming part of the reserve, but may, with such consent, from time to time, lease for a term not exceeding 99
years, mortgage, charge, or grant easements over or under any part of the reserve.

There is power also for the trust to accept any gift or bequest and apply the proceeds in such manner as the trust thinks fit towards the improvement of the medical centre or the extension of the objects for which it is established. There are powers also to employ officers as may be deemed necessary.

There is provision for the submission to the Minister of reports and financial statements regarding the operations of the trust, copies of which shall be forwarded also to the Senate of the University. It is required that the trust furnish to the Minister for presentation to each House of Parliament an annual report regarding its operations. A copy of this shall also be forwarded to the Senate of the University. There is also the necessary safeguard with regard to the auditing of financial statements by the Auditor-General.

There is an important provision in the Bill which sets out that each hospital established on the reserve, declared to be a teaching hospital, shall have a managing body. This body will be appointed under the Hospitals Act. There is also provision in the Bill that not less than one-fifth of its members shall be persons nominated by the Senate of the University. Furthermore, it is provided that such teaching hospital shall have a committee, known as the appointments committee, which shall be charged with the duty of nominating persons for appointment by the managing body of the hospital to its medical staff. It is here emphasised that the managing body is the final arbiter in this decision and that the appointments committee nominates the persons for appointment.

The appointments committee will consist of seven members, three of whom shall be persons appointed by the managing body of the teaching hospital and three by the Senate of the University, one at least of whom shall be a member of the Faculty of Medicine at the University of W.A. The remaining member will be the chairman of the managing body of the hospital. It is proposed that the period of their appointment shall be for three years.

There is also provision that the Parks and Reserves Act, 1895, does not apply. This is designed to indicate that the Bill, in itself, provides for an Act of its own particular significance, to be called an “A” reserve, and shall also be the chairman of the managing body of the teaching hospital.

There are the usual powers for the making of by-laws, keeping of accounts, the conduct of persons frequenting the reserve, and with regard to trespass and the regulation of traffic. These provisions explain in general the proposals in this measure.

The Bill in itself is small in size, but, as I said earlier, it is substantial in importance. It opens up a concept of medicine which, as far as I can gather, has not yet been attempted elsewhere in the Commonwealth. It is a long-term arrangement and will need considerable sums to bring it to fruition. I think everyone will hope that the plan can be adhered to and that it will not be delayed through the lack of necessary loan funds.

The Bill follows a lengthy period of research by many dedicated professional men and others in the administrative field who are really too numerous to mention. Its proposals are soundly based on advice received from all parts of the world. Some of this has been written advice; but, as I indicated previously, the Government has not been satisfied with this: it sent overseas an expert committee to do what I have referred to.

The Bill will, it is believed, set the pattern for further medical centres as may be necessary in the metropolitan area and the country; and it may well be that the concept of regional hospitals in our main country towns will gradually evolve into regional medical centres.

Debate adjourned, on motion by Mr. Brady.

PERTH MEDICAL CENTRE BILL

Message: Appropriations

Message from the Governor received and read recommending appropriations for the purposes of the Bill.

FLUORIDATION OF PUBLIC WATER SUPPLIES BILL

Second Reading

Debate resumed from the 11th October.

DR. HENN (Wembley) [5.12 p.m.]: About three years ago I spoke on a similar Bill which was before the House and on that occasion I said, amongst other things, that I did not object from a medical point of view to the fluoridation of public water supplies. As I have said, roughly three years have passed since then, and I have not changed my point of view. That is to say, I do not believe anything but good can come from the insertion of one part per million of fluoride in the public drinking water.

I may have spoken a bit too long on that occasion, and I certainly will not speak as long tonight. I did spend a lot of time weighing up the pros and cons of the various authorities, for and against fluoridation, but I do not propose to go over that ground again.

It is true, as the Deputy Leader of the Opposition pointed out when he opened his speech on Tuesday, the 8th October, 1963, that this is a very important subject; and I quote from his remarks—

It should be borne in mind that on this question there are no experts in
this House, and I make no exceptions in saying that.

I remember those words well; and I think he was right. He went on to say—

Therefore, the only argument which we can use is the one known as argument from authority.

That would seem to be the position with all of us, but I do not think we can ignore altogether the authoritative views of medical science in this matter.

There is a large amount of literature on the subject of the fluoridation of water supplies, some of it produced by individuals, some by committees or boards, and some by groups. Therefore it is essential to select from this huge amount of literature that which appears to be seeking the truth rather than that which would be useful to anyone who might want to play upon the emotions of the public.

Mr. Graham: You are reflecting on the Minister now, are you?

Dr. HENN: I listened to some of the honourable member's interjections last night, and I do not think the one he just made is a very good one and I do not propose to answer it.

Mr. Graham: You cannot answer it.

Dr. HENN: Oh, yes I could if I wanted to. The honourable member should try to make me out later on.

Mr. J. Hegney: Put it on the notice paper!

Dr. HENN: The Deputy Leader of the Opposition made a long speech last night, and I do not want to spend too much time on it. However, one or two things he said require answering, as most of his speech I thought was somewhat irrational, emotional, and definitely misleading. I do not want to suggest that the Deputy Leader of the Opposition was intentionally misleading the House or the public, because I know him too well personally to believe he would do that. However, having sought a reason for his remarkable and wild statements, I have come to the conclusion that two possible reasons exist. One of these is because he became over-enthusiastic on the matter and went off the rails to some extent; and the other is possibly because he was not qualified to interpret a great deal of the literature which has been written on the subject.

Mr. Hall: Who is qualified?

Dr. HENN: I say this with great humility, because it must be appreciated that doctors who are trained, and particularly the specialists—I am referring to the specialists who have made pronouncements on the fluoridation of public water supplies—have spent many years first of all on their basic training, and then on their specialist training, and subsequently on their research work. Some of them are still engaged on research and even they, no doubt, find it difficult to draw conclusions—and the correct conclusions—from the great amount of literature available. Therefore I feel that the Deputy Leader of the Opposition made these misleading statements, because he was not sufficiently trained in these matters to be able to interpret the literature.

Mr. Graham: I presume you are now going to debunk!

Dr. HENN: If the member for Balcatta will remain calm, he will find out what I am going to do.

Mr. Ross Hutchinson: That has already been done!

Dr. HENN: First of all I am going to have a drink of water which is not fluoridated.

Mr. Graham: It might be your last chance!

Dr. HENN: The first point in the speech of the Deputy Leader of the Opposition on which I wish to comment concerns the case of chronic fluoride intoxication on which he spent some time. The gist of what he said was that the man who was about 64 years of age, had died of fluoride poisoning. I have read through the rough copy of the speech of the Deputy Leader of the Opposition, and that is the gist of what he said. However, I am going to suggest that is not what the article stated at all. In fact the article stated that the patient was admitted to hospital for the last time in May 1962—he had been admitted many times previously—and he died three days later.

Mr. Hawke: You admit he died.

Dr. HENN: I admit he died, because the report says so. I admit all that is stated in the report. It is the interpretation placed on the contents of the report with which I do not agree. This man for 32 years had symptoms of polydipsia and polyuria which, in plain language, I understand to be frequent drinking, and frequent passing of urine. As I said, he had those symptoms for 32 years, but to what disease were they attributable? On page 1075 is the following:

The principal disorder was thought to be due to anyotrophic lateral sclerosis.

That is a fairly rare disease of the spinal cord. This information I am reading is taken from the clinical notes, and I mention that because I will refer to it again later. The report continues—

In 1954, the patient was readmitted because of acute epididymitis and intermittent retention of urine of 1 month's duration. His bladder was markedly distended, and the neurological signs of spastic quadraparesis had increased since 1950.

So it is evident that this patient had been getting worse over the years. However, although the Deputy Leader of the Op-
position said that this patient died of fluoride poisoning. I do not agree with him at all, and I do not think anyone who knew what he was reading would come to that conclusion.

I am going to read the autopsy findings of this case in full so that they will appear in Hansard for anyone interested to read. When I have finished quoting, I am going to draw my conclusions. I do not want to read only portions of these findings, because I want the complete findings printed. On page 1076 is the following:—

AUTOPSY FINDINGS

The sternum, calvarium, and vertebrae were extremely dense. In the skull there was no spongy bone between the tables; the cranial vault was 2.5 cm thick and was uniformly white and dense throughout. The anterior fossae showed massive protuberances of bone. The clinoid processes were white, thick, and homogenous. The sella turcica was of average size. The vertebral column was massive. The spinal cord was symmetrical in its upper cervical portion and disclosed no gross abnormality.

Multiple sections of vertebral bone showed marked thickening of trabeculae with prominence of the lamellar lines. The marrow spaces were markedly narrowed. Osteoblastic reaction was noted in several areas. There was no significant evidence of active bone resorption. The marrow appeared normal. Sections of the upper cervical cord showed increased numbers of corpora amylaceae.

The pituitary gland was grossly normal in size and appearance. Sections of the anterior lobe showed normal appearing and normal numbers of acidophilic, basophilic, and chromophobic cells when stained with hematoxylin-eosin and periodic acid-Schiff. Sections of the posterior lobe stained with hematoxylin eosin and the silver impregnation technique showed normal nerve cells, fibres, and neuroglia.

The parathyroids were normal in size; sections showed normal numbers of oxyphil and chief cells with no evidence of hyperplasia.

The right lung showed patchy consolidation, confluent in some areas. A culture of the exudate revealed Staphylococcus aureus.

Mr. Nalder: No wonder he died!

Dr. HENN: I will pause there for a moment because I want to suggest that from that report it is evident this patient died of pneumonia. Everyone knows of the golden staph.

Mr. Tonkin: Are you sure it was not the measles?

Dr. HENN: If the Deputy Leader of the Opposition will listen to me he will know what I believe it was. I know this will be unpleasant for him, but he will listen, I hope.

Mr. Tonkin: Don’t you worry, he is listening!

Mr. Ross Hutchinson: He does not heed; that is the trouble!

Dr. HENN: This man died of pneumonia.

Mr. Hawke: It took a long time.

Dr. HENN: Everyone knows how fatal pneumonia can be. The report continues—

The bladder was dilated and trabeculated. Bilateral dilation of the ureters and calyces was present. Acute inflammatory changes were noted in the renal pelves. In sections, chronic inflammation was noted in the renal parenchyma, and hyaline casts were seen in liddated tubules. Some glomeruli were fibrosed.

A toxicologic study disclosed an elevated bone fluoride content of 610 mg/100 g of dried bone and a liver fluoride content of 6.1 mg/100 g of dried liver (method of Frere (3)).

Mr. Graham: Which part of him was fit?

Dr. HENN: That concludes the autopsy report.

Mr. Graham: What a mess!

Dr. HENN: I conclude from that—

Mr. Graham: You should conclude!

Dr. HENN: —that the man died from pneumonia. I do not want to bore the House by reading any more of the clinical symptoms this patient had. He undoubtedly had kidney trouble for about 35 to 40 years.

Mr. Jamieson: What caused the pneumonia?

Dr. HENN: That has nothing to do with my argument.

Mr. Hawke: What argument?

Dr. HENN: As I said before, the immediate cause of death was pneumonia. A contributing factor was chronic renal disease and, I might add, amyotrophic lateral sclerosis of the spinal cord. The only mention in this autopsy report of that part which interests the Deputy Leader is the reference to the amount of fluoride content in the bone and in the liver; and I say without hesitation that that had nothing to do with the death of this man.

The Deputy Leader of the Opposition selected parts of this report to place before the House and the public, not with the intention of misleading them, but that is what happened. I will not sit down and take that sort of thing.

Mr. Court: Hear, hear!

Dr. HENN: I know better than that. I do not blame the Deputy Leader of the Opposition, because he is meddling in
of the Opposition

At that point, the honourable member mentioned that he was driving at, but I was able to obtain what he was speaking, and it was subsequently informed by the Minister that he had been in touch with Martindale. A new *Extra Pharmacopoeia* was to be issued and it was proposed to lift the maximum dose to 150 milligrams.

Mr. Speaker, the honourable member went on to say, "If the Government does that, it will be guilty of murder."

I tried to find out what he was driving at because, as I have already explained, this "Martindale" is merely a book compiled by the council of the Pharmaceutical Society of Great Britain. It is used by all chemists and pharmacists where English is spoken as a guide to maximum dosage and minimum dosage and other items of interest regarding pharmacology. It is used extensively, and I would say there would not be a chemist who did not have one in his shop.

Consequently, it is not likely that anything the Minister for Health in the Government of Western Australia might do or say to the publishers or the authors of Martindale would influence them to change their minds, or to change one word of that book.

I refer to the word "murder"; I refer to where the Government is supposed to be guilty of murder. I think the Deputy Leader of the Opposition at that moment must have been looking up to a large number of people in the gallery and, in consequence, went off the rails and became emotional, because I can assure him that this Martindale is brought up to date from time to time—in fact, very frequently—and there is not likely to be a single mistake in it; and should it be printed with a printer's error, this would be corrected extremely smartly. I suppose his remarks were intended to cause a bit of furor to those who were listening last night to the honourable member.

Another matter which intrigued me when he spoke about it was the question of allergy. This morning I intended to try to make some check on this, but I have not had time to do so between last night when we adjourned and this evening. However, obviously the Minister for Health has been doing that and, with your permission, Mr. Speaker, I would like to read out just a small section in the paper. It is headed, "Minister Denies Fluoride Story." I am referring to what the Deputy Leader of the Opposition said last night and I will quote what he said because he was arguing with the Minister
a minute ago as to what he did say. He said—

I learnt a few hours ago that at the Princess Margaret Hospital here in Perth three children are listed as being allergic to fluoride. One of these children has eczema.

Then the Deputy Leader of the Opposition continued and tried to make a big story of it. However, I did remember some of the details of this allergic business three years ago and I know one of the cases quite well. I will not go into the details of that case but, if I told the story, it would be a complete argument against what the Deputy Leader of the Opposition said. However, I will quote what the Minister for Health said in today's paper—or is reported to have said—and this is as follows:—

Deputy Opposition Leader Tonkin claimed in the House that he had information that recently a child suffering with eczema was given fluoride tablets—and the complaint had flared up.

The child, he said, was one of three children treated at the hospital for similar allergies.

Said Mr MacKinnon: "No child has ever been admitted to Princess Margaret Hospital with allergies due to fluoride.

"Additionally, no case of suspected fluoride-sensitivity has been substantiated at the hospital."

He admitted, however, that three children had been referred to the hospital because of suspected sensitivity.

"Of the three children referred, one was found on investigation not to be sensitive. It was impossible to prove to the mothers of the other two children that they were not allergic because the mothers would not agree to the investigations necessary," said Mr MacKinnon.

I think that is a complete denial of the allegation—or the assertion—that the Deputy Leader of the Opposition made in his speech last night.

As I say, Sir, I have not had time to go through this very long speech, or to deal with many other points with which I would like to deal; I shall leave it to some of my colleagues who will, no doubt, have more time because they will be speaking after me.

I would like to pass on to something which might be termed "less negative." Three years ago I said I supported the fluoridation of water supplies and my statement was made three months before the Bill was brought down in 1963. I had not made up my mind to support it until that time. What made me come to my conclusion was the Expert Committee's Report of the World Health Organisation. That was one thing which influenced me; and I mentioned numerous others. Those were statements made by the National Health and Medical Research Council, the British Medical Association, the Australian Medical Association, the American Dental Association and the Australian Dental Association, and, last but not least, the Department of Public Health, Western Australia.

I know that last night the Deputy Leader of the Opposition tried to make one that the Expert Committee of the World Health Organisation was no good. He indicated that somebody had been shanghaied into it for some extraordinary reason—I could not make out what it was; I could not make out whether it was a take-off or whether the individual came to some conclusions and then rushed off to get a large amount of money for them.

I have not had time to read the speech fully, but he did insinuate that this committee was of no consequence. I am going to suggest it was of every consequence; that it is one of a number of special, or expert, committees. I am not suggesting that, because this committee is of a medical nature, it is better than any of the others. However, the members of the committee are selected for their special knowledge and technology and they are selected from any country in the world.

Although I do not know the gentlemen who were on the committee, I am going to suggest that they are reputable in the spheres in which they work. I will not give their names again, but they are there to be seen. There are seven of them and they set to work on this job they were given. I would like to read this one small paragraph written by the World Health Organisation—

Expert advisory panels and committees are an essential part of the machinery of WHO. Their purposes and functions are to provide the organisation with technical advice on particular subjects. The Director-General has authority to establish expert advisory panels and to select and appoint their members, who undertake to contribute by correspondence and without remuneration technical information or reports on developments within their own specialties. They serve in their personal capacity and not as representatives of Governments, institutions, organisations, or other bodies. Expert committees are convened to discuss particular subjects; their members are selected by the Director-General from the advisory panels, the choice being governed by the agenda of each session. The selection of members of both expert advisory panels and committees is based primarily upon their ability and technical experience, with due regard to adequate geographical distribution.

I am not going to leave out a large portion of this, lest the Deputy Leader of the Op-
position accuses me of wanting not to read it. To continue—

Reports of expert committees are of basic importance to WHO. While not necessarily expressing the views of the organisation, they are taken into consideration in developing policies and programmes. The publication of reports of expert committees is authorised by the Executive Board.

I suggest the reason they make that statement “not necessarily expressing the views of the organisation” is in case there are political implications with regard to any of the matters that the various special committees look into. Obviously, they do not want to become involved politically. They are doing a job for the benefit of the world and they reserve the right to be dissociated from the statements of these special committees. And I consider that is a fair thing. To my mind, that is the reason why those words were used.

I do not propose to speak very much longer, but I would like to refer to the summary of this first report on water fluoridation. I may say that it was published in 1959. In listening to the Deputy Leader of the Opposition last night, it seemed very strange to me that if all this danger is about, if all these deaths are taking place, if the terrific allergies exist, if mongolism and all those other things mentioned have any connection with fluoridation, why has not this organisation convened another committee? I would like to know the answer to that if these allegations are true. The reason this organisation has not convened another committee is because it is of the same opinion now as when it published this report; I am quite certain of that. I would like just to reiterate one or two of the summaries of this first report. It says—

Among the numerous preventive methods, the fluoridation of drinking-water supplies is the most promising.

The effectiveness, safety, and practicability of fluoridation as a caries-preventive measure has been established.

Hundreds of controlled fluoridation programmes are now in operation in many countries. Some have been in progress for the past 12 years—

I might mention this was in 1958. To continue—

—so that conclusions are based on experience. No other public health procedure, during the initial stages of its application, has had such a background in time or extent.

I now turn towards the end of the summary at item No. 13 which says—

Growth and development, somatic and psychic, are normally in children drinking water containing 1 p.p.m. fluoride.

Over 3 million people in the United States of America, over half a million in England,—

I might interpolate here that there are also over half a million in Australia. Continuing—

—and large population groups in other countries have, during their lifetime, consumed water containing 1 p.p.m. fluoride or more. Mortality and morbidity rates for five leading causes of death are comparable for cities in the United States of America with fluoride and non-fluoride public water-supplies. No relation between fluoride and arthritic changes in bone has been found, nor have confirmed cases of allergy to water containing p.p.m. fluoride been described.

The addition of fluorides to public water-supplies has proved to be similar to other routine mechanical procedures widely employed in waterworks practice. Suitable equipment has been developed, reliable analytical procedures are available, and appropriate safeguards have been established.

No other vehicles or techniques for the prophylactic application of fluorides can at present replace the fluoridation of drinking-water as a public health measure. Where water fluoridation cannot be used, research into other vehicles and improved methods of local fluoride application should, however, be encouraged.

I now want to mention two matters. A small number of people in my electorate within the last two or three months approached me and asked if I would consider making representations to the proper quarter to have fluoride tablets distributed free by the Government. I told most of them I had no objection to such a proposal; it would be quite satisfactory. However, I want to say that, undoubtedly, from all the literature I have been able to read, it is evident that although tablets are a suitable method of ingesting fluoride, the placing of fluoride in public water supplies is the best or optimum method.

Therefore I cannot blame the Government for introducing this Bill for the fluoridation of public water supplies. Indeed, I congratulate it, in the face of a few people who are making a great deal of noise over the Government going ahead in its endeavour to do its best for the community. Fluoride tablets are the second best method and are quite satisfactory, but they are not good enough. I am proud to be a member of a Government that is prepared to adopt the best method. That is all I have to say to the people in my electorate who seek to have fluoride tablets distributed free of charge by the Government. To them I say that, from a medical point of view, the fluoride-
tion of public water supplies will give them a better service.

My final comment is that it seems to me the people can become quite hot under the collar over this matter. In referring to the Department of Public Health in this State, I would point out that as a health department it is of no mean order. I would not be surprised if it were the best within the Commonwealth of Australia. There are some remarkable officers giving service in that department. In that fact that those officers, from the Commissioner of Public Health, downwards, would agree to the introduction of a measure such as this if it were considered it would adversely affect one baby in Western Australia. I am quite certain they would not agree to the measure if they were of that opinion.

I was wondering whether the Deputy Leader of the Opposition, in all the mass of literature that is available on the fluoridation of public water supplies, was seeking the truth, or seeking just that part of it which he could use to play on the emotions of the public. I will leave the House to decide that question.

MR. MAY (Collie) [5.50 p.m.]: As members of this Parliament, we should intimate to the public our attitude towards the measure and give those people who are for or against fluoridation of water supplies an opportunity to decide the issue for themselves. When introducing the Bill, it was obvious the Minister was fully convinced that the fluoridation of water supplies was the correct step to take. Having said that, I cannot give him any further credit.

As a layman I do not intend to quote what has been said or written for or against this proposal. My attitude towards fluoridation of public water supplies is that if we are to adopt this scheme, the people should be consulted as to whether it is right or whether it is wrong. There are mountains of propaganda both for and against this proposal, and much of the literature has been circulated among the people and they have become confused on the subject. I am not greatly concerned with what the member for Wembley has said. I maintain that if the people were given an opportunity to decide this issue by referendum, and the majority voted for it, everything would be in order, but to foist such a proposal onto the people would be entirely wrong, because there are many who are scared stiff as a result of the propaganda that has been issued on this subject, including people in my own district.

I do not know much about the subject but I do know that to force people to accept fluoridation of water supplies without giving them an opportunity to decide whether they want it is wrong in principle. I have decided that I will not be persuaded either way by any propaganda on the matter that has been forwarded to me. There is no doubt that the subject has become of real interest among the people of the State. No matter where one goes, fluoridation of water supplies is talked about by various groups. Some want it and others do not want it, so who are we, as members of Parliament, to say, "You are going to have fluoridation of water supplies without having an opportunity of saying Yea or Nay"?

In that part of the State which I recently visited there are people who are really scared stiff over this matter. The propaganda that has been issued against the proposal contains some startling statements.

Mr. Ross Hutchinson: Surely you do not believe them?

MR. MAY: I did not interrupt the Minister while he was speaking, and I gave him credit for believing what he told us when he introduced the Bill, but that is as far as I can go in extending any credit to him. The people to whom I have spoken are really frightened over the propaganda which has been freely circulated. Members of the medical fraternity should have far more knowledge of fluoridation than a layman and that is why I will not speak in technical terms when discussing this matter. I merely wish to indicate to people my attitude towards it.

I would suggest that the adherents of the party which forms the Government in this Parliament have on many occasions, unsuccessfully endeavoured to tie the Labor Party to the Commonwealth Party, but they have failed miserably. The nearest approach to communism that one could get would be to regiment completely the people in regard to this subject. To those who are in favour of fluoridation and who are trying to bring it to fruition, I suggest they should give the matter a great deal more thought. In my reckoning it will mean that if we are to be regimented on this proposal we will be regimented on many others.

Because the Government has a clear majority at present, it is completely ignoring the Opposition in this Parliament. The Government just pushes ahead with its proposals, completely disregarding the opinions expressed by members of the Opposition, and that is entirely wrong. I am strongly against any regimentation in respect of the fluoridation of water supplies, and I know there are many other people in the State who hold the same opinion. Therefore the people of Western Australia should be given an opportunity to decide whether they want fluoridation. I repeat that this move is the nearest step that one can take towards the regimentation which is practised in communist countries, and I hope the Government will not continue with its plans.

I have no right to make a decision on an issue which includes a proposal to
interfere with the purity of water supplies in this State until the people who have to drink the water be consulted. I am not learned enough in technical matters to decide whether fluoridation is right or wrong, but I repeat there are many people in Western Australia who are scared of the proposition contained in the Bill. I therefore hope common sense will prevail and the Government will give the people an opportunity to say whether they want fluoridation. If the people decide to reject the proposal, what happens subsequently to their health is their responsibility; but at least they should be given an opportunity to decide the issue for themselves.

People have existed for hundreds of years without their water supplies being fluoridated, so why should we be pushed into accepting this proposal without having an opportunity to say Yea or Nay? If a referendum were taken, the people who desire fluoridation of water supplies would have an opportunity to make their decision without legislation, but if the Government thinks the people of this State are incapable of using fluoride in the manner it should be used, I do not think they should be forced into accepting it in their water supply.

I sum up the matter in this way: If the people of the State decide they want fluoridation and the scheme is put into effect, no objection can be taken to it; but, whatever steps are taken to implement fluoridation of public water supplies, the people should be consulted, and therefore I do not intend to support this Bill.

MR. BURT (Murchison) [6 p.m.]: I rise to support this Bill, as I supported a similar measure three years ago. I repeat that I do so, not because I possess any technical or scientific knowledge, apart from what I read recently and heard during this debate, but because I feel I am well enough informed and sufficiently experienced to speak on the practical effects of fluoridation in a particular area of Western Australia. I refer to the Murchison district, particularly the town of Cue where I lived for some 25 years.

It is generally known to all that Cue possesses natural fluoride in its water supply, in what is generally regarded as being the most suitable and satisfactory proportion to add to water in order to provide the correct quantity of fluoride to be most beneficial to teeth. Fluoride prevents tooth decay, and because it does not cause injury, illness, or early death to a community that consumes fluoridated water, it plays a very important part in the dental health of the people.

In the early part of this century some 10,000 people in the towns of Cue and Day Dawn drank the water naturally fluoridated in proportion which is considered to be beneficial to teeth. Not only did those people drink this water, but they drank it in large quantities, because the temperature in that area reaches over the century for many days during summer. If the claim that the intake of fluoridated water is detrimental to one's health, then there would have been large concentrations of fluoride found in the systems of people living in the area.

Last evening the Deputy Leader of the Opposition referred to the survey that had been conducted by the Department of Public Health on children living in Cue, and on those living in Meekatharra, which is some 73 miles to the north-east. The water supply of Cue contains from 1.2 to 1.5 parts per million of fluoride, whereas that of Meekatharra contains something like 25 parts per million. The Deputy Leader of the Opposition told us that dental decay was worse among the children of Cue than among those of Meekatharra. I am prepared to believe what he said, although I have not had time to examine the report which he stated had been made in 1951.

I have here a report by Dr. Kallis of the Perth Dental Hospital setting out the results of a survey which was conducted amongst the children of the Cue and Meekatharra districts in 1961. This report showed such a marked benefit among the Cue children, as compared with the Meekatharra children, that it is very difficult to understand how such a vast transformation could have taken place in a period of 10 years—between 1951 and 1961.

In the survey it was shown that the proportion of school children who were not affected by dental caries was as follows:

- Cue—2 out of 16 were not affected.
- Meekatharra—All were affected.

The figures for decayed tooth surfaces showed:

- Cue—15 per cent.
- Meekatharra—47 per cent.

The number of children who were tested were as follows:

<table>
<thead>
<tr>
<th>Preschool</th>
<th>School Total</th>
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<tr>
<td>Cue</td>
<td>Meekatharra</td>
</tr>
<tr>
<td>22</td>
<td>12</td>
</tr>
<tr>
<td>46</td>
<td>40</td>
</tr>
</tbody>
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The survey showed that the caries life experience—that is, teeth which have been affected by decay from birth—were:

- Cue—Among the preschool children, 4.14 per 100 teeth were decayed.
- Meekatharra—Among the preschool children, 12.5 per 100 teeth were decayed.

Overall, the decayed teeth among the children of Cue totalled 94 out of 784, or 12 per cent, whereas among the children of Meekatharra they totalled 382 decayed teeth out of 1,181, or 32 per cent. The survey showed that 1 out of the 22 preschool children in Cue were completely free of caries, while only six out of the 12 in Meekatharra were completely free.
from the figures I have given the teeth of the children at Cue are far less affected than the teeth of the children at Meekatharra.

I should also mention my personal experience. The less said about my wife's and my own teeth the better, but our three sons who were reared in the Cue district have very healthy and strong teeth. I attribute this—although I did not realise at the time to the fact that they have drunk naturally fluoridated water since they were babies, and no doubt their mother also drank this water before they were born.

The school mobile dental clinic which visits the Murchison district twice a year finds that once the agricultural areas—the Wongan Hills and Mullewa districts—are left behind and the Murchison district is reached, the teeth of the children show a marked improvement; they are much stronger and are less decayed. That trend exists throughout the towns of the Murchison.

At Granite Peak Station I understand the naturally fluoridated water reaches six to seven parts per million, and although the children there have very mottled teeth, their teeth are excellent. As far as we know there are no ill-effects on the people who have resided there for many years. That illustrates the beneficial effect of drinking naturally fluoridated water in the area I have mentioned.

It is only fair to look at the other side of the picture to ascertain whether this naturally fluoridated water has had any ill-effects on the health of the community. I must again repeat what I said during the second reading debate on a similar Bill in 1963; that is, I spent some time looking through the death register of the town of Cue which has been kept since 1890. I found that the average age of the people who had died in Cue—apart from those who met their deaths through accidents, or causes which were not due to the effects of fluoride—was 74.4 years. In my view that is pretty conclusive evidence of the good health of a community which has drunk fluoridated water for 70 or 80 years, because the average age of the local inhabitants was 74.4 years at time of death.

