

The Impact of Fluorosis in Neurological Disorders: A Mini-Review

Sugavasi Raju, Madhan Kumar Soutallu Janakiram, Parthiban Govindarajoo

Department of Anatomy, Faculty of Medicine, Manipal University College Malaysia, Jalan Batu

Corresponding author: sugavasi.raju@manipal.edu.my

Received: 25th June 2024

Accepted: 17th November 2024

Published: 30th April 2025

Abstract

The purpose of the present review is to update and conclude available evidence of risk of fluorosis associated with neurological disorders. Neurological disorders are diseases of the central and peripheral nervous system which includes the brain, spinal cord, cranial nerves, peripheral nerves, nerve roots. Alzheimer disease, dementia, Parkinson's disease, neuropathy, Autism, and memory and learning deficits are considered as neurological disorders. Globally 47.5 million people are affected by dementia and 7.7 million new cases are found every year. Alzheimer's disease is the main reason for developing dementias in 60–70% of cases. Fluorosis is a metabolic bone disease which is produced due to prolonged exposure to excessive amounts of fluoride through various sources. Extreme fluoride exposure may possibly consequence to central nervous system dysfunction. Chronic fluorosis might play a role in Alzheimer's disease, as it is common among people living in endemic fluorosis regions. High levels of fluoride exposure may have the risk of impaired intelligence in children. Excessive ingestion of fluoride leads to calcification of ligaments and tendons causes compression on nerve structures and produces myelopathy and radiculopathy. Fluoride can cross the blood-brain barrier especially at the time of pregnancy period leading to develop neural deterioration of offspring which promotes learning and memory impairments. The present review attempts to elucidate the possible relationship between fluorosis and neurological disorders.

Keywords:

Fluorosis, Alzheimer's disease, Dementia, Neurodegeneration.

Introduction

Fluorosis, as a universal public health crisis, has received extensive and deserving awareness in recent years. Fluoride contaminated water is the reason for occurring 80% of diseases and fluoride pollution is the main cause to develop 65% of endemic fluorosis in the world ¹. In India 62 million people including 6 million children are affected with fluoride related health diseases. Epidemiological studies in China have shown that, about 330 million people are exposed to high fluoride, among them about 42 million are

suffering from fluorosis². Fluoride exposure leads to dental and skeletal fluorosis. Fluoride has been shown to be toxic, not only to the teeth and skeletal tissues, but also to the non-skeletal tissues such as the brain, liver, pancreas, endocrines, and the kidney³. Dental fluorosis causes mottling of enamel of the teeth, however skeletal fluorosis is characterized by swollen, deformed joints and enlarged bones. Fluoride is a neurotoxic agent and scientific interest of effect of fluoride, its mechanism on the nervous system has been increasing recently⁴. Fluoride toxicity showed a several types of neuropsychiatric symptoms which include drowsiness, confusion, learning and memory disorders⁵. Present review focused on the neurological diseases which are born due to fluoride exposure.

Methods

The following search engines like Google Scholar, ScienceDirect, Web of Science, PubMed/Medline and Research Gate were used to collect data as evidence from already published literature.

Effect of fluorosis on Alzheimer's disease (AD)

Alzheimer's disease (AD) is a progressive neurodegenerative disease which Impaired short term memory and decline cognitive ability. AD Patients complaints confusion, disturbances of language, sleep-wake cycle and gradual development of long-term memory loss⁶. Accumulation of neurofibrillary tangles and amyloid plaques are the pathological basis of AD⁷. Amyloid plaques are produced from β -amyloid peptides ($A\beta$), which are formed by the enzymatic cleavage of the amyloid precursor protein (APP)⁸. AD patients exhibit severe memory deficits, these deficits were associated with changes in hippocampal synaptic transmission, particularly with changes in synaptophysin expression⁹. Acetylcholine (ACh) plays a significant role in cognitive processes and disturbance of cholinergic system produces Alzheimer's dementia in AD patients¹⁰. In AD predominantly neurodegenerative changes take place in hippocampus, frontal cortex, amygdala, nucleus basalis, and medial septum of brain¹¹.

