TEFLON AND HUMAN HEALTH: DO THE CHARGES STICK?

Assessing the Safety of the Chemical PFOA

Project Co-ordinator: Rivka Weiser

Editor: Gilbert L. Ross, M.D.

Prepared for THE AMERICAN COUNCIL ON SCIENCE AND HEALTH

April 2005

AMERICAN COUNCIL ON SCIENCE AND HEALTH 1995 Broadway, 2nd Floor, New York, NY 10023-5860 Tel. (212) 362-7044 • Fax (212) 362-4919 URL: http://www.acsh.org • E-mail: acsh@acsh.org THE AMERICAN COUNCIL ON SCIENCE AND HEALTH GRATEFULLY ACKNOWLEDGES THE COMMENTS AND CONTRIBUTIONS OF THE FOLLOWING INDIVIDUALS, WHO REVIEWED ALL OR PART OF THE LONGER POSITION PAPER ON WHICH THIS BOOKLET IS BASED.

Larry Beeson, Dr.P.H. Loma Linda University

Hinrich L. Bohn, Ph.D. *University of Arizona*

Joseph F. Borzelleca, Ph.D. Virginia Commonwealth University

John Doull, M.D., Ph.D. *University of Kansas*

Gordon W. Gribble, Ph.D. *Dartmouth College*

F. Peter Guengerich, Ph.D. Vanderbilt University School of Medicine

Theodore R. Holford, Ph.D. Yale University School of Medicine

Rudolph J. Jaeger, Ph.D. *Environmental Medicine, Inc.*

Manfred Kroger, Ph.D. Pennsylvania State University

Roger P. Maickel, Ph.D. *Purdue University*

Thomas H. Milby, M.D. Walnut Creek, CA

lan C. Munro, Ph.D. Cantox Health Sciences International

Roy F. Spalding, Ph.D. University of Nebraska

Arlene Weiss, M.S., DABT Environmental Medicine, Inc.

James J. Worman, Ph.D. Rochester Institute of Technology

TEFLON AND HUMAN HEALTH: DO THE CHARGES STICK? Assessing the Safety of the Chemical PFOA

Copyright © 2005 by American Council on Science and Health, Inc. All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted in any form or by any means, electronic, mechanical, photocopying, recording, or otherwise, without prior written permission of the publisher, except in the case of brief quotations embodied in critical articles and reviews. Inquiries should be addressed to American Council on Science and Health, 1995 Broadway, 2nd Floor, New York, NY 10023. Telephone: 212-362-7044. Fax: 212-362-4919. Email: acsh@acsh.org.

Printed in the United States of America

Cover design by Yelena Ponirovskaya

TABLE OF CONTENTS

I.	Introduction and summary 5
II.	What is PFOA? 6
III.	How are humans exposed to PFOA? 6
IV.	How much PFOA are people exposed to? 6
	A. Amount based on human blood levels
	of PFOA 6
	B. Amount based on water levels of
	PFOA
V.	What do we know about the health effects
	of PFOA?
	A. From studies of animals 7
	B. From studies of humans 8
VI.	Is the amount of PFOA that people are
	exposed to a cause for concern?
	A. Risk analysis based on blood PFOA
	levels
	B. Risk analysis based on administered
	doses of PFOA10
VII.	Conclusions10
Ref	erences

I. Introduction and summary

Recently, the public has become concerned about the potential human health effects of PFOA (perfluorooctanoic acid or perfluorooctanoate), a chemical used to produce substances needed to manufacture Teflon and many other products. The Environmental Protection Agency (EPA) has been reviewing the scientific data on PFOA and at press time for this publication was working on its final report about the human health effects associated with PFOA (the draft assessment was released in January 2005). In 2004, concerns about PFOA were widely reported in the media because the EPA claimed that DuPont, the manufacturer of Teflon, had not adequately reported information about PFOA's presence in water supplies and its ability to cross the placenta from mother to fetus. It is important to note that even while some media reports may have caused misunderstanding by calling PFOA a "Teflon chemical," PFOA is not present in the final product of Teflon-coated cookware; it is only used in the manufacturing process of the product.