In the 1963 debate I mentioned the names of a few gentlemen of my acquaintance who had died in the 1960s. One was Mr. Patrick Morrissey, who died at the age of 93 after having lived nearly all his life at Nallan Station, which is the source of the Cue water supply. I also mentioned numerous older pensioners who had lived into their 90s before they finally passed away. There are still a few of these gentlemen in the town of Cue, and they are increasing in years. No doubt they will reach the 90 mark also.

Mr. May: That does not only apply to people who drink naturally fluoridated water. It is applicable to hundreds of others. I know many people who have lived up to 70 and 80 years.

Mr. BURT: I agree wholly, but if we are to believe what was said by the Deputy Leader of the Opposition about the dangerous effects of drinking fluoridated water, then anyone living in Cue is lucky to reach 30 or 40 years of age. What I have said is conclusive proof that the seeds of drinking fluoridated water are not as bad as the Deputy Leader of the Opposition would have us believe.

Mr. Hawke: Would the figures you have given for Cue regarding deaths include the local people who had gone to the Royal Perth Hospital or some other hospital in the metropolitan area and died there?

Mr. BURT: They were people who had been buried in the Cue cemetery.

Mr. Hawke: I thought that was so.

Mr. BURT: The figures do not include those who died from accidents or similar causes. The relatives of many of the old inhabitants of those country towns do not like to see them buried in the metropolitan area, and in many cases the bodies are returned for burial in the district.

On Monday last I attended a Rotary meeting at Kalgoorlie as a guest speaker, and there I met a young student who is on exchange from Pennsylvania. He asked me if during his next visit to Perth I could show him over Parliament House to enable him to listen to a debate. This student resides at Merredin, where he is undertaking a course at the local high school. He told me he was very interested in the politics of the countries he visited, and asked how was the fluoridation legislation faring. I told him the debate would take place this week, and I asked him for his views on the subject. He said he was a resident of Pennsylvania, where the people have been drinking fluoridated water for as long as he can remember. He said this did not have any ill-effects on them. I told him that the fluoridated water had not harmed his teeth.

Mr. Hawke: What about the other parts of his body?

Mr. BURT: I did not discuss that matter with this young person. Despite what the member for Collie said a little while ago, it is the duty of a responsible Government to endeavour to improve the shocking state of dental health of the children of Western Australia. If it means the placing of certain compounds in the water supplies, it is a move in the right direction, whether or not some people like it. The people who for some reason or other set out to oppose the compulsory medication of drinking water do not consider what good this might do for millions of others. They seem to get a little off beam in endeavours to oppose
what they regard as the conscription of habits of the people.

**Sitting suspended from 6.15 to 7.30 p.m.**

Mr. BURT: I was about to conclude my speech, Mr. Speaker, when you called me to order for the tea suspension. I would like to finish by saying I feel that the responsibility of the Government and of the nation towards the young children, whose future health is so very important, is greater than the fear which I consider to be most illusory in the minds of the people who are objecting to fluoridation.

I wish to read an extract from the presidential address to the Health Congress at Harrogate in 1959 by Lord Cohen of Birkenhead, M.D., D.Sc., LL.D., F.R.C.P.

It was published in the *Royal Society of Health Journal* 1959, vol. 79, pages 221 and 222. It reads as follows:—

An interesting aspect of the effect of mass suggestion in projects of this nature is shown by the experience that was had in the Meekatharra area. In Charlotte, North Carolina, where it was announced that fluoridation would begin on 1st April, 1949. Next day a flood of complaints poured in of unpleasant taste, of stains on clothing and crockery, of ruined photographic films, of the death of flowers and goldfish. But it was later revealed that the fluoridation had been postponed; and rather sheepishly the complaints ceased. On 25th April, fluoridation was started, unannounced; there were no complaints!

I feel that experience has a very great bearing on the arguments of those who oppose fluoridation. As I have revealed earlier, the fact that practical experience has shown there is a benefit from fluoridation—as against the lack of any injurious effect caused by it—has made me realise it is most essential that fluoridation be brought to the community in Western Australia.

**MR. KELLY (Merredin-Yilgarn)** [7.34 p.m.]: The member for Murchison, who has just resumed his seat, referred to Cue and its fluoridated water. That fluoride is a natural fluoride and must not be confused with the artificial or manufactured type of fluoride we are faced with having to use to fluoridate the water.

I suggest to the honourable member that in the country he speaks of, particularly for some distance around that area, there is a tremendous amount of limestone and undoubtedly, as it is in such quantity, that water would be filtered. That must have some bearing on the quality of that water. It has always been found that where there is limestone in an area where water is drawn for stock, the water has a beneficial effect on the stock. That applies particularly to horses and their bone structure. That is a recognised feature with horses bred in country containing an amount of limestone.

So, without wishing to detract from the previous speaker's thoughts—because there could have been quite a lot of fluoride, but perhaps as powerful as the manufactured fluoride—I do think the limestone would have had some bearing on the great satisfaction that has been recorded in regard to dental health in that area. I do not know if the natural fluoride is as powerful as the manufactured fluoride; I do not know the technicalities of the subject.

Mr. Burt: Would you say it was only accidental that the children's teeth at Cue were in better condition than the teeth of the children at Meekatharra?

Mr. KELLY: I think the honourable member will agree that the limestone is much deeper in the Meekatharra area than it is in the Cue area. The limestone is almost the subsoil in many parts around Cue whereas, in the Meekatharra area, it would be 12 or 14 feet under the surface.

Mr. Burt: I have never seen limestone in the Cue area.

Mr. KELLY: I have seen it in both the Cue area and the Meekatharra area. In fact, I have had one deposit examined and so I know it exists. If the honourable member cares to delve deeper in that area he will find it.

The Minister set the ball rolling by quoting the Deputy Leader of the Opposition as having made certain statements in connection with the allergy patients at the Princess Margaret Hospital. The Minister's statement was followed by comments from our learned friend from Wembley, who also endeavoured to read another meaning into what the Deputy Leader of the Opposition had to say. However, it was very noticeable that when he got to the repetition of one part of the speech made by the Deputy Leader of the Opposition he refrained from going any further. As a matter of fact, he very smartly went on to the next portion of his discourse. So, for the benefit of the House, I would like to mention this matter because it has a great deal of bearing and, probably from the angle of the member for Wembley, had something to do with his rather smearing comments. This is what the Deputy Leader of the Opposition had to say—

I learnt a few hours ago that at the Princess Margaret Hospital here in Perth three children are listed as being allergic to fluoride. One of these children has eczema. The dentist attending the child—and he told me this himself—advised the parents to give her fluoride tablets. The experience is that every time this child takes fluoride, the eczema flares up and the child is in a very bad condition. When the fluoride is stopped, the condition subsides. This occurs every time. Information has come to
me that three such children are listed at the Princess Margaret Hospital.

Here is the point: The parents of those children can discontinue the fluoride and stop this aggravation because the children are allergic to it; but if we put fluoride in the water supply, these youngsters cannot avoid it.

I draw attention to the fact that the Deputy Leader of the Opposition did not say the children were at the hospital. He said they were listed as being allergic to fluoride. I trust that the clarity of that statement made by the member for Melville—the Deputy Leader of the Opposition—will leave no doubt in the mind of members in this Chamber. What he had to say can be substantiated, and is, indeed, a fact.

Mr. Norton: The TV programme commented on it too.

Mr. KELLY: I suppose it is understandable to endeavour to misrepresent a quotation.

Mr. Norton: Mutilated, is the word.

Mr. Dunn: Was not the Minister asked a direct question?

Mr. KELLY: A direct statement was made.

Mr. Dunn: I thought he was asked a question.

Mr. KELLY: It is not a question that I am speaking of.

The SPEAKER: Order! Will the honourable member address the Chair.

Mr. KELLY: Yes, Mr. Speaker, I thought that was rather unruly. I could not agree with the member for Wembley, naturally, when he spoke in such terms and was criticising so cringingly the Deputy Leader of the Opposition and being so erroneously misleading. I feel certain that if the honourable member gave further consideration to his remarks he would not make them on a second occasion, because they were not applicable in this particular instance.

I thought the Deputy Leader of the Opposition was not only most convincing, but was very revealing. I also think he had a very well-prepared and fully-authenticated case. We have agreed, at various times in this Chamber, that we each have our own opinions. We are here to express those opinions and say what we think if we think it worthy of saying. On this occasion I have noticed—and it might be because of the excess in numbers on the other side of the House, I would not know—that there seems to be an attitude of ridicule of everything that is put up by way of a case against the fluoridation of water supplies in Western Australia. That is introducing, to my way of thinking, a new outlook and a new attitude in this Chamber.

I think the Opposition has always been accorded the right to speak its mind and say what it thinks. However, there seemed to be some nervousness on the part of the previous speaker about what he might disclose. I think that is an entirely wrong approach to this very important question.

I say again, that the Deputy Leader of the Opposition quoted from a very wide array of facts. He quoted world authorities. He certainly put his own feelings forward from time to time, but the majority of his speech was made up of quotations from authorities which would bear any investigation that any member of this Chamber would care to make. That also applies to any member of the Medical Board. We want to be perfectly frank and do not want to hoodwink people about what is right or wrong in this matter.

Surely to goodness we can be open-minded enough to approach this from a purely humanitarian point of view and not from the viewpoint that the Government has the numbers to bash the legislation while it is in power. I think that is a very poor outlook.

In the main speech from this side of the House, the Deputy Leader of the Opposition also introduced some very startling facts, and he substantiated them by quoting not only from publications, but from letters; and he also gave the names at the bottom of the letters. In the particular instance I have in mind, the Deputy Leader of the Opposition even indicated that there was a case of bribery when fluoridation was getting off to a start in America.

The Deputy Leader of the Opposition also submitted irrefutable data so far as his case was concerned, because he dealt very carefully and conclusively with various factors. Those cases warranted being brought to the surface, as naturally they would where there was a fear against a particularly important issue of this kind.

With regard to the starting point for discussions in connection with this matter, I would say that the Deputy Leader of the Opposition has a lead from here to the Causeway so far because of the case he has submitted to the Chamber and the facts he gave during his discourse.

Mr. Rushton: Is that on a time basis?

Mr. KELLY: No. I think he is quite capable of defending his record, on a time basis, against any other member in this Chamber, including the Minister for Industrial Development. I do not think even that Minister could eclipse the efforts of the Deputy Leader of the Opposition in that direction.

On the other hand the Minister quoted from authoritative and reputable sources during the course of his speech, but I thought he displayed a total disregard for the opinions of many other authorities who
could have cast a great deal of doubt on the benefits of fluoride which were mentioned by the Minister. I think the Minister was singular in refusing to accept anything, irrespective of from where it came, if it did not support the case he was putting forward.

The fluoridation of public water supplies is mass medication; there is no doubt in my mind about that. We are going to be given something, whether we like it or not; and we do not even know what the opinion of the general public of Western Australia is in regard to this matter. This opinion has never been put to the test, notwithstanding the fact that apparently the Premier, some time ago, was quite happy about a referendum on the subject being held. On this occasion no mention has been made of a referendum, so that everybody will have to bow to the inevitable weight of numbers, because the legislation will be bulldozed through this Chamber. However, this action could very easily react at some future time.

Mr. Ross Hutchinson: There is very real support from some members of the Labor Party for this.

Mr. KELLY: There is not a great deal of real support from the Labor Party. There are odd members, just the same as there are odd members on the other side of the House who are against fluoridation. We know something about it and I could name one or two if I wished to do so, but that would not be playing the game. There are members on both sides of the House—

Mr. Ross Hutchinson: There is very real support from some members of the Labor Party for this.

Mr. KELLY: —who have a great dislike for the idea of fluoridation. Now let us mention the Country Party members. This party has only recently been won over to the idea of fluoridation, and its acceptance was passed by a very small majority. In the conference rooms of the Country Party, not long ago, there was a very divided feeling as to whether, as a party, its members should support this measure when it was introduced. So there has been a dues all along the line and I think that is a completely wrong approach to have to a very important subject.

I have no intention of embarking on a discourse regarding the scientific pros and cons of fluoridation, but I read an interesting passage in a speech made recently, which I thought would be worth repeating. In the conference rooms of the Country Party, some time ago, I think the Minister was singular in refusing to accept anything, irrespective of from where it came, if it did not support the case he was putting forward.

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I have no intention of embarking on a discourse regarding the scientific pros and cons of fluoridation, but I read an interesting passage in a speech made recently, which I thought would be worth repeating. I have the official report, fifth series, of the Parliamentary Debates, Lords, for 1965-66, vol. 272, the 25th January to the 17th February. I shall not weary the House by making a number of quotations on matters leading up to this point, but the speech from which I intend to quote was made when the Bill for the fluoridation of water supplies—it had almost the same title as our Bill—was before the British Parlia-

ment. Among other remarks against fluoridation Earl Waldegrave had this to say—

My wife is at this moment in correspondence with the Minister for Health about this matter. He is being most helpful, courteous and thorough in his inquiries and in the correspondence which is ensuing, and therefore I hesitate to bring up the matter at all.

Note that word "courteous," Mr. Minister. Mr. Ross Hutchinson: I believe courtesy should be answered with courtesy.

Mr. KELLY: To continue—

But I happen to have had a grandchild who was born in Kenya where there is an excessive amount of fluoride in many of the boreholes. My grandchild's deciduous teeth were practically non-existent, and all had to be removed. The next batch of teeth are now erupting, there is considerable difficulty and it is turning into a long medical case.

The dentists in Nairobi had no doubt that this was due to there being too much fluoride in the water. They said, "We get this a good deal in borehole water. It affects Europeans rather more, as they are not used to it. We are away running across it. Bad Luck!" It is a little worrying when the Minister's reply, so far, is in these terms:

"I am advised that it is doubtful whether the dentist in Nairobi was fully justified in his conclusion that the dental condition was due to fluoride."

Perhaps I have not quoted an authority on this subject, but the person who made the speech holds a very high place in the House of Lords and he was expressing his opinion on the matter of fluoridation of water supplies in Britain. In my view this is a subject which requires a study of scientific thought as well as practical experience throughout the world in regard to fluoridation.

If I have not already indicated where my thoughts lie on this subject, let me say that before long I will leave no doubt in anybody's mind where I stand on the issue, and I make no apologies for my outlook. I should firstly advise the House that I have a distinct dislike for regimentation, and this measure could not be introduced under any other guise—it is regimentation of the whole State, and for my part I refuse to accept the necessity for this unjustified experimentation.

I say that, because the reputed effects or benefits of fluoride are still not fully known; the fluoridation of water supplies is still in the experimental stage, no matter where we go throughout the world. Everywhere people can still argue about the pros and cons of fluoride, and we as a State
would be foolish to rush into something with our heads down, hoping for the best. But that will be the position in this State if we pass this Bill.

Mr. Naider: What about the situation in Tasmania?

Mr. KELLY: That is one little instance—one isolated instance—and we on this side could mention just as many other places—important places—where fluoride is not now being used, because it has been found that its use is detrimental to the community concerned. Therefore the Tasmanian experience has no great bearing on the case, because just as many other places, where fluoridation has been abandoned, could be quoted.

The Minister has asked the House to agree to the compulsory fluoridation of water completely on trust. That is how it strikes me. He has not indicated a single safeguard that will be taken to make certain that it is the right thing to do. It is all very well to quote a few authorities throughout the world, one way or the other, and to say that this is the right way to approach the problem of dental decay. But are we passing the buck by doing this? Have we fallen down from the point of view of dental care, not only in Western Australia but also throughout the Commonwealth, generally? Has it not been apparent over the last 20 years that we are getting further and further behind in regard to dental care?

We have not had sufficient dentists, either in this State or in the Commonwealth, generally, to cope with the problem; and I venture to say that this position might have been avoided had we in operation a scheme similar to the national health scheme. Now the Minister is looking for an alternative to getting down and grappling with the problem.

Mr. Ross Hutchinson: Preventive medicine instead of curative.

Mr. KELLY: Let us get away from the aspect of medicine. If we had some form of diet to prevent dental decay, and so helped the teeth of the children of this State, we would do much better than fluoridating the water supplies.

Mr. Ross Hutchinson: You are not seriously suggesting that this is not a public health measure?

Mr. KELLY: I am serious in saying that if this is a Government measure, then it should have been a Government responsibility to do something about the state of children's teeth prior to this; because the care of the teeth is of paramount importance, and the subject should have been tackled years ago, not only by this Government but also by previous Governments. This problem has not crept on us overnight; it is something that has been with us for years, and if we paid more attention to the type of food we eat and what we allow to enter our stomachs, and our children's stomachs, almost from the time they are in the cradle until they leave their mothers and fathers, we would be rendering a far greater service than we will be rendering by the fluoridation of water supplies.

Mr. Hawke: Hear, hear! The Minister for Agriculture believes that, too, I think.

Mr. KELLY: I think there is ample evidence that many countries are having serious problems with the state of the teeth of their people; and, of course, this problem applies not only to the under 12s but also to people of all ages.

Instances have occurred where, because of an error in certain treatments, there have been fatal results. I know the member for Wembley, the Minister, and probably those who have paid particular attention to the cases they have been submitting in this regard, would have opposite views on the matter. That is understandable, but the fact remains that these errors have been occurring over a considerable period, whether fluoride has been in the water or not. There has been a series of mishaps throughout the world, and anybody who reads the medical journals can substantiate that.

The point is that there is no cut and dried case on this particular subject of fluoride, one way or the other, and I think the people of the State should be given the opportunity of making up their minds whether they are prepared to accept the idea or not.

Mention was made earlier this evening, mainly by the rereading of the remarks passed by the Deputy Leader of the Opposition, of people who are allergic to fluoride. We are told, and I have it on very excellent authority, that there is a great danger in the case of people who suffer from allergies, and who are allergic to many different things. They may not be allergic only to fluoride, they may be allergic to dandelions, or to hair, or to 101 other things. There is no doubt that anyone who is allergic to fluoride will suffer considerable trouble from a health point of view.

I read a very reputable book by C. L. Waldbott called The Struggle With Titans. He is a scientist of considerable repute, and he states that people with goitre will undoubtedly get into difficulty. He said that if fluoride could be properly regulated, and any element of doubt could be eliminated, it could make a contribution; but he adds that in the case of people whose health is already bad, and who are affected by fluoride, it will put the tin hat on an already serious condition, and will affect the people concerned very seriously.

I think it is wrong that we should submit people to this aspect. Let us consider the older people in the country who just cannot absorb such an amount of fluoride into their systems; and it will undoubtedly build up as time goes on.
Mr. Ross Hutchinson: You are completely wrong.

Mr. KELLY: That is the Minister's opinion.

Mr. Ross Hutchinson: It is being done now by millions of people.

Mr. KELLY: It is also being discontinued by millions of people. Does not the Minister think there is considerable weight of evidence in that regard? Of course there is. There are a number of people who, to use the Minister's words, have enjoyed fluoride for a few years and who have then realized the serious repercussions it could have. Because of this, it has been discontinued in a number of countries.

Mr. Ross Hutchinson: They are only false fears.

Mr. KELLY: False fears? My grandmother!

Dr. Henn: False teeth, not false fears.

Mr. KELLY: That would be nearer the mark. One of the aspects with which I am concerned is that there is no guarantee that we can regulate the percentage distribution of fluoride through the water supplies of the State. Not only does that doubt concern me, but it is one which is of some concern from a world-wide point of view, particularly because of the possibility of a concentrated build-up of fluoride somewhere along the line. This of course is a perfectly reasonable suspicion.

If, for example, we try to put super through a water line we find there is a deposit at various places; we find there is a deposit at every coupling, even though water by the thousand gallons is passing through that point. If one tries to put super through a pipe in which there is an obstruction or some obstacle there is no chance of getting a complete distribution and coverage.

There is no reason to suppose we will get any better distribution with fluoride under the same conditions. It could be maintained that it would be most difficult to obtain a distribution beyond a certain footage in a pipe; and no guarantee could be given as to the exact content of fluoride or any other matter that would pass through at a particular point. Tests have shown that the amount of fluoride contained in water in the early stages of distribution is much greater than it is at the end of the line, when it has more or less come to the point of exhaustion.

It has been said that one milligram, or one-thousandth of a part added will not do any harm. It may not, and I am not scientific enough to know whether it will. The point is that along with the other things carrying fluoride it is possible that one milligram could be in excess of the dose that is found to be safe for the majority of people.

When the Minister replies I want to know what remedial action he proposes to take—once the Bill is bulldozed through the Chamber—if we are subjected to what is happening in other parts of the world concerning the distribution of fluoride in the early stages. We have not been given any idea at all as to what he proposes to do. Let us suppose that within two years we discover that we are on the wrong track, will the Minister persist with his pig-headed idea and continue to fluoridate the water supply; or will he get down to some sane, level-headed thinking in the matter?

I ask this because the health of a number of people will be very much at stake. Another question I wish to ask is: Can we have any confidence from a distribution point of view when this mixture is passed through old water-pipe systems in the metropolitan area and the suburbs? There are many places with old pipe installations. I could take the Minister to a dozen, without thinking twice, and show him where water is coming through brown and dirty. The water comes through spasmodically because a number of these installations are old. If the Minister cares to wait long enough for us to pull the pipes up he will see that instead of the pipes carrying the full ½ -inch bore the water would be emerging in a mere trickle. What will be the effect of fluoride on pipes of that kind? The families who have old pipe lines installed will undoubtedly get into trouble.

Mr. Ross Hutchinson: No, they will not.

Mr. KELLY: What ground has the Minister for saying that?

Mr. Ross Hutchinson: They are doing it in Chicago.

Mr. Hawke: Al Capone's country.

Mr. KELLY: Did you hear what the Minister had to say, Mr. Speaker?

Mr. Ross Hutchinson: Fifty million or 60,000,000 people are having this fluoridated water pass through various types of pipes. New York has just recently come in as a fluoridated city.

Mr. KELLY: Quite apart from the normal corrosion that occurs in the pipe we will have to contend with the added fact that fluoride is a corrosive agent; and it does not need much imagination to realize what will happen when it comes into contact with the pipes that are commonly used in this State. The Minister may have an answer to this problem, but if he has not it will show he has not given the study he should have to this Bill.

It is all very well to run clean water through a pipeline, but it is a vastly different matter when we put through water containing a corrosive agent. The Minister may suggest the use of copper pipes, and this may be a good idea. Incidentally, I notice there have been many robberies of copper pipes. If any of the dire things we
are told will happen, do happen, we will be in a very serious position.

Mr. Ross Hutchinson: That is only the feeling of the "antis."

Mr. KELLY: Those who are for it disregard everybody else's point of view but their own; they are just as firm in their convictions that they are doing the right thing.

Mr. Graham: With Government resources behind them.

Mr. KELLY: If the Minister did the right thing he would either withdraw the Bill, or give it to the people of Western Australia to kick it around and decide the issue. Is the Minister afraid of a referendum? Is he satisfied that he may not get a majority vote, and that it will make him look smaller than he is now?

Mr. Ross Hutchinson: You know that Parliament is the appropriate place to decide the issue. The Labor Party believes it. A report was made to the Labor Party.

Mr. KELLY: It does not believe it as a party. The Minister does not know.

Mr. Hawke: And what happened to it? The Minister does not know.

Mr. KELLY: That is not surprising, because he is not well-informed.

Mr. Hawke: He is talking through his hair.

Mr. Graham: What is left of it.

Mr. Ross Hutchinson: You certainly can't talk.

Mr. KELLY: When the member for Murchison spoke, he stressed the value of natural fluoride. I am sure that most people are quite happy with the content of natural fluoride which is present in many of our vegetables and in the water supplies on farms and other places; but it is in a natural state; it is not manufactured; it is not waste material that Alcoa or somebody else wants to get rid of in order that they might make a few bob.

Mr. J. Hegney: It is a secondary industry now.

Mr. KELLY: The Minister has not given one indication as to where the supplies of fluoride—irrespective of the type—will come from. He has evaded the question on every occasion. He does not know.

Mr. Graham: From Red China.

Mr. KELLY: The Minister says that fluoride may be one of two sorts. Fluoride is an unwanted residue: that is all it is. It may be pansied up, but it is only waste material, and putrid waste material at that.

Mr. Ross Hutchinson: Are you supporting the Bill?

Mr. KELLY: I told the Minister he would have no doubt as to whether or not I was supporting the Bill after I finished speaking. I have a piece of doggerel which somebody handed me, and I think it may be appropriate to read it.

Mr. Ross Hutchinson: It might improve the speech.

The SPEAKER: The honourable member has another five minutes.

Mr. KELLY: Thank you, Mr. Speaker. Ten minutes will just about do me. The verse reads as follows:

I pass the brimming cup around
For it may be fluoridated,
For old-time liberties and rights
Are strictly antiquated.
What matters now if kidneys rot
Or blood and brain go dry,
We'll have a lovely set of teeth
To grin with when we die.

That will give members some idea what is likely to happen.

Mr. Court: How stupid can you get!

Mr. Ross Hutchinson: Powerful stuff.

Mr. KELLY: So, from whatever angle we look at this Bill, there is no doubt in my mind that it is shaky and ill-conceived in an attempt to foist something onto the people of this State. The Minister says he has made up his mind. He made it up a long time ago. However, the Premier nearly unmade it, as was shown by a letter read by the Deputy Leader of the Opposition.

However, the Government has seen fit to bring this matter here. If the Government does the right thing and has regard for the Opposition and the opinions expressed from this side of the House, I think the gentlemanly thing to do would be to go more deeply into the measure than has been done up to the present time; and if there is one fraction of doubt, the matter should be submitted to the people of Western Australia. Without doubt, in my mind, this is socialised medicine in its truest sense; and how the people on the other side of the House, who foolishly interpret this as a measure to bring in a socialised measure of this kind I have yet to find out.

MR. WILLIAMS (Bunbury) [8.1 p.m.]: I have no bones about where I stand right from the outset. I intend to vote for the measure for very good reasons. The honourable member who has just resumed his seat—the member for Merredin-Yilgarn—said we are rushing into this matter. I would say that after 20 years of research throughout the world we are not rushing into this matter. In fact, there has been more than 20 years of research into the fluoridation of water supplies.

I believe this will be the best thing for our future generations, both from their mouth health point of view and their pocket, because this is going to save them money. Recently I had reason to have my front teeth capped and crowned, and it cost plenty. After spending three hours in the dentist's chair, if someone had given me something liquid to restore my
teeth, I would have taken it gladly. On the information that is available to us, we have to take this matter up at this stage.

Mr. Kelly: You are guessing.

Mr. WILLIAMS: I am not guessing. There is always a certain number of scientists against something; but in this field, I believe the greatest number is for fluoridation of water supplies.

Mr. Bovell: By far.

Mr. WILLIAMS: Quite a number of statements have been made in this House that have been out of context.

Mr. Graham: Give some examples.

Mr. WILLIAMS: Let us go back to the days of Jenner when he introduced vaccination. What was the reaction in those days? It was said that people would grow horns, have four legs, and look like cows. Those things were said by people who were against that sort of thing. Naturally there are bound to be some people who are not sure what will happen, so we have to accept the research that has been carried out by people of repute; and, as the member for Wembley said earlier this afternoon, the Department of Public Health has been looking after our health for many years, and its officers are not likely to poison us overnight—not likely in my book; and that would be the view of the majority in this House.

Mr. Hall: Vaccinations can have a bad effect.

Mr. WILLIAMS: They are very efficient; and Dr. Jenner introduced this in the face of a lot of criticism.

Mr. Hall: They have not been proved conclusively.

Mr. WILLIAMS: They have proved themselves fairly conclusively, and sufficiently to warrant being carried out.

Mr. Hall: They have a bad effect on many people.

Mr. WILLIAMS: I have three small boys at home and since their early years they have been receiving fluoride tablets. I am not against tablets. My eldest boy is 12 years of age and he has had tablets since he was two years old. The middle lad is now nine, and he has had tablets since he was 12 months old. The next is just over six and his mother has given him tablets from before birth.

Mr. May: Nobody is trying to stop you.

Mr. WILLIAMS: In the number of teeth among my three boys there are two fillings. The eldest lad chipped a tooth on a cherry stone, and the middle boy had a decayed tooth. In 1963 in this House we heard a lot of criticism of fluoride poison, and I know that people would not have a bar of it, in tablets or in any other form; but now we get literature which shows they have changed their tune. They say, "Let us not have it in the water, but let people have it in tablet form."

Mr. Graham: If they want to.

The SPEAKER: Order!

Mr. WILLIAMS: The Minister answered some questions yesterday which were asked by a member of the Opposition in regard to the content of fluoride in our water supplies from bores supplying the metropolitan area. The answers showed that the fluoride content in these bores varies from 0.2 or 0.4 up to 0.8 parts per million. I believe the latter was the figure for the King's Park Reservoir, which supplies 40 per cent. of the water for the metropolitan area.

Mr. Tonkin: Aren't you sadly astray with your figures? There is not one with 0.2.

Mr. WILLIAMS: I think it was 0.8.

Mr. Ross Hutchinson: It was 0.8.

Mr. WILLIAMS: People are giving children fluoride tablets while there is a certain amount of fluoride in the water, instead of having something scientifically controlled and well regulated, as I believe will be the position through the water supply. However, some people want a haphazard distribution of tablets. My family are given their tablets prior to retiring just after they have cleaned their teeth at night, in order that they will get, what we believe, to be the full benefit. However when we come to Perth, if we have time, we sometimes leave the tablets home and the children have to go without them. This often happens.

Recently a film was shown in this State by the anti-fluoridation group; and the Deputy Leader of the Opposition supports this film. I believe that on the 23rd of September, at a meeting called by the Pure Water Association at Anzac House, the Deputy Leader of the Opposition supported this film. Recently I asked the Minister to table the papers regarding this film and those in relation to Dr. John Ott, who helped produce the film. He is not a medical doctor, but a scientist who works for the Time-Lapse Foundation.

The Deputy Leader of the Opposition stated that he spent some 1,000 hours studying this matter, and that is, indeed, a great number of hours; and I think we have to commend him for the study he does. We all know he spends a lot of time in regard to the matters on which he speaks in this House, and no-one can take anything from him for that.

Mr. Graham: The member for Wembley did.