Chronic fluorosis causes neurodegenerative diseases like Alzheimer's dementia and learning and memory impairments¹². Metals like aluminum have permeability to cross blood brain barrier and nonmetals like fluoride also have ability to cross blood brain barrier and damage the brain and develops memory and cognitive impairments¹³. Fluoride exposure increases the synthesis of reactive oxygen species by microglial activation resulted oxidative stress¹⁴. Fluoride stimulates cytokine secretion, macrophages and microglia results neuroinflammatory process in AD¹⁵. Fluoride plays a significant role in apoptosis which is the main pathogenesis factor in neurodegenerative diseases like Alzheimer's and Parkinson's disease¹⁶. Long term ingestion of fluoride could affect potential increase in the level of oxidative stress in the brain tissue¹⁷. Chronic exposure of fluoride decreases the glutathione levels in mice due to oxidative stress¹⁸. Brain antioxidant enzyme glutathione level was significantly depleted in Alzheimer's patients when compared to normal subjects in non-Invasive Technique study¹⁹. Fluoride Decreases Acetylcholine Levels when exposed to Fluoridated water²⁰. One previous study reported decreased levels of the neurotransmitter acetylcholine in Alzheimer's disease and acetylcholine considered as a neuropathological marker in Alzheimer's disease²¹. Previous studies reported that fluoride induced oxidative stress, and neurodegeneration can be reduced by supplementation of AChE inhibitors²². Fluoride exposure causes impaired learning and memory capabilities which involve endoplasmic reticulum stress and associated apoptosis in the hippocampus of rats²³. The endoplasmic reticulum is the key element involved in protein folding and secretion and is significantly affected in Alzheimer's disease neurons²⁴. Fluoride has a possible action to cause nervous tissue degenerative changes in Alzheimer's disease²⁵. Dementia is a clinical condition which affects cognitive functional ability and memory impairment due to neurodegenerative and cerebrovascular processes of brain²⁶. Chronic administration of fluoride led to inclusions in the blood

vessels that can cause vascular dementia ²⁷. A cross-sectional study resulted out of 160 people 67 developed primary degenerative dementia when exposed to highest fluoride concentrations in public water supplies ²⁸.

Effect of fluorosis on Myelopathy

Spinal fluorosis leads to compressive myelopathy, mostly affecting the cervical and dorsal spine of vertebral column. Stenosis of spinal canal is the reason for compressive myelopathy that is due to ossification of ligamentum flavum, and ossification within the dura mater ^{29,30}. Previous study resulted in 63.63% of cases observed ossification of the interosseous membrane, 33.33% of cases noticed ankylosis and 90.9% cases noticed increased density of bone due to spinal fluorosis ³¹. 82% of patients of Indian population the main source of fluoride in take is through deep bore well groundwater ^{32,33}. Fluorosis is the uncommon cause for developing compressive myelopathy. One study reported ossification of intraosseous membrane in forearm causes compressive myelopathy along with elevated urine fluoride level due to fluoride exposure ³⁴. Spinal fluorosis causes compression of the nerve roots that results in Neurological manifestations in myelopathy and neuropathy ³⁵. MRI scan report showed degenerative changes throughout the spine in one fluorosis case that developed compression of spinal cord at multiple levels causes paraplegia ³⁶. Fluoride in take in endemic areas causes vertebral osteosclerosis that resulted in spinal cord compression ³⁷. Myelopathy was noticed due to spinal cord compression in 77-year-old man by skeletal fluorosis ³⁸. Spina bifida is the congenital neural tube defect which affects posterior wall of vertebrae of the spine. Spina bifida is the condition where the patient complains about neuropathological symptoms. Study reported endemic fluorosis areas are more prone to develop Spina bifida occulta in children. One study revealed out of 50 children in 22 (44%) cases noticed spina bifida occulta in the lumbosacral region ³⁹.

