

Fluoride Program To Save Teeth Of Children Is Sweeping Country

HEALTHIER CHILDREN. Sixty-five percent less dental decay. Lower dental bills. These are results that can be obtained by adding fluoride to the community's water supply.

Most Widespread of All Diseases

Dental decay, perhaps the most widespread of all diseases. Every year it takes an enormous toll in terms of decayed teeth, toothaches, lost teeth, and poor oral health.

The Nation's children receive only about a third of the fillings

they require. Two-thirds of their cavities are neglected.

Sixteen-year olds have an average of nine decayed teeth and have lost several teeth.

Without adequate preventive or control measures, it is probable that this generation of children will have lost half their teeth before the age of 40.

The fluoridation of water supplies is a powerful aid in improving this situation. It can be done at a relatively little cost, is safe

and effective when the proper procedures are followed, can be accomplished within the framework of the community's administrative organization, and in addition to improving the health of the community offers substantial economic savings in terms of lower bills for dental services.

More Than 60 Cities Add Fluoride

To reduce decay and improve the health of their children, many communities are adding fluoride to their water supplies.

National organizations of professional health workers, impressed by the findings of decades of research on fluoride and dental decay, have endorsed the adding of fluoride to community water supplies.

Effective While Teeth are Forming

To gain the full benefit of fluoridated water, children must drink it during the period their teeth are forming, or from birth to about age 8. Children who are older at the time fluoridation is started receive some protection against dental decay, but not as much as the younger children. The protection obtained by children continues throughout life.

During the first several years of fluoridation, many children may be brought additional protection by applying 2 percent solution of sodium fluoride to their teeth at the proper ages. Your State health department can assist in establishing a sodium fluoride application program to supplement the adding of fluoride to the community's water supply.

As neither fluoridation nor applications of sodium fluoride to the surfaces of the teeth are 100 percent effective in preventing tooth decay, children should continue to see their dentists at periodic intervals for the early detection and treatment of teeth which become carious. In addition they should brush their teeth regularly, and eat less sweets.

Kinds of Fluoride Compounds Added to Water Supplies

Fluorides are compounds formed by fluorine combining with other elements. These compounds include sodium fluoride, calcium fluoride, potassium fluoride, magnesium fluoride, etc. Other combinations form silicofluorides.

SODIUM FLUORIDE is being used in many water fluoridation projects because it is available, is convenient to use, dissolves easily, and has been the subject of extensive studies on toxicity and physiological effects.

SODIUM SILICOFLUORIDE (sodium silicofluoride) is one of the most economical compounds. It provides available fluoride at from one-third to one-half the cost of fluoride obtained from sodium fluoride.



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HYDROFLUOSILICIC ACID, while more costly than sodium silicofluoride, can be fed directly into water supplies without considering solubility and with the least handling.

Amount of Fluoride Required Varies

The amount of the fluoride compound required will depend upon the quantity of water to be treated, the fluoride compound used, the present fluoride content of the water, and the desired fluoride concentration.

Normally, 1 part of fluoride per million parts of water is the concentration maintained in fluoridated water supplies. However, this may be varied on a seasonal and area basis. Your State health department should be consulted on the permissible concentration.

In general, a town of 10,000 persons without any fluoride in its water and using 1,000,000 gallons a day needs to add only 20 pounds of sodium fluoride daily. That much sodium fluoride will maintain the concentration of 1 part of fluoride per million parts of water and would cost about \$2.15.

If sodium silicofluoride is used instead of sodium fluoride, 14 pounds should be added to each million gallons of water to maintain a concentration of 1 part of fluoride per million parts of water and would cost about 84 cents.

A very small amount of the fluoride compound is needed by each child to effect a reduction in dental decay of some 65 percent. If the child drinks an average of a quart of water a day from birth to 7½ years of age, he would consume, 1 tablespoonful of fluoride for the entire period, or less than a third of a teaspoonful annually. Consumption from birth to age 60 is about 8 tablespoons of sod-

ium fluoride, or 6 of sodium silicofluoride.

Little Water Used for Drinking

The people of a community drink only a very small fraction of the water distributed. The rest is used for industrial, sanitary, and other purposes. Despite this loss of most of the fluoride, in most communities the annual cost per person for fluoridating water supplies is between 5 and 14 cents, depending largely upon the kind of fluoride compound used, the per capita water consumption, and transportation costs.

It has been suggested that fluoride compounds be added to milk and other foods, that food be grown on soil rich in fluoride, that cows be fed fluoride enriched feeds, and that drinking water be fluoridated in the home. In the light of present knowledge, such schemes are impractical when compared with the simplicity and low cost of fluoridating the public water supply.

Solution Feeders Used in Small Towns

The mechanical feeds used in adding fluoride to water supplies have generally been the same type of machines used for feeding lime and other chemicals in water treatment and industrial plants. They have been used for many years, do the job accurately, and are easily regulated to control the amount of fluoride added to a given quantity of water. Such feeders are of two general types: solution feeders and dry feeders.

Solution feeders are essentially small, accurate pumps that deliver a measured quantity of preparing solution during a specified time. The concentration of the solution and the controls on the feeder can be adjusted to meet the needs of a particular community.

Where sodium fluoride is used, the strength of the solution fed into the water supply is usually 3 to 3.5 percent, or a stronger, saturated solution can be made with a recently developed saturator. A much weaker solution can be made for use in very small communities.

Solution feeders can be used for feeding sodium fluoride and sodium silicofluoride in communities of up to about 20,000 popula-

tion, or in communities requiring as much as 2,000,000 gallons of water daily.

Hydrofluosilicic acid can be fed by solution feeders in towns of any size, from the smallest community to the largest city.

The cost of solution feeders varies between \$325 and \$1,500 depending on capacities, installation charges, and auxiliary equipment. They may be obtained from a variety of sources.

Returns From 5 Cents a Year

The total daily cost of adding sodium fluoride to the water supply of an average town of 10,000 using 1,000,000 gallons of water a day is about \$2.25. If sodium silicofluoride is used, the total daily cost is about 75 cents. Sodium fluoride costs about 11 cents a year per person; silicofluoride, about 5 cents. Amortized over a 20-year period, the annual cost of equipment for feeding fluoride into the water supply is almost negligible.

For an annual investment per person of about the price of a candy bar, the community can bring greatly improved dental health to its younger children. As fluoridation is continued, more and more children will be protected, until eventually all who have drunk the water from birth will be benefited.

Measured in terms of improved health, the benefits are great—two-thirds less tooth decay; better, more attractive teeth; and a reduction in illnesses due to maladies caused by dental abscesses and infections.

In addition, there are economic savings. With the reduction in dental decay, the bills for restoring decayed teeth with fillings will be reduced by two-thirds. There will be fewer extractions and, as the children grow older, the need for replacement will be reduced.

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