Mr. WILLIAMS: He also spent a lot of time in study. I think the honourable member will find that the member for Wembley had a few words to say about the Deputy Leader of the Opposition's quotations and remarks.

Mr. Graham: He was not concerned with accuracy.

Mr. WILLIAMS: A great deal of play was made at this meeting about the film produced by the Time-Lapse Foundation:
and there has been great talk about totalitarian behaviour in this State on the part of those on this side of the House; and letters written by Dr. John Ott and others have been read. I would say there is no greater example of Nazi and fascist methods than there was with the production of this film, which is out of context.

The anti-fluoridationists claim that the film was quite genuine. I believe the section shown is genuine, but there is a section which has not been shown, but which should have been shown in conjunction with the other part.

Members will realise that in experiments into a matter such as this, a lot of pictures are taken over a great period of time and all sides of the question are studied. However, if a group gets hold of a particular section of a film, it can make great play about it. I think you will agree, Mr. Speaker, that in dealing with a subject such as this, a great deal of quoting has to be done by members on both sides of the House in order to justify their thoughts. These statements, of course, are made by specialists or people specially able to give their point of view in a matter like this. Therefore, I intend to quote to a reasonable degree—I hope I do not bore the House—from certain letters written by John Ott; and there was a TV programme in which there were several interviews.

The first letter is to Mr. Ernest R. Anderson, Greater New York Committee Opposed to Fluoridation, Inc., written by John Ott, Director of Time-Lapse Foundation, dated the 31st December, 1964. It reads as follows:—

This will acknowledge your letter of December 21st which greatly concerns me, as it appears to indicate a complete reversal of our original understanding which has been repeatedly confirmed in our correspondence and personal conversations to date, regarding public showing of the toxicity study films before completion and proper evaluation of the project.

My reasons for not supplying a copy of the No. 2 mouse L cell print ordered by Dr. Cranville Knight, I suggest that we refund his money to him as from what you say in your letter regarding his intended use of the film for research purposes in the field of allergy, and I presume his studies deal with human allergies. I strongly feel that releasing only the results of the mouse cell experiments to him or any one else in view of what has been learned through the human cell experiments would be withholding very important information and misleading.

Finally I must take strong exception to your statement of condemnation of the A.D.A., as my experiences through the years in working with many of their top executives have been only of full co-operation and assistance on their part in every instance.

In view of the position taken in your letter, I feel I have no other alternative than to withdraw from further participation in this project.

Dr. Ott then had reason to write to several other people. I will not quote all of these letters, because he says much the same thing in most of them.

The following is portion of a letter from John Ott to Mr. J. I. Rodale, dated the 25th March, 1965:—

Last year the Time-Lapse Research Foundation agreed to take some Time reference to the heart cells going bad does not mean the culture became contaminated or anything like that, but only that their general appearance and character changed before the toxicity study was started and such changes are not uncommon in tissue culture studies when the natural environment of the cells is changed of necessity in growing the cells in vitro.

Here I might add from what I have seen, read, and heard of Dr. John Ott, that he is, after trying many experiments, a qualified person and would know whether or not this was correct regarding the contamination of the human cells. To continue—

The fact that the very preliminary remark by my assistant that as he did the experiment and watched the cells through the microscope, they appeared to continue to divide as the human tooth-pulp cells did, after the profusion of the sodium fluoride but that whether or not such divisions were normal or not this was correct regarding the period of time might have, could not be determined until the pictures were processed and properly evaluated, has prompted both you and Dr. Miller to so quickly eliminate human cells completely from the project without anybody even bothering to look at the films is surprising to say the least.

With reference to the copy of the No. 2 Mouse L cell print ordered by Dr. Cranville Knight, I suggest that we refund his money to him as from what you say in your letter regarding his intended use of the film for research purposes in the field of allergy, and I presume his studies deal with human allergies. I strongly feel that releasing only the results of the mouse cell experiments to him or any one else in view of what has been learned through the human cell experiments would be withholding very important information and misleading.

Finally I must take strong exception to your statement of condemnation of the A.D.A., as my experiences through the years in working with many of their top executives have been only of full co-operation and assistance on their part in every instance.

In view of the position taken in your letter, I feel I have no other alternative than to withdraw from further participation in this project.

Dr. Ott then had reason to write to several other people. I will not quote all of these letters, because he says much the same thing in most of them.

The following is portion of a letter from John Ott to Mr. J. I. Rodale, dated the 25th March, 1965:—

Last year the Time-Lapse Research Foundation agreed to take some Time
Lapse cinemographic pictures of both mouse and human cell cultures in vitro with and without sodium fluoride added at very low concentrations. This work was to be done for a group of doctors and dentists interested in this subject and it later developed that they represented the Greater New York Committee Opposed to Fluoridation of Water, Inc. It was agreed that neither the films nor any information regarding them would be released beyond the immediate group until the results had been studied and evaluated by a competent medical and a scientific board of review which would include representatives of the American Dental Association.

Unfortunately and to our great embarrassment, apparently the New York Committee or someone connected with this committee has released a print of some or perhaps the very results dealing with mouse cells only, and has expressed his or her personal opinion in such a way as to imply that the statements released represent some official report. Actually the project has not been completed and no report of any kind has been issued.

In my personal opinion there appears to be a very significant difference in the results shown in the pictures between the effect of the sodium fluoride on mouse and human cells and that the showing of the mouse cell pictures only is omitting vitally important information and grossly misleading.

In view of these premature and unauthorized showings of only a part of the results, it has become necessary for the Time-Lapse Research Foundation as well as myself as Director to withdraw from any further participation in this project.

I also wish to point out that the statement in your article referring to studies that I have done for the American Medical Association is incorrect as I have not made any studies or even pictures for the American Medical Association. I also wish to point out that the release of any part of these preliminary pictures and especially before they have received any authoritative medical evaluation is directly contrary to their agreement with me, and moreover as stated above by releasing only those pictures showing the results of the experiments using mouse cells and intentionally withholding the results of the experiments using human cells is omitting vitally important information and grossly misleading.

Then there was a film clip on the television evening news on the 20th October, 1965, in the City of Washington. Walter Cronkite was seated in the TV studio and after a preliminary introduction he passed the microphone to Mike Wallace. Mike Wallace was obviously holding a glass of water in his hand, and the following is the conversation which took place:

Wallace: "This is the water. Out of every million gallons that New Yorkers drink, one gallon now is the chemical sodium fluoride. And most medical, dental and public health authorities agree that fluoridation brings children lifetime protection against tooth decay. And the 20 years' experience has proved the technique safe.

"But the bitter, often ugly fight against fluoridation is far from over. And the anti-fluoridators now believe they have themselves a brand new weapon, a scientific research film, which they are showing nationwide—not just to scientists but to mayors, town councils, public meetings.

"The film, they say, proves that fluoridation is not safe, is, in fact, subtle poison. But as you dig a little deeper, you find that there are other subtleties in the story.

"The picture is narrated by Dr. Jonathan Foreman, a 77 year old Ohio internist, teacher and writer; one of the most distinguished members of the anti-fluoride camp.

"The film itself, shot through a microscope in a speeding up process called time-lapse, allegedly shows the effect of fluoridated water on healthy living cells of connective tissue multiplying in a test tube. The tissue is from a mouse, although that fact is mentioned only once in the 14 minute film.

"This is the heart of the movie, as interpreted by Doctor Foreman.

Foreman: 'Now, you are about to see a film of this overnight study. In this experiment, sodium fluoride in a concentration of one part in 30 million is perfused into a growing active culture of cells. Note the swelling of the membranes around the cells. This makes it impossible for them to absorb foodstuffs. Note they're shriveling up now. There are no cells dividing. All is becoming still. Most of the cells are dead, or dying. This demonstrates the toxicity of this material.'

Wallace: "But does it? Or just what does this remarkable film prove?

"The man who made it, under contract to anti-fluoridation groups, is not a doctor. He is John Ott (?), an expert time-lapse photographer. He told correspondent Harry Arout why he feels the anti-fluoridators have no business distributing the film in its present form, or interpreting it the way they do."
Ott: "Well, whenever we do work of this nature, it's always very definitely agreed to, and we insist, that all the pictures be studies.

"Now, we studied the pulp (?) cells from a human tooth. You see the cells dividing. And, then, when we added the sodium fluoride, we were, of course, very anxious to see what would happen. And the result was they went right on dividing. Then we went to the human heart cells pictures. And here's out control. Now, the way the cells, with the sodium fluoride added, and what happens? Well, you can very clearly see that the cells are—start in dividing again. They don't just die, just as the mouse cells did. And I feel that this is a very important part of the total story. And it's put me in a very embarrassing position, because the group that originally asked me to do this has refused to show all the pictures."

I presume he means the pictures with the tests on the cells. Finally, the following is portion of a letter from Doctor Ott, dated the 21st March, 1966:

Unfortunately and to our great embarrassment, apparently one or two of the doctors who have received a print of some of the preliminary results dealing with mouse cells only have taken it upon themselves to add their own sound track and to show these films publicly and to express their personal opinions in such a way as to imply that their statements represent some official report. Actually the project has not been completed and no report of any kind has been issued.

In my personal opinion there appears to be a very significant difference in the results shown in the pictures between the effect of the sodium fluoride on mouse and human cells and that the showing of the mouse cell pictures only is omitting vitally important information and grossly misleading.

In view of these premature and unauthorized showings of only a part of the results of the mouse cell pictures and intentionally withholding the most important pictures of the effects of the fluoride on human cells, it has become necessary for the Time-Lapse Research Foundation as well as myself as Director, to withdraw from any further participation in this project.

I quoted all that because that is the way some of these things are taken out of their context. By what authority should anyone accept the word of an anonymous commentator of a film and yet, at the same time, reject the value of Doctor John Ott and a well-known and highly respected organisation such as the Time-Lapse Foundation? One would think that in these days of advanced photography, television, and cinema shows everyone would be aware of the care with which one has to draw conclusions from films because of trick photography. None was used in this case, because the organisation producing it was too well known.

I support this Bill, and finally I would remind members that it is not really true that, with the aid of an umbrella, Mary Poppins could fly!

MR. BRADY (Swan) [8.38 p.m.]: I wish to make some remarks on this Bill because it is of great public interest. I naturally deplore the fact that, in the main, most of us are laymen and have to make up our minds to the best of our ability on this controversial subject.

I also deplore the fact that the B.M.A. of Western Australia and the medical profession generally have not been fit to come into the arena to try to give the general public some lead on this vital matter. I would have thought they would do something to try to inform the public mind.

In 1963, I opposed the proposal for the fluoridation of water even though I had a relative of very high standing in the dental profession who was urging me to do the reverse. I opposed it at that time because whilst there was a possibility that fluoridation would help some young children, grave doubts existed in my mind as to whether it would help adults. After all, all children go through a phase when they lose their baby teeth, but after a number of years, as they grow into adulthood, they are able to look after themselves because they know what foods to eat and what foods to avoid in order to maintain good teeth. Therefore in 1963 I opposed the proposal for fluoridation because I did not think it would help adults; and I am of the same opinion still.

Mr. Ross Hutchinson: Children grow up to be adults, you know.

Mr. Hall: Some never do!

Mr. BRADY: They do. The point is that when they become adults they do not require the things they required as children. There is an old saying that when a person is a child he has certain things to play with, but when he grows up he puts those things away. For instance, in babyhood and childhood it is absolutely essential and imperative that ample quantities of milk are drunk. However, the average adult, if asked to have a glass of milk, would look down his nose.

Mr. Hall: Not if it had whisky with it!

Mr. BRADY: Therefore what is essential in childhood is not required in adulthood. However, I have departed from the point I want to make. The general base of the Minister's argument is that he wants to do something to help the adults and children in connection with dental care.
I am prepared to support him in his endeavours, but I think he is going about the whole problem the wrong way. As I continue I will make my point.

I am very disappointed that, despite the reference, in the Minister's speech, to clinics in various places, one has not been established in the industrial area of Midland Junction. That area has no dental hospital such as has been established in Perth and other parts of the State. It does not even have a clinic. For many years people in that area have been endeavouring, through the Australian Labor Party and other organisations, to have steps taken in this regard. Yet despite all the interest the department and the Minister have, nothing has been done to ease the position in my area. I hope the Minister will have a word with the commissioner and his officers to ascertain why no clinic has been established in such an important area as Midland, which has great possibilities with the population increasing regularly.

I support the Minister in his endeavours to prevent dental trouble rather than to cure it after it has developed. I think the best way this could be achieved would be to establish more dental clinics, and especially one in the Swan electorate.

A great deal has been made of the fact that probably one of the things that triggered off the desire of the Department of Public Health to establish this fluoridation scheme was the marvellous effect of the experiment in Cue.

The 1951 annual Report of the Commissioner of Public Health contains a fluorine report and the following appears on page 74:

It has been stated on several occasions by research workers in America, Australia and elsewhere that:—

1. A concentration of about 1 part per million of fluorine in drinking water is likely to have a beneficial influence on the production of teeth which will be resistant to decay.

2. That more than 1 part per million is likely to produce "mottling" of the teeth but these teeth are likely to be more resistant to decay than teeth from fluorine free areas.

Further on is the following:

On the other hand, an extract from "Food and Nutrition Notes and Reviews", Vol. 8, No. 304, states:—

Teeth.—An inadequate intake of fluorine during the first six years of life does not appear to predispose to caries.

In the same annual report is a table setting out the percentage of children in the various parts of Western Australia.

Because two or three names were mentioned, I will mention them again and also the percentages. At this point I would like to draw the attention of members to other figures which I will introduce; and, as far as I know, there is no fluoridated water in this particular locality and the percentage of sound teeth is equal to that applicable to the area of Cue. I mention that this table which I propose to present shows a column bearing the initials D.M.F. which means, "decayed, prematurely missing, or filled teeth." The figures are:

<table>
<thead>
<tr>
<th>Town</th>
<th>Source of Water</th>
<th>P.P.M.</th>
<th>Per cent. Average Number of D.M.F.</th>
<th>Sound M% Child Mouths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cue</td>
<td>Bore</td>
<td>1.25</td>
<td>8.9</td>
<td>4.69</td>
</tr>
<tr>
<td>Meekatharra</td>
<td>Bore</td>
<td>0.25</td>
<td>10.7</td>
<td>4.76</td>
</tr>
</tbody>
</table>

This table shows that the percentage of sound mouths at Cue is 8.9 and the average D.M.F. per child is 4.69, whereas at Meekatharra, which is close by and has a less concentration of fluoride—less to the extent of 1 per cent.—the average D.M.F. per child is less than it is at Cue.

Mr. O'Connor: What year was this?

Mr. BRADY: It is for the year 1951 and is contained in the report of the Commissioner of Public Health.

Mr. O'Connor: Have you seen the 1961 report?

Mr. BRADY: I have not seen it, but that is not the point I am making. I would be most interested to hear the Minister for Transport's theory later on, and I am sure the members of his electorate would also be pleased to hear his point of view and why he is going to support the Government in this particular scheme.

Mr. O'Connor: I think I appreciate the benefits of it.

Mr. BRADY: When this matter of fluoridation was first being toyed with by the department, as I have said, Meekatharra—less fluoride—had a better percentage of sound mouths. Nobody has mentioned the position in Jardee which is at the extreme end of the State, as against the position in Cue and Meekatharra.

Based on a source of water supply from the river which contained no parts per million of fluoride, the percentage of sound mouths was 9.0 and the average D.M.F. per child 6.98 per cent.

It appears therefore that, apart from fluoride, there may be other reasons why children have sound mouths. I am inclined to agree with the theory that there are other reasons. That is why I believe that whilst there may be some advantage, there may be other things which would prove just as great an advantage to the children and their dental health as fluoride. In the matter of the protection of the public health, I am disappointed that the Department of Public Health has not given attention to the causes which create the caries and unsound mouths generally in children. These causes are concerned with wrong
diets and the wrong foods which are sold from time to time, which are made up to be so appealing to children.

Mr. J. Hegney: Too much sugar!

Mr. BRADY: We know that white sugar, while flour, certain kinds of fruit and other foodstuffs are the diets which are creating these caries and causing tooth decay in children.

In my opinion, if the Department of Public Health and the Minister for Health were wise, they would be advising the public—day in and day out—to keep away from this type of food. If this were done, gradually the whole problem would be approached from a positive point of view and not from a negative point of view as has been put forward by this particular Bill.

There is another point I would like to mention and this causes much greater disadvantage to adults—in fact, it is not concerned with children. As far as I can see the Public Health Department is doing practically little or nothing about this particular problem, and I refer to alcohol.

The SPEAKER: Order! This has nothing to do with the Bill.

Mr. BRADY: If you do not mind me interjecting, Mr. Speaker, it has everything to do with the Bill.

The SPEAKER: Order! I would remind the honourable member that he does not contradict the Speaker, and, if he does so, he will sit down. I am not convinced that alcoholism has anything to do with this Bill at all, but, if you can convince me that it has, I do not mind listening.

Mr. BRADY: I never meant to contradict the Speaker and, to my knowledge, I have not done so previously. I would like to mention that in the formation of human beings, there are such things as enzymes and, in their turn, these create certain chemicals in the digestive organs which turn carbohydrates into sugars; and sugars, in their turn, create alcohol and other things such as amine acids which are necessary to the human being. Therefore, alcohol has quite a lot to do with public health.

Mr. Court: I didn't know we had so many amateur scientists in the House.

Mr. BRADY: There are many matters on which the department's attention should be concentrated other than the matter of decayed teeth, which is its primary concern at the moment.

Mr. J. Hegney: Nobody can dispute that.

Mr. BRADY: I am opposed to this Bill for another reason, and that is the uneconomical method by which the Government will compel people to take something which they might not want. In his own words, the Minister said the main desire was to help the children with their teeth. I think the main desire should be to help the children with their choice of food. The Minister can only support his case by an indication of a 50 per cent. cure. Why, therefore, my objection to the adult population at a very great cost when the average mother and father who desire fluoride can buy it in tablet form? I believe it is the responsibility of the Government to provide it to the parents free of charge.

Mr. Ross Hutchinson: The 50 per cent. reduction represents a magnificent achievement.

Mr. BRADY: Of course it does, but if it is only going to cure to the extent of 60 per cent. in children and is going to cause disability to the extent of 60 per cent. in adults, where is the advantage? Neither the Minister nor any of his officers can prove that it is not going to be a disadvantage to adults.

Mr. Ross Hutchinson: It has been proven that it is not a disadvantage.

Mr. BRADY: I have here a booklet which expresses a favourable opinion towards the fluoridation of public water supplies. This booklet is published by an American authority and it states that up to a certain age, fluoride can be of certain benefit but after one passes that age, it practically remains static. What is happening in the meantime? The fluoride is building up in the body and could be causing a number of difficulties. Unlike our doctor friend in the House, I am not in the position of being able to talk from a scientific point of view, but common sense dictates to me that the human being is subjected to about 30 different diseases.

Mr. J. Hegney: Many more than that.

Mr. BRADY: I said, "at least 30". I have a booklet here, and I do not want to read out the diseases completely, but, because some members seem to be doubting what I am saying, I shall quote just a few. The booklet refers to diseases of the blood, diseases of the heart, diseases of the respiratory system, diseases of the digestive tract. At this point I shall skip over about 20 to mention mental diseases and diseases of the skin.

The point I am making is: Why should the adult population of Western Australia be forced to take medicine in this form when it might aggravate something that already exists in them? or, perhaps, bring on a disability which they would not otherwise have had? That is the point with which I am concerned.

Here and now, I would like to say that in my opinion the fluoridation of water supplies might help children up to a certain age. In fact, I have seen positive evidence that fluoride is helping certain children. However, on the other hand, just as adults do not want to drink milk, they do not want to drink fluoridated water and I do not think they should be forced to do so.

I feel the Minister is flying in the face of great opposition in this matter. He has
a protective clause in the Bill which protects the members of the committee against being subjected to prosecution for carrying into effect the provisions of the Act. Of course, from the committee's point of view, that is very desirable and I should imagine the committee would support this clause to the extent of 100 per cent.

In the Bill we find that "fluorine includes any compound of fluorine." I would like to advise the members of this House what this booklet has to say in connection with that. I would mention that this book was printed by the American Dental Association. There are no less than six different kinds of fluorides which can be put into water. There is sodium fluoride, there is sodium silico fluoride, there is fluoro silico acid, there is ammonia fluoride, there is calcium fluoride, and there are other natural fluorides. These can be put in the water in a dry form or can be put in in the form of a solution. Therefore, it looks to me as if the fluoridation board is going to have a real beano when trying out the various types of fluoride, according to the reports received from the various water boards from time to time.

As I said before, I think the Minister is flying in the face of grave dangers. And I hope that even at this late stage the Government may see its way clear to resolving this question by means other than forcing it on the 800,000 people in Western Australia who, in my opinion, are equally divided as to whether fluoride has advantages or not.

In my opinion, the Minister did not make a case for the placing of fluoride in the water. If he could have said there would be a 90 per cent. cure, or if he could have said there would be no danger to the adult population, I would have been prepared to support the Bill, but the Minister did not say either of those things. Therefore, I do not think the Minister should try to continue to get the Bill passed through this House.

I would like to point out to the Minister that in a number of industries—and particularly in the chemical industries—many adults are working in a fluoride atmosphere all day. For a number of years I was secretary of the Superphosphate and Chemical Workers' Union and, very often, I had to go into the court and argue the disadvantages of men who were working superphosphate and who, as a consequence, worked in a fluorosis atmosphere. This fluorosis atmosphere was caused by the acid acting on the phosphate rock. These people were inhaling this day in and day out. In fact, I am sure that some of my friends whom I meet these days have been affected in their adult life by this atmosphere.

I do not think the chemical workers in the superphosphate industry and other chemical workers who work in conditions where this atmosphere prevails, should be forced, in addition, to take one part per million of fluoride in water.

There is another angle to this problem, and I touched on this in 1963. Water is taken in different types of conveyors to the various places where it is used. These may be cement pipes, galvanised pipes, steel pipes, iron pipes, wooden pipes, copper pipes, and glass pipes.

Mr. J. Hegney: Or asbestos pipes.

Mr. BRADY: As the member for Belmont says, asbestos pipes, as well. What is the chemical reaction from putting the sodium fluoride through these various pipes which convey the water? It may be that no difficulty would arise in the case of glass pipes. It may be there would be no difficulty with aluminium or asbestos pipes, but there could be a very dire disability if it were put through wooden pipes, or some of these other constructions by which water is conveyed.

I do not think sufficient thought has been given to this matter. We next have to consider the types of water—there is soft water and there is hard water. According to the reports I have read—and I have tried to read as many as I could in this last week or two—the parts per million of sodium fluoride should be varied with the type of water, because there are different reactions according to the types of water. What is the department doing about that particular aspect? We know that in the metropolitan area water sources are of three or four different kinds—bore water, natural water, and other waters are all mixed up.

Mr. Guthrie: There is tank water, too.

Mr. BRADY: As the member for Subiaco says, there is tank water as well. Depending on the area where the water comes from, the water is fluoridated or not fluoridated.

I think the general public should be given the right to have a referendum on this matter. A referendum would have provided a solution. What I resent is what I term the brainwashing of members of Parliament whilst this subject is before the House for discussion. I resent being placed on my bench literature which has been forwarded by the Government department or some Government institution during the last fortnight advocating the case for fluoridation. I have two booklets in front of me at the moment which have been forwarded by the Department of Public Health, New South Wales, on the fluoridation of water supplies, and another one dealing with oral hygiene. If the Government had any desire to be fair it should have distributed propaganda advocating arguments for and against the fluoridation of water supplies and not have distributed to members literature which advocates one side only.

As I have said before, I am quite sure the general public would have appreciated the holding of a poll on this subject.
That brings me to mention that many people in my electorate of Swan have written to me on this question, as they did when a similar Bill was before the House, and on this occasion it is rather significant that the people who have written to me are not those who wrote to me in 1963. This would indicate there is some concern among the community on the question of fluoridation of water supplies. Perhaps I should read this letter to the House because, as one member said this evening, the Deputy Leader of the Opposition likes to quote letters, so I do not think he should be alone in that respect.

The following is a letter from a man who has after his name the letters Ph.C., M.P.S.:

Dear Sir,

I am writing to appraise you that there is a great deal of interest and activity in your electorate on the subject of fluoridation of the public water supply proposed by the Brand Government.

Petitions are being drawn up in this district and in others near by and these indicate that majority opinion is against fluoridation.

As we have supported you in the past we now expect you to acquaint yourself with the facts concerning fluoridation and to state your opinion in the house if you are against mass medication through the addition of sodium fluoride to the public water supply.

I enclose a copy of my letter to the Premier, on the subject.

Thanking you for your consideration,

Yours faithfully,

That letter is from a prominent chemist in my electorate. Three years ago another prominent chemist came to me and he had a similar approach to this important matter. As the member for South Perth was about to say, chemists sell fluoride tablets; but I think the ethics and the morals of these men are just as high as the ethics and morals of anyone else. If they are of opinion that fluoridation should not be placed in public water supplies to the disadvantage of the people, they should express their views in letters such as the one I have just quoted to the House.

I can inform the member for South Perth that the chemist who approached me three years ago is a retired man and, in expressing his views on this subject, stands to gain nothing one way or another. Therefore any member imputing that the writers of these letters have ulterior motives should have second thoughts on the matter. The next letter I have is from The Anti Water-Flouridation Council of Australia and New Zealand, and it has the following names on the top of the letterhead:


I will not read the names of the other people and their qualifications which appear on the top of this letter. I merely quote the ones I have mentioned to show that they are prominent people. The contents of the letter are as follows:

Members of the Legislative Assembly and Members of the Legislative Council of West Australia.

Gentlemen,

The urgent purpose of this letter is to indicate to you some of the facts against water-flouridation, believing that you will be needing the evidence for and against, before you make your fateful decision how to vote on the water-flouridation Bill.

Professor Sir Arthur Amies, Dean of the Dental Faculty, University of Melbourne, has had recorded in the minutes of the meeting of the Dental Research Advisory Committee of the National Health and Medical Research Council, dated September 25, 1959, that he considers; (quote).

"(1) Conclusions are drawn from numerical data of experimental trials in U.S.A. which were accepted by the N.H.M.R.C. in 1952, have been proved to be fallacious, and the original claim and promised benefits of artificial fluoridation have not been demonstrated."

There are a number of other paragraphs of this letter written in the same vein, but because I know I have a limited time to speak on the Bill I will not quote them. I have here another letter from the Eden Hill Progress Association which is in my electorate, and it reads—

Dear Sir,

Enclosed please find a copy of letter sent to the Premier re the proposed fluoridation of water.

Strong feeling was expressed at our meeting on the 25th, against the enforcement of fluoridation on the whole population when it is of benefit to approximately one third of the population. It is felt that the balanced dosage of tablets would receive no opposition and would retain liberties and freedom of the people.

Any assistance you can give us in this matter would be appreciated.

Yours faithfully,

A. Price, Hon. Secretary.
These letters are examples of the correspondence I have been receiving on this subject. The following is an extract from another letter from an elector of mine residing at Eden Hill:

Dear Mr. Brady,

As you represent this area, I am writing to you to register very strong objection to the threat of Government action in contaminating water supply. I do not intend to read the whole of the contents of this letter, but the writer attached a reprint of No. 67 Journal of the House of Representatives, 72nd Legislature, Regular Session of 1964. This has reference to the American House of Representatives. This reprint contains a report of a Select Committee on water fluoridation, and apparently was delivered in Lansing, on Friday, the 24th April, 1964. The paragraph I wish to quote to the House reads as follows:

The United States Public Health Service is a principal promoter of fluoridation of public water supplies. It recommends adding fluoride in an exactly correct amount, one part fluoride to one million parts of water. This is sodium fluoride—a poison. The 1 p.p.m. concentration provides no margin of safety.

It is the initial conclusion of the Committee that no control of fluoride intake into the human body is possible. Intake from sources other than water, namely food, drugs, and air contaminated by fluoride is unpredictable. Even if a constant fluoride level in drinking water could be maintained throughout a water system, the amount of water drunk varies from person to person and tolerance to drugs differs in individuals. Young children, for whose teeth fluoridation is designed, drink very little water. Even if a known, controlled, daily amount of fluoride were to reach the stomach there is uncertainty as to how much would remain in the system of a grown person or in which organ or organs it would be stored. The amounts stored varies widely from person to person.

The committee's recommendation continues in that vein. Once again I could quote three or four paragraphs of that letter for the information of the House. All these people cannot be wrong concerning this matter. In addition I received another letter from a person who resides in the Darling Range electorate. It reads as follows:

Mr. J. J. Brady,  
Member Legislative Assembly.

Dear Sir,

I feel the Government's decision to fluoridate the water supply is very unfair, as after all our teeth are not so important as other parts of our body which will surely be affected, as we have no positive proof otherwise.

The letter continues in that strain, but to be fair to the member for Darling Range, I replied to the lady correspondent pointing out that I was not her parliamentary representative and was not in favour of fluoridation of water supplies, and that she should write to the member for her district.

I thought the member for Darling Range would be opposed to the fluoridation of water supplies. I hope he will read the letter which he received from his electorate. From one end of my electorate to the other the people are opposed to fluoridation, and they are not all fools. I have here a letter which I received from the Christian Science Committee on Publication dated the 22nd July, 1964. It states:

It is quite obvious from news items, letters, and leading articles in our daily newspaper, that the Government is probably proposing a Bill on the question of fluoridating the Public Water Supplies under its control.

If this is so, it is felt that now is the time to place before you a brief statement on behalf of the Christian Scientists in this State, to clarify our Church's position on this question. Attached is a "Statement on Fluoridation."

The statement on fluoridation attached to that letter states:

We wish to make it clear at the outset that it is certainly not our desire or intention to oppose legitimate public health and sanitation programs, or to deny any of the various medicinal health measures to those who desire them.

But when it comes to compulsory fluoridation or any other program that would undermine the basic freedom of the individual in matters of personal health and religion, then we feel it is our duty to register our convictions and deepest protest.