Effect of fluorosis on Intelligence quotient (IQ)

Intelligence quotient (IQ) of children depends on environmental, nutritional, and hereditary factors. Chronic ingestion of excess fluoride also results in reduction of intelligence quotient (IQ) in children ⁴⁰. High concentration of fluoride in drinking water is the risk factor for impaired intelligence and development in children ⁴¹. IQ scores of children living in fluorosis endemic villages were found to be less compared to the children living in non-endemic villages of India ⁴². A meta-analysis of 27 cross-sectional studies of children conducted in China reported exposed to fluoride in drinking water suggests an average IQ reduction of about seven points in children ⁴³. A comparative study confirmed that average IQ scores were significantly less in children living in the fluorosis endemic area ⁴⁴. Children who are exposed to excessive fluoride may be prone to impaired intelligence ⁴⁵. Children living in medium and severe fluorosis regions showed less IQ than the children in mild fluorosis region suggesting that excessive fluoride intake is linked with lower intelligence ⁴⁶. Exposure of high fluoride levels was related to high rates of mental retardation and borderline intelligence in children ⁴⁷. The fluorosis in India is nearly estimated to affect 66.6 million people of which an estimated 6 million are children below the age of 14 years ⁴⁸.

Effect of fluorosis on Memory and Learning disorder

Extreme exposure to fluoride may generate central nervous system dysfunctions ⁴⁹. Sustained exposure to fluoride was the main reason for neuronal activity instability and moreover the unusual behavioral patterns ⁵⁰. Chronic fluoride ingestion affects brain, spinal cord and causes neurodegeneration leading to learning and memory impairments ⁵¹. The incidence of learning and memory deficits were typically due to exposure of 100 part per million of fluoride in 30 days of period ⁵². Exposure to fluoride in Industrial workers resulted in diminished psychomotor performance and memory ⁵³. Fluoride exposure affects neuronal differentiation, migration and synaptogenesis leads to learning and memory disturbances ⁵⁴.

Perinatal fluoride exposure in male rats showed decreased motor coordination and learning and memory deficits and showed lack of habituation, failure to discriminate between familiar and novel objects in female rats ⁵⁵. Fluoride has a role in memory and learning impairments because it releases oxygen free radicals by disrupting oxygen metabolism ⁵⁶. Fluoride toxicity could have developed in learning and memory deficits due to a decrease in the nicotinic acetylcholine receptors ⁵⁷. High fluoride and arsenic co-exposure in rats showed decreased learning, memory, and biochemical indices ⁵⁸. Rats exposed to fluoride revealed the differences in the cognitive responses and deficits in behavioral patterns.

Effect of chronic fluorosis on psychiatric disorders

Patients exposed to chronic fluorosis would manifest psychiatric symptoms such as mood swings, anxiety neurosis and mental depression due to neurotoxicity of brain, so it is required more focusing and consideration ⁵⁹. According to previous epidemiological data people living in fluorosis prone places were more likely to showed high prevalence of mental depression and social anxiety and exposure to fluoride in early life can be possible to develop autism and mental retardation disorders ⁶⁰. The neuropsychiatric symptoms were noticed more in dental fluorosis patients compared to normal individuals. Previous studies reported that college students suffering from dental fluorosis were showed mild depression and dental fluorosis would be the risk factor for neuropsychiatric depression disorder ⁶¹.

Mechanism of action of fluorosis on neurological disorders

Fluorosis may be involved in damaging the brain neurons by various mechanisms. Fluoride can absolutely interact with antioxidant enzymes and decline their ability to scavenge free radicals. Fluoride accumulation in the brain in chronic fluorosis can lead to rapid increased ROS concentrations, reduction in antioxidant enzyme activity, and increased lipid peroxidation process. This mechanism was studied in cerebrum, cerebellum, and medulla, when exposed to 50 and 150 mg/L fluoride in drinking water ⁶². Rats exposed to 13 mg/kg of fluoride water every 24 h were noticed altered mitochondrial membrane potential and integrity of neurons due to increased ROS synthesis and lipid peroxidation ^{63,64}. Brain injury due to fluoride induced oxidative stress is the main mechanism caused in neurological disorders.

