



FDI DRAFT POLICY STATEMENT (revision)

Promoting Oral Health Through Fluoride

**Submitted for adoption by the FDI General Assembly:
September 2017, Madrid, Spain**

**Original version “Promoting Dental Health through Fluoride” adopted by the FDI
General Assembly**

November 2000 in Paris, France

Original Version reconfirmed in September 2008 in Stockholm, Sweden

1

2 CONTEXT

3 Despite the efforts to date, dental caries, which affects children, adults including the
4 elderly, continues to be the most prevalent chronic disease worldwide and constitutes a
5 major global public health challenge¹. It can hinder an individual’s ability to speak, smile,
6 smell, taste, touch, chew, swallow and stop a person to convey a range of emotions
7 through facial expressions with confidence and without pain or discomfort². Dental caries
8 can also potentiate the risk of some systemic diseases. Maintaining good oral health is
9 therefore, critical to securing overall health and well-being.²

10

11 There are many social determinants of health that contribute to oral health inequities,
12 causing increased prevalence and severity of dental caries among disadvantaged
13 populations³. Dental caries can be prevented, managed or treated in its initial non-
14 cavitated stage, through the adoption of evidence-based measures such as: avoiding
15 unhealthy diets like sugary foods and drinks, particularly those rich in free sugar content,
16 and implementing good oral hygiene habits, which include regular removal of oral biofilm
17 from tooth surfaces and appropriate use of fluoride toothpaste.

18

19 Fluoride ions in low concentrations at the tooth surfaces are essential to avoid, slow down
20 or stop demineralization and to enhance remineralization of tooth tissue. ^{4,5}

21

22 SCOPE

23 There are several cost-effective options to make fluoride available to populations, which
24 can and should be applied according to country’s regional realities and legislation.

25

26 Fluoride at an optimal preventive level may be present naturally in drinking water or can
27 be added to water supplies through population-based public health interventions. Some
28 public water supplies and wells have higher than recommended concentrations of
29 naturally occurring fluoride, where defluoridation or alternative drinking water should be
30 recommended. Water fluoridation is the most efficient, cost-effective, safe and equitable
31 way in preventing, managing and treating carious lesions at a community level. Fluorides
32 can, alternatively, be added to salt or milk, in the appropriate concentration and dose.⁴

33

34 At an individual level, the use of fluoride toothpaste, fluoride mouthwashes, fluoride gels
35 and/or fluoride varnishes have proven to be effective in managing, preventing and treating
36 the early stages of dental caries, when used at recommended ages and levels, taking in
37 account each country guidelines. ^{4,5,6}

38

39 **DEFINITIONS**

40 **Fluoride role in Oral Health** - The preventive efficacy, cost-effectiveness and safety of
41 fluoride-containing products in reducing the prevalence and severity of dental caries and
42 delaying its onset has been proven³. It has been clinically shown that fluoride can also
43 play a therapeutic role in the treatment of non-cavitated enamel carious lesions as well as
44 in cavitated caries such as root caries lesions. This newly re-discovered characteristic of
45 fluorides, always through topical action, reinforces the importance of its use in synergy
46 with removal of plaque, in the fight against dental caries.

47

48 **PRINCIPLES**

49 FDI urges all countries to recognize that universal access to appropriate and judicious use
50 of fluoride for maintaining oral health as part of the basic human right to health.

51

52 **POLICY**

53 FDI advocates the use of fluoride at the right concentration and dose, for management
54 of dental caries, in prevention and/or treatment of early lesions for children, adults
55 including the elderly and calls for the implementation of policies that:

56

- 57 • Ensure population-wide public health measures that allow universal access to
58 affordable fluoride in effective concentrations to prevent dental caries and
59 promote oral health.
- 60 • Use the most appropriate means to disseminate information on the benefits of
61 fluoride as a preventive agent in health promotion strategies and programs.
- 62 • Disseminate information about the importance of fluoride in the treatment of the
63 non-cavitated carious lesions.

64

- 65 • Encourage governments to reduce or remove taxation and tariffs on fluoride
66 products for oral health.

67

- 68 • Improve capacities of national food and drug administrations for better monitoring
69 quality standards of toothpaste in line with ISO 11609:2017 and oral rinses in line
70 with ISO 16408:2015.

71

72 **KEYWORDS**

73 Dental caries, Oral public health, Oral health, Fluoride

74

75 **DISCLAIMER**

76 The information in this Policy Statement was based on the best scientific evidence
77 available at the time. It may be interpreted to reflect prevailing cultural sensitivities and
78 socio-economic constraints.

79

80 **REFERENCES**

- 81 1. FDI World Dental Federation. The Challenge of Oral Disease – A call for global
82 action. The Oral Health Atlas. 2nd ed. Geneva: FDI, 2015.
- 83 2. FDI World Dental Federation, 2016; FDI’s new definition of oral health.
84 ([http://www.fdiworldental.org/oral-health/vision-2020/fdis-definition-of-oral-](http://www.fdiworldental.org/oral-health/vision-2020/fdis-definition-of-oral-health.aspx)
85 [health.aspx](http://www.fdiworldental.org/oral-health/vision-2020/fdis-definition-of-oral-health.aspx), accessed 20 January 2017).
- 86 3. World Health Organization, 2012 ; What are social determinants of health?
87 (http://www.who.int/social_determinants/sdh_definition/en/, accessed 20 January
88 2017).
- 89 4. O’Mullane D et al, 2016; Fluoride and Oral Health, Community Dental Health (2016)
90 33, 69–99
- 91 5. Lenzi T, Are topical fluorides effective for treating incipient carious lesions? JADA
92 2016;147(2):84-91.
- 93 6. S. Sakuma,S et al, 2004; Fluoride mouth rinsing proficiency of Japanese preschool-
94 aged children, International Dental Journal; 54(3), 126-130.
- 95 7. R.J. Wierichs, et al, 2015; Systematic review on noninvasive treatment of root caries
96 lesions JDent Res. 94(2):261-271.