The statement goes on in similar vein and I could go on reading paragraph after paragraph. What more does the Minister personally do not want to be here until 12.30 tomorrow morning. I have here a pamphlet which illustrates the opposition to the fluoridation of water supplies. It is as follows:

Freedom of Choice?  
The Principle Is The Same  
(Individual's Freedom of Choice)  
Only The Ingredient Is Changed  
This Appeared When It Was Proposed  
To Nationalise The Banks  
"For Our Own Good"  
Why is it that the Principles of Freedom?  
Then is shown an illustration of a bottle of poison. The pamphlet continues:

You Won't Like The Taste Of This  
It's All Free  
What Freedom?
Fluoridation Bill
We Did Not Like It Then
&
We Do Not Like It Now
Vote Against
Every Member That
Supports
The Proposed Bill

In 1949. The Liberal Party adopted
as its platform Anti-Bank National-
isation & brought down legislation to
this effect. What's the difference?
The principle is the same. In 1949 the
Liberal Party did not want the national-
isation of banks but now it wants compul-
sory fluoridation.

I hope the Minister will see the folly
of following the path the Government is
taking. By introducing this legislation it
is losing supporters from its ranks, and
it is causing great concern among the
people. Generally speaking it is adopting
tactics which are not worthy of the Gov-
ernment. I oppose the measure and will
do everything I can to see that it is
defeated.

MR. W. A. MANNING (Narrogin) [9.14
p.m.]: I notice the member for Swan said
he regretted he did not receive any anti-
fluoridation literature. I am sure that is
an omission on the part of somebody, be-
cause I have files and files of it.

Mr. Brady: Did you get the literature
from the Government?

Mr. W. A. MANNING: I am not worried
where it came from.
Mr. Brady: Of course you do not know.
When you are debating a subject you want
to have a knowledge of it.

Mr. W. A. MANNING: I have knowledge
of the subject, and I have many documents
in my possession relating to fluoridation. I
wholeheartedly support the action of the
Government in introducing this legislation. It
is a responsible Government, and it is
taking steps to provide something for the
public which is decidedly for its benefit.
It has placed the facts before the people.

However much the member for Swan
and others might like to read to us, if
they are fair-minded they will come to the
conclusion that the experiments into the
fluoridation of water supplies which have
been conducted over many years, in so
many countries and among so many races,
are decidedly in favour of fluoridation.
One can go on dealing with the matter
and criticising the points which have been
raised. I do not intend to do that, because
much has already been said.

The member for Merredin-Yilgarn laid
great stress on the selling of poison by
vested interests, on the selling of a waste
product, and on making money out of it.
He said that was the main reason for the
introduction of the legislation.

Mr. Kelly: They want to sell the by-
products.

Mr. W. A. MANNING: He said they
wanted to sell their by-products, but it is
very strange that everyone who is opposed
to fluoridation has supported the taking of
fluoride in tablet form.

Mr. Kelly: That is a regulated dose.

Mr. W. A. MANNING: I agree it is, but
the people will be taking exactly the same
substance as will be put into the water
supplies, and the same interests will sell
the poison! Also vested interests will
sell the tablets. Not only will those vested
interests be selling what, according to the
honourable member, is poison, but also the
tablets.

Mr. Toms: People do not have to buy
the tablets.

Mr. W. A. MANNING: There is no
foundation for what the member for Merredin-Yilgarn has said. Whatever is
advocated, the same substance will be sold.

Mr. Toms: Do you buy fluoride tablets?

Mr. W. A. MANNING: I do not. I am
beyond the stage where they have any
effect on me. The contention by the hon-
ourable member that the fluoridation of
water supplies is being advocated for the
benefit of vested interests is all poppycock.

Mr. Hall: You will be sorry when your
to

Mr. W. A. MANNING: The member for
Swan said he regretted very much that
the Australian Medical Association had not
come into this controversy and given an
indication of its views. I wonder what
would be the attitude of the honourable
member if that association did set out in
a letter the benefits of fluoridation. Would
he change his mind then? He said that
if the association had said so-and-so he
might have changed his views.

Most of us in this House are laymen,
and we are guided by the opinions of those
who know about these matters. I took the
opportunity to write to the doctors in my
electorate to find out their views, without
indicating to them my thoughts on the
matter. I asked this question: "Would you
care to advise me in a few words whether
you have any objection to the proposed
addition of fluoride to the drinking water?"

When the member for Swan hears the re-
plies I have received he will, no doubt,
change his opinion.

The first is the reply which I received
from Dr. Worsam. It states—

Thank you for your letter of 25/8/66.
Firstly it has to be stated that I am
no expert on this subject, although
interested and concerned.

1. The benefits of supplying fluoride
where deficient are virtually completely
established.

2. The risk of harm when given
either in tablets or in the drinking
water (where controlled) is negligible.

3. The most practicable method,
and probably the cheapest, would be
via the water supply—in this way
underprivileged children would be protected despite the imprudence of their parents.

That is the point which some members opposite have overlooked. Many parents are imprudent. Perhaps their children are most in need of the benefits from fluoridation, but they will be deprived of it if only tablets are available. To continue with the letter—

4. The so-called moral issue of compulsory mass-medication has been over-played. This is no more a moral or ethical question than any other involving the population at large. To supply a factor deficient in local supplies of water, the addition of which will generally be beneficial, is as acceptable a public health measure as to chlorinate water to remove factors known to be harmful.

There is this letter from Dr. M. Slavin—

I wish to advise you, that I am all in favour of the proposed addition of fluoride to drinking water.

The next is from Dr. Stuart Mainland—

In reply to your query on Fluoridation, I am 100% in favour of it, and can suggest no reason for not adding fluoride to the drinking water.

From Dr. John Francis—

In reply to your letter of the 25th inst. I would like to state that I have no objection whatever to the proposed addition of fluoride to the drinking water.

I feel that fluoride, in the correct dosage, is most necessary for children, and can do no harm to adults.

From Dr. Zilko—

I am wholly in favour of the proposed addition of fluoride to drinking water.

The next letter will interest members of the Opposition because they know the doctor very well. The letter is from Dr. A. Jacobs—

I have no objection, and believe that such a step would prevent much dental caries—and this with no risk of fluoride poisoning.

Those are the opinions I received. There was only one reply that I did not obtain. I understand the doctor concerned is in favour, but I cannot quote a written reply. That is the evidence I have been able to obtain from those concerned in my area; and whose opinions are we going to accept?

With all due respect to the Deputy Leader of the Opposition, he is not a doctor; and he accepts the opinions of other people. Those whom I have quoted deal with the health of the community all the time, and every one is in support of this measure.

Mr. Graham: That is not evidence; it is only their views.

Mr. Ross Hutchinson: It is the best of evidence.

Mr. W. A. MANNING: Whose advice are we to take on a subject such as this? We cannot reject the advice of those who are concerned every day with the health of the people. That is my attitude and I feel I can depend upon the advice of the people I have mentioned. I wholeheartedly support the Bill.

MR. NORTON (Gascowye) [9.23 p.m.]: I want to make it quite clear from the outset that I intend to oppose this measure, as I did previously. My main reason is that it is a further whittling away of the civil liberties of the people of Western Australia.

First of all I want to make some small comment on two small statements made by the Minister in his speech when he introduced this Bill. He was referring to what the Bill sets out to do and said it was designed to curtail the alarming extent of dental decay throughout the State. Then, later on, he went on to say that Western Australians have very bad teeth. I am not going to comment on those statements, but I am going to read from a little pamphlet issued by the Health Education Council of Western Australia. I will quote from the pamphlet and leave it to the House to decide the merits of the Minister's statement.

We Can Keep Our Teeth

There is a belief in Australia that our teeth are the worst in the world. This is not just so. The state of dental health in Australia is certainly not good, but repeated examinations in Western Australia show that healthy teeth are being seen more often.

So I do not know how the Minister can make the statements he did, when the health authority was saying something different. The other thing mentioned in his speech was the case brought before the Irish Court some time ago. He quoted from Mr. Justice Kenny's findings.

I have in my possession two or three pamphlets from which I am going to quote. They are pamphlets I have selected after quite a bit of research. The first one is entitled Once More—Fluoridation, which was a paper read before the 9th International Convention on Vital Substances, Nutrition, and Civilisation Diseases, September 16 to 22, 1963, held at Lindau on Lake Constance, Germany, and at Bregenz, Austria. It was given by Doctor Steyn.

The second one is the Second Memorandum on the Artificial Fluoridation of Drinking Water Supplies. This was a paper submitted to the Committee of Enquiry into Fluoridation of Public Water Supplies, again by Doctor Steyn, in 1964. So as to keep the argument consistent, I have chosen one person whom I consider puts up a good argument against fluoridation.
In respect of the court case in Ireland, I want to refer to an article which gives the other side of the case. It is in the form of a letter written by the solicitors for the defence in this particular case and it commences—


(Document P.95).

I have Mr. Richard Ryan's (of Ryan and Wallace, Solicitors, Dublin) permission to place his letter of September, 11, 1964, dealing with the above judgment, before this Commission and to use it in public. The following is an extract:

Ryan & Wallace
Solicitors

Our Ref. R. 32
Your Ref. Fluorine

31, Dame Street,
Dublin 2.
11th September, 1964.

The letter is addressed to Professor Steyn,
and states—

Our Court case here was unsatisfactory from a number of points of view and you are free to quote my criticisms:

(1) Several publications which Plaintiff's witnesses, including yourself, wished to put before the Court were rejected by the Trial Judge while voluminous documents referred to by witnesses for the Minister for Health were admitted without difficulty on the ground that they were official documents published by the Governments of various States.

(2) The evidence of Plaintiff's witnesses including yourself was taken down verbatim, by a team of shorthand writers on behalf of the Minister of Health and transmitted nightly to the Public Health Department of the United States of America and other pro-fluoridation Agencies and later subjected to destructive criticism while no opportunity was afforded to those criticised to reply to the criticism.

(3) An application by Plaintiff's Lawyers to recall Doctor Sinclair and Doctor Dillon to rebut criticism of their evidence was refused.

(4) We were subjected to unreasonable pressure to bring the case forward for Trial and later on to bring it forward for Appeal. This left us insufficient time to prepare adequately for the case.

(5) The Attorney General undertook to provide a copy of the Transcript of the High Court evidence for the Supreme Court. The copies furnished were incomplete, as long quotations from anti-fluoridation writers which were quoted by Plaintiff's Counsel in the cross-examination of defendant witnesses were not included in the Transcript and were not before the Supreme Court.

(6) The fluoridation side had, of course, the unlimited resources of the State and indeed of the Public Health Department of the United States of America behind them. Apart from the services of several members of the Department of Health and of the Attorney General and Chief State Solicitors' officers, the cost of which is unknown, the State spent not less than £30,000 in presenting the pro-fluoridation case. On the other hand, the expenditure of the Plaintiff's case was £1,200. No reasonable person could argue that both sides of a scientific argument could have been adequately presented in such circumstances.

I certainly agree. Money speaks all languages; and when one has two countries coming in, putting one's case, one has everything in one's favour and nothing to lose.

Mr. W. A. Manning: Was not that the statement of the solicitor who lost his case before the Supreme Court?

Mr. NORTON: Yes; and nobody was able to refute it.

Mr. W. A. Manning: He was trying to excuse himself.

Mr. NORTON: Nobody has refuted it.

In The West Australian was an article concerning Col Bonney following his examination of children at the Como kindergarten. It was quite an interesting article and one worth recording in Hansard. It reads—

An examination of the teeth of children at the Como kindergarten yesterday was claimed to give a startling example of the effect of fluoride, a good diet and oral hygiene on children's teeth ....

Mr. Bonney said this marked improvement on the average dental health of children in the four-to-five age group showed that parents and children were becoming increasingly aware of the advantages of healthy teeth.

We all agree with that. To continue—

Much of this awareness could be accredited to the kindergarten teachers who took special courses in dental care and co-operated with the Dental Health Department in teaching children and parents how to care for their teeth.

The Kindergarten Teachers' Training College was giving eight lectures a year on dental hygiene.

Mr. Bonney said more mothers realised now that children of kindergarten age were not capable of cleaning their
teeth properly and consequently were doing it themselves.

Mr. Tonkin: What Mr. Bonney did not say was that he included a child who had never had fluoride; and he knew it!

Mr. NORTON: Irrespective of that, it proves very clearly that dental hygiene is playing a big part in the control of caries. There is no doubt that fluoride, when given in regulated quantities, does a good job; but it is useful only to children up to 12 years. If fluoride could be given in properly regulated quantities, no reason exists why it should not be given.

I must say now that there is a difference between water with fluoride and fluoridated water. Fluoride in water is calcium fluoride, whereas fluoridated water contains sodium fluoride which is a corrosive.

In The West Australian on the 7th October this year, was a letter headed, "Old Bones." Again the name of Bonney appears but with a different christian name. This letter is by Pat Bonney. However, having read it, I think that The West Australian probably made a mistake in the teeth have printed Col Bonney. The letter reads—

Increasing evidence of fluoride's value in the treatment of bone disorders gives hope that not only will the teeth of future generations be better but also that there will be less osteoporosis and hip fractures in the elderly.

Cohen and Gardiner reported in the Journal of the American Medical Association (March 14, 1966) that old women given daily doses of 50 times as much sodium fluoride as they would get from a fluoridated water supply had their long-term bone disorders cured in 15 months or less.

This helps to confirm both the safety of fluoridation and its value to senior citizens.

In the area from which I come the water is fluoridated with calcium fluoride, and I know of people in that area who for the whole of their lives have drunk no other water than that, but they have broken bones in their hips in old age and have had the other diseases mentioned in that article.

All members received a pamphlet the last time a similar Bill was under discussion. It is a very good pamphlet and sets out clearly how children's teeth should be cared for in order to prevent caries. A chart is printed on page 11 illustrating how and when the acid forms and works on teeth. It does not matter how much fluoride a person takes or how hard a person's teeth. It does not matter how much fluoride a person takes or how hard a person's teeth are, if dental hygiene is not exercised, and when the acid forms and works an opportunitiy to work for three hours each day. This must make members realise that a certain amount of dental hygiene must be exercised to safeguard the teeth against caries.

No matter who speaks on the prevention of dental caries, he always finally refers to dental hygiene and diet. Even Professor Rumford, who was here for a dental convention and spoke as a guest of honour on the A.B.C., said he was of the opinion that dental caries was not as big a danger as was gum disease which is so prevalent. He said he had found it in children as young as six years of age. I understood him to say that to a great extent this disease was caused by the formation of tartar on the teeth. It gets down behind the teeth and forces the gums away, allowing the disease to take over.

This Bill sets out to force people to take fluoridation as a compulsory medication. Several methods exist for the administering of fluoride, and these have already been mentioned. For instance, by administering fluoride in tablet form, the exact quantity can be taken each time. However, the amount of fluoride taken if it is compulsorily added to water cannot be measured.

Mr. Ross Hutchinson: What about that child in the south who took some score of tablets the other day?

Mr. NORTON: That is quite an interesting interjection. Fluoride is a poison of a cumulative nature. When it is taken in large quantities it has one reaction, and a very quick reaction—vomiting. Therefore a person who takes a large dose of fluoride like this immediately gets rid of it completely on the spot, whereas when fluoride is taken in minute quantities over the years it accumulates, as I will illustrate later.

Several medical controls have been instigated in this State in respect of various diseases. However, there is no compulsion about them unless a person is found to have an infectious disease or has been in the company of a person who has one. It is possible now to be immunised against polio, and the voluntary response to that campaign has been marvellous. Very few children have not been fully immunised.

A few people have been immunised against smallpox; and most children have been inoculated against diptheria, and so on. To help in the elimination of T.B., X-rays are compulsory, but this is not a medication. It is merely a device to find out whether a person has the disease which is contagious. However, caries is not contagious and is injurious only to the person who is unlucky enough to have it.
In The West Australian on the 1st October was a rather outstanding article headed, "U.K. Report Warns of Smoking Toll." Portion of it reads—

... in the report on public health in England and Wales in 1965. During the year 22,231 men and 4,167 women died from lung cancer—an increase of 1,027 over 1964.

Lung cancer and chronic bronchitis, the legacies of cigarette smoking, were the causes of more than five times as many deaths than road accidents in a year, he said. Yet they excited far less comment in the Press.

In Western Australia, last year, there were 580 deaths from lung cancer and 252 road deaths. What is being done about the deaths on the road; and what is being done to put people off smoking? Is the Government taking any action to stop extensive advertising on TV which induces young people to smoke? Younagers are given the impression that every time they play a game or sport, they have to have a smoke.

The ACTING SPEAKER (Mr. Crommelin): Order! I do not think that is related to the Bill. You have made your point: I smoke.

Mr. NORTON: I will not go any further on that matter, but I think you, Mr. Acting Speaker, understand what I mean.

There are a number of methods of administering fluorine. There are tablets, stanis fluoride in toothpaste, and the fluoride which dentists paint onto the teeth. All of those are helpful but none successful unless the person who is receiving treatment is prepared to keep up with dental hygiene at all times.

I wish now to quote from the second memorandum on fluoridation under the heading of "Artificial Fluoridation of Public Water Supplies". It reads as follows—

"Joint Meeting of Advisory Committees on Dental Health Services and Therapeutic Agents: Thursday 7th April, 1960, at 2 p.m., Conference Room (No. 5), Locarno House, Schoeman Street, Pretoria."

"1. At a recent meeting of this Department's Advisory Committees on Dental Health Services and Therapeutic Agents the following resolution was inter alla adopted:

"Whereas Fluorine is of value in particular circumstances (E.G. in cases of children during the years of tooth calcification) as a preventive measure in dental caries, there are other aspects and procedures, such as suitable diet, addition of Strion, and oral hygiene which may have a similar and even greater value in the control of dental caries.

"Because of the narrow margin of safety..."

I emphasise "because of the narrow margin of safety". To continue—

... the Committee also directs attention to the number of safeguards which are considered essential by the Expert Committee on Fluoridation of water where this is to be carried out—vide World Health Organization Technical Report Series, No. 146."

Further on it is stated as follows—

Another reason for opposing fluoridation of drinking water supplies is that fluoride may inhibit dental caries to a certain extent but contributes nothing to the removal of the root cause of tooth decay, namely, diets deficient in essential food factors.

There is no doubt that fluoride is a poison, as far as I can find out from inquiries, and the answers I have received to questions. The poison 1080 is one of the fluoride compounds and I do not think there is any argument in that respect. Fluoride is like many other poisons when administered in controlled and small doses: it is quite harmless. It has a cumulative effect and it might take 30 or 40 years before various allergies are likely to manifest themselves. Actually, no assessment has been made of its effect in combination with other minerals. I will again quote from the memorandum under the heading of "Artificial Fluoridation of Water", as follows—

"I have, among others, referred to the lack of information concerning the presence of minerals other than fluorides in water in the American studies, and, this information is of very great importance as far as the chronic toxicity of fluorides in drinking water is concerned. Also the concentrations of the different salts (ions and anions) in the water play an important role in the determination of the chronic toxicity of fluorides present in such waters.

What is going to be our reaction as far as the Perth water supplies are concerned when we realise that the waters being pumped into our reservoirs contain no less than 14 different minerals? Are those minerals compatible with sodium fluoride, or are they not? That is the question which has not been answered and I do not think it has ever been looked at.

Individuals have different tolerances. This is actually quite an interesting study in itself. It is quoted that children from the same family have different tolerances to fluoride. The investigation which I am going to quote is rather interesting and was carried out in Japan. It reads as follows—

The following items have been revealed through the examination of the oral cavity as well as of the body of about 24,000 populations in 279 fluoridated areas of various districts in Japan for the purpose of the preliminary investigation of the present research of fluoridation.
It goes on—

2. An excess quantity of fluorine contained caused, in Japan, mottled teeth, for instance, if we used the same quantity as that reported from America. The quantity causing relatively intense mottled teeth was 1.2 p.p.m. in the latitude of 40° N. or higher (the areas of Hokkaido and Tohoku), 1.0 p.p.m. in 35° N. (the areas of Kanto, Chubu, Kinki and Chugoku), 0.8 p.p.m. in 31° N. (Southern part of Kyushu), and 0.6 p.p.m. in 25° N. (Formosa).

So it can be seen that even the latitude makes a considerable difference to the amount of fluorine which can be ingested, even in one country. The book from which I have been quoting contains many accounts of investigations made in various places and the effects of fluorine on different people. How are we to regulate the dose so that there will be no undue effects on various individuals? The recommended quantity is one part per million of fluoride. This is equal to one miligram of fluoride for every litre of water, or just less than two pints.

This means that if anyone drinks over two pints of water in any one day—he must not drink tea beyond that intake—he has taken over the recommended dose of fluoride. If the individual drinks six cups of tea in addition to the two pints of water, he has doubled the quantity of fluoride he has consumed for that day.

Throughout the day, children drink different quantities of water and one cannot, in any way, regulate their intake.

When one looks at some of the reports in respect of drinking water and the effect of it, it would seem that there are many harmful effects. One of the reports I have here is in respect of diabetics. I should like to quote a passage, and I mention that this is in connection with the Army in America. I quote—

Word from the Surgeon General's Office, United States Army, indicates the water requirement of man for temperate climate varies with activity, ranging from 300 cubic centimetres per day under a regime of light activity to 1 to 3 litres per day under conditions of normal activity. In a hot climate under conditions of moderate activity the daily intake is 2 gallons per day. With heavy exertion, the intake exceeds this amount.

With regard to diabetes, it says—

Further diabetes mellitus affects many millions of people, including children, and the diabetic, as a rule, drinks very large quantities of water daily.

This fluoridation would have an injurious effect on that particular person. As I said before, fluoride is only actually required for those children who are in the age group whose teeth are calcifying but, when one goes beyond that age, one finds a very different result.

There is quite an interesting article, and this is contained in a slightly different pamphlet to the one I have quoted from before. This pamphlet is a reprint from The Toxicology of Fluorine (Symposium) in Bern and it is edited by Professor Doctor T. Gordonoff. I quote—

1. Those of the studies of M. C. Smith and H. B. Smith. In this editorial it is stated: M. C. Smith and H. B. Smith in their studies at St. David, Arizona, found that of the people using drinking water containing 1.6 to 4.0 parts per million of fluorine at the ages of 12 to 14, 33 per cent, had caries; at ages 21 to 41, nearly 100 per cent, had caries: from 26 to 34.5, 50 per cent, had teeth extracted and replaced by dentures. The authors concluded from these data that the teeth of the individuals of a community in which comparatively large amounts of fluorine are found, in this case 1.6 to 4.0 parts per million, are structurally weak; in some cases, the tooth structure being so impaired as to crumble on attempts to place fillings.

I think that statement is very telling and is one which does not lean towards the addition of fluoride to water, particularly when one is getting into the older age group.

I could go on for quite a long while quoting the effects which fluorine has on the various parts of the body. I would suggest members take the opportunity of reading these booklets, which are in the possession of this House—these particular ones are my own property but the Clerks have these booklets. I would suggest that members read them in order to understand the different effects fluoride has on different parts of the body. For instance, it states here—

The ingestion of excessive quantites of fluoride—

That is, sodium fluoride—

—enhances the deposition of calcium in atherosclerotic blood vessels and in this way aggravates arteriosclerosis and high blood pressure, two of the most common diseases in western civilisation.

That has reference to blood. Another thing it says is that fluorine has an effect on the blood and causes it not to congeal so quickly and therefore there is a chance of causing haemorrhage. Fluorine also has a very direct action on the enzymes, which were referred to by the member for Swan. This article states—

The fluorine ion, being an active enzyme poison, may be a factor in triggering cancer which has many
causes and is such a prevalent disease of civilisation.

The article goes on to give a far more detailed description of that. It deals with many points, and one of the most important things it indicates is that there is quite a danger to the thyroid gland and this can easily trigger off cancer in that part of the body.

With the possibility of the addition of fluoride to our water supplies, we are faced with quite an extensive engineering problem. The member for Merredin-Yilgarn dealt with the corrosive action of sodium fluoride to our water supplies, we are faced quite a danger to the thyroid gland and important things it indicates is that there is many points, and one of the most important things it indicates is that there is quite a danger to the thyroid gland and this can easily trigger off cancer in that part of the body.

The article goes on to give a far more detailed description of that. It deals with many points, and one of the most important things it indicates is that there is quite a danger to the thyroid gland and this can easily trigger off cancer in that part of the body.

With the possibility of the addition of fluoride to our water supplies, we are faced with quite an extensive engineering problem. The member for Merredin-Yilgarn dealt with the corrosive action of sodium fluoride in the piping. America has found some very big problems in this direction and I will quote one or two of these so as to give the House some idea of what is actually taking place in America. First of all I am going to quote, not from any of the books I have previously quoted from, but from a book which is in the Parliamentary Library, and which is entitled, The American Fluoridation Experiment. And I quote from page 204:

"The accumulation, at critical points in the distributive system, of heavy deposits of highly toxic fluoride salts. The water engineer does not know where these may occur and has no way to find out."

Loss .1 p.p.m. could build up over long period.

Meadow Brook Soft Water Laundry, in North Andover, Massachusetts. The town fluoridated the water supply in 1953 and soon afterwards the laundry had trouble. The entire laundry load would have brown cast. Found deposits soft rust nearly one inch thick in hot water system, when removed found that baked enamel in filter system had been corroded away. The intake pipe connecting with the town's water main clogged and leaked, and when removed was found to be paper thin. Fluoride had softened the heavy rust that had collected on the inside of the town's water mains over the years. As it freed itself it was carried along with the water and used by the people in North Andover.

I wonder what is going to happen in Perth as a result of brown water. To continue quoting—

"I have in my possession information from the United States of America that surface scrapings from pipes carrying fluoridated water were found to contain 3,600 to 8,000 p.p.m. of fluoride (P) and that a sample of water fluoridated to 1 p.p.m. of fluorine (fluoride) at one time contained 3.94 p.p.m. of fluorine and at another time 2.8 p.p.m. of fluorine.

Everingham states: "The New York States Department report for 1958 gives a variation in fluoride at taps in 8 fluoridated cities as 0.25 to 1.4 p.p.m." This is a rather telling letter which is printed in this pamphlet, and it is dated the 26th February, 1962. It is published in this journal in the following manner:

"To my Fellow Townsmen:

"As Superintendent of Wilmington's water system, it has been my responsibility to add sodium fluoride to our water since 1955. Having had close contact with this toxic material and feeling a deep concern for the people of Wilmington, I am compelled to report to you on this situation before you vote next Saturday on whether or not to continue fluoridating our water supply.

"Since the installation of the fluoridator at the pumping station, there has been a series of breakdowns of that equipment due to corrosion of the metal parts. I have been asked how much longer it will be before the same thing happens to pipes, meters, hot water tanks and household plumbing, even though the concentration in the fluoridator is much stronger than in the system. It is my duty to report that I have already observed an increase in corrosion throughout the town since we started adding fluoride to our water.

"I must also notify the townspeople that it has been impossible to maintain the recommended 1 part per million. This is the concentration which we add to the water at the pumping station; but tests of fluoride in the lines have fluctuated from .4 to 1.4 parts per million, dangerously close to 1.5 parts per million which according to the U.S. Public Health Service makes the water unsafe for drinking purposes.

"In view of these facts, I would urge the voters of Wilmington to consider carefully whether or not they wish to continue adding sodium fluoride to the public water supply. Personally, it is my conviction that the water system should be used for the sole purpose of supplying pure, potable water, and the furnishing of sodium fluoride and other drugs which have been suggested for mass medication through the water mains be left to other more appropriate agencies.

Sincerely,

Edmund Sargent."

There is another quotation in the other pamphlet which deals with the matter of copper and which was referred to by the member for Swan. It is headed—

Sidetlight on Fluorine

Unequivocal evidence of the cost, waste and danger of fluoridation has
come from Asbury Park, New Jersey, which fluoridated its water supply in 1952. In response to an inquiry, the Superintendent of the Water and Sewer Departments, Joseph L. Mauro Jr., stated:

"Since the installation of the fluoridation equipment at the City of Asbury Park Plumbing Station, there has been a series of breakdowns of the equipment due to corrosion of metal parts, etc."

Further down this statement continues—

Along the same lines, the views of a boiler manufacturing company are no less explicit.

The Coulter Copper & Brass Company of Toronto, in response to a letter about the effects of fluoridated water in Brantford, Ontario, on the company’s product, said:

"The material from which our boilers are fabricated is known as Everdur, which is a silicon bearing copper, offering great resistance to corrosion by normal water supply."

Then, referring to the effect of fluoridation in Brantford, the company said:

"This type of water does affect our boilers more than water which is pure or merely chlorinated."

I could continue to make quotations along similar lines in respect of corrosion, but as my time is running out I think I have quoted sufficient literature to make it doubly clear that fluoride has a definite corrosive action on metal and quite definitely accumulates in any water supply system. So it is possible to have, as it were, balls of fluoride passing through the reticulation system, and one could ingest an overdose of fluoride in that manner.

Mr. Ross Hutchinson: That is not true, of course.

Mr. NORTON: It will be up to the Minister to disprove it.

Mr. Ross Hutchinson: It has been disproved so many times.

Mr. Graham: The Minister has never heard of it before.

Mr. NORTON: I would now like to quote some comments from doctors. I know the Minister does not appreciate these quotations but we sat and listened to what he had to say—

Mr. Graham: What an ordeal!

Mr. NORTON: —and we will now be able to tell him something he does not know.

Mr. Ross Hutchinson: You have my full attention.

Mr. NORTON: I am glad to hear that. This quotation is taken from the Second Memorandum on the Artificial Fluoridation of Drinking Water Supplies which was published in the Republic of South Africa, and reads as follows:

I believe Dr. J. R. Doty, representing the American Dental Association, and Dr. J. D. Porterfield, representing the State and Territorial Health Officers Association, who, when asked if their groups made any independent research studies prior to endorsing the fluoridation program, replied: They did not.