Conclusion

Chronic fluorosis disease can cause brain damage by accumulation of fluoride in brain by crossing through the placental barrier or Blood Brain Barrier leads to neurotoxicity and developed cognitive impairment and neuro psychiatric symptoms. Present review concluded fluoride exposure through various sources can affect the nervous system and developed neurological disorders in human and animals according to previous published literature.

Conflict of Interest

None

References

1. Felsenfeld AJ, Roberts MA. A report of fluorosis in the United States secondary to drinking well water. *Jama*. 1991 Jan 23;265(4):486-8.
2. Wang J, Ge Y, Ning H and Wang S. Effects of high fluoride and low iodine on biochemical indexes of the brain and learning-memory of offspring rats. *Fluoride*. 2004 Aug 1;37(3):201-208.
3. Anon (1978). Nonskeletal fluorosis. *Fluoride*; 12(3): 111-114.

4. Trivedi, M.H.; Verma, R.J.; Chinoy, N.J. Mitigation of sodium-fluoride induced toxicity in mice brain by black tea infusion. *Fluoride* 2009, 42, 29–33.
5. Ma J, Liu F, Liu P, Dong YY, Chu Z, Hou TZ, Dang YH. Impact of early developmental fluoride exposure on the peripheral pain sensitivity in mice. *International Journal of Developmental Neuroscience*. 2015 Dec 1; 47:165-71.
6. Waldemar G, Dubois B, Emre M, Georges J, McKeith IG, Rossor M, Scheltens P, Tariska P, Winblad B. Recommendations for the diagnosis and management of Alzheimer's disease and other disorders associated with dementia: EFNS guideline. *European Journal of Neurology*. 2007 Jan;14(1): e1-26.
7. Resende de Almeida J, A Taft C, da Silva HT. Density Functional Theory, Molecular Interaction Fields, Pharmacophore, Virtual Screening and Physical Chemistry of the Interactions of Novel Acetylcholinesterase Inhibitors in Alzheimer's Disease. *Current Physical Chemistry*. 2013 Dec 1;3(4):419-30.
8. Esch FS, Keim PS, Beattie EC, Blacher RW, Culwell AR, Oltersdorf T, McClure D, Ward PJ. Cleavage of amyloid beta peptide during constitutive processing of its precursor. *Science*. 1990 Jun 1;248(4959):1122-4.
9. Sze CI, Troncoso JC, Kawas C, Mouton P, Price DL, Martin LJ. Loss of the presynaptic vesicle protein synaptophysin in hippocampus correlates with cognitive decline in Alzheimer disease. *Journal of Neuropathology & Experimental Neurology*. 1997 Aug 1;56(8):933-44.
10. Muir JL. Acetylcholine, aging, and Alzheimer's disease. *Pharmacology Biochemistry and Behavior*. 1997 Apr 1;56(4):687-96.