While concerns about PFOA's effects on humans have arisen recently, data on PFOA's presence in humans and its effects on both animals and humans has been collected for more than 20 years and can be used to evaluate the potential for harm from PFOA. Research has shown that very high doses of PFOA can cause harm in animals, but the amount of PFOA to which the general population is exposed is hundreds to thousands of times lower, and biological differences may make concerns about some of the observed effects irrelevant to humans. Additionally, studies of workers (who are exposed to much higher doses of PFOA than the general population) have not shown the same effects in humans that occur in animals.

II. What is PFOA?

PFOA* is mainly used to produce other chemicals, such as APFO (ammonium perfluorooctanoic acid - often referred to as C-8). (1) These chemicals are then used in the production of products such as Teflon coating on cookware. While the use of PFOA to make Teflon is most widely known, most of these chemical products of PFOA are used in other industries such as automotive, electronics, and defense. For example, they are used to produce insulation for wires, power steering and brake assemblies in cars, and gear lubrication.

III. How are humans exposed to PFOA?

While the presence of PFOA in the environment is at least partially due to the production, use, and disposal of PFOA itself, it may also result from a breakdown of other substances that are used in consumer products. (2) It is unclear, however, how much each source contributes to the chemical's presence in the environment. PFOA has been found in air, water, living organisms, and landfills, but there is only limited data on its levels. Mostly, PFOA levels have been measured in areas (particularly in water) near production plants that use PFOA. (1)

When PFOA is absorbed through inhalation or ingestion, some of it binds to proteins in the blood, and it can also accumulate in organs such as the liver and kidneys. (9) The length of time that PFOA remains in the body has been assessed only in one study, and that study included only nine workers. (10)

IV. How much PFOA are people exposed to?

A. Amount based on human blood levels of PFOA

A number of studies have measured the levels of PFOA in the blood of people around the world,

^{*} In this document, references to PFOA also imply C-8 and APFO.

both in the general population and in workers who are much more highly exposed to PFOA. (3-7) Because these studies have analyzed the blood of large numbers of people in widespread locales, we can be fairly confident that the studies represent the PFOA blood concentrations in the entire population. On average, the general population has about 5 parts per billion (ppb) of PFOA in their blood, with high values at about 20-30 ppb. (3-6) These concentrations do not seem to vary by age. (4, 5) Some workers in factories that use or manufacture PFOA have levels much higher than those found in the general population, averaging about 1-10 parts per million (ppm) (equivalent to 1,000 to 10,000 ppb). (7)

B. Amount based on water levels of PFOA

Drinking water levels of PFOA probably represent the largest source of human exposure to PFOA (1, 8) and can be used to estimate the amount of PFOA that people ingest (see section VI). Studies have measured PFOA levels in areas near plants that use or manufacture PFOA and sites contaminated with PFOA but have not reported countrywide, comprehensive levels of PFOA in air, soil, or water. (1, 8) While these studies cannot give us an idea of how much the average person is exposed to PFOA, they can be used to estimate the exposure to PFOA of people in the population expected to be most highly exposed. In areas surrounding plants in West Virginia and in Alabama, the levels of PFOA in drinking water have averaged about one part per billion (ppb), ranging up to about 10 parts per billion. (1,8) In a six-city survey, drinking water levels of PFOA were much lower, ranging from non-detectable to 0.029 ppb. (1)

V. What do we know about the health effects of PFOA?

A. From studies of animals

Various studies have shown that very high doses of PFOA have harmful effects on animals. In stud-

TEFLON AND HUMAN HEALTH: DO THE CHARGES STICK?

ies in which animals such as rats, rabbits, and monkeys ingested high doses of PFOA, the animals experienced adverse effects including liver changes, weight loss, and gastrointestinal irritation. (9) When exposed to high levels of PFOA in the air, these animals showed symptoms such as irregular breathing, changes in liver weight, weight loss, and eye corrosion. (9) High-dose studies of APFO have shown reproductive and developmental effects on rats; the offspring of these rats experienced increased mortality and weight loss. (11) One study found that rats exposed to high doses of PFOA had increased rates of liver, testicular, and pancreatic cancers. (9)

In applying these studies to predict risk for humans, it is important to note both that the animals were very highly exposed to PFOA (see section VI) and that a variety of studies suggest that the mechanisms by which PFOA causes cancer and other health effects in rats may not even be applicable to humans. (9) However, the exact biological mechanisms related to some of the health effects found in animals are not completely understood. (9)