I believe Dr. Alton Ochsner, head of the famed Ochsner Clinic in New Orleans and honorary life member of the American Cancer Society, who stated to me in a letter dated Feb. 9, 1961, that he had served on a committee to determine whether or not the water supply in the City of New Orleans should be fluoridated. He spoke with Dr. C. C. Bass, dean emeritus at Tulane University of Medicine and who, for the past forty years has been interested in the pathology of teeth and is convinced from his investigations that fluoride causes periodontoclasia (pyorrhrea) a disease of the gums which causes the loosening of teeth in older individuals and that fluoridation should not be used until Dr. Bass is proven wrong. Today New Orleans is not fluoridated.

I believe Dr. F. E. Ray, research professor and director, Cancer Research Laboratory, University of Florida, who wrote me (Jan. 31, 1961): "Although people say no one will be harmed from fluoridation, there is need for a good deal of investigation of this subject, because we do not have any firsthand information."

I could go on to quote quite a few more paragraphs in this journal, but they are available to any member who wishes to read them, and should any member do so he will agree that the whole matter of the fluoridation of water supplies should be put to the people of this State to decide for themselves.

In conclusion, fluoridation represents an unprecedented enlargement of the responsibility and authority of the public health services. There is no doubt it does, and they do not know what they will come up against in this respect. Fluoridation will subject the administrative urban population to a medication designed to benefit a comparatively few.

The programme provides no adequate control of the dosage with respect to the requirements and tolerances of individual patients, who may be young or old, well or sick, allergic, or malnourished. The results of treatment cannot be predicted since there are no adequate preliminary studies of the effects of artificially fluoridated water on children, and none whatsoever of the effects upon adults. It takes 10 to 25 years for the cumulative effect of fluorides on teeth or bones to
manifest itself. I am not keen to support the Bill, but I will support the second reading in the hope that we can obtain a referendum on the subject.

Mr. Hawke (Northam—Leader of the Opposition) [10.10 p.m.]: I will try to be as brief as possible in dealing with this Bill. On the other occasion, when we had a measure very similar to this before us, my attitude was clear. In the first place, I could not support the legislation, because I was not convinced there would not be serious side effects resulting from the intake of fluoride by people in the water supply districts in Western Australia.

In the second place, it was my view that this proposal was so drastic in its compulsion as to make it undemocratic for this Parliament to go ahead and impose such a compulsory system upon the public without the public having any opportunity whatsoever to say whether it was in favour of a compulsory system of fluoridation of water supplies being imposed upon it.

The Bill before us contains no proposal for a referendum. We have a rather interesting comparison on this point in Western Australia at the present time, because there is some agitation for the retention of the archway which is below Parliament House. The Government has said public opinion in regard to its retention, or otherwise, should be tested. I cannot believe the Government wants to test public opinion just for the fun of it, and I only mention this by way of illustration.

Whether the archway remains or does not remain will not have the slightest effect upon the health, certainly not upon the physical health, of any individual in Western Australia at this time, or at any time in the future. Yet the Government considers public opinion should be tested on the matter. But in regard to this terrifically important subject of fluoridation of domestic water supplies, the Government does not consider public opinion should be tested. It does not consider it should be taken any notice of whatsoever. The Government arrogantly decides to go straight ahead and, provided Parliament agrees, impose this compulsory system upon everybody in the water supply districts in the State.

I was naturally very interested in the remarks of the member for Wembley. He said we must rely upon medical science in connection with a subject of this nature; that is, the compulsory fluoridation of our domestic water supplies. Up to a point, I think we must depend upon medical science for guidance as to whether this is a safe proposition with which to go ahead.

The member for Wembley did not quote many authorities in favour of fluoridation; he did not quote as many authorities in favour of it as the Deputy Leader of the Opposition, and the member for Gascoyne, quoted against it. So what is the decision of medical science upon this issue? Very clearly medical science throughout the world is divided.

Mr. Ross Hutchinson: Very disproportionately.

Mr. Hawke: I think it is open to question whether it is disproportionate.

Mr. Ross Hutchinson: It is not.

Mr. Hawke: When a medical association in America, Great Britain, Australia, or any other country makes a declaration through its small governing council, most members of the association would feel some loyalty towards the decision, and would not be over-anxious to come out publicly and declare themselves against such a decision.

I know some dentists in Perth who are strongly opposed to fluoridation, but they are a bit scared to come out publicly and make a declaration along those lines. However, it is clear medical science, as such, is divided. The fact that some leading medical scientists in the world are opposed to the fluoridation of water supplies, and are afraid of likely side effects, surely should make each one of us extremely cautious about voting to put into operation a system of this kind.

It must be also remembered that medical science is not infallible; it has not reached the stage of having successfully covered every disease and complaint to which the flesh is heir. I suppose it would not be denied that medical science has approved of the contraceptive pill; I suppose it would not be denied that medical science has approved of the drug LSD. Yet we know what developed out of taking the drug thalidomide; we know what it is thought is happening in many instances, or in some instances, in regard to the taking of the contraceptive pill; and we know what has happened, to some extent, in regard to the drug LSD.

I suppose if the records were examined over a considerable number of years it would be found the drugs which were fully approved by medical science at the time they first came out would be found to have been dangerous because of the side effects which developed in people who had been taking one or other of those drugs.

I was very interested in the case which the Deputy Leader of the Opposition brought before the House concerning the man who died. The Deputy Leader of the Opposition, in his conclusion in regard to the cause of death in this case, claimed it had been brought about by fluoride poisoning. The member for Wembley, to whose opinion we must naturally give some weight, took an opposite view. He read in full the autopsy report of this case. We all listened very carefully to
his reading of the report. I am sure most of us, as we listened, came to the conclusion that this particular individual was suffering from almost every disease known to man.

Mr. J. Hegney: Too right.

Mr. HAWKE: Yet the member for Wembley amazed all of us by finally saying that, in his opinion, this man had died from pneumonia. I am happy to see the honourable member smiling—even laughing.

Mr. Court: I think I would accept his diagnosis before that of the Deputy Leader of the Opposition.

Mr. HAWKE: Naturally the Minister would say that. He might have some justification for saying it.

Mr. Court: One of them happens to be a doctor.

Mr. HAWKE: That is so. I say I agree completely with the member for Wembley the immediate cause of death was pneumonia, but not the basic cause. He knows as well as I pneumonia can supervene very quickly in a case where a person is suffering from some illness or other, and bring about the death of that person: but I am sure the member for Wembley would not in such a case claim the basic cause of death was pneumonia.

Dr. Henn: I did not say it was.

Mr. HAWKE: I think that is the important point.

Dr. Henn: I think what killed the man was pneumonia.

Mr. HAWKE: I agree. The immediate cause of death was the supervention of pneumonia upon all the other troubles and disabilities this man had.

Mr. Graham: Simpler than that, it was a heart stoppage.

Mr. HAWKE: To prove the basic cause of death was not pneumonia but fluoride poisoning, I refer to the document which was quoted by the Deputy Leader of the Opposition and the member for Wembley. The very heading is enough to show that this particular individual was suffering from almost every disease known to man. The very heading is enough to show that fluoride played a most important part in bringing about the death of this poor fellow. It is, "Chronic Fluoride Intoxication with Fluorotic Radiculomyelopathy." This is written by Bertram J. L. Sauerbrunn, M.D., Charles M. Ryan, M.D., F.A.C.P., and James F. Shaw, M.D. I do not want to quote very much from this statement, because the heading itself is enough.

Mr. Court: How old was this person?

Mr. HAWKE: I think a few days older than the Minister.

Mr. Court: If I remember rightly he had been on fluoridated water for over 40 years.

Mr. HAWKE: That has a great deal to do with the matter, because it supports the argument of the Deputy Leader of the Opposition.

Mr. Court: Just the reverse.

Mr. HAWKE: This person had been on fluoridated water for many years.

Mr. Court: More than double the normal dose.

Mr. HAWKE: Exactly. The Minister is deserting the member for Wembley and coming over to our side.

Mr. Court: He explained that point and did so very well. Even I could understand him.

Mr. HAWKE: I would have thought the strength of the argument which the member for Wembley might have used was in the fact that fluoridated water which this individual had been consuming was very powerful in fluorine content. However, the honourable member sought to establish, and indeed did claim, the cause of death was pneumonia. I am sure in his inner mind the Minister for Industrial Development agrees pneumonia was only the immediate cause of death, and it supervened on the other illnesses from which he was suffering.

Mr. Tonkin: The member for Wembley went further. He said the fluoride intake had nothing to do with the matter.

Mr. HAWKE: I am very interested in the argument about what happened at Princess Margaret Hospital. What the Deputy Leader of the Opposition had to say was based upon information given to him by a dentist who was interested in one of these children in a practical way. He related to the House what had been given to him by the dentist. Surely that is fair enough.

Mr. Ross Hutchinson: Did you hear him?

Mr. HAWKE: Yes, I heard him and I understood him—which is very important.

Mr. Ross Hutchinson: You understand what you want to understand.

Mr. HAWKE: The Deputy Leader of the Opposition tonight has been in telephonic communication with the dentist on the initiative of the dentist: and, further on the initiative of the dentist, the Deputy Leader of the Opposition has been in telephonic communication with the mother of the child. Both the dentist and the mother say very clearly that at the clinic of the Princess Margaret Hospital information was given to indicate the eczema condition which had developed in the child was the result of the taking of fluoride tablets. On the advice of those in the clinic at the time, the taking of these tablets was discontinued, and within a short time the eczema condition disappeared.

Mr. Ross Hutchinson: Yet the medical director of that hospital said this did not happen, and that no child had been there suffering from the effects of the tablets. The taking of the tablets could have been
Mr. HAWKE: I am telling the House about the information which has been given by the dentist, and later by the mother of the child, to the Deputy Leader of the Opposition. I would hope within the next day or so this whole matter will be cleared up absolutely, so that there will be no misunderstanding or further confusion.

Mr. Ross Hutchinson: I hope so, too.

Mr. HAWKE: Medical science is not so clever about the treatment of eczema or dermatitis. If that is so, I do not know whether I am prepared to accept the view of those associated with medical science who advocate the fluoridation of water supplies. I know of an eczema case which I can vouch for. The person suffering from the complaint had gone to a general practitioner who prescribed some ointments and tablets, but they did not do any good. He then went to a leading skin specialist in Perth, in the partnership of McLishan and Macmillan. The specialist subjected him to ray treatment, and injected some new American drug—I think from the Minister's favourite city of Chicago—and after a time the condition became worse and worse. Medical science could not do anything about a cure; it succeeded only in making the condition worse.

By a sheer fluke the sufferer from the eczema condition made contact with an old Assyrian chemist who cleared it up completely within a week—not by drugs, not by ray treatment, but by diet. If medical science cannot cure an eczema condition, there is all the more reason why we should be very cautious indeed in accepting the supporting views of some medical men on the fluoridation of water supplies, even if there were no medical men of standing in the world who were opposed to fluoridation.

However, as there are many such men strongly opposed to fluoridation, we have another reason, and a very powerful one, why this matter should be approached with great caution. The member for Wembley asked, "Would officers of the Public Health Department in Western Australia recommend the fluoridation of water supplies if they thought for one instant even one baby was likely to be detrimentally affected?" Of course, none of us would think they would make such a recommendation if they had fears about the safety of what they were recommending.

But, as I have already shown, medical science has made mistakes in the past, just the same as every other group in a community has made mistakes. Medical science is not infallable—it is not total in its knowledge of sickness and diseases. We know the common cold has not yet been conquered by medical science. We know cancer is a disease about which medical science knows very little. Could the member for Wembley, for instance, tell me with assurance that the taking of fluoride in water could not bring about a cancerous condition, or could not make worse an already existing cancerous condition in a person?

Mr. Ross Hutchinson: On the best of evidence he could answer you.

Mr. HAWKE: I know he could not. What causes cancer?

Mr. Ross Hutchinson: The incidence is no different in communities where the people have drunk fluoridated water all their lives.

Mr. HAWKE: What causes it? Of course, the Minister does not know; and medical science does not know. As I say, although we must have great respect for medical science, we must not blindly accept everything every doctor says about every health problem.

Mr. Ross Hutchinson: I quite agree.

Mr. HAWKE: We are making some progress with the Minister.

Mr. Ross Hutchinson: We are nearly on the same wave length.

Mr. HAWKE: That is an achievement of no mean order. In fact, it is one of the best results I have achieved during my long term in this Parliament and I am greatly encouraged.

Mr. Graham: Light is dawning over there.

Mr. HAWKE: I would have thought the member for Wembley, in particular, and the Minister when he replies, would concentrate to a large extent upon showing the unreliability in this subject of the several authorities quoted by the Deputy Leader of the Opposition, the member for Gascoyne, and other members who have quoted scientific and medical authorities who are strongly opposed to the fluoridation of water supplies.

I think the Minister has no right whatsoever to ask members of this Parliament to support this measure unless the Minister or some other member on the Government side of the House can show that the authorities quoted against fluoridation of water supplies are unreliable; and it would not be enough, in this regard, for the Minister to say that Professor so-and-so, or Doctor so-and-so, or Mr. so-and-so, although an acknowledged authority in health matters, is also, we understand, interested in music.

Mr. Ross Hutchinson: All of these arguments have been weighed by biochemists and authorities and have been found to be wanting. The last time this Bill was introduced I told of a number of authorities quoted by the honourable member that had been discredited completely.
Mr. HAWKE: I know the Minister's methods of discrediting people who disagree with him. At times he has tried to discredit me when I have disagreed with him, but tonight I find a most acceptable degree of agreement developing between us. That is all to the good and should be encouraged; but it is not sufficient for the Minister to say that Doctor so-and-so who opposes fluoridation, Professor so-and-so who opposes fluoridation, and Mr. so-and-so who opposes it are discredited.

That is no good. The Minister has to produce proof as to why they are not to be accepted—as to why some reasonable degree of attention is not to be paid to their views, which are strongly in opposition to the fluoridation of water supplies. That is the task which is upon the Minister's shoulders, and I would trust he would do his best to discharge that task successfully.

The Minister seems to place some stress upon the fact that some Labor people support the fluoridation of water supplies. That does not prove anything.

Mr. Ross Hutchinson: I said, "even some." That is only a minor thing.

Mr. HAWKE: It is also true—and perhaps more so in regard to numbers—that some supporters of the Liberal Party are strongly opposed to fluoridation.

Mr. Ross Hutchinson: I suppose they are.

Mr. HAWKE: The Minister only supposes they are. He is in for a shock. A new Liberal Party is developing in the balmy atmosphere of the hills. I think the member for Darling Range is already feeling their hot breath on the back of his neck. Quite a number of those people are taking the step they are taking because of the Government's policy of the compulsory fluoridation of public water supplies. They not only oppose the fluoridation of public water supplies, but they oppose the arrogant action of the Government and its supporters in forcing this fluoridated water down the throats of every citizen in the community, irrespective of whether that person wants to take fluoride into his or her system or not.

The fluoridation of public water supplies is going to involve the Government in the first instance in heavy capital costs.

Mr. Kelly: It has got plenty.

Mr. HAWKE: Yet, at this time we have the State Treasurer, supported by other members of his Government, coming along and loading all sorts of additional taxes and charges upon the people. One would think Western Australia was broke at the present time, judging by the terrific burden of additional taxes and charges being put upon the people. One would not think the Government had hundreds of thousands of dollars to spare to spend in a capital way on the installation of this system in the first place.

Mr. Ross Hutchinson: This will save a tremendous amount of money so far as the people are concerned in regard to dental expenses alone.

Mr. Graham: Guessing again.

Mr. HAWKE: We will agree with that if the Minister gets any satisfaction from it; but the fact is the Government, as such, will have to find the money to meet this capital expenditure to install the mechanism necessary to enable the water supplies to be fluoridated. The Government has to find that money; and subsequently the Government has to find annually, from Consolidated Revenue, the amount of money necessary to purchase the fluoride and to have it integrated into the water supplies.

Mr. Ross Hutchinson: It will save the people a great amount of money on dental expenses.

Mr. HAWKE: I think the Minister is confusing Government expenditure with expenditure of individual citizens.

Mr. Ross Hutchinson: They are related.

Mr. HAWKE: Not in the financial sense in which I am approaching this matter. The Government has to find the loan moneys which will have to be expended in installing the capital equipment required to fluoridate the public water supplies. The Government as such will have to find each year from Consolidated Revenue the amount of money required annually to purchase the fluoride and incorporate it in the water supplies.

Mr. Bovell: Like it has to for other social services; and this is a social service.

Mr. Graham: Go back to sleep!

Mr. HAWKE: Here we have the Minister for Lands coming out of one of his reveries to tell us the Government will have to find the money for this purpose the same as it has to find it for other purposes.

Mr. Bovell: For other social services, I said; and this is a social service to the community.

Mr. Jamieson: We will be penalized for this one, too.

Mr. HAWKE: We know the Government will have to find the money for this legislation if it becomes law. I was hoping the Minister for Lands would make a contribution to this debate which would be helpful and perhaps new.

Mr. Kelly: His gems of wisdom!

Mr. HAWKE: All the Minister comes up with is the profound declaration that the Government will have to find the money for this legislation the same as it does for other social services.

Mr. Bovell: Because this is a social service.

Mr. HAWKE: I am pleased the Treasurer is not here to listen to the interjection of the Minister.
Mr. Bovell: It is the responsibility of the Government to find it.

Mr. HAWKE: The Treasurer would be overcome to think that such a profound declaration could come at this hour of night from one of his senior Ministers!

Mr. Bovell: I am making a point, but you are deliberately trying to be dense.

Mr. HAWKE: The Minister does not have to try to be dense; it comes naturally to him.

Mr. Bovell: That is a matter of opinion, and I do not respect your opinion on this occasion.

Mr. HAWKE: Every time the Minister for Lands and I have a difference of opinion, we usually finish up on a most friendly basis; and I think we will on this occasion. However, if it gives the Minister for Lands any satisfaction, I agree totally with his profound and fundamental observation on the point.

Mr. Bovell: We might afterwards have a drink of this water you are talking about!

Mr. HAWKE: I think this proposal is dangerous. I am not a scare-merchant, but I think there could be a great deal of danger in the fluoridation of public water supplies. I would be as anxious as anyone else to preserve to the greatest degree possible the teeth of our young people, but I think we are not entitled to take action to bring about a greater preservation of teeth in our young people which could at the same time endanger the health and well-being of a number of other people in the community.

If the Government could separate the two propositions, I would be 100 per cent. with it; but it cannot. The two go together, and the Government in this matter is prepared to take a risk which I am not prepared to take.

A way does exist by which the teeth of young people can be preserved more than normally, and that is by the taking of fluoride tablets. That system is working now to some extent and it could be encouraged and assisted by the Government. When we take into consideration all the money the Government proposes to make available as capital cost for the purchase of the machinery and so on necessary to establish this system, and all the money which will have to be provided for the purchase of the fluoride, I doubt whether it would cost the Government any more, or as much, to make available free tablets to all children in the appropriate age range.

Mr. Ross Hutchinson: You are not far from being right, but it would not be a public health measure. It does not cover the situation, and does not—

Mr. HAWKE: The Minister has agreed that I am nearly right—

Mr. Ross Hutchinson: Up to a point, on cost.
but also by those who have spoken on behalf of the Health Education Council. I have heard particularly Mr. Carr on this matter, and he is so convinced in his own mind that he leaves little scope for argument. It does the Health Education Council little good to have an officer like him, because whenever he participates in a discussion, particularly on TV—and this refers not only to fluoridation, but that is the matter under discussion at the moment—he has an unfortunate mannerism which rubs people up the wrong way. I suggest the arrogant attitude of those who are supporting this measure on behalf of the Government is, indeed, doing just about the same thing.

With regard to the placing of fluoride in the water supplies, I am not very much concerned, except that there are other effects which could occur in the future. Referring to what is supplied to us by the Water Supply Department, I will quote from a speech the Minister delivered on the 12th September, 1963, wherein he stated as follows:

I will obtain a list for the Deputy Leader of the Opposition; but one chemical which readily springs to mind is chlorine.

The Minister is discussing the number of other chemicals already in the water supply. To continue—

In addition, there is alum, caustic soda, copper sulphate, and probably half a dozen others, if not considerably more.

The bore water referred to by the member for Gascoyne contains 14 chemicals, and that bore water is pumped into our water system. It will be seen that we are virtually receiving a chemical soup and not pure water these days. Whether the addition of fluoride will cause a reaction I am not competent to say; and I do not think anybody in this House is competent to say. Therefore we could be doing something in the public interest to be in the best interests of the community, but in the long run could prove to be unpalatable.

This matter has caused many arguments and I have heard arguments in the party councils also. I have seen reports brought down by experts but they have not been accepted by the multitude, because it was felt there was still some doubt. That is the situation in this House. There have been many reports from experts and one is inclined, when not being convinced, to deny and lean on the opinions of others. We have seen this happen in the House tonight.

We have heard quoted letters from doctors. Obviously, the persons using those letters have some doubts in their minds. They are relying on somebody else's opinion to bolster their case. Fortunately, this has occurred on both sides of the House: on the side of those for, and on the side of those against. If those people were thoroughly convinced, they would not use opinions expressed by other people. They are entitled, as always, to use facts and figures to support their case, but to use opinions expressed by other people is evidence of a doubtful situation.

Opinions are opinions, from wherever they are secured. Sometimes they are right, and sometimes they are wrong. Like legal opinions, one can be given one on this hand and one on that hand, and they can both be right. From that point of view there are too many escapes in opinions and we have to agree that the facts are what we have to go on; and we have not enough facts at this juncture.

There are several matters which have concerned me. I have heard debates and arguments outside Parliament on this issue. I have heard University students, drawn from all faculties, argue whether it is a desirable feature or not. I have heard people who proposed supporting the matter, in such circumstances virtually opposing to it, because they understood the motion because they were not sure. On study, they were convinced that there could be doubts. There could be effects on other sections of the body after excessive build-up of fluoride. With this thought in their minds, they have been prepared to support the matter with reservations and all sorts of provisos. In those circumstances, one cannot get a clear indication.

From what knowledge we can gain, the Country Party itself is not very sure within its own ranks. Like some other parties, it does not have open doors at conferences. We are led to believe by Press reports that that party debated this matter and it was supported by a very small majority. Then several days later, it was reported that the party was having a second look at the matter and debating some proviso which should be adopted and made a policy of the Government with regard to the fluoridation of public water supplies.

Here again, there is a degree of second thought. I have also heard arguments about the effect of fluoridated water on agriculture; that is, water for irrigation. It has been argued that on occasions fluoridated water has caused a falling off in the production of milk. Fluoride obviously causes a hardening of bone structure, just as it hardens the teeth. This is obvious. So it will harden bone structure in other circumstances and create another problem so that the cows will not get sufficient calcium to produce a full amount of milk. That is the reason given for the falling off in milk production. It has also been stated that fluoride has affected crops. I do not know to what degree; I am not capable of examining such a situation.

While I am prepared to go along with the various kinds of medication we accept in the community these days—I refer to
such things as those to which my family always subscribe—I would not subscribe to inoculation for the rose bushes, or the lawn, or the fowls, or whatever else I have. However, under the terms of this proposal all those extraneous possessions which belong around our homes have to be doused with a dosage of fluoride. They will receive fluoride the same as the people using the water for drinking or cooking. I say that when we are compulsorily medicated on a basis such as this, we are possibly carrying medication too far.

It has been stated by interjection, and by reference from a few who have spoken in support of the measure on behalf of the Government, that the very source of the opposition to fluoridation has been discredited or mainly discredited. I hasten to mention the fact that I have yet to see any discrediting of the attitude of the French Department of Health. It has a very clear and unmistakable belief on this matter. This raises some concern in my mind because the French, if anything, are less conservative than other people in medical reforms.

It will be noted that early in history many reforms in medicine occurred first in France. In France they were prepared to take a forward step on such issues. However, on this matter the majority of advisers in France obviously say “No.” That raises doubts in my mind and there is some justification for thinking that there could be problems associated with the fluoridation of water.

Despite the fact that people, such as the Minister handling the Bill, are obviously convinced that those are facts which are not to be taken into consideration, I would say they are. In the main, of course, most of the people in the community would not care much what they were getting so long as it looked clean and so long as the housewife had clean water for washing. Most people would not know what was in the water.

There is a small percentage of people, such as the Pure Water Committee and others, who take a vital interest in it but these numbers are no more than the protector-arch group in the community. I would say that percentage, in itself, is a very small percentage, but represents the people who really care.

The vast majority of the community only accept their responsibilities of caring in any way through the attitude of the member representing them in this Parliament. Because of this we, as members of Parliament, have to be rather careful in what we decide to do.

Once again, I find myself going along the lines of talking against my usual attitude; that is, if there is a matter dealing with a socialising principle, I usually wholeheartedly support the intention. Twice this year I have found myself in a situation where I have been somewhat opposed to it, although on this occasion I am fence-sitting—I am not fully opposed to it.

If a member of the public had gone into the gallery and did not know the way the House was divided and had no previous knowledge, I suggest that if we asked him which side was the socialist side and which side was the anti-socialist side, he would never guess correctly, after listening to the debate, which side was which.

From the background on this issue, it is rather amazing that such strong support can come for a principle; and this is a principle which some of the people in the community are objecting to, particularly one who, besides clicking his teeth at the Minister, gave several rather Nazi salutes early in the debate. He is convinced this is an overall communist plot. I would not go so far as to say that—in fact, I support the principle. Even the Minister for Food salutes early in the debate, which side was which.

There is one other feature I wish to say. I am quite satisfied that the addition of fluoride to the system has the effect of hardening the enamel on the teeth. There is no doubt in my mind that this is the effect, but whether it has any adverse effects on the system, I do not know. I have not heard any argument that has convinced me one way or the other. I have heard a lot of argument but as I say, I have not heard any argument which would convince me one way or the other. Consequently, I am in complete doubt on this issue. At this stage, I am a very confirmed fence-sitter but I intend to support the proposition if it is proposed—and it will be, I understand—at a later stage of the debate to have a referendum. I support this idea because I am a person who has not made up his mind as to what should be done in this matter. There must be many like me and, possibly, it would be the ideal thing to let the people decide the issue.

There is one other feature I would like to mention and that is when I chided him by asking, “Would this be a penalty on the part of the Grants Commission to this State for including this social service”, the Minister said, “No: it is in New South Wales.” However, it is in New South Wales with a difference; it is not a compulsory measure in so far as it is allowed to be done by the water boards. It is true that certain water boards have done it but
other water boards have not. At the moment the commission would be hard pressed to grant it is a general rule in New South Wales. However, it will be a general rule here because there will be no doubt—the legislation will specify that this will be the case. I do not think this situation will entirely escape the rigours of the Grants Commission survey because it went to the extent of having a look at parliamentary salaries, as the Minister is well aware, on the last occasion it was in Perth. I suggest that we have to see that improving our social services does not further jeopardise our financial position.

Mr. Ross Hutchinson: Now that you feel that way, I cannot see you have any chance of getting on the Grants Commission.

Mr. JAMIESON: Perhaps the House will be tolerant enough to permit me to express the opinion that I am glad Mr. Phillips has been replaced as chairman of the Grants Commission.

From my own observations, and these are observations strictly on the basis of what I have seen in this House, the only party that is really decided on this issue seems to be the Liberal Party. The members of that party seem to be sold on the idea completely. One hears there is a breakaway group which is not happy with it, but those who are members of the Liberal Party—as we know it—seem to have accepted the proposition that it is required; and, as such, they seem to have bound themselves either by the action of the party or the action of their own consciences. Their action would seem remarkable on the occasion we have been so over-advised on which we have been so over-advised.

Only with one other exception have we had more advice and that is, of course, on marginal quotas. As I say, with that one exception we have never been as over-advised in any matter as we are on this one, and it is rather surprising that some of the members on the opposite side of the House do not hold divergent views. No one could tell me that comes about strictly by chance. There is a line-up somewhere and it becomes rather obvious that it is a party line-up and this could be dangerous on such a matter as this.

We have seen various non-party issues in this House on liquor, gambling and such matters, where there has been an obvious divergence of opinion, and members have voted accordingly. However, on this occasion, it does not appear to me as if there is a genuine attempt to vote accordingly on this issue. I reiterate that the actual views of the Australian Labor Party in its councils on this subject are that the Labor Party could not be convinced there was a desirable policy to follow despite the findings of the expert committee which went into this matter over a period of some three years.

That is the general trend of my thoughts. I cannot further advance them, nor would I match the dissertations of the Minister, the Deputy Leader of the Opposition and others who have put forward the various cases. None of these speakers has got past the fact—the fundamental fact—that there is no doubt that fluoride will improve dental enamel. Of course, under certain circumstances, it will do other things to teeth. The fact that the French authorities are opposed to fluoridation has not been explained. No doubt the French authorities are opposed to it because they gave it very deep consideration before making their determination.

I am sure fluoridation warrants the serious consideration of every member of this House before he makes up his mind whether he will vote one way or the other. At this juncture I say I am not clear on it and I am not prepared to make a decision, but I am prepared to say that if the people by majority want to make a decision, that is their democratic right and they can exercise it.

MR. EVANS (Kalgoorlie) [11.10 p.m.]: At this late stage of the debate, having heard a great deal of argument advanced by those who are in favour of fluoridation of water supplies and argument by those who are against it, and having been, like every other member of this House, a recipient of a voluminous quantity of literature on this subject, I can honestly claim to have absorbed large measures of fluoride both aurally and optically. However, that does not mean that I am a full bottle on the subject, by any means.

At the outset I wish to indicate that I have 100 per cent. respect for the views expressed by my colleagues, but on this occasion I do not share their views, and I clearly enunciate that I intend to support this measure.

Mr. Ross Hutchinson: Congratulations.

Mr. EVANS: I take my stand and justify it on the grounds I have not been convinced that the dangers that have been enumerated to the House will be a natural result of fluoridation. I have not been convinced that they will, or may, ever occur to contend that if such dangers were real or imminent, examples close to home would have been available for citation and for close examination, because there are areas in Australia where people have been drinking fluoridated water for some time.