11. Terry AV, Buccafusco JJ. The cholinergic hypothesis of age and Alzheimer's disease-related cognitive deficits: recent challenges and their implications for novel drug development. *Journal of Pharmacology and Experimental Therapeutics*. 2003 Sep 1;306(3):821-7.
12. Blaylock RL. Excitotoxicity: a possible central mechanism in fluoride neurotoxicity. *Fluoride*; 2004;37(4): 301-314.
13. Banks WA, Kastin AJ. Peptides and the blood-brain barrier: lipophilicity as a predictor of permeability. *Brain research bulletin*. 1985 Sep 1;15(3):287-92.
14. Shuhua X, Ziyong L, Ling Y, Fei W, Sun G. A role of fluoride on free radical generation and oxidative stress in BV-2 microglia cells. *Mediators of inflammation*. 2012;2012.
15. Goldman R, Zor U. On the mechanism of activation of PLA2 and PtdIns-PLC by fluoride in murine macrophages. *Advances in prostaglandin, thromboxane, and leukotriene research*. 1995; 23:93.
16. Hamouda KB, Jemel H, Haouet S, Khaldi M. Thoracic myelopathy caused by ossification of the ligamentum flavum: a report of 18 cases. *Journal of Neurosurgery: Spine*. 2003 Sep 1;99(2):157-61.
17. Shao Q, Wang Y, Guan Z. Influence of free radical inducer on the level of oxidative stress in brain of rats with fluorosis. *Zhonghua yu fang yi xue za zhi [Chinese journal of preventive medicine]*. 2000 Nov;34(6):330-2.
18. Miranda GH, Gomes BA, Bittencourt LO, Aragão WA, Nogueira LS, Dionizio AS, Buzalaf MA, Monteiro MC, Lima RR. Chronic exposure to sodium fluoride triggers oxidative biochemistry misbalance in mice: effects on peripheral blood circulation. *Oxidative medicine and cellular longevity*. 2018;2018.
19. Mandal PK, Tripathi M, Sugunan S. Brain oxidative stress: detection and mapping of antioxidant marker 'Glutathione' in different brain regions of healthy male/female, MCI and Alzheimer patients using non-invasive magnetic resonance spectroscopy. *Biochemical and biophysical research communications*. 2012 Jan 6;417(1):43-8.
20. Reddy YP, Tiwari SK, Shaik AP, et al. Effect of sodium fluoride on neuro immunological parameters, oxidative stress and antioxidative defenses. *Toxicol Mech Methods*. 2014 Jan;24(1):31-36.
21. Sharma A, Pachauri V, Flora SJ. Advances in multi-functional ligands and the need for metal-related pharmacology for the management of Alzheimer disease. *Frontiers in pharmacology*. 2018;9.

