# PSGR

### New Zealand Charitable Trust

## 2023 UPDATE

For over 20 years the Physicians and Scientists for Global Responsibility New Zealand Charitable Trust (PSGR) has produced reports and submitted to government Bills and Inquiries.

All PSGR's submissions are available to the public on our website PSGR.org.nz. You can find us on <u>LinkedIn</u>. To search for us on Twitter, Youtube, Substack or & Instagram just use our handle **@PSGRNZ** (you won't find us if you forget to put the 'NZ' in). This Update aims to inform members and colleagues – and act as a go-to summary of our recent work.

#### **SUBMISSIONS**

We've made a couple of major submissions since we last sent out our newsletter. Our summaries of submissions can be read from page 3 onwards.

#### MEMBERSHIP

Please – without your support and membership PSGR cannot do this work. We've kept our fees deliberately low because your membership is important to us.

Membership information: **HERE**. Email: info@psgr.org.nz KiwiBank Tauranga 38-9001-0432703-00 Charity registration no. CC29935

# PSGR

For 20 years PSGR New Zealand have provided scientific & medical information & analysis in the service of the public's right to be independently informed on issues relating to human & environmental health.



#### WHITE PAPER: PROPAGANDA (2023)

PSGR 2023 in-depth discussion paper: When does science become propaganda? What does this suggest for democracy. ISBN 978-0-473-68632-1

This paper sheds light on a stewardship problem in modern societies where technologies and their emissions are everywhere, in air, water, soil -all the way to the digital space but there is no local monitoring or scientific research to triangulate the claims of the industry-paid scientists.

The information that supports the release onto the market and into the environment of technologies and their emissions is broadly controlled by the same industries that seek market access and re-authorisation of these products. There can be no assurance of safety if local scientists do not have freedom and resources to monitor and assess how and why these technologies might cause harm over time. Please read and share!

#### **REVIEW: BIOTECHNOLOGY IN NZ (2023)**

With National planning to 'loosen' GMO laws we thought it was time for a <u>review of where New Zealand</u> <u>stands currently on biotechnology and gene editing</u>.

The Productivity Commissioners enquiry showed us how few producers are focussed on biotech. The greatest interest appears to come from industry partners and Crown Research Institutes who own related patents.

New forms of biotech could include modified organisms in pesticides; releases of modified organisms into the environment to promote infertility in pest populations (vertebrate/invertebrate); modified ingredients in waste streams from industrial-grade edible protein manufacturers; and as ingredients to clean up chemical spills. As our review underscores, New Zealand has a poor record of monitoring research as well as GMOs exported as farm inputs. The removal of the bioethics panel suggests a reluctance to transparently discuss moral and ethical issues, including what a precautionary approach might involve.

We consider that recent media have inadequately discussed the biosecurity risk presented by scalable GMO technology. New Zealand has a low tolerance for unwanted and invasive species. Wilding or volunteer GMO species are a massive problem in north and south America. It is not easy to estimate how highly scalable GMO technologies could themselves become a biosecurity risk for future generations.

#### TRUSTEES NEWS

Congratulations Dr Mike Godfrey on the publication of his latest paper:

Godfrey, M. and Godfrey, P. (2023) Breast Thermography: A 20-Year Retrospective Review of Infra-Red Breast Thermal Imaging in New Zealand and Its Potential Role in Breast Health Management. Advances in Breast Cancer Research, 12, 129-141. https://doi.org/10.4236/abcr.2023.124010



#### MOVING FORWARD - 2024 FOCUS

3 primary projects that we will focus on in the coming year:

- 1. New Zealand expert communities & the safety of electromagnetic radiation and 5G technologies.
- 2. New Zealand expert communities & children's mental & physiological health & nutrition.
- 3. Resourcing for independently-produced policyrelevant science in New Zealand.

Project [3] concerns an information – and intelligence dilemma. For policy and law to reflect the public interest, New Zealand requires public-interest scientists who have the research scope and the relevant funding to research policy-relevant areas where scientific information drives policy, even if these issues are politically controversial.

Society requires autonomous scientific cohorts with expertise in a given policy area, who do not have financial conflicts of interest in an outcome.

When we lack scientists and researchers at 'arm's length', elected members and policy-developers risk being under-, mis-, or mal-informed. The information may be tainted or biased and fail to verify whether the scientific information that drives that policy is public interest.

These projects will be conducted in parallel with our ongoing advocacy work.

Our Objectives include an obligation to promote scientific research and analysis of the risks of genetically engineered/modified organism risks, and to educate the public on relevant matters of science and medicine. We aim to encourage scientists and physicians to engage in public debate on issues of science, medicine and technology, particularly those involving genetics.

In recent decades the evidence that genetic and/or metabolic and/or mitochondrial health is fundamentally associated with environmental and dietary exposures. These exposures whether short and acute, or long term and chronic, act as stressors – or if exposures are beneficial, they can be protective in times of stress.