Having made that statement, I am quite certain that in the event of the Deputy Leader of the Opposition moving amendments in Committee to qualify this legislation so that it is the will of Parliament that the Act will be proclaimed if it is endorsed by a majority decision of the electors of Western Australia, I will not object to supporting him in such
a move. Further, if the Deputy Leader of the Opposition, at the appropriate stage, moves to include in the Bill a provision that, upon a person claiming his health has adversely suffered as a result of ingesting fluoride—and the onus upon such a person is great—such person should have the right of action against the Crown, I would support the Deputy Leader in such a move.

However, unlike the Deputy Leader of the Opposition I cannot visualise such a claim being made if the Government accedes to the request for such an amendment to the Bill. I cannot see a claim such as that being accepted by our courts. Nevertheless if a claim along these lines were advanced I am of the opinion it would be debated in the forum of our law courts and, with all due respect to our Parliament, there the subject and the issues involved would receive a truer testing than in our Legislature. In this Chamber a question is decided on numbers. It is an old truism that a Government can do anything it wishes provided it has the requisite numbers. It is hoped, of course, that that axiom will never be applied to our courts of law.

So if the question arose of whether a person's health had suffered adversely as a result of absorbing fluoride which had been put into our domestic water supply, this question and the issues involved would result in medical evidence being fully tested, and the conclusion arrived at by the court of law, so far as the community in general was concerned, would probably be accepted more readily than some of the decisions which emanate from Parliament when such decisions would appear to be against the immediate interests of the community at large.

I do not wish to weary the House, but I repeat that I will support the measure with the reservation that I intend to exercise my right to support a move for a referendum on the issue, or the right to support any amendment which will provide to any person who feels aggrieved because his health has been adversely affected as a result of being compelled to absorb fluoride through our domestic water supplies, the right of action to appeal to our law courts. I support the second reading of the Bill.

MR. DUNN (Darling Range) (11.18 p.m.): During the debate on the Bill over the last two evenings much has been said on a subject which I am certain has occupied the mind of every member of this Chamber since a similar Bill was introduced in 1963. In that year I suppose very few members had any knowledge of fluoridation.

This subject has been under study since 1902, and I suppose one would spend a lifetime trying to eliminate and learn all the facts that have been gleaned on fluoridation since that time. It has been truly said by more than one member of this Chamber that he could not possibly hold himself up as an authority on fluoridation. No-one could expect this, but I think anyone who is elected as a representative of the people in this Chamber is expected to vote on this subject and make himself conversant with all the facts available to him. In this regard I wonder how many members have approached the responsible department of the Public Service, which is wholeheartedly supporting and promoting the introduction of fluoride into our water supply.

For my part, I have endeavoured to make myself as knowledgeable as possible on this subject and have used all the facilities available to me. As a result I find it difficult to convince myself it is not my responsibility to vote in favour of this measure.

To those who are desirous of getting as much information as possible on the subject, I would recommend this book which consists of some 635 pages and which is entitled Fluoride Drinking Water published by the United States Department of Health, Education and Welfare, and is available to anybody who wants it at a cost of $3.50. Those who can digest all the information contained in it, and are prepared to read and study all the references in it—and these are voluminous indeed—would have a very good knowledge of a subject which has been studied by specialists in their own particular field, and by specialists who have given to the world at large their findings on the subject.

I would say that for every one specialist who is against fluoride there would be thousands of proponents who are in favour of its being added to drinking waters. Anyone who studies this very large publication can only conclude that the argument in favour of the fluoridation of water supplies is completely convincing.

One of the biggest problems that I have found while discussing it with various people is the concern expressed for its effect on adults. By and large the people with whom I have discussed the matter acknowledge that so far as children are concerned the measure is desirable, and that it will have a beneficial effect on the children's teeth. Indeed this has been said over and over again by those who have made a complete study of the subject.

They have, however, been concerned with regard to the effect of fluorine on adults; that there could be some possible side effects which, in the final analysis, might result in a higher mortality rate. To those who think along these lines, and for the benefit of members, I would like to read an excerpt on this particular aspect from the book to which I have referred. The excerpt which I wish to quote is headed "Mortality Statistics" and reads—
A comparison of the mortality data of various populations furnishes an important index of their general health. Recently a number of carefully controlled studies have obtained mortality rates for heart disease, cancer, nephritis, diabetes, extracranial lesions and cirrhosis of the liver among communities using essentially fluoride-free drinking water and those using water containing fluoride naturally present or added in controlled amounts.

In one study the mortality statistics were analyzed for 32 cities whose water supplies contained more than 0.7 p.p.m. fluoride from natural sources. Each of these cities was randomly paired with a neighboring city containing less than 0.25 p.p.m. fluoride in its water supply. The total population for all cities exceeded 2 million. The death rates, adjusted for age, sex and race, were compared with the expected deaths for the two periods 1940 and 1950. As shown in table 6, they show no significant differences related to fluoride in the drinking water.

In another study, the mortality experience in five cities was compared before and after institution of fluoridation of the water supplies to 1 p.p.m. fluoride. The cities were fluoridated during the period 1945-1949 and the number of deaths (exclusive of accidents, suicide, and homicides) in 1940 and in 1950 was recorded. These were compared with the expected deaths using the U.S. age-race-sex mortality experience as a standard. A significant change in the ratio of recorded to expected deaths for the two periods 1940 and 1950 would then indicate that some variable other than age, race, sex and declining mortality for all causes, accounted for the difference shown in table 6. As shown in table 7, there was no significant change in the ratio of recorded to expected deaths between 1940 and 1950.

These statistics thus indicate that no relationship existed between mortality experience and the presence of fluoride in drinking waters, whether naturally present or mechanically added. These data provide additional evidence that fluoridation of a water supply to 1.0 p.p.m. fluoride presents no health hazard.

That is typical of the information which is available in this treatise to those who are really interested in this subject. There is no question on this matter which has not been fully and completely dealt with in this book. To those who are really sceptical of their knowledge on the subject, and who are a little afraid to make a decision, I would recommend they study this publication in which they will find the evidence so overwhelming as to make it impossible for them to do anything but support the measure.

I would also recommend this book to those who are convinced that fluoride will be harmful, because it is my firm hope that this great problem of tooth decay will be properly tackled, as it has been in many other countries of the world. I hope that we will take up the challenge courageously, and that we will use the knowledge, the evidence, and the experience gained by the countries which use fluoride; and that we will eventually bring about a state of dental health in Western Australia of which we will all be justly proud.

I am sure the measure will assist those who are unable to obtain the attention, guidance, and help necessary from their parents—and I am now speaking, of course, of the young children who are left to their own devices, and who are permitted to do what they want and to go their own way.

The measure should be given the full support of the entire community, and I thoroughly commend it to the House. Those who really want to find out the truth about this subject can only come to one conclusion if they study this publication to which I have referred; that is that we will be completely guilty if we do not accept the challenge that has been thrown out to us. We therefore must accept this measure.

MR. HALL (Albany) (11.29 p.m.): As the member for Merredin-Yilgarn said, the measure before us constitutes a complete case of regimentation. It appears that we are to have our water supplies impregnated with fluoride. I would take your mind back, Sir, to the occasions when it was necessary for us to clear out the bacteria from the pipeline serving Borthwick's Meat Works. In that case the entire pipeline had to be impregnated with chlorine to remove the bacteria; so much so that the elderly people in the Stirling Terrace area of Albany took considerable objection to the water supply being impregnated with chlorine even though it was to clean out the bacteria present in the pipes.

I was asked to visit an elderly lady in the hospital, and to take along a gallon of drinking water so that she could rid the fears in her mind of contamination from the effects of chlorine. The fear of contamination is psychologically impressed in the minds of some elderly people.

It cannot be disputed that the submissions of the Deputy Leader of the Opposition have covered the whole subject, and there is no need for me to reiterate any aspect. We have to tackle this problem in the true sense of the word. We should not be regimented into accepting something which we do not want. When we take into account all the fears—such as the fears held by the elderly lady in hospital who wanted a gallon of drinking water to be taken to her—we will not
readily advocate fluoridation. The psychological fears must be deeply impressed on the minds of such people.

Perhaps the young people will benefit from fluoridation through preventive dentistry, but overall fluoridation of water supplies will not benefit our lawns or the health of elderly people. The Minister for Health views this question in a favourable light, but if he were to have regard for the circumstances of the aged people he would realise they also have to be considered. Although young people might gain some benefit from the intake of fluoride tablets, I wonder whether the Minister has considered the adverse effects which might result from the implementation of the legislation.

There is every justification for opposing the Bill. I have not prepared lengthy notes to speak on this debate, and we have heard all the pros and cons of the matter. On the whole I believe that reintegration of this kind is not good for the people; it is dictatorial and almost despotic in character. We should tackle this question from that point of view. We need not go through all the points of view which have been expressed by the Deputy Leader of the Opposition. We should view the overall situation seriously, although that might be wearisome to some members; but the course which I intend to take is very clear. I support the views of the Deputy Leader of the Opposition to the utmost, because I believe the legislation before us is of a dictatorial and despotic character. It is reintegration of something, and we should not have to put up with that. I commend the views of the Deputy Leader of the Opposition to the House.

MR. I. W. MANNING (Wellington) [11.35 p.m.]: Whilst I have always recognised the value of fluoride as a means of improving dental health, I have not previously actively supported the fluoridation of water supplies, and I respected the views of those who expressed opposition to it.

However, the anti-fluoridationists have directed such a stream of propaganda at me and about me that I have taken a second and a much closer look at this legislation. I am very glad I did. One reason is that many of the facts contained in the propaganda sent to me have turned out to be false. This propaganda has been directed at the characters of people well known to me—the members of the Government—and I know it is not correct. This has very substantially weakened the other material which they have directed to me, and the material immediately becomes suspect.

My examination of this subject has convinced me that fluoridation is steadily and surely being accepted by many countries of the world and most of them have been mentioned in this debate. I would like to quote from the *Netherlands News* which I obtained from the parliamentary reading room. One paragraph under the heading of “Fluoridation of Water” states—

> In a radio interview the Director General for Public Health welcomed the plans of the British Royal Society of Health to hold its international Congress in the Hague as a breakthrough. It is the first time that such a Congress will be held on the European continent. Dr. Kruisinga said that fluoridation of drinking water would be one of the subjects of the Congress, which is scheduled for September 5 to 9.

He said that in the Netherlands about 1½ million people were receiving fluoridised water on July 1 this year, and that the number of Government approvals of applications from provincial and municipal reticulation works had increased to the extent that in the very near future over 6 million people would receive it. They would represent about 60 per cent. of the Dutch population.

I mention the position in the Netherlands, because this is a country which is in addition to those already mentioned in the debate on the Bill. It serves to indicate that the acceptance of fluoridation of public water supplies is becoming very widespread throughout the world. To turn our backs on this question at this stage would be to endeavour to stem the tide of public opinion.

I regard fluoride as a trace element, and, like trace elements used in agriculture, if it is used intelligently it could be very beneficial. Most members are aware that much of Western Australia is deficient in trace elements, and the addition of small quantities to fertilisers has transformed the land, the crops, and the pastures to which they have been applied. I believe the addition of fluoride to drinking water could bring about the same transformation in the teeth of people, and they would benefit from it.

Like all trace elements, the misuse of fluoride could cause problems which could certainly cancel out the benefits to be gained from its use. But I see no reason why fluoride could not be efficiently infused into the water schemes at the prescribed rate of one part per million parts of water.

The member for Swan did say when he commenced his speech that with the possible exception of the member for Wembley we would all be laymen on this question and we ought to be guided by the experts. Of course this Government has available to it, highly skilled advice from its departmental officers and it is to those people we look on this question. Their advice to the Government is that the fluoridation of public water supplies would be a forward step in dental health; and I accept that.
For that reason I propose to support this legislation.

The people who are opposed to it—and I refer mainly to those outside of Parliament—seem to be divided in their reasons. A number of my electors have spoken to me expressing opposition to the compulsory fluoridation of water supplies. Some are opposed to it because they regard it as some dreadful poison. Others are opposed to it because they feel that if a certain section of the people is to be given fluoride it should be done by means of tablets.

We have had presented to us many reasons why the fluoridation of water supplies is the most efficient method; and, again I say, I accept this. We can have some sympathy with the point of view of those who are expressing opposition to the compulsory fluoridation of water supplies. Some are opposed because they feel that if a certain number of people have died, so must be considerable doubts about the safety of fluoride. I say this because so many people have opposed the use of it and they have indeed warned against the use of it.

Yet we know of no instance where people have died. So we must accept the fact that this method is an efficient way of getting fluoride to the people; and when it is regarded as a necessary trace element, in that way it would be nutritious to the people taking it. Inasmuch as it would provide some parts of the body with nutrient. In that case it would not cease to become something that we could regard as objectionable if it were available to everyone by means of the water supply.

Therefore, all in all, looking at the broad picture from a layman’s point of view and accepting the opinions of people qualified to express them and qualified to advise the Government; and because of the wealth of consideration that has been given to this particular question and this particular measure before the House, I cannot see any reason why we should have doubts about it and I am prepared to accept it. I support the Bill.

MR. MOIR (Boulder-Eyre) (11.46 p.m.): The aspect of this debate that has rather amazed me is the fact that people who are in favour of this proposal are only concerned with those scientific opinions which support their case. I know all members of this Parliament have had an abundance of advice by way of scientific opinions and authoritative papers forwarded to them, both for and against this proposal.

I am not sufficiently well versed in these matters to be able to form an opinion and say this proposal will adversely affect public health or be helpful to it. I have read quite a lot of these opinions given by men with high scientific qualifications, but as an ordinary member of the public who has been elected by the public to come into this House to represent them, I feel there must be considerable doubts about the safety of fluoride. I say this because so many people have opposed the use of it and they have indeed warned against the use of it.

One matter that is of particular concern to me—and the Minister has given no indication—is in regard to where the water supplies are to be treated in relation to the goldfields. Is the fluoride to be added in the metropolitan area? I would hope, Mr. Speaker, that in regard to such a serious matter the Minister would pay a little more attention to what I am saying. We know that the goldfields water supply and a lot of water that goes to other country areas comes from Mundaring Weir.

Is that water going to be treated in the metropolitan area; is it going to be treated somewhere along the pipeline; or is it going to be treated at Kalgoorlie for the consumption of the people in Kalgoorlie and Boulder? I would take it, Mr. Speaker, from the inattention of the Minister that he is not very concerned about this aspect. However, I—and any thinking person must be—am concerned about it because the information we have is that it is very important that temperatures be taken into consideration when adding the necessary amount of fluoride to the water supply.

We have a written report from the International Health and Medical Research Council, the 38th session, which particularly stresses the importance of the amounts of fluoride that have to be added to the water as they are related to temperatures.

I think the Minister will readily agree that we could have one temperature in the metropolitan area and a far different one in Kalgoorlie, Boulder, Merredin, or Southern Cross. If the amount of fluoride is judged by the temperature in the metropolitan area, and the water is then pumped to these country towns, the temperature could well be in excess of 100 degrees. The water takes a considerable time to travel that pipeline, and if the appropriate
amount of fluoride were added here for a temperature of say, 75 degrees, it could be well in excess of 100 degrees by the time the water reaches Merredin, Southern Cross, Kalgoorlie, or Boulder, and it could reach a dangerous level.

Mr. Ross Hutchinson: It would not be a dangerous level.

Mr. MOIR: It would not?

Mr. Ross Hutchinson: No.

Mr. MOIR: I am going to read an extract from this report. I take it that the Minister will acknowledge that this is a responsible body, and probably one of the highest medical research authorities in Australia. Page 21 deals with this matter and then on page 22 is a relevant portion. I do not want to read what appears on page 21 because it would weary the House. On page 22 is the following:

From these estimates and assuming the upper safe level of fluorine intake from all sources for children of eight years to age to be 1.5 mg. fluorine per day (McClure et. al., 1945) Table II has been prepared showing the recommended fluorine concentration related to the temperature zones (normal maximum temperature) shown in maps 1 and 2. Gaps in the data have been filled by interpolation.

The following is the scale:

<table>
<thead>
<tr>
<th>Temperature zone</th>
<th>95-100</th>
<th>90-95</th>
<th>85-90</th>
<th>80-85</th>
<th>75-80</th>
<th>70-75</th>
<th>65-70</th>
<th>60-65</th>
<th>55-60</th>
<th>50-55</th>
<th>45-50</th>
</tr>
</thead>
<tbody>
<tr>
<td>mg. fluorine per day</td>
<td>0.4</td>
<td>0.5</td>
<td>0.6</td>
<td>0.7</td>
<td>0.8</td>
<td>0.9</td>
<td>1.0</td>
<td>1.1</td>
<td>1.2</td>
<td>1.3</td>
<td>1.4</td>
</tr>
</tbody>
</table>

That scale indicates that there is quite a variation in the amounts of fluorine parts per million to be added according to the temperature at the time. I would like the Minister to deal with this aspect when replying to the debate. Fluoride could be added at what is considered a safe level according to the temperature in the metropolitan area—and the water for the country areas is drawn from the metropolitan area—and yet when the water reaches the goldfields it could be of a much higher temperature. It varies from 50 to 40 degrees.

Mr. Ross Hutchinson: But the difference in levels would not be significant enough to get anywhere near a dangerous point.

Mr. Toms: How do you know?

Mr. MOIR: My information is that the safety level is very narrow.

Mr. Ross Hutchinson: It is not, it is very broad.

Mr. MOIR: That is not the information I have.

Mr. Tonkin: It is not true either, and the Minister knows it.

Mr. Ross Hutchinson: Any amount around the one part per million is completely safe, despite any of that stuff you might read.

Mr. MOIR: I am very sorry that I have left at home a letter I received from the assistant professor of chemistry at one of the universities at Hobart. He was severely criticising a statement made by the Minister, and he gave all sorts of reasons why the Minister was completely at fault. Therefore I am very chary about accepting statements the Minister makes as to what is and what is not safe. I would say that a person who had attained the position of assistant professor of chemistry at a university would know slightly more about the subject than the Minister. I will take that a bit further.

I listened with interest today to the member for Wembly who, we all know, is a qualified doctor. I was rather surprised at the statements he made, and also at the statements made by other speakers opposite who followed him. They seem to think that what the member for Wembly quoted was absolutely authentic. I also have had conversations with doctors highly qualified in other fields. I do not know whether they are qualified to speak on fluoride, but they told me frankly that they did not know whether it was good or bad.

Therefore I wondered at the speech of the member for Wembly, and I say this with no disrespect for him. I understand he is a very well qualified man in his sphere of medicine, but we know perfectly well that nowadays doctors specialise in different avenues of medicine, and it is not to be expected that they are fully conversant with every aspect. When we know that people who are recognised in world spheres as big, top scientists differ in their opinions on this matter, it makes us sceptical when someone states authoritatively that there is no harm in this type of medication.

It might surprise members and the public to know—and maybe the Minister for Labour will amend the workers' compensation legislation in this respect—that in the third schedule of the Workers' Compensation Act, which deals with compensation for poison and damage to workers as a result of various chemicals, is included poison by fluoride.

Mr. Ross Hutchinson: Some with chlorine.

Mr. MOIR: A lot of them are set down in the third schedule of the Workers' Compensation Act. As a matter of fact, anthrax is one of the incurable diseases mentioned together with poison by carbon and by fluoride. It includes any process in which fluorine is used. Therefore I am pleased to know that the people who will be handling this chemical and putting it
into our water will, if they become ill and lose work as a result, be compensated under the Workers' Compensation Act.

However, that does not apply to the members of the general public if they become poisoned by drinking the water to which fluorine has been added. No Act of Parliament, to my knowledge, exists to provide for compensation for them.

Even if I were convinced that this proposal would be beneficial to all members of the community, I would still be opposed to it because I consider we are cutting across a principle—and a very important principle—which is that people should be free to determine themselves whether or not they shall take medication. This proposal seems to me to be really dictatorial. In fact, I cannot find words strong enough to describe the attitude of this Government. I did not think I would live to see the day when any Government in a democracy would force people to take any type of medication against their will.

Mr. Ross Hutchinson: What about compulsory unionism?

Mr. MOIR: I was not aware that was medication.

Mr. Ross Hutchinson: It is compulsion, and it is pretty bad medicine to take on many occasions.

Mr. MOIR: The Minister is clutching at straws. I am not against compulsion in certain things. Indeed, we have compulsion to obey the law; we have to behave decently. We cannot assault one another and we cannot rob one another. Very properly so. I uphold those laws and believe in them, but I do not believe in the Government compelling us to use fluoride. When I say "Government" I refer to the 12 men who form the Cabinet and who decide that in certain cases certain things may be done and then regiments the members who sit behind it into voting for the Government. We have had ample evidence of that here. Once the Government brings a matter forward it becomes holy, and every member on that side must support it.

Mr. Jamieson: They are holy cows!

Mr. MOIR: Yes. It is no good the Minister trying to cloud the issue by throwing that sort of thing into the ring.

Mr. Burt: Do you believe in compulsory chest X-rays?

Mr. MOIR: Yes, I do. It is rather interesting that the member for Murchison should mention that matter. I am one of the people who, with others who were working in the mining industry, were required to submit ourselves before starting in that employment—and every year they were working in that employment—to an X-ray test. There was a very good reason for that. It was to ensure that any person who was working in the mining industry was free of communicable disease.

Mr. Burt: I am talking of the population generally.

Mr. MOIR: I think any reasonable person would willingly submit himself to an X-ray, both for his own good and also to be secure in the knowledge that he did not have a disease which he could communicate to his fellow workers.

Mr. Hall: Are there any after-effects attached to X-rays?

Mr. MOIR: I am not so sure about that; but that again is something on which a layman cannot express an opinion.

The SPEAKER: I think it is also outside the scope of this Bill.

Mr. MOIR: It may be outside the Bill, but the matter was raised by interjection. When I mentioned that the amount of fluorine which was added to the water had to be carefully regulated in relation to temperature, the Minister interjected and said there was a very wide difference. I have an extract from the minutes of the 36th session of the National Health and Medical Council, held on the 4th December, 1953. I will not read the whole of the extract, but I will read the relevant portion which is as follows:

(c) The water supply must be amenable and subject to strict supervision and control by qualified engineers and chemists.

The point is stressed that there must be strict supervision and control by qualified people. To continue—

(d) The amount of fluorine to be added must be carefully determined and adjusted to meet climatic and environmental changes.

If that is not important, as the Minister seems to think, why do those people think it is important? It does not impress the Minister.

Mr. May: He does not look impressed.

Mr. MOIR: He is not in the mood to be impressed. However, that statement impressed me because I have to look to organisations such as the one I have mentioned for my guidance, the same as any other member in this Chamber would do if he were honest.

People who are very closely related to me—one of whom is a medical man—believe in fluoride but they believe it should be given to their children in the form of tablets. Their children have received fluoride in the form of tablets with the result—it may not be with the result—that the children have very good teeth. I say that may not be, because the mother has very good teeth and she never had any fluoride. The people I have mentioned do not believe in this proposal by the Government. Although those people believe in fluoride for their children they think the water supply should not be the means of giving it to them. Those people believe that they
should be in control of the medication themselves. They believe it is highly wrong to force other people to take this fluoride.

I cannot escape the conclusion that the Government, in its attitude to these proposals, is not so much concerned with the feeling of the ordinary people. The Government knows perfectly well that there is a large body of opinion strongly opposed to this measure. During the last election the Government members did not get up and tell the people that if they were returned they would bring in a Bill to fluoridate the water. They did not do that; and they could not do it because the Country Party section of the Government was not in favour of the measure. Since that time, a change has evidently taken place.

A matter of such great importance should have been put to the people. Indeed, it is not too late now to take that action to ascertain whether the people wish to be compulsorily medicated or whether matters should be left as they are for every individual to determine for himself.

I view this type of legislation with considerable alarm. I have always been very proud and satisfied that we live in a democracy. I have read a good deal about other countries in the world where there are dictatorships. This type of measure is forced on the people in those countries and they dare not raise their voices against it. In this country we can raise our voices against this measure, but it will still be forced on us whether we like it or not. I wonder if this is only the first step and if we will have other things forced on us very much against our will. It appears to me that as long as this Government has any power it will completely disregard the views of the people.

It has become more apparent to me over the last few years that this Government has entirely forgotten that it represents the people. Every member in this House is sent here to represent the people. We do not represent departments, and I think the Government is completely overlooking that. The Government feels that it represents itself, or the views of the departments, and that is what it is forcing on the people of this State. I oppose this Bill as strongly as I possibly can.

MR. TOMS (Bayswater) [12.9 a.m.]: Even at this late stage I am not going to cast a silent vote on this question. Since the debate on this measure commenced in this House, I have, apart from a short time I was out this evening on urgent private business, listened most patiently to all speakers. I am one who still holds the opinion I held in 1963 and that is that I cannot possibly support the measure before the House.

We have had quotations from all sorts of experts for and against this particular measure. I am one of those people, who, being elected by the people, feel that if in any way there is any doubt at all, the position should remain the same as it is now. The whole purpose of fluoridating the water supplies is so that the teeth of children up to the age of 12 can be either held to be good teeth or can be strengthened in some way.

For the life of me, I cannot see why the whole of the populace of this particular State should be subjected to taking into their systems something which it may be thought only a minority are objecting to simply because we want to protect the teeth of children to the age of 12. In company with a lot of other members in this House, I am perhaps not qualified to form a firm opinion. However, I am a member of a party which, on this particular question, has been wise enough to leave a decision to the sound judgment of its members.

In listening to some of the debate, Mr. Speaker, it has been remarkable to me to notice the somersaults that have been turned by some members on the Government side and the very weak excuses which have been raised as a reason for those somersaults.

Mr. Graham: They have been conservative this time.

MR. TOMS: I only wish I had had the opportunity to speak earlier, because many of the points I was going to raise have already been raised. As you know, Mr. Speaker, I am not one to stand up and unnecessarily repeat matters which already have been discussed. To my mind in a country where we are supposed to be elected democratically and where we are supposed to be governed democratically, for any body of men, such as this Government, to do such a thing as this Government now proposes to do, and that is to introduce mass medication on the populace of Western Australia, merely for the purpose of making some children up to the age of 12 strengthen their teeth, far beyond my comprehension. I could not possibly support a measure of such magnitude, particularly when one considers all the excuses—I will not call them reasons—which have been given against the use of tablets.

Because there is an alternative to the distribution of fluoride, I do not think we should force upon the people this mass medication. It has been said, of course, that some authoritative people have stated there is no possible harm with the implementation of one part per million of fluoride into the water system of this State. Despite all the high-flown names and the names of some of the people who have been quoted as authorities on fluoridation, I do not think there has been enough research done to convince me that this method is fool-proof. Until such time as I am convinced of that, I will not be a party to having it foisted upon the people.
Mr. DAVIES: Perhaps even the Minister for Works could have given us some advice on this. I understand there is no truth in the rumour that he went east to see the football final; but, indeed, he went to investigate the water supply in Canberra.

There has been a lot of feeling displayed on this question of fluoride, and indeed, everyone is entitled to his own views. However, I have been more than a little disappointed by the attitude of the Government in regard to its approach to this very important question. I do not mind listening to anyone on any subject but I do object to being blatantly lobbied and I have been blatantly lobbied. I thought at first the lobbying was only a friendly discussion but later I saw how naive I was and indeed I felt I was being used.

The question of fluoride has been before us since 1963 and it has caused us to accumulate a tremendous amount of data, both for and against. Because of the amount of information I have collected, I feel I could quite competently put up an argument whichever way I chose.

This is where I consider I am not qualified to make up my mind on whether there are dangers involved in fluoridating public water supplies. I have listened, with a great deal of interest, to many people who have spoken on this subject, but some of them have not had the same effect on me as they have had on the member for Heeloo. For example, I have heard Mr. Carr speaking on several occasions. Indeed, I was listening to him on the radio earlier today when he was commenting on a letter sent out by one of the organisations opposed to fluoridation. I am afraid he did not convince me fully, although what he did say was, in many respects, very sensible.

On this question the Australian Labor Party made its position quite clear in the many policy speeches that we made during the last election when it was said that the party would take the question to a referendum if it were returned to office; and, even if it were returned as the Opposition, the party promised to press for a referendum. However, in the circumstances, I do not think there is much left to be done and, indeed, I am quite happy to adopt this attitude because of the vast, conflicting evidence I have on my file. I consider this evidence to have been supplied by reputable authorities, but even these authorities can prove to be wrong.

I do not think any medical man can be proved to be 100 per cent. right all the time. An example of this was brought home to me only last week when my own sister consulted a specialist and was told there was no need for her to have an operation. She decided to consult another specialist on the Monday and she was operated on on the Tuesday, and the second specialist could not understand the...
The Government's contention is that there is a substance which can be added to our drinking water without being harmful to any one person in any shape or form, but, instead, will guarantee better teeth for our children. I do not believe there is any such substance that would be the equivalent of air or perhaps just plain water, two constituents of life we cannot do without. It is fantastic for the Government to make such a claim, but if it believes what it says it should provide compensation to any person who is able to prove his health has been adversely affected by whatever type of fluoride is put into our drinking water.

I said before that I considered it was a rather autocratic approach by the Government, and I feel the members of the Government have been whipped into line. On several occasions I have spoken to Government members about fluoride and I have received the same answer on practically every occasion. The answer has been: Surely you are not against fluoridation! This seemed to be the standard approach. Why should I receive the same reply from a number of Government members beyond my comprehension, unless it is the line of attack that has been decided upon in the party room, because obviously this question has been decided in the party room and we know what the decision of Government members on this Bill will be.

I think they are completely disregarding the minority group which, on this occasion, is a large minority group, and I am sure the Government is fully aware that many citizens, apart altogether from the members of the Pure Water Association, have been organising petitions; and although the active members of the group are very small in number, they already have obtained more than 4,000 names on the petition, which names have been gathered in approximately 20 days. I am told the petitioners are coming forward extremely well and that one of the most surprising reasons that has been given by people time and again for signing the petition is that mothers, as a result of giving fluoride tablets to their children, have discovered that whilst some children are able to take them without adverse effects, very often there is one child who is not able to ingest the tablets.