B. From studies of humans

Some studies have been performed on worker populations in the U.S. and Europe who have been exposed to much higher doses of PFOA than the general population. These studies aimed at detecting in humans a variety of adverse effects that had been seen in laboratory animals but did not find these effects in workers. (12,13) A study of almost 4,000 workers did not find a relationship between PFOA exposure and allcause mortality or cancer mortality. (9) Contrary to the results of an earlier study of workers (14), there was also no association between PFOA exposure (measured by length of employment) and prostate cancer. (9)

An unpublished report claimed that people who drank water contaminated with PFOA had higher

rates of various cancers. This report was made to support a lawsuit and was not reviewed by peers in the scientific community for its methodology and the accuracy of its claims (as studies published in peer-reviewed journals are). (15) Aside from this claim, the current data do not support a connection between PFOA and cancer, even in workers (who are most highly exposed to PFOA).

VI. Is the amount of PFOA that people are exposed to a cause for concern?

The data on effects of PFOA in humans do not give us a way to directly evaluate the potential human health risks of PFOA. However, regulatory agencies try to estimate the risk by either (A) comparing blood PFOA levels of animals experiencing adverse effects to the blood levels found in humans or (B) comparing the doses of PFOA associated with adverse effects in animals to the doses to which humans are exposed. These methods, however, are based on the assumption that the same biological mechanisms are present in humans, and that may not be true.

A. Risk analysis based on blood PFOA levels

Blood levels are not routinely measured in highdose toxicology studies of animals, but one reproductive study recorded them for some animals. (16) The Environmental Protection Agency's preliminary risk assessment (17) was based on levels from that study, which indicated that the lowest parental PFOA blood levels associated with adverse effects in offspring were 0.37 parts per million for female rats and 51.1 parts per million in male rats. These levels are 100 to 10,000 times greater than the 5 parts per billion average level of PFOA found in blood of the general human population (in other words, there is a 100- to 10,000fold margin of safety). (17)

Another risk assessment that used estimated blood PFOA levels based on ingested dose of PFOA concluded that the levels of PFOA in humans were about 1,000 to 10,000* times lower than the levels that began to cause adverse effects in animals. (19)

B. Risk analysis based on administered doses of PFOA

One study indicated that the greatest amount of administered PFOA that does not cause adverse effects is 10 mg/kg/day in female rats and 3 mg/kg/day in male rats. (16) However, others suggest that this level is lower, because doses of 0.5 to 1 mg/kg/day (500 to 1000 micrograms/ kg/day) of PFOA were associated with liver effects on laboratory animals. (18) As discussed earlier, the highest level of PFOA that has been measured in water is approximately 10 ppb (10 micrograms/liter). Therefore, in order to reach even the lower estimate of the amount of PFOA suspected to cause adverse effects (500 micrograms/kg/day), the average person (of 70 kg) would need to drink more than 3,500 liters of this most highly contaminated water daily** Using water intake and weight guidelines for children, a similar calculation would also indicate a margin of safety that is somewhat smaller but still very large.

VII. Conclusions

While research has shown adverse effects of high doses of PFOA in animals, the existing studies of workers who are highly exposed do not indicate health effects of PFOA. Risk analysis based upon blood levels of PFOA and ingested amounts of PFOA by the general population show that laboratory animals experiencing adverse effects from PFOA are exposed to amounts that are hundreds to thousands of times higher than those to which the general human population is exposed.

There is doubt, however, as to whether at least some of the effects observed in animals are rele-

^{*} The variation depends on which effect is being examined. **(70 kg X 500 micrograms/kg/day)/(10 micrograms/liter) = 3,500 liters/day.

vant to humans at all, since some biological mechanisms that produce these effects are not present in humans. Additionally, workers with blood levels of PFOA equal to or higher than those that have been found to cause adverse effects in animals have themselves not shown adverse effects. This suggests that the margins of safety for the general population may be even higher than the risk analyses predict.

While further research is needed in order to more fully understand how PFOA acts in the body, the current data indicate that we can expect no risk to human health associated with the levels of PFOA exposure found in the general population.