Scientific resourcing and research to monitor, research and understand the interacting drivers of environmental and human health risk - is essential if New Zealand society are to steward technology and pollution in the public interest.

#### MOVING FORWARD - SUBSTACK



Find @PSGRNZ on Substack.com -We look forward to publishing science and policy-based perspectives from our members & colleagues.



Join PSGR today.

You don't have to be a scientist or doctor to join as an associate member.

info@psgr.org.nz

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#### **INTERVIEWS & ADVOCACY**

#### **PSGR INTERVIEWS**

We've been conducting interviews with scientists and doctors who stand in an important space – they are advocating for game changing approaches to how we *do* science, how we treat illness and how we *protect* human & environmental health. These interviews seek to draw attention to complex topic areas that are narrowly served by conventional science funding, research & medical approaches.

To watch the interviews either click on the image to go to the video, or find them via PSGR or go to our YouTube channel - @PSGRNZ.

**Professor Jack Heineman** on the <u>potential scalability</u> <u>of new technologies.</u> "Where harm can accumulate at scale transition, that's precisely where regulation is a solution to mitigate risks."

#### Professor Jack Heinemann

Professor of Molecular Biology and Genetics School of Biological Sciences. University of Canterbury.

Director, Centre for Integrated Research in Biosafety (INBI) New Zealand

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**Professor Philippe Grandjean** <u>discussing his latest</u> <u>paper</u> which proposes the lowest level of known neurotoxic risk from fluoride exposure. 'That's what I think the fluoride decision is. It's outdated. Now we have fluoride in toothpaste'.



#### Due for early release in 2024:

Fascinating interviews on cancer with Dr Anna Goodwin. Discussions traverse the aetiology of cancer, cancer treatment, and how we *stop cancer growing*.

#### FLUORIDE - COGNITIVE & IQ RISK?

PSGR are concerned that the potential cognitive and IQ risk from exposure to fluoridated drinking water has not been sufficiently *impartially assessed* by New Zealand government agencies. We have worked to highlight to scientists, doctors and the general public that there are too many 'blind spots' and that benefit (of a potential marginal alteration in caries outcome) may not outweigh risk (in early childhood, to cognition and IQ).

Fluoridation is a limit on the right in s 11 of the New Zealand Bill of Rights Act 1990 (BORA) to refuse medical treatment. In recent <u>High Court case</u>, the Director-General of Health was found to have failed consider whether the directions were a reasonable limit on the right to refuse medical treatment.

Many councils had been <u>directed by the Director-</u> <u>General of Health</u> to fluoridate their water by a <u>nominated date</u>.

The legislation that permits this is the Health (Fluoridation of Drinking Water Amendment Bill). However, in both the 2016/17 Select committee report, and a later 2021 Health Committee report, all public concerns about the safety of the fluoridation of drinking water were dismissed as they did not speak directly to the bill content.

For 50+ years, 50% of the population has been exposed to fluoridated water, and consequently, local authorities have released fluoridated council water into the environment. Yet the New Zealand Environmental Protection Authority has never monitored fluoride/ hydrofluorosilicic acid (HFA) emissions to understand environmentally relevant levels, nor conducted a risk assessment to identify the changing science on human and/or environmental health risk.

HFA is not a pharmaceutical grade chemical, but a highly corrosive compound. What occurs when emissions increase when community water is dosed with hydrofluorosilicic acid (HFA)? We don't know!

However, with no formal (and impartial) regulatory process, it appears that all claims that the benefits outweigh the risks are flimsy. The primary 'scientific' source arises from claims by the Office of Prime Minister & Cabinet (OPMCSA). However, no methodological review was undertaken in 2021 and all peer review committees were highly biased towards the safety of fluoridated water. The OPMCSA downplayed the assertions of scientists in the globally authoritative <u>US National Toxicology</u> <u>Program (NTP) Assessment for Developmental</u> <u>Neurotoxicity</u>.

Where the NTP stated more evidence was required to confirm safety, the OPMCSA stated there was 'no convincing evidence' of risk. The OPMCSA dismissed an earlier 2019 draft and then failed to remain updated on the NTP draft and information release process and adequately inform policy-makers and the public on the uncertainty concerning risk, that the NTP toxicologists were highlighting.

We believe the NTP is the more authoritative institution and should not be so lightly dismissed. We note that the OPMCSA appeared to lack a quorum of experts on this matter.

Children have higher levels of fluoride in their drinking water, but this has not been considered by the OPMCSA, nor policy, nor in legislative processes.

The <u>Water Services Act 2021</u> states that 'safe' drinking water can only be established when other causes are considered together with the consumption or use of drinking water.



#### FLUORIDE: PSGR PRESENTATIONS

September 28, 2023: Dr Damian Wojcik presented to the Whangarei District Council. <u>Video with</u> references available here.