Many people feel that because of the experience mothers have had with their own children taking fluoride tablets they would not like to see fluoride put into public water supplies. I understand this petition will not be available for presentation to Parliament before the Bill leaves this Chamber, but I am also given to understand it will be considerably enlarged when the Government does receive it at some future date. It is because the petition is not quite ready that I mention it at this time.

The main line of attack by the proponents of fluoridation has been to discredit completely anybody who is against fluoridation. This has been instanced on more than one occasion by the attitude of Government supporters, the manner of the Ministers in replying to questions, and the practice of belittling all authorities which claim to be against fluoridation. On one occasion, after listening to the qualifications of one man, it was quite absurd to hear stated that he also liked music. This brought forth quite a few sniggers from some Government members of the House, which reminded me of teenage girls at their first dance, and I did not think it was funny.

Mr. O'Connor: Didn't you snigger?

Mr. DAVIES: We did not snigger in concert when it was stated that this man liked music. Indeed, I see the Minister for Industrial Development smiling now.

Mr. Hawke: That is a welcome change!

Mr. DAVIES: The Minister's attitude surprises me as I know that he too likes music, because I have seen him, on occasions, at A.B.C. concerts.

Mr. Hawke: He blows his own trumpet a lot.

Mr. DAVIES: The Government members, as it were, used this little addendum which they added to a perfectly sensible answer to discredit the person concerned. I do not like this approach, and yet it happens time and time again. The contempt with which members of the House are treated is disgusting on some occasions, and this is particularly so when the question of anti-fluoridation is raised. If this is the attitude of members we can never know about it. I suppose they were used to being associated with this type of business and with this type of person and that is all we can expect from them.

We have been assured from many quarters, including the Government quarter, that the addition of fluoride to water supplies is absolutely safe. If the Government believes what it says, it must back up its beliefs by inserting a clause in the Bill, as has been foreshadowed, to provide some compensation to persons who claim they have been adversely affected by fluoride.

Mr. O'Connor: Who claim they have been affected?

Mr. DAVIES: Who claim and subsequently prove they have been affected, if the Minister wishes me to dot my i's and cross my t's.

Mr. O'Connor: To claim is different from proving.

Mr. DAVIES: I think it is self-evident. I will now continue to discuss the
manner in which I propose to support this argument, and I will be pleased to answer any interjection during my further remarks right through to their conclusion.

I will admit there is ample evidence to support the Government's claim. I can argue one way or another, but to assist the Government to support its claim I propose to quote from a publication put out by the Royal Society of Health which is headed, Dental Decay Control by Fluoridation. This deals with problems under various aspects, the first of which is the dental aspect. The next is the waterworks aspect, and the third is the safety aspect. It is from the last part, which concerns the safety aspect, that I wish to quote. It states—

Proof of the absolute safety of any procedure is virtually unobtainable. Vital statistics can never give a complete answer to questions such as the safety or otherwise of fluoridation, and planned trials to test safety measures are fraught with the difficulty of obtaining adequate controls. Nevertheless, the high degree of agreement which careful scientific investigations and long-term studies have shown enable certain conclusions to be reached with a considerable degree of confidence.

(i) Fluoride salts are widely distributed in nature and are consumed in our daily diet throughout life. (ii) Where fluoride salts in optimal amounts are naturally present in local drinking water supplies they have been shown to have a marked effect in reducing the incidence of dental decay.

(iii) When fluoride salts are added to drinking water to raise the concentration to the optimal level of 1 p.p.m. the effect is similar to that found in areas where the drinking water naturally contains fluoride at this level.

(iv) Independently of the level of fluoride in their drinking water, or whether fluoride has been added, all individuals store fluoride progressively in their bones until middle age is reached. There is no evidence to suggest that in old age the ability to eliminate fluoride from the body is impaired. (v) There is now abundant evidence from numerous sources collected over many years, testifying to the essential safety of controlled fluoridation as a public health measure.

In view of these conclusions which are well tabulated—and incidentally the pamphlet is very interesting particularly if one considers that the Government should have no hesitation in accepting the amendment that has been foreshadowed. I point out that the pamphlet states that proof of the absolute safety of any procedure is virtually unobtainable. It is unobtainable in this case, so there must be some degree of risk. The pamphlet then goes on in five points to show that the proposal is to all intents and purposes perfectly safe under controlled conditions.

This gets back to supporting the Government's theory and to supporting, I hope, the amendment proposed. If we decide to hold a referendum, I think it will be money well spent, because it will satisfy a great number of people. I am sure I will be prepared to abide by the majority decision which the Government believes will be so overwhelmingly in favour of fluoridation.

I think the first possible opportunity should be taken to conduct such a referendum. This is the policy that we introduced at the last election, and one which we will continue to support until there is a firm and established policy as far as the Australian Labor Party is concerned.

I do not think there is anything further I can possibly say on the matter that has not been very competently dealt with by the many other speakers. My views are expressed in the interests of all concerned, and I hope the Government will accept the amendment that has been foreshadowed.

MR. GRAHAM (Balcatta) [12.36 a.m.]: It is not my intention to speak at any great length, but having regard to the fact that this measure has exercised for several years, and continues to exercise, the minds of very many of our people—and indeed disturbs the minds of many people—I feel it calls for members to give expression to their views so that there will be no mistake in the minds of people who are directly interested one way or another.

Three years ago, when a similar measure was before this Parliament I indicated that from a personal standpoint I had no great fears as to the harmful effects of ingesting quantities of fluoride. If my thoughts have undergone a change in the intervening period it would be in the direction that I am not now as certain as I was then that this question can be treated lightly. In other words, I feel there are some possibilities of damage and harm being done to those who have an intake of fluoride either in limited quantity or who, because of circumstances, ingest amounts greater than are generally recognised as being safe.

But whatever my personal attitude, I feel we must have some regard for the viewpoint of people—even if they be mistaken—who are respected citizens, and who feel strongly on this question and are as convinced of their point of view as are the Minister for Works—who was the Minister for Health on the last occasion—and the present Minister who occupies a seat in the other Chamber.

We have either suffered, or enjoyed, a plethora of evidence from the point of view of the Minister, designed to establish beyond any shadow of a doubt that
there is no possibility of harm, damage, or
danger to any citizen if this legislation
is given force and effect.

There has likewise been evidence
adduced—and incidentally a far greater
volume of evidence has been adduced—
from persons at least equally qualified
and of world-wide renown, indicating that
cautions must be exercised, and that there
are, to say the least, very grave doubts
as to whether the introduction of a
scheme of fluoridation is as harmless as
other people maintain.

Mention has been made of the fact that
the conclusions of the member for Wem
bly—because he is a qualified medical
practitioner—carry greater weight than
those of others who have studied this
subject, for instance, the Deputy Leader
of the Opposition. But none of us in this
Chamber has made an analysis of the
question, and none of us has undertaken
tests or research. I venture to suggest
that no officer of the Public Health
Department or the dental services has
conducted conclusive tests.

All that we can do is to indulge in
reading, and to take into account the
conclusions that have been arrived at by
other people. I suggest if an opinion has
been expressed by a person from another
part of the world—somebody with ex-
tremely high qualifications—it makes his
observations no more sound or unsound,
whether they be quoted by the member
for Wembley or by the member for Bal-
catta. Therefore we have to be guided
by the opinions and experience of others.

The Minister for Works in fair debat-
ing style says this legislation has been
promoted with the blessing of a whole
string of authorities which took into
account the objections which were out-
lined to us by the Deputy Leader of the
Opposition. I say it is a debating device.
If we are to judge an issue having regard
to a fact such as that, it would be more
true to say that statements have been
made by the proponents of the fluorida-
tion of public water supply and that, in
the full knowledge of their claims, the
opponents have come to their conclusions.
Therefore I submit that anybody knowing
anything about adjudicating in debate
will realise the Minister cannot score a
single point on that issue. If anything,
the favour lies in the opposite direction.
Having regard for the eminence of those
who have expressed opinions, no member
of this Chamber can say with absolute
certainty which side of the argument is
right.

Whilst you, Mr. Speaker, or I may have
a predilection one way or the other, I
suggest it is quite right and proper for us
to hold views as individual citizens; but
I do not think we are entitled to enforce
or to impose this measure upon the public.

As we are aware, very many people in
the community avail themselves of fluoride
preparations in one form or another. We
of this Parliament cannot be the guardians
of all the children in the State, and we
cannot say that we know better than their
parents. We cannot say because a number
of parents are remiss and unfair to their
children.

Mr. Ross Hutchinson: We do that in
respect of education.

Mr. GRAHAM: That is correct, but the
Minister knows under the scheme pro-
posed in the Bill some children will miss
out, because not all water supplies will be
fluoridated, and not all children will drink
water from public water supplies. It is
true to say that just as certain parents
are remiss in their concern for the welfare
of their children from a dental aspect,
others are remiss in very many other direc-
tions as well. To know that, one has only
to observe the children and the lack
of concern of some parents in respect of
money which is given to the children and
of the type of food which is purchased
during the lunch period and afterwards.
I regret to say that much of the muck
which has an impure effect on the teeth
of children is sold by school tuckshops
operated by parents and citizens' organisa-
tions. The Minister is aware of that.

It would be far more constructive if the
Government were to give greater atten-
tion to the "pop" and sweets which are
freely available to the children; indeed,
are induced to purchase these things,
and parents are encouraged to allow their
children to make such purchases, because
the proceeds of the sales go into the funds
of these associations.

Mr. Rushton: That is not general.

Mr. GRAHAM: It is not uncommon.
Perhaps the honourable member and I can
have a personal discussion on this aspect.
I am not seeking to belittle or to criticise
parents and citizens' associations; what I
am doing is to suggest that the Govern-
ment of interfering with what might be presumed to be the personal and
private life of the home, and instead of
intruding rather than leaving it to parents
to educate and give advice—should dis-
courage what has grown to mammoth
portions in recent times; that is, the
consumption of aerated waters. The sugar
and the other ingredients in these drinks
have a most detrimental effect on the
teeth of children.

Mr. Ross Hutchinson: The Health
Education Council tries to do that.

Mr. GRAHAM: To promote the sales of
these drinks the interests concerned spend
huge sums in advertising in the news-
paper and over the television and radio
by sponsoring programmes, and the rest
of it. The few words which come from a
public organisation are of no avail against
the avalanche of propaganda and advert-
ise which is thrown at the children and
which creates a temptation to them.

Mr. Ross Hutchinson: Do you think there
is room for a private member's Bill?
Mr. GRAHAM: I would say that would be a lesser invasion of the rights of the individual than what is proposed in this legislation. As most thinking people are aware, in the same way chocolates and sweets in general have a detrimental effect on teeth, particularly those of young children; and, if we take into account the baby foods, such as arrowroot biscuits, we find they are in the top category of foods which have a detrimental effect upon the teeth.

The Government does not touch these foods, because by doing so it would interfere with the rights of traders, businessmen, and vested interests. In introducing the Bill it is only interfering with the rights of the ordinary and average member of the public in the thousands, and that does not seem to matter! But to interfere with, and to curb the operations of, private enterprise is unthinkable to the Government; it does not matter what happens to the children. These private interests must be left alone!

Mr. Grayden: What about the people who sell pills? What profits do they make?

Mr. GRAHAM: I have no idea. This Government is opposed to any form of control over profits and overcharging, but I notice it is very much in favour of pegging the basic wage.

Mr. Grayden: Not on this particular issue.

Mr. GRAHAM: I have not heard of anybody dying because there was something wrong with their teeth—because of some small holes or punctures in the enamel of their teeth, or because certain teeth were missing from their upper or lower dentures. But I have, in common with every other member, heard of people losing their lives because of cigarette smoking—smoking tobacco. Why does not the Government, if it is hell bent in the direction of looking after the health and welfare of the people, deal with the more serious matter first. I am not advocating this, but if there are to be priorities, surely the Government should tackle a matter which is taking human life, rather than that which in some cases—unfortunately too many—is having a detrimental effect only upon teeth.

Of course, if we pass to the question of alcohol and what it does to health, happiness, homes, morality, and to the financial structure of homes and in the way of crime, even to murder—and we know the position regarding so many who have become complete victims of the consumption of liquor—then something would be achieved by the Government if it were to grapple with this. Again I interpolate that I am not advocating this be done; but if the Government feels the urge to interfere with the rights and domestic affairs of the people of the community, then there are far more important things—and on a far higher priority—than that which is dealt with in this Bill.

We do know that tobacco has a very serious effect, even to the point of death. We know similarly with regard to alcoholic liquor; but there are, as I have said, reservations with regard to fluoride because of the wealth of talent and the eminence of those who have been quoted who are very strongly opposed to, or who have the strongest regarding, the so-called harmless effects of the ingestion of fluoride.

Of course, I am only a layman in this whole matter, but as other members have pointed out, the habits of people even in the same community vary very considerably. In this far-flung State of ours there are variations of temperature and variations in the working and sporting habits of people. Because of this, by drinking water or taking in fluids, some members of the public could have X quantity of fluoride at the end of 24 hours, whereas others would have 3X, 4X, or perhaps 10X quantity.

However, if we relied on the tablet, surely it would be a simple matter to control its issue; namely, that I take one tablet per day and you, Mr. Speaker, take one tablet a day. That is the quantity you get and that is the quantity I get. But in the matter of our drinking water, some, I repeat, drink enormous quantities of fluids and others very little; and accordingly there is a great disparity in the case of one as against the case of the other.

Mr. Rushton: There is .8 in some of the water supplies and if we took the tablet it would be added to that.

Mr. GRAHAM: That is an interesting and pertinent interjection. The Minister said earlier there was a great margin for safety in this one part per million and therefore there was no need for concern. About all I can do is to submit a little authoritative evidence which I probably would have overlooked only for the timely interjection. This pamphlet has been prepared with the approval and assistance of the Australian Dental Association, New South Wales branch, and amongst other things, it says this:

Fluorine tablets should not be administered when the water supply contains more than 0.7 parts per million fluoride.

Now, if some of the water supplies have 0.8 at the present moment and this Government is going to add to that—

Mr. Rushton: I think you are misconstruing it. This all mixes in with the whole issue.

Mr. GRAHAM: Does not this indicate that there is some danger attaching to a point somewhere around about 1.7 parts per million; because if the water supply
contains more than 0.7 parts per million, then these tablets should not be taken.

Mr. Dunn: Don't you believe the engineers can control this?

Mr. Graham: Surely the member for Darling Range appreciates, firstly, that some people have an intake of liquid far greater than others; and, secondly, there are a whole lot of foodstuffs and drinks—tea, beer, and the rest of it—that also have a higher percentage of fluoride than has water as it comes from the tap.

Mr. Dunn: I am prepared to believe those people who know.

Mr. Graham: We have again reached the point where there has been a very timely interjection. The member for Darling Range is prepared to believe certain people because he thinks they know.

Mr. Dunn: Of course I am.

Mr. Graham: Very well; and he is entitled to that opinion, but there are others who choose to believe other authorities because they think they are correct. I am, of course, not seeking to derogate from either. What I suggest the member for Darling Range has no more rhyme or reason to impose his thoughts and accordingly his fluoride down my throat than I have to impose something upon him and pour something down his throat which he, after reading his authorities, is opposed to.

Mr. Dunn: I stated in my address to the House that I was trying to prove nothing, but was accepting responsible authoritative opinion.

The Speaker: Order!

Mr. Graham: I accept that short speech of the member for Darling Range. I have already indicated my personal viewpoint—indeed, it was some years ago. I hope I can remember that far back. However, the member for Darling Range has read something—quite a lot per chance—and chooses to agree with a viewpoint; but there are others equally sincere who have perhaps undertaken greater research than he has and they have read the works of outstanding authorities and have come to a different conclusion. Who is right and who is not right? Frankly, I do not know. It would appear it is an issue on which many prominent people still have not arrived at a definite conclusion—a conclusion that cannot be challenged by somebody equally eminent. For that reason I think it would be foolhardiness on our part if we allow ourselves to foist this on several hundred thousand people, without being absolutely sure.

I ask myself what is the overpowering urgency in connection with this? What harm is done if we wait a little longer in order to see whether the experts who disagree at the present moment can perhaps have some further thoughts on the matter and see whether there can be almost complete agreement amongst them.

I am aware of very many discoveries over the year which were treated originally with very little respect and the whole weight of authoritative medical opinion was against them. Even the person who suggested the theory of the circulatory system of blood movement throughout the body—and he was subsequently found to be correct—was laughed to scorn by the leading medical people of the day.

We know the attitude of the medical profession towards Sister Kenny: we know the experience of the Pasteur family: and so on. There is nothing new and novel about this. Although the professional people have had the best intentions in the world, they have often been proved wrong. But this is going beyond that. We are seeking to make this compulsory. This may be wrong, and on the other hand it may be perfectly correct. Again I say I do not know.

I am aware of someone who approached the member for Maylands because of the distress that was felt. No disrespect is intended, but he did not get very far for obvious reasons. He then went to a Legislative Councillor of the same political party, and all that person could offer was a suggestion that the family buy a rainwater tank.

Mr. Marshall: Of whom are you speaking?

Mr. Tonkin: The honourable member knows.

Mr. Marshall: I do not know. I am asking.

Mr. Graham: I do not think I am at liberty to mention the name of the person, but I suggest that the honourable member discuss the matter with the Legislative Councillor concerned. After all, there are only two for the district, and between them he will find out.

Mr. Marshall: You are quite wrong. No one came to me.

Mr. Graham: It is easy to make a denial.

Mr. Marshall: Is it?

Mr. Graham: Obviously it is. Strangely enough, yesterday afternoon a gentleman came to me. I will give his name to the Minister and to anyone else who is interested.

This man is an ex-serviceman with a certain blood condition and because of it, for reasons I do not understand, it is impossible for him to have any sodium, as any element of it in any form has a deleterious effect. Because of this he buys salt at 10s. 6d. for 6 oz. I do not know what sort it is, but it is certainly not sodium chloride. He purchases these tablets through the Repatriation Department to offset the effects of some of the sodium which, of course, he finds impossible to escape entirely.

Naturally this person is horrified at the prospect of being compelled to drink water to which has been added fluoride. He is
prepared to face up to this problem and go to the expense of installing a rainwater tank at his own home, but wherever he goes during the course of his work or on visits, if he feels thirsty he will be compelled to drink the public water. There will be no escape unless he takes his own flagon of water with him wherever he goes. Otherwise he must consume some of this chemical mixture which has sodium in it.

Mr. Grayden: Not very much.

Mr. GRAHAM: There is not very much in a little sprinkling of salt on a boiled egg, but he dare not have even that much. This ex-serviceman suffers this disability and it is costing him money. He does not go to this trouble for the fun of it. His disability has been recognised by the Repatriation Department. He is only an ordinary unskilled worker—incidentally he works for the Water Supply Department—and yet this sodium affects him so seriously that he is prepared, in his own interests, to install a water tank to protect himself as far as he possibly can.

I say the Government has no right to make such an attack on people—and there are others who have certain reactions to fluoride. Some of them have been mentioned already.

It is true that the medical profession, try as it may, cannot find all the answers. It does not even know a great deal about the common cold, does it? It does not know much about asthma, cancer, and so on. There is a whole lot to be learned. It does not even know a great deal about this sodium fluosilicate. The member for Narrogin mentioned medicos. Those esteemed medicos, I believe, in the fluoridation mixtures which have sodium in it.

Mr. GRAHAM: I am not in a position, and neither do I pretend that I will be in the position 18 months ahead, to give an undertaking—and I doubt very much whether the Leader of the Opposition would be prepared to give an undertaking of that nature. All I know about statements in connection with this is that this Government was peculiarly silent on the issue during the last State elections. It did not have a policy at all that was proclaimed to the people. On the contrary, the Premier in correspondence, I think to one of his constituents, indicated that he would not, if his party were returned, be responsible for a piece of legislation along these lines.

Mr. Court: At many meetings we were asked this question straight out. I well remember one such meeting with the now Minister for Labour which they attended in force on this particular issue. We made no bones about it.

Mr. Tonkin: What answer did you give?

Mr. Court: That we believed in the fluoridation of public water supplies.

Mr. Tonkin: You did not say you would introduce legislation to fluoridate the public water supplies.

Mr. Court: We did.

Mr. Tonkin: No, you didn't.

Mr. Court: At that time the Country Party was not in agreement with it.

Mr. Tonkin: So why say you did say it?

The SPEAKER: Order!

Mr. GRAHAM: After this interesting interlude surely we are entitled to conclude that the Government was not in a position to give an undertaking either way because it did not know or was unaware, or was afraid, of the attitude of the Country Party.

Mr. Court: The Country Party has clarified its attitude.

Mr. GRAHAM: Therefore the public has had no say in connection with this, and we get back to the point raised by the member for Victoria Park. Because a few gentlemen and ladies of the Country Party got together at a conference and, by a narrow majority decided to do a back flip on a certain issue, the public can go hang. The important thing is that the Government is, in both Houses of Parliament, now assured of a majority to pass this piece of legislation. That is all that counts.

[Wednesday, 12 October, 1966]
Mr. Ross Hutchinson: Your party did a bit of a back flip, you know.

Mr. Dunn: Do you deny that The Western Sun, published three or four years ago, said your party would support the fluoridation of water?

Mr. Hawke: Only one member said he wanted such a measure. We are not entitled to embark on a personal course; or, because of loyalty to a particular party, to foist this measure upon the public.

Mr. Graham: flat will be ample, Mr. Speaker. If one endeavours to adopt that attitude which, of course, indicates that such appeared, because three years ago—and before three years ago—we were obliged, because of a conference decision, not to impose fluoridation upon the public without the public first of all indicating that it wanted such a measure. We are being consistent in that attitude this evening. Irrespective of whether we oppose or support or are neutral in our approach to this matter we still say that we—or the majority of 80 members of this Parliament—have not the mandate or the authority to impose fluoridation on the public. Indeed, if one cares to analyse the Government policy, it has something on the negative side and therefore it has no authority whatsoever to impose this form of tampering with public water supplies.

Mr. Graham: That is a very appropriate interjection which, of course, indicates that we are all aware of what the Leader of the Opposition said. I thank him for reminding us that it would appear that members of the Country Party have double-crossed the public. Eighteen months ago the Country Party went to the electorate on a policy of no fluoridation without the consent of the people. However, now the will of the people amounts to nothing.

Mr. Hawke: The Country Party policy at the last election was opposed to the fluoridation of public water supplies.

Mr. Graham: That is the ease that was the policy of the Country Party is obliged to do it.

Mr. Dunn: Do you deny that The Western Sun, published three or four years ago, said your party would support the fluoridation of water?

Mr. Hawke: Only one member said he wanted such a measure. We are not entitled to embark on a personal course; or, because of loyalty to a particular party, to foist this measure upon the public.

A member: Hear, hear!

Mr. Graham: I put myself in the role of an adjudicator because I have already indicated my personal attitude. I readily confess that my two young children get their dose of one fluoride tablet per day, seven days a week. But that is a decision made in the Graham home for the Graham children; it is not made in the Cabinet room or the Liberal Party caucus. They are our children and we make the decision and we are assured that the children get the quantity of fluoride that has been recommended. They get no more and they get no less. However, under this scheme goodness knows what quantity the children will receive. So I say my position is perfectly clear and plain in connection with the whole matter.

Mr. Graham: Those opinions did not come from cranks or laymen. They were opinions from high-ranking officials; professional and technical men. Therefore, any doubts at all—as the member for Maylands stated—should be given to the status quo. Where there is doubt, a person is found not guilty, and no action is taken against him and, in this instance, because the case has not been sufficiently proven that the introduction of fluoride into our water supplies can be guaranteed to be completely harmless to the people, I suggest this legislation should not be before us.

The Government should hasten slowly; it should wait until it is absolutely positive and until fluoridation has been proved world-wide, and by our own experiments and observations, before it proceeds any further.

However, if the Government feels that the dental health of the citizens of Western Australia is so perilous that urgent and early action must be taken, then it can proceed in a constructive manner. It is certain no parents would object if this Government took some steps to see that there was less inducement for the kiddies to eat ice cream and sweets, and drink aerated water in great quantities. The Government has no mandate, and it has no right, morally or on any other basis, to proceed with this legislation; and,
if this legislation is to be passed by this Parliament with a majority in both Houses, and is to see the light of day, it will only be because of the action of this Government in the party rooms in deciding that there should be a united stand. In other words, conscription for Vietnam in the Federal sphere and conscription for fluoridation in the State sphere. In neither case, do I think the Government has anything of which to be proud.

MR. GRAYDEN (South Perth) [1.18 a.m.]: I certainly did not intend to speak to this debate; however, in view of the fact that it is 1.15 a.m., I am now going to do so.

I was surprised at some of the statements made by the member for Balcatta. He said that he had regularly given his children fluoride tablets. I find this rather hard to believe because although I do not smoke, neither do I weigh a ton. I do not know the ages of his children, one could well be 18 months old.

Mr. Graham: No; you flatter me.

Mr. GRAYDEN: The member for Balcatta may not be quite as capable as I thought he was. However, if it were not the member for Balcatta, it could be some other individual who could have a child of six months, 12 months or 18 months. That child could be receiving a fluoride tablet. The same family could have a child 16 years old, and that child could also receive one tablet per day.

How, in these circumstances, could the honourable member say—as he did—that the children were receiving a scientific dose. That is absolute rubbish. The child of six months who is getting a fluoride tablet could possibly weigh 14 lb. or 28 lb. or whatever a child of that age might weigh.

Mr. Graham: If anybody knows, you should; you have a dozen of them.

Mr. GRAYDEN: On the other hand, a boy of 18 would weigh several stone, so to say that a tablet represents a scientific dose is absolute rubbish. It is much more scientific to place the fluoride in the water supplies, because by so doing the people obtain a dose of fluoride in accordance with the amount required.

Another point I wish to raise is that some time ago the Opposition stressed the fact that this was a capitalistic move. We have not heard this expressed much during the debate, but in the past it has been mentioned many times that to enhance the profits of those firms which manufacture alumina, the fluoridation of water supplies was advocated. It was alleged that fluoride was the by-product of an alumina factory. In consequence of questions asked in the House during the last few days we have learned that the firms that manufacture alumina have been long since ceased to produce fluoride as a by-product in the process of manufacturing alumina, and now, if we wish to obtain fluoride from such a firm we would have to induce it to install a special plant to manufacture it.

It is not extraordinarily difficult to imagine that the position is quite the reverse. It could well be alleged that some of the large overseas chemical factories are behind the opposition to the fluoridation of water supplies that is taking place. In regard to those firms that manufacture fluoride in large quantities, this could be a fact. Surely the manufacture of fluoride tablets is much more profitable than manufacturing a by-product of alumina to be used to fluoridate our water supplies. Compared with the manufacture of fluoride tablets, the extraction of fluoride as a by-product from the manufacture of alumina for insertion in our water supplies is, financially, but a drop in the ocean, as it were.

It could well be alleged that if there are any forces working against the fluoridation of water supplies, they could be the great chemical companies of the world. This is not an assertion that should be glossed over lightly. It could be a fact. A tremendous amount of money has been spent on literature against fluoridation of water supplies. There is not one member of this House who has not been inundated with pamphlets on the subject of anti-fluoridation, and one asks oneself, “Where does this money come from?”

There are many of us who have not much respect for the large overseas chemical companies, and I would think that if I were the manager of a large chemical company and I was utterly unscrupulous, I would soon come to the conclusion that the manufacture of fluoride tablets was a very profitable undertaking and so I would go out of my way to discover those who were receptive to the suggestion I would put forward and I would supply them with propaganda and leave the rest to them. In such circumstances I can imagine what those people would do. They would do precisely what the people who are opposing fluoridation are doing today. That is the situation to my mind. The same circumstances exist in many other spheres, but I will not mention them.

I used to be bitterly opposed to fluoridation. I think I was the only member on this side of the House who was conscientiously opposed to it, because at that time I hated the thought of what I considered to be compulsory medication. I have always had a horror of tablets in any form. I have always avoided doctors as much as possible. Not that I lack confidence in doctors; on the contrary, I have the greatest confidence in them, but it behoves everybody to keep as far away from them as possible.

Mr. Hawke: All the time.

Mr. GRAYDEN: As I was so bitterly opposed to fluoridation and as I had
Mr. Hawke: I think the member for South Perth and I should take some of this cobalt.

Mr. Grayden: Here was a trace element which was lacking in the water, and which made all the difference in the world to those particular cattle. Surely we should regard fluoride as a trace element which is lacking in the water supply that is made available to the citizens of Perth! We have already had an illustration of this.

I think it was the member for Bunbury who said that during the summertime 40 per cent. of the water used in Perth was derived from a bore in King’s Park in which the percentage of fluoride was in excess of one part per million.

Mr. Ross Hutchinson: It was .8.

Mr. Grayden: That is pretty close.

Here we have a bore in King’s Park which augments the water supply in Perth in the summer months and which contains 0.8 parts per million of fluoride.

In other words, the people of Perth have been drinking fluoridated water for many years. Those who drink beer drink fluoride. The few who drink tea drink fluoride.

Mr. Jamieson: Which few is this?

Mr. Grayden: The significant point is that in Western Australia there are many places where fluoride is natural to the water supply to a far greater extent than one part per million which is proposed in this measure. In any part of the State where fluoride occurs naturally we find that the children’s teeth are infinitely better than they are elsewhere in the State where perhaps fluoride does not occur naturally. We also know that people have lived all their lives in certain places where there is fluoride present, and have lived to the age of 80 or 85 years or more. So fluoride obviously does not affect the age to which an individual lives; nor has it anything to do with any ailments that one might suffer.

There are people who have lived in Cue from the time they were born till they were 85 years of age, and their health has been equal to if not better than the health of anybody else in the State. Quite apart from this they have excellent teeth.

I have heard a lot about Mexico where there is supposed to be several parts of fluoride per million gallons in the water supply. That being so, I thought I would hear of people who were maimed and crippled as a consequence, and who might suffer from all sorts of side effects. Instead of that, I find from the search I made through the most extensive library of the Public Health Department that there was not one single side effect anywhere.