22. Goschorska M, Gutowska I, Baranowska-Bosiacka I, Piotrowska K, Metryka E, Safranow K, Chlubek D. Influence of Acetylcholinesterase Inhibitors Used in Alzheimer's Disease Treatment on the Activity of Antioxidant Enzymes, and the Concentration of Glutathione in THP-1 Macrophages under Fluoride-Induced Oxidative Stress. *International journal of environmental research and public health*. 2019 Jan;16(1):10.
23. Niu Q, Chen J, Xia T, Li P, Zhou G, Xu C, Zhao Q, Dong L, Zhang S, Wang A. Excessive ER stress and the resulting autophagic flux dysfunction contribute to fluoride-induced neurotoxicity. *Environmental Pollution*. 2018 Feb 1; 233:889-99.
24. Gerakis Y, Hetz C. Emerging roles of ER stress in the etiology and pathogenesis of Alzheimer's disease. *The FEBS journal*. 2018 Mar;285(6):995-1011.
25. Uttara, B.; Singh, A.V.; Zamboni, P.; Mahajan, R.T. Oxidative stress and neurodegenerative diseases: A review of upstream and downstream Antioxidant therapeutic options. *Curr. Neuropharmacol*. 2009, 7, 65-74.
26. Whalley LJ, Dick FD, McNeill G. A life-course approach to the aetiology of late-onset dementias. *The Lancet Neurology*. 2006 Jan 1;5(1):87-96.
27. Isaacson RL, Varner JA, Jensen KF. Toxin-Induced Blood Vessel Inclusions Caused by the Chronic Administration of Aluminum and Sodium Fluoride and Their Implications for Dementia a. *Annals of the New York Academy of Sciences*. 1997 Oct;825(1):152-66.
28. Still CN. On the incidence of primary degenerative dementia vs. water fluoride content in South Carolina. *Neurotoxicology*. 1980; 1:125-31.
29. Akhaddar A, Mansouri A, Zrara I, Gazzaz M, Maftah M, Mostarchid B, Benomar S, Boucetta M. Thoracic spinal cord compression by ligamentum flavum ossifications. *Joint Bone Spine*. 2002 May 1;69(3):319-23.
30. Hamouda KB, Jemel H, Haouet S, Khaldi M. Thoracic myelopathy caused by ossification of the ligamentum flavum: a report of 18 cases. *Journal of Neurosurgery: Spine*. 2003 Sep 1;99(2):157-61.
31. Modi JV, Tankshali KV, Patel ZM, Shah BH, Gol AK. Management of acquired compressive myelopathy due to spinal fluorosis. *Indian Journal of Orthopaedics*. 2019 Mar;53(2):324.
32. Reddy DR. Neurology of endemic skeletal fluorosis. *Neurol India*. 2009; 57:7-12.
33. Susheela AK. Fluorosis: An Easily Preventable Disease through Practice of Interventions. Delhi: Fluorosis Research and Rural Development Foundation. 2005.
34. Shetty S, Nayak R, Kapoor N, Paul TV. An uncommon cause for compressive myelopathy. *Case Reports*. 2015 Mar 3;2015: bcr2014208640.
35. Gupta SK, Gupta RC, Seth AK, Chaturvedi CS. Increased incidence of spina bifida occulta in fluorosis prone areas. *Pediatrics International*. 1995 Aug;37(4):503-6.
36. Ahsan T, Jabeen R, Hashim S, Bano Z, Ghafoor S. Fluorosis causing paraplegia mutilating life. *J Pak Med Assoc*. 2016 Feb 1; 66:213-6.
37. Fisher RL, Medcalf TW, Henderson MC. Endemic fluorosis with spinal cord compression: a case report and review. *Archives of internal medicine*. 1989 Mar 1;149(3):697-700.
38. Webb-Peploe MM, Bradley WG. Endemic fluorosis with neurological complications in a Hampshire man. *Journal of neurology, neurosurgery, and psychiatry*. 1966 Dec;29(6):577.
39. Gupta AK, Singh TP, Agrawal PK, Singh D, Sachan M, Agarwal V. Quadriplegia—a rare presentation of skeletal fluorosis. *Journal, Indian Academy of Clinical Medicine*. 2008 Jul;9(3):201-4.
40. Chen YX, Han F, Zhou Z, Zhang H, Jiao X, Zhang S, Huang M, Chang T and Dong Y. Research on the intellectual development of children in high fluoride areas. *Fluoride*. 2008; 41(2): 120-124.
41. Seraj B, Shahrabi M, Falahzade M, Falahzade F, Akhondi N. Effect of high fluoride concentration in drinking water on children's intelligence. *Journal of dental medicine*. 2006; 19(2):80-6.

