

Hannah Will
Buxton/ME
LD 1570

Testimony of Dr. Nicholas Roy, D.M.D., M.A.G.D.
Saco River Dentistry | Buxton, Maine
April 21, 2025

In Strong Opposition to LD1570, Legislation Proposing the Removal of Public Water Fluoridation in Maine

To the Honorable Members of the Committee of Health and Human Services,
My name is Dr. Nicholas Roy. I am a practicing general dentist in Buxton, Maine, where I serve not only as a clinician but as a mentor and leader for a network of practices and public health initiatives. I submit this testimony in strong opposition to the proposed legislation to remove public water fluoridation in our state.

Let me be clear: from the front lines of dental care, this proposal carries enormous potential to harm. Removing fluoride from public water supplies will not just result in more cavities—it will drive up preventable suffering, healthcare costs, and disparities in access to care across our most vulnerable communities.

The scientific consensus on community water fluoridation is overwhelming. The Centers for Disease Control and Prevention named it one of the Ten Greatest Public Health Achievements of the 20th Century (CDC, 1999). A 2018 meta-analysis published in Community Dentistry and Oral Epidemiology confirmed that fluoridation reduces dental caries by 35% in baby teeth and 26% in permanent teeth on average (Iheozor-Ejiofor et al.). Furthermore, a 2021 review in the Journal of Dental Research reaffirmed that water fluoridation is both safe and effective, with no credible evidence linking optimally fluoridated water to systemic harm when kept within recommended levels.

More relevantly, after Calgary, Alberta, discontinued fluoridation in 2011, the rate of tooth decay in children rose sharply—a 47% increase in cavities among second graders in just a few years (Public Health, 2016). That's not a hypothetical. That's what happens when policy ignores science.

From our vantage point as healthcare providers, this legislation would reverse decades of progress and expose entire populations, particularly children, the elderly, and lower-income families, to unnecessary disease. Until rigorous science demonstrates a compelling and substantiated risk that outweighs the decades-long benefit, we have no ethical or medical justification to remove fluoride from public water.

This is not a political issue—it's a public health issue. And the science is not ambiguous. We must not allow misinformation, fear, or ideology to compromise community well-being.

I urge you: stand with the evidence, stand with our patients, and reject this bill.

Respectfully submitted,

Dr. Nicholas Roy, D.M.D., M.A.G.D.

Hannah Will, RDH

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