I did find, however, that there was a slight difference between the people of Mexico and those who lived in parts of the United States where fluoride was not natural in the water supply. As a consequence of the presence of fluoride there...
was a slight thickening of the bone structure, and there were far fewer breakages of limbs there than in the surrounding countries. That was the only difference, and it was particularly noticeable in those who were aged.

We all know that in our own community when an aged person falls and breaks a limb he very often drops in mortality and perhaps dies. In Mexico there are far fewer limbs broken among the aged people, which, to my mind, is most significant. As I have said, the only difference among the people of this country was a slight thickening of the skeletal structure which was considered to be an excellent thing.

There must surely be something wrong if we in Western Australia are going to quibble about drinking water containing one part of fluoride per million parts of water in our water supplies—particularly when some people in this State are already drinking far more than that because of the natural presence of fluoride in the water supply—when the water supply contains several parts of fluoride per million gallons of water.

As members know, I have 10 children, and I can assure the House that if there was the slightest danger in fluoride it would be the last thing I would expect them to drink. I had the agonizing experience recently of taking some of my younger children to the dentist and sitting in the dentist's waiting room while they manfully went and had their teeth drilled. One of them who is three years old had a tooth extracted, and as children do he placed it in a glass filled with water in the hope that he might receive a couple of shillings from the fairies. I am getting a bit tired of this, though I assure the House that it is not because of the money, because I would be glad to spend any amount that is necessary to preserve their teeth.

My wife endeavours to give the children fluoride; but I have some very pleasant neighbours who are consistently giving them either biscuits or sweets. We all know that the main cause of tooth decay is the eating of sweets and biscuits, which contain sugar. In a society such as ours one cannot escape the fact that children will eat sugar and not clean their teeth afterwards. If they did, fluoride would not be necessary. In those circumstances should we not do something, if it is within our power, to cut dental decay by 50 or 60 per cent? If we can do that without harm to people then it behoves us to support the measure.

A lot has been said at various times in the past about compulsory medication. The argument has been raised that this is a Liberal-Country Party Government—one which is opposed to socialism or anything of that kind—yet it seeks to introduce compulsory fluoridation of water supplies, while it is opposed to the nationalisation of banks. Anyone who gives this matter a moment's thought will come up with the answer that fluoridation of water supplies is not comparable with the nationalisation of banks.

No-one proposes that people in the Perth or any other district in Western Australia must drink fluoridated water, and if that were the case I would vote against the measure. Such a proposition would be intolerable to members on this or the opposite side of the House. Who would take it on himself to suggest that people should be compelled to drink fluoridated water?

The greater bulk of the water from the Mundaring Weir and other reservoirs is used for watering lawns, washing clothes, flushing toilets, and washing dishes. The amount that is drunk is absolutely negligible. Many people in the community are opposed to fluoridation and I respect their views for reasons which I shall give in a short while. If this section of the community does not want to drink fluoridated water, it is very costly to install a rainwater tank.

Mr. Hawke: Will the Government give a subsidy for that purpose?

Mr. GRAYDEN: What happened when Western Australia was colonised? The people depended on rainwater tanks. Today in almost every building in this State guttering is installed to channel the water from the roof. People who are opposed to fluoridation could install water tanks of 1,000 gallons, 500 gallons, or even 200 gallons capacity; and if they cannot afford that they can use a 44-gallon drum. If anyone cannot meet the cost of installing a new rainwater tank he has only to go through the advertisements in The West Australian of any Saturday to find secondhand rainwater tanks being offered for about £5. I daresay the money that will be saved by conserving the rainwater in a tank will in due course pay for the cost of the tank. It is a good business proposition to install such a tank.

Mr. Tonkin: I think you are battling for B.H.P.

Mr. GRAYDEN: I am not. I am all for assisting people who experience difficulty in meeting their excessive water charges. Under this Bill we are given the opportunity to do something which will obviate a great deal of pain among the children of the State. If we are able to achieve that objective then the measure is worth while.

Let us consider what is worth while to be done for the people. Certainly the pleasures which people experience are of tremendous importance, and we shall go out of our way to enable them to experience pleasure; but equally important is the prevention of pain. What is the good of providing pleasure on the one hand, and on the other hand, doing nothing to lessen pain among the children? Thousands of the children in future will benefit from this legislation. The pain which
children now have to bear when they visit the dentist, in having teeth extracted or drilled, will be lessened in the future.

Mr. Jamieson: The dental faculty might have to close shop.

Mr. GRAYDEN: The benefits outweigh by far the disadvantages which might arise along the line. The member for Balcatta spoke of compulsory fluoridation, and about people being compelled to drink fluoridated water. It is not a fact, and people do not have to drink this water. He referred to the case of a person who drank rainwater when he was home, and said that when that person went out for the day and drank a glass of water somewhere else it would be fluoridated water. He was referring to a fully-grown man who drank rainwater in his home, and who occasionally drank fluoridated water when he was out. He complained about that! Yet in the next breath he said he was providing his own children with fluoride tablets. He is prepared to supply his children with fluoride tablets which contain a greater concentration of fluoride than fluoridated water—greater than one part per million.

Mr. Tonkin: How do you get that idea?

Mr. GRAYDEN: That is the position.

Mr. Tonkin: It is not the position at all.

Mr. GRAYDEN: The honourable member says that is not the position, and I am rather curious to find out how he arrives at that conclusion.

Mr. Tonkin: Because it is in the pamphlet.

Mr. GRAYDEN: The Deputy Leader of the Opposition is prepared to give a fluoride tablet to a child which weighs 20 pounds, and to another child of 16 years of age weighing 14 stone he is still prepared to give the same dose of one tablet.

Mr. Hawke: The member for Mt. Marshall is not here!

Mr. GRAYDEN: The Deputy Leader of the Opposition says that is a scientific dose for a child of 20 pounds, and also a scientific dose for a boy of 14 stone. The difference between the effect on a child of 20 pounds and one of 14 stone is far greater than the difference between the effect on an individual who drinks a gallon of fluoridated water a day and one who drinks half a gallon a day. If the Deputy Leader of the Opposition were to consider this aspect he would find that what I have just said is correct.

The member for Balcatta was worried about a grown man drinking rainwater while he was at home, and occasionally drinking a glass of fluoridated water when he was out. Yet I do not imagine he would object to one of his constituents going into a hotel and drinking pints of beer which, of course, contains fluoride in excess of one part per million.

Mr. Jamieson: That is not sodium fluoride.

Mr. GRAYDEN: To get back to the point I wanted to clarify, when I approached the Department of Public Health my main object was to ascertain whether the fluoride which is naturally present in water is different to the fluoride which is added to water supplies. The officers of the department produced reference after reference to indicate that there is no difference. This was the point that satisfied me. In those circumstances, I think we are going to do a tremendous injustice to the children of this State if we sit here and blithely vote against a measure of this kind.

We have the experience of what has happened in the Eastern States. We know that at Yass the people have had fluoride in their water supply for 10 years. There has never been one complaint, and there have never been any side-effects. Is there anyone in this Chamber who would deny that the teeth of the children of Yass are the best in New South Wales? Here in Australia we have a community that says, "We are going to be far in advance of the times"—in fact, 10 years ahead of Western Australia. Ten years ago at Yass the authorities possessed of some forethought and put fluoride into their water supply, and in that 10 years they have reached this position: The children at Yass have the best teeth in New South Wales; there has not been a single side-effect; and there have been no complaints.

How in these circumstances can we oppose this Bill? I suggest this: We should adjourn this Parliament and hold it in the town of Cue. We would take the Speaker's Chair and enthrone you, Sir, so that you can ably maintain the necessary decorum. You are probably more capable of doing that than any other Speaker has done.

We would debate this issue and have on the outskirts lots of little aborigine and other children. They would be listening to the Opposition members and would say, "Why did not that happen to me?" We might arouse some sort of distress as they might think that all the things told them by the medical officers who have visited the district were false.

These children would go home and peer into each other's mouths and say, "I want to see if there is any mottling". They would look for an arm dropping off; or some other side-effect. They would think it ridiculous. On the other side of the gathering would be the aged people who would be in their 80s and 90s. Obviously they would wonder whether they were a group apart because they had been drinking fluoridated water ever since they were born.

It would make a mockery of the whole debate if we were to go to Cue where fluoride is naturally in the water supply and where the local inhabitants have been drinking this water ever since they were born.
I mentioned earlier that I have the greatest respect for those who oppose fluoridation. I have the greatest respect for anybody who opposes this sort of thing. In the forefront of this group are those who go out of their way to study diet; and they abstain from smoking, drinking alcohol, and things of that kind. I think that is a section of the public for whom we should have the greatest respect.

On this particular issue their reaction is one that all of us should originally have had. If we did not have that sort of reaction, then there is something wrong with us. It would indicate the human race has not long to survive if we said lightly that we would have mass medication and let the majority of doctors say at will, "We will inject you with this, or vaccinate you with something else." If we reach that stage, the human race will not have long to survive. So we have to be ever cautious; and we can thank this particular section of water supplies, who probably differ from the majority of members here. Let us hope we always have a section like that in the community. If we do not, then God help this community. I make this point, because I have a lot of respect for them.

Exhaustive research into fluoridation has been going on for 30 years and, in those circumstances, we cannot take any notice of this minority on this one occasion, but I would go so far as to say that this need not be the position on other occasions.

MR. BICKERTON (Pilbara) [1.57 a.m.]: I cannot bring myself to apologise for keeping people out of bed at two in the morning. I have a pet theory that if anyone keeps me up until midnight, then it is my privilege to prolong it a little after that.

This is a matter, as many previous speakers have said, which is one that is extremely difficult for the average layman to decide upon. I understand that we have no experts in this Chamber as far as this fluoridation of water supplies is concerned. I concede the Minister has his advisers, but he has them on other matters which he brings before this Chamber and I do not know whether we have always agreed with him or his experts on those other matters.

However, I am one who supports fluoridation of water supplies. I do so, I readily admit from a limited knowledge, but I have made up my mind from what I have read on the matter and from the remarks of other members. I feel the good that can come from it outweighs the risks that are taken.

However, I respect the views of those who oppose the matter; and I find myself a little disappointed, if I may say so, at the arrogance of the speakers on the Government side in this connection, even though I am in accord with the fluoridation of water supplies. I have heard criticism of the Deputy Leader of the Opposition and the case he put before this House; and, whilst I do not agree with him, I would say quite truthfully that I really felt the case put before the House by him proved to me that he at least, in his own mind, knows what he is voting for, even though he is opposed to the measure. It is possible that he would be one of the few who has done sufficient research on this matter to really convince himself that what he is doing is 100 per cent correct.

Therefore I thought it was rather unkind of the member for Wembley to make some of the remarks he made in connection with the case submitted by the Deputy Leader of the Opposition. He endeavoured to belittle that case without, in my opinion, submitting a strong argument against the points the Deputy Leader of the Opposition raised.

I find myself, as a member of this House, with the privilege of having a vote as to whether or not the public water supplies should be fluoridated. This is an extremely important matter and not one of us, whether we vote for or against it, knows the very same thing as the scientist who supports the fluoridation. If we have done the right thing. We can only consult our own consciences on the little knowledge we have at our disposal and decide what is, in our opinion, in the best interests of our constituents and of Western Australia. This, I believe, I am doing; but I do not say I am right.

In view of the fact that this is such an important matter, although I have the privilege—or perhaps it might not be a privilege—of voting on this issue, I certainly would not vote to deny the rest of the people of this State an opportunity of casting their vote on an issue of this nature. Therefore it is my intention to vote for the amendment of the Deputy Leader of the Opposition, advocating a referendum.

I would vote for that amendment fully conscious of the fact that I am not one generally to advocate referendums. Personally I believe that a Government is elected to govern and that it should go about the job of governing, and that probably only rare occasions would arise when a referendum was essential. I believe that this is one of those rare occasions.

Referendums are influenced a lot by the particular party which has the greatest amount of money to spend on the campaign. That is one reason I do not believe they are always accurate. Another is that if one argues against a particular thing and says it is harmful, and truly believes it is harmful, and then advocates a referendum, one must realise that should that referendum succeed and the majority of people vote for, in this case, fluoridation, then, of course, that does not overcome the damage, if damage is to result from fluoridation.
If a referendum is held and results in a vote against fluoridation, then the worries of those who are opposed to fluoridation are overcome; but assuming the referendum had the opposite result, then nothing is overcome. However, in this case, as a type of mass medication is involved—and a compulsory one—the people of this State should have the right to decide whether or not they want it; and I think that is only fair under the circumstances because the Government would otherwise be establishing a precedent in introducing this legislation, regardless of the arguments put forward to the contrary.

However, regardless of my earlier remarks, I am conscious of the hour of the morning. I believe that fluoridation would benefit the community, but I think it desirable, in a matter of this nature, that a referendum of the people should be allowed.

MR. RHATIGAN (Kimberley) (2.5 a.m.): Whilst I realise that it is 2.5 a.m., if the Government is determined to force this upon us, I make no apologies for delaying the House another few minutes. I, like many other members, would much prefer to be in bed at this early hour of the morning instead of speaking on a subject about which I know nothing. I can only be guided by those who profess to know all about fluoridation; but a conflict of opinion exists. Some experts are opposed to another group of experts, so who is right? I do not know and I do not think any other member here knows. I do not think the Minister who introduced the Bill knows.

This is a measure which should not be forced through the House at this early hour of the morning. The debate should be adjourned to allow further discussion. Let us take time over it. There is no urgency! I understand from questions asked of the Minister last week or the week before that even if this Bill passes, 18 months will elapse before it will take effect; so why the urgency? Why should this Bill be passed tonight? This Bill will affect the lives of many people.

It is all very well to quote expert opinions. The Minister told us that the legislation will benefit children up to the age of 12 years. However, after all is said and done we do not know enough about this matter. I listened very attentively to the Deputy Leader of the Opposition during his 24 hour speech, if I remember correctly. He has done a lot of research on this matter and surely his opinion should be considered as well as the opinion of the Minister, which the Minister insists on forcing down our throats. This is something that will affect the whole of Western Australia, not just the Government benches. I have been amazed from my experience in this House to realise how regimented are members opposite. In other words they are spineless. They have not the courage of their convictions to express their opinion. No, they are regimented.

As other members who have had any experience with natives will know, natives have the best teeth of any individuals. I have been told by a prominent dentist who has attended these natives in the north that this is because they do not eat food with sugar in it. Actually they do now, but they did not in the past. They chewed things like kangaroo pieces and goannas, and it was this exercise of their jaws which gave them the good teeth they have to this day. I am speaking of those natives who were children about 15 years ago. They did not eat stews and sweets and that type of thing. That is the answer.

There is a lot we do not know about the subject, but here the Government is forcing it down our necks at 2.10 in the morning. What is the urgency if it will not be put into effect for another 18 months if it is passed, as, indeed we know it will be, because the Government benches are regimented? We on this side are not regimented.

Mr. Court: Not much!

MR. RHATIGAN: Look here, until I heard some of the speeches I was inclined to support fluoridation! We are not regimented at all on this Bill, I can assure the Minister of that when he says, "Not much." Why is there such a hurry for this Bill to go through?

Mr. Craig: We want to go home to bed.

MR. RHATIGAN: Yes, so do I. However, cannot we postpone this Bill for another 12 months to allow some research?

Mr. Ross Hutchinson: The situation would not be any different.

MR. RHATIGAN: It would be no different because the Government has made up its mind. That is why the situation will not be any different. The situation was no different in 1930 and on that occasion the majority did not vote in favour of the Bill. That is why it is here again now and we are debating it in the early hours of the morning. All the Ministers have to work tomorrow and yet they are determined to keep us here debating this legislation. Is there any dire necessity for this legislation to go through immediately? According to replies to questions which were asked of the Minister, fluoridation will not come into effect for another 18 months.

The logical thing to do is to let the people decide what they want. Why push the fluoride down their throats if they do not want it? Let us not have this dictatorial attitude of the Government. I cannot be kicked out of this Chamber by saying what was said by the old chap from the gallery the other night. He said "Heil Hitler" and I am inclined to agree with him. I do not know him. I was told who
he was and I do not agree with his attitude, but I think he was inclined to be right.

The Government is trying to force something down the people's necks. As far as the north is concerned, there is a lot of fluoride in the bores and in the wells. How will that fluoride be regulated?

The answer to this problem is to let the people of Western Australia decide whether or not they want fluoride. Why should the health authorities or the Minister say that the people shall have fluoride whether they want it or not? That is not right in my humble opinion and I will vote against the measure.

MR. ROSS HUTCHINSON (Cottesloe—Minister for Works) [2.13 p.m.]: I have changed my mind on a number of occasions during the course of this debate as to what procedure I should adopt when replying. I have come to the conclusion that I should not spend a great deal of time replying as so much has been said in the presentation of the case for each side. Also, a great deal was said on a previous occasion, some three years ago, when representations were made for and against fluoridation. Most members in the House now appreciate perhaps even more than before, that there is an abundance of literature on the subject, for and against, and the responsibility of each member is to adjudge for himself as to where the quality and weight of evidence lies. I have made up my mind and the Government has made up its mind and has taken this action.

Mr. Hawke: When you say that, you mean the members of the Liberal Party?

Mr. ROSS HUTCHINSON: That is a fair question. I cannot speak for all the members of the Liberal Party but we hope that they will all support the Bill. If the Leader of the Opposition has made up his mind back three years he will recall that it was two members of the Government party who were responsible for defeating the Bill.

Mr. Hawke: That was in another place.

Mr. ROSS HUTCHINSON: That is perfectly true; it was in another place. Unfortunately, the legislation was defeated because of that. At that time, the Opposition voted as a party and I am very happy indeed that on this occasion it has been published that there is no strict adherence to party vote.

Personally, if I am not presuming, I would like to say that I appreciate the courage and the foresight of those members of the Labor Party who have indicated their approval of the legislation. I also offer some degree of sympathy to the member for Beeloo because I think he very genuinely—despite the fact that he said he was sitting on the fence—was concerned about the attitude of the Department of Health in France. That Department of Health is adopting a somewhat similar attitude to that of the member for Beeloo.

By and large, and speaking generally, I think the State appreciates that over the seven years of the reign of this Government we have faced our responsibilities with a good deal of courage. The case of fluoridation is a controversial subject and is one which could well have been left alone as being too thorny a problem to tackle. However, as in many of the problems we have tackled, this is felt not to be the way and there have been very many debates within our party room on various aspects. There have been close consultations with experts and close study of literature connected with the examination of this problem and that problem within the major problem. It appears, from the debate that has taken place over the last two days, that the members of the Government party are pretty solidly behind this proposition.

The prime purpose of the legislation, I hardly need to say, is to adjust the level of fluoride in our water supplies. There is already a quantity of fluoride in our water and this has been known for a long time. Perhaps it was not as well known as it is now that some bores carry a content of .8 parts fluoride per million parts of water, and the amount of fluoride which we hope to have placed in the water for the benefit of the people is one part of fluoride per million parts of water.

I do not want to stretch out any arguments, but it can be said that at the present time those children who get in their water in the summertime, say, .3 parts of fluoride, and who also have fluoride tablets, are getting more than the regulation dose. I think this can be accepted, and I would think that when fluoridation is in full swing—if this Bill becomes law—there would not be this large variation in the intake of fluoride by people who drink water from public water supplies.

So it is an adjustment of what has been termed a trace element—that is not a bad name—to a point where considerable benefits can be conferred upon the people.

Initially the benefits of fluoridation will be conferred on the children, but these benefits, most assuredly, will flow to adult life, because children eventually become adults. It is true that an adult with a large number of teeth in his head at the age of 45 or 50 must expect some dental decay, but there will be teeth in his head which he would not have been there if he had not been drinking fluoridated water.

In making a few brief points on the case for fluoridation, I am not going to use my own words, but the words of a member of the Privy Council. These were the words that were used by Lord
Upjohn who, on this occasion, was the chairman of the judicial committee when the legal right to add fluoride to a town's water was determined in the Privy Council. I will read only the relevant parts to the House. There were some quotations concerning New Zealand which are not pertinent in this instance, and then Lord Upjohn is reported as having said—

"... the legal right to add fluoride to a New Zealand town's water was determined in the Privy Council. There were some quotations concerning New Zealand which are not pertinent in this instance, and then Lord Upjohn is reported as having said—"

Mr. Evans: Is there any citation for the name of the case?

Mr. ROSS HUTCHINSON: The name of the case appears on the top of the pamphlet. It is an extract from a book entitled The Medical Officer. In other words, fluoridation of water supplies is efficient and safe; and it is not only an economical means to achieve the efficiency spoken of, but it is economical to the people on whom the benefits of fluoridation are conferred.

I just want to say that the debate was a notable one in many respects. Some little heat was engendered at times, and there was some drama perhaps and not a little humour, but the only part of the debate I did not like was the tendency of some speakers—perhaps one in particular—to play unnecessarily on the fears of the people. To my mind the pattern set by the anti-fluoridationists is deplorable. I am of the opinion that the benefits of fluoridation have been slow in coming in many parts of the world because of this, but I do not want to pursue that line of thought at this juncture.

Mr. May: Perhaps not, but it is perfectly true.

Mr. ROSS HUTCHINSON: The Deputy Leader of the Opposition mentioned cases of children in the Princess Margaret Hospital who were allergic to fluoride. I would certainly like the doubt that he has raised cleared up, no matter in what form it has been raised. In reply to the comments made by the Deputy Leader of the Opposition on this matter I have here a letter from the Medical Director of the Princess Margaret Hospital and Professor I. C. Lewis of the Department of Child Health and, among other things in this letter, it is stated—

There have been no children admitted with fluoride sensitivity to Princess Margaret Hospital. Three years ago, three parents approached the hospital claiming that their children were sensitive. Two refused to bring their children for testing, one claiming her two boys were "sensitive to everything." The one child who was brought to the hospital was said to be sensitive to fluoridated toothpaste but proved, after testing, to have no sensitivity to fluoride. In recent weeks the Dental Health Education Officer sent the hospital the name of a woman who claimed that her child was sensitive to fluoride tablets, but this woman has not replied to a letter asking would she like to have sensitivity tests carried out. We should therefore like to repeat that there are no children in Princess Margaret Hospital who are allergic to fluoride, and never have been.

I do not want to say much more about that incident except to quote the information that has been supplied by those two medical gentlemen. One may draw whatever conclusions one wishes, but it is remarkable that this happening occurred three years ago, and then was raised again only the other day when the legislation was before Parliament.

There is yet another matter which must be mentioned and that has to deal with Professor Hugo Theorell of Sweden. The Deputy Leader of the Opposition almost used this double Nobel Prize winner as a trump card in his case.

Mr. Tonkin: Don't you think he is an outstanding scientist?

Mr. ROSS HUTCHINSON: I do, indeed.

Mr. Tonkin: He is opposed to fluoridation.

Mr. ROSS HUTCHINSON: I think it would have been wiser for the Deputy Leader of the Opposition not to have repeated that.

Mr. Tonkin: No, it would not; the Deputy Leader of the Opposition knows what he is talking about.

Mr. ROSS HUTCHINSON: The honourable member also said that Sir Robert Menzies, in describing the change of heart that Professor Theorell had had, was
speak untruths, or words to that effect. Sir Robert Menzies was not speaking untruths, because it is perfectly true that Professor Theorell has changed his mind on this matter.

Mr. Tonkin: What is the proof?

Mr. ROSS HUTCHINSON: That is what I am trying to bring forward. There is a translation here from a Swedish paper.

Mr. Tonkin: Yes, I thought so! What paper, and what date?

Mr. ROSS HUTCHINSON: I am just trying to tell the honourable member. This is an extract from the *Journal of the Swedish Federation of Dental Surgeons* dated the 15th April, 1962, page 218. The heading is, "Professor Theorell supports the Norrköping Experiment." Let me briefly reintroduce the subject. In 1958 Professor Theorell did indicate he was not satisfied with the fact that the fluoridation of water supplies was safe. I have here a copy of the type script, but I also have it in another form, printed in the *British Dental Journal*, and it might be easier if I read it from here. This was published on the 21st August, 1962, and states—

Professor Theorell supports the Norrköping Experiment

The first number of *Tandvarnsnytt*, the organ of the Dental Service, for 1963, which has just appeared, contains an interview with Professor Hugo Theorell on the fluoridation experiment in Norrköping. In 1958 Professor Theorell opposed the Medical Board's proposal that the communites should be allowed to add fluoride to their drinking water.

In this journal he says—

I have just drawn up another report, with Professor Jan Waldenstrom and Professor U. S. von Euler, recommending that the Norrköping experiments be continued. On being asked if this meant a complete reversal of his previous opinion he replied—

and this is the interesting part—

No, if you read my 1958 report you will see that at that time I simply did not consider the time to be ripe for any general permission for the fluoridation of water supplies, and advised experiments along other lines. But now, since the Norrköping experiments have shown such good results as a 50 per cent. reduction in caries, I consider that it would be wrong to stop the experiments. Quite obviously they must go on.

I stated in my 1958 report that there was a risk involved in increasing the fluoride content of certain organs of the body and that as fluoride is an enzyme poison, the prolonged addition of fluoride to drinking water might have medical consequences. The Norrköping experiments, however, have not supported this theory. That is something we did not know four years ago. We know now that it is not dangerous.

Moreover, since it has not been made public in Norrköping in which part of the town the extra fluoride has been added to the water, there is no possibility of individuals letting their imagination run away with them. That was another point on which I expressed fears in my report.

 Altogether I would say that time has worked in favour of the continuation of the Norrköping experiments. I now await their final results with great interest.

Mr. Hawke: That is fair enough.

Mr. Tonkin: He still declared in 1963 that he was opposed to it.

Mr. ROSS HUTCHINSON: That is not true.

Mr. Tonkin: Is it not? I have it here.

Mr. Hawke: He is in favour of a continuation of the experiments.

Mr. ROSS HUTCHINSON: He says it is not dangerous. Surely I do not have to read it out again.

Mr. Hawke: Have the experiments been completed?

Mr. ROSS HUTCHINSON: They were completed up to that point of time. I tried to intimate as coolly and as logically as I could earlier that one of the reasons why the benefits of fluoridation are not conferred on various populations is because of the scare tactics used by the anti-fluoridationists. I say that much more coolly and logically than the anti-fluoridationists argue; much more coolly than the Deputy Leader of the Opposition, who spoke about people being killed by this method.

Mr. Tonkin: I was not aware that I introduced any heat into what I said.

Mr. ROSS HUTCHINSON: I would like to quote from another document from Professor Hugo Theorell. It is dated the 20th July, 1952, and is in reply to a letter from Professor Noel Martin, University of Sydney, Faculty of Dentistry, Dental Hospital, Chalmers Street, Sydney. It reads as follows:—

*Re your letter of July 4, 1952. The number of letters with questions on the fluoridation problem arriving here every day is too large to allow me to answer them individually. I must therefore confine myself to the following standardised statement. I have almost done the same thing in my reply to similar letters. The letter continues—*

As fluorine is an enzyme poison and as in 1958 too little was known of human reactions to it I found it safer
at that time to advise against a general fluoridation of tap water. Since then we have gained more practical knowledge from the experiments in Norrköping and as these have given no negative results, but on the other hand the caries frequency has gone down by 50 per cent. among the school children getting fluoridated water, I think it well worth while to continue the Norrköping experiment for another period of time.

Yours sincerely,
Hugo Theorell.

Mr. Tonkin: I would not object to that, if an experiment were in progress. It is most desirable in order that finality might be obtained.

Mr. ROSS HUTCHINSON: I can see that both the honourable gentlemen opposite would like to read their own interpretation into this and, of course, they are entitled to do so.

Mr. Tonkin: I do not think you are entitled to read into it that he is now in favour of fluoridation.

Mr. ROSS HUTCHINSON: There are so many things he says about it not being dangerous; that it should continue; and that it is giving benefit to people.

Mr. Tonkin: It is strange that in 1963 he said he was opposed to fluoridation.

Mr. ROSS HUTCHINSON: The very least I claim after having given the House the benefit of this is that it is substantially different from the story conveyed by the Deputy Leader of the Opposition when he spoke during the second reading debate.

Mr. Tonkin: I do not agree.

Mr. ROSS HUTCHINSON: In conclusion I would like to say that we again have an opportunity to implement a health reform of quite considerable magnitude. Whether it is in the right priority or not, as was suggested by some member, it is a health reform of great quality and is a very worthwhile step to take. On this occasion I hope we do not allow the Bill to lapse or to be lost.

In respect of our being accused of giving poison to people, I might say—as has been said by other members on this side of the House—that we could well accuse those who fanatically oppose this health reform of being people who are denying good dental health to the people of our State.

Question put and passed.

Bill read a second time.

In Committee

The Chairman of Committees (Mr. W. A. Manning) in the Chair; Mr. Ross Hutchinson (Minister for Works) in charge of the Bill.

Clause 1 put and passed.

Progress

Progress reported and leave given to sit again, on motion by Mr. I. W. Manning.

BILLS (3): RECEIPT AND FIRST READING

1. Optical Dispensers Bill.
2. Optometrists Act Amendment Bill.
3. Medical Act Amendment Bill.

Bills received from the Council; and, on motions by Mr. Ross Hutchinson (Minister for Works), read a first time.

EDUCATION ACT AMENDMENT BILL

Returned

Bill returned from the Council without amendment.

House adjourned at 2.44 a.m. (Thursday)

Legislative Council

Thursday, the 13th October, 1966

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The PRESIDENT (The Hon. L. C. Diver) took the Chair at 2.30 p.m., and read prayers.

QUESTIONS (2): ON NOTICE

OVERSEAS AND INTERSTATE TRADE

Particulars

1. The Hon. H. K. WATSON asked the Minister for Mines:

(a) the amount of Western Australia's excess of exports over imports; and
(b) the net collective result of all the Australian States and Territories, other than Western Australia?

2. In respect of Western Australia's interstate trade during the year ended the 30th June, 1966, what were—

(a) the total amount of imports; and
(b) the total amount of exports?