42. Eswar P, Nagesh L, Devaraj CG. Intelligence quotients of 12–14-year-old school children in a high and a low fluoride village in India. *Fluoride*. 2011 Jul 1;44(3):168.
43. Choi AL, Sun G, Zhang Y, Grandjean P. Developmental fluoride neurotoxicity: a systematic review and meta-analysis. *Environ Health Perspect* 2012; 120: 1362–68.
44. Poureslami HR, Horri A, Garrusi B. A comparative study of the IQ of children age 7–9 in a high and a low fluoride water city in Iran. *Fluoride*. 2011;44(3):163-167.
45. Lu Y, Sun ZR, Wu LN, Wang X, Lu W, Liu SS. Effect of high-fluoride water on intelligence in children. *Fluoride*. 2000 May 1;33(2):74-8.
46. Li XS, Zhi JL, Gao RO. Effect of fluoride exposure on intelligence in children. *Fluoride*. 1994;28(4):189-92.
47. Zhao LB, Liang GH, Zhang DN, Wu XR. Effect of a high fluoride water supply on children's intelligence. *Fluoride*. 1996 Nov 1;29(4):190-2.
48. Ayoob S, Gupta AK. Fluoride in drinking water: a review on the status and stress effects. *Critical Reviews in Environmental Science and Technology*. 2006 Dec 1;36(6):433-87.
49. Spittle B. Psychopharmacology of fluoride: a review. *Int clin psychopharm*1994; 9(2): 79-82.
50. Mullenix PJ, Denbesten PK, Schunior A and Kernan WJ. Neurotoxicity of sodium fluoride in rats. *Neurotox teratol*.1995; 17(2):169-177.
51. Reddy PY, Reddy KP and Kumar KP. Neurodegenerative changes in different regions of brain, spinal cord and sciatic nerve of rats treated with sodium fluoride. *Journal of Medical & Allied Sciences*.2011; 1(1): 30.
52. Pereira M, Dombrowski PA, Losso EM, Chioca LR, Da Cunha C and Andreatini R. Memory impairment induced by sodium fluoride is associated with changes in brain monoamine levels. *Neurotoxicity Research*.2011; 19(1): 55-62.
53. Yazdi SM, Sharifian A, Dehghani-Beshne M, Momeni VR, Aminian O. Effects of fluoride on psychomotor performance and memory of aluminum pot room workers. *Fluoride*. 2011 Jul 1;44(3):158-62.
54. Madhusudhan N, Basha PM, Rai P, Ahmed F, Prasad GR. Effect of maternal fluoride exposure on developing CNS of rats: protective role of Aloe vera, Curcuma longa and Ocimum sanctum. *Indian J Exp Biol*. 2010;48(8):830-6.
55. Bera I, Sabatini R, Auteri P, Flace P, Sisto G, Montagnani M, Potenza MA, Marasciulo FL, Carratu MR, Coluccia A, Borracci P. Neurofunctional effects of developmental sodium fluoride exposure in rats. *European review for medical and pharmacological sciences*. 2007 Jul 1;11(4):211.
56. Chirumari K and Reddy PK. Dose-dependent effects of fluoride on neurochemical milieu in the hippocampus and neocortex of rat brain. *Fluoride*.2007; 40(2): 101-110.
57. Shan KR, Qi XL, Long YG, Nordberg A and Guan ZZ. Decreased nicotinic receptors in PC12 cells and rat brains influenced by fluoride toxicity—a mechanism relating to a damage at the level in post-transcription of the receptor genes. *Toxicol*.2004; 200(2-3): 169-177.
58. Wu C, Gu X, Ge Y, Zhang J, Wang J. Effects of high fluoride and arsenic on brain biochemical indexes and learning-memory in rats. *Fluoride*. 2006 Dec;39(4):274-9.
59. Liu, F., Ma, J., Zhang, H., et al., Fluoride exposure during development affects both cognition and emotion in mice. *Physiol. Behav*. 2014;124, 1–7.
60. Nakamoto, T., Rawls, H.R., Fluoride exposure in early life as the possible root cause of disease in later life. *J. Clin. Pedia Dent*.2018; 42 (5), 325–330.
61. Pan, Z., Que, K., Liu, J., et al., Effects of at-home bleaching and resin infiltration treatments on the aesthetic and psychological status of patients with dental fluorosis: a prospective study. *J. Dent*. 2019; 91, 103228.
62. Dec, K., Lukomska, A., Maciejewska, D., et al., The influence of fluorine on the disturbances of homeostasis in the central nervous system. *Biol. Trace Elem. Res*.2017; 177 (2), 224–234.

63. Hassan, H.A., Yousef, M.I., Mitigating effects of antioxidant properties of black berry juice on sodium fluoride induced hepatotoxicity and oxidative stress in rats. *Food Chem. Toxicol.* 2009;47 (9), 2332–2337.
64. Mittal, M., Flora, S.J., Effects of individual and combined exposure to sodium arsenite and sodium fluoride on tissue oxidative stress, arsenic, and fluoride levels in male mice. *Chem. Biol. Inter.* 2006;162 (2), 128–139.