

Fluoride / Organofluorine Poisoning

By Jason Uttley, 2015

Stages of Long-Term Exposure

| | Stage 1 | Stage 2 | Stage 3 | Stage 4 |
|--|---|---|--|---|
| MOST COMMON DIAGNOSIS | Patients often treated like hypochondriacs by physicians due to slow progressive onset of symptoms, unless tests reveal thyroid impairment. | | | |
| | Thyroid Dysfunction, or Stress / Anxiety Disorder | Chronic Fatigue Immune Deficiency Syndrome or Myalgic Encephalomyelitis | Fibromyalgia | Fibromyalgia, or Spinal Stenosis |
| | <i>* See list of symptoms for other common diagnoses as physicians typically diagnose & treat symptoms one at a time, as they arise. Susceptability depends on source & duration of exposure, as well as overall health.</i> | | | |
| PRIMARY SOURCE OF EXPOSURE | Most crippling stages of poisoning are linked to certain fluoride-based prescription drugs, which may form dangerous organofluorines in the body. | | | |
| i. CHRONIC EXPOSURE: FLUORIDE ION | Poisoning typically occurs slowly, over the course of many years. Symptoms emerge as neuroendocrine dysfunction triggers loss of cellular energy production. | | | |
| | fluoridated tap water (most beverages) green or black tea (unusual absorption from soil) | fluoridated tap water (most beverages) green or black tea (unusual absorption from soil) | | |
| ii. SUB-ACUTE EXPOSURE: ORGANOFLUORINES | Poisoning can occur in weeks, although symptoms take considerable time to peak. Impossible to determine severity of poisoning until 3-6 years after exposure. | | | |
| | prescription drugs (i.e. Cipro, 2-4 wks) | prescription drugs (i.e. Cipro, 4-6 wks) | prescription drugs (i.e. Cipro, 6-10 wks) | prescription drugs (i.e. Cipro, 10+ wks) |
| | <i>* Other significant sources include: pesticides (i.e. sulfuryl fluoride), occupational exposure, toothpaste (if swallowed), fluoride treatments, salt (some countries, not U.S.), perfluorochemicals, certain vitamins (unlabeled).</i> | | | |
| VARIABLE SYMPTOMS | Severity of symptoms not proportional to degree of poisoning. However, quantity of symptoms tends to increase with each stage. | | | |
| Chronic Fatigue (not relieved by sleep or rest) Depression Dry Mouth/Skin/Hair Feeling of Weakness / Lethargy Gastrointestinal Disturbances (IBS) Hair Loss Headaches Immune System Dysfunction Multiple Chemical Sensitivities (MCS) Muscle Spasms / Involuntary Twitching (RLS) Muscle Weakness / Muscle Fatigue Sleep Disturbances Temperature Sensitivities (cold hands & feet) Tendency of Lose Balance / Dizziness / Nausea Thyroid Dysfunction Urinary Frequency / Tract Irritation Visual Disturbances (floaters / eye pain) Weight Gain | < 10 symptoms (typical) | > 10 symptoms (typical) | > 15-20 symptoms (typical) | > 20 symptoms (typical) |
| PROGRESSIVE SYMPTOMS | Severity of symptoms worsen proportionally to degree of poisoning. Particularly important in determining <i>current</i> stage of condition. | | | |
| Cognitive Impairment Joint Pain (arthritis-like) Muscle Pain & Stiffness / Tendon Pain Neuroendocrine / HPA-Axis Dysfunction Numbness (Peripheral Neuropathy) Ringing in the Ears (Tinnitus) Visual Disturbances (light, focus & contrast issues) Kidney Pain (Rhabdomyolysis) Bone Changes (calcification, esp. spinal) | possible mild concentration/memory problems possible joint pain (isolated) possible mild to moderate muscle pain (isolated) mild neuroendocrine impairment possible light sensitivity | mild to severe concentration/memory problems mild to moderate joint pain (isolated) mild to moderate muscle pain (isolated) moderate neuroendocrine impairment possible tingling/numbness (esp. in limbs) possible light sensitivity | moderate to crippling impairment; brain fog mild to severe joint pain (isolated or widespread) moderate to crippling muscle pain (widespread) severe neuroendocrine impairment tingling/numbness (esp. in limbs) possible ringing in the ears light sensitivity / possible 'halo effect' | crippling impairment; brain fog; dementia moderate to crippling joint pain (widespread) severe to crippling muscle pain (widespread) crippling neuroendocrine impairment tingling/numbness (esp. in limbs, face, spine) moderate to severe ringing in the ears severe 'halo effect'; focus/contrast issues; other pain/swelling sensation spinal stenosis/cord compression |
| | <i>* Not all symptoms listed. Other symptoms include, but are not limited to: acne, anxiety, infertility, erectile dysfunction, tendon rupture, ligament tear, insomnia, joint "popping", joint deterioration, bone fractures.</i> | | | |
| KNOWN TREATMENTS | Treatment is the same regardless of source of exposure as organofluorine poisoning effectively becomes extreme intolerance to fluoride. | | | |
| i. LONG-TERM | Minimizing fluoride intake is the most effective long-term treatment. All other treatments are considered secondary. | | | |
| Minimize Dietary Fluoride Intake | Requires understanding major sources of daily fluoride exposure & modifying diet accordingly. Tolerance to fluoridated water will approach <u>zero</u> in stages 2-4, as sensitivity is extreme. Most symptoms abate within weeks, provided exposure to fluoride remains <u>consistently</u> low. Six months restricted diet required to suppress most symptoms. | | | |
| Antioxidant Supplementation | When taken in sufficient quantities certain antioxidants (i.e. CoQ10, ascorbic acid) may improve symptoms by reducing free radical formation and oxidative stress. | | | |
| Iodine Supplementation | Like thyroid medications, iodine may help minimize certain symptoms if taken regularly, although it won't reverse poisoning. Fluoride adheres to bone & areas of the brain and is not easily removed. | | | |
| Guaifenesin | Difficult treatment protocol popularized by Dr. Paul St. Amand for the treatment of Fibromyalgia. Minimizing fluoride intake far more effective and easier to maintain. | | | |
| ii. SHORT-TERM | Contributes to misdiagnoses by physicians unfamiliar with ability of drug to temporarily offset effects of select neurotoxins. See treatment for fluorinated Sarin gas. | | | |
| Benzodiazapines | Large daily doses can minimize entire array of symptoms up to 8-12 months. Symptoms return and continue to progress after that, or whenever even a single dose is missed. | | | |

** Most water filters do NOT remove fluoride. Reverse osmosis, distillation and ionic filtration are the best options.*