October 27, 2023: Jodie Bruning (MA Sociology) presented to the Bay of Plenty Regional Council on absence of environmental monitoring & risk assessment (28 mins). <u>Video with PowerPoint slides</u> available here (0-28 mins). <u>Transcript available</u> <u>here.</u>

November 6, 2023: Jodie Bruning (MA Sociology) presented to the Tauranga City Commissioners and management. <u>YouTube video (5.30-13.00)</u>. Warning: poor sound quality. Link: <u>Reference</u> <u>paper (PDF) handed to staff and</u> <u>commissioners</u> and tabled by TCC.

The text presented to Tauranga City Commissioners was re-presented with references in a <u>YouTube video (14 minutes)</u>. This has been sent in an email to elected members in all councils <u>affected by the Director-General's</u> <u>order</u> to fluoridate water.

Following the Tauranga presentation Jodie Bruning agreed to an interview on Reality Check Radio to discuss the topic presented to Tauranga City Commissioners: <u>Uncertainty about pending</u> <u>challenges to the lawfulness of Ministry of Health</u> <u>fluoride directives to TLAs.</u>

#### FLUORIDE: POLICY SUGGESTIONS!

**Educate:** Ongoing education programs for x2 daily brushing & flossing at kindergarten, primary & secondary level.

Ensure that education includes information emphasising association with ultraprocessed foods & sugar-sweetened beverages with poor dental and oral health outcomes. Increase funding for cooking and home-economics education. Make it compulsory from years 7-9. Reduce focus on baking, and increase focus on preparing savoury, meat and vegetable based meals.

**Supply:** Free toothbrushes & toothpaste at kindergarten, primary & secondary level.

Tooth decay experienced by low-income communities vastly outstrips the claimed improvement ratio in dental caries. The costbenefit ratio of supply toothbrushes and toothpaste is unlikely to outstrip health costs of dental and medical treatment to low-income communities.

#### **PSGR ADVOCACY**

In 2023 PSGR presented on the topic of the safety of roadside and urban spraying to a group of staff and elected members from Whangarei District Council. This presentation was later updated and re-recorded and uploaded to YouTube.

The rerecorded video is intended as a <u>public-interest</u> <u>video to support local communities</u>. The video aims to support discussions on safety and health, and addresses some of the scientific and technical issues relating to the safety of urban and roadside herbicide spraying.

More information can be found <u>here</u>.



#### GOVERNMENT INQUIRIES/CONSULTATIONS

Please note – ordinarily the government departments that invite public consultation do not discuss our reports/submissions.

Information contributing to government inquiries and consultations are therefore information sources for the general public, as they do not serve any other purpose than a demonstration of performance in these processes.

**November 6, 2023:** Submission <u>to FSANZ - Application</u> A1274 for Food derived from disease-resistant banana line QCAV-4.

**September 2023:** Co-signatory of <u>letter</u> to the Brazilian Ambassador: Brazilian government: overturn the approval for GE eucalyptus plantations.

July 26, 2023: 2023 Public Consultation: Safer Online Services and Media Platforms.

'<u>PSGR notes</u> that the effect is to claim that regulatory activities can set aside peoples' constitutional rights. Thus, this proposal can be challenged to be unconstitutional – and the related statutory and regulatory system to constitute unlawful governmental overreach'.

March 13, 2023: <u>Co-signatory of declaration</u> supporting an international ban on the genetic modification of human beings (HGM).

**February 26, 2023:** <u>Report (submission) to Health</u> <u>Select Committee</u> concerning the <u>Therapeutic Products</u> <u>Bill.</u> We focussed on the downplayed risk of biologic drugs, the issue of active protection to Māori regarding nutritional equity and health, and the problem of

institutional conflicts of interest in the World Health Organization.



January 16, 2023: 2023 DoC & LINZ consultation on information & emerging technologies. Response

to November 2022 draft Long Term Insight Briefing. PSGR considered that the draft paper excluded a sophisticated discussion of key drivers & so focussed on inappropriate technological solutions.

August 7, 2022: Public consultations on the Food <u>Regulatory System Strategic Plan 'Horizon Scan'</u> (Australia - FSANZ). PSGR <u>considered that this 'first</u> <u>step'</u> of the most significant update to food system regulation since 2000 did not discuss the issue of independent science to triangulate industry claims of safety.

April 22, 2022: <u>Comment on first public hearing</u> to the World Health Organization intergovernmental negotiating body (INB): pandemic preparedness and response. PSGR forwarded this comment to the first public hearing. April 2022.

The WHO has a special role to protect health. Risk for infectious and non-infectious disease is determined by economic, social and environmental drivers. The most important role the WHO can prioritise is critical work to safeguard the health of infants and children by assisting nation-states to promote of safe, ancestral and indigenous wholefood diets and to prioritise the protection of drinking water.

In November 2023 trustee Jodie Bruning joined a delegation on behalf of the PSGR. Open letters to the <u>Attorney-General</u> and <u>Human Rights Commissioner</u> requested that they publicly consider questions arising from treaties and accord proposals recently developed by the United Nations and the World Health Organization.