References

- U.S. Environmental Protection Agency. Revised Draft Hazard Assessment of Perfluorooctanoic Acid and Its Salts. Office of Pollution Prevention and Toxics, Risk Assessment Division, Washington, D.C. (2002)
- Hagen, D.F., Belisle, J., Johnson, J.D., and Venkateswarlu, P. Characterization of fluorinated metabolites by a gas chromatographic-helium microwave plasma detector; the biotransformation of 1H, 1H, 2H, 2H-perfluorodecanol to perfluorooctanoate. Analytical Biochemistry. 118:336-343. (1981)
- Olsen, G.W., Church, T.R., Miller, J.P., Burris, J.M., Hansen, K.J., Lundberg, J.K., Armitage, J.B., Herron, R.M., Medhdizadehkashi, S., Nobiletti, J.G., O'Neill, E., Mandel, J.H., and Zobel, L.R. Perfluorooctanesulfonate and other fluorochemicals in the serum of Red Cross adult blood donors. Environ. Health Perspect. 111:1892-1901. (2003)
- Olsen, G.W., Church, T.R., Hansen, K.J., Burris, J.M., Butenhoff, J.L., Mandel, J.H., and Zobel, L.R. Quantitative evaluation of perfluorooctane sulfonate (PFOS) and other fluorochemicals in the serum of children. J. Children's Health (in press)

TEFLON AND HUMAN HEALTH: DO THE CHARGES STICK?

- Olsen, G.W., Church, T.R., Larson, E.B., van Belle, G., Lundberg, J.K., Hansen, K.J., Burris, J.M., Mandel, J.H., and Zobel, L.R. Serum concentrations of perfluorooctanesulfonate and fluorochemicals in an elderly population from Seattle, Washington. Chemosphere 54:1599-1611. (2004)
- Kannan, K., Corsolini, S., Falandysz, J., Kumar, K.S., Loganathan, B.G., Mohd, M.A., Olivero, J., van Wouwe, N., Yang, J.H., and Aldous, K.M. Perfluorooctanesulfonate and related fluorochemicals in human blood from several countries. Environ. Sci. Technol. 38(17):4489-4495. (2004)
- Olsen, G.W., Burris, J.M., Burlew, M.M., and Mandel, J.H. Epidemiologic assessment of worker serum perfluorooctanesulfonate (PFOS) and perfluorooctanoate (PFOA) concentrations and medical surveillance examinations. J. Occup. Environ. Med. 45(3):260-270. (2003)
- West Virginia Department of Environmental Protection. Ammonium Perfluorooctanoate (C-8) Groundwater Investigation Steering Team Report. Division of Water and Waste Management, Charleston, WV. (2003)
- Kennedy, G.L. Jr., Butenhoff, J.L., Olsen, G.W., O'Connor, J.C., Seacat, A.M., Perkins, R.G., Biegel, L.B., Murphy, S.R., and Farrar, D.G. The toxicology of perfluorooctanoate. Crit. Rev. Toxicol. 34(4):351-384. (2004)
- Burris, J.M., Lundberg, J.K., Olsen, G., Simpson, C., and Mandel, J. Interim report No. 2, Determination of serum half-lives of several fluorochemicals. 3M Company, St. Paul, MN. (U.S. EPA Public Docket AR-226) (2002)
- Butenhoff, J.L., Kennedy, G.L., Frame, S.R., O'Connor, J.C., and York, R.G. The reproductive toxicology of ammonium perfluorooctanoate (APFO) in the rat. Toxicology 196:95-116. (2004)

- Gilliland, F.D. and Mandel, J.S. Serum perfluorooctanoic acid and hepatic enzymes, lipoproteins and cholesterol: A study of occupationally exposed men. J. Occup. Med. 29:560-568. (1996)
- Olsen, G.W., Butenhoff, J.L., and Mandel, J.H. Assessment of lipid, hepatic and thyroid function in relation to an occupational biologic limit value for perfluorooctanoate. U.S. EPA Public Docket AR-226. (2003)
- Gilliland, F.D. and Mandel, J.S. Mortality among employees of a perfluorooctanoic acid production plant. J. Occup. Med. 35:950-954. (1993)
- Renner, R. DuPont disputes PFOA cancer claim. Env. Sci. Technol. 38(14):264A-265A. (2004)
- York, R.G. Oral (gavage) two-generation (one litter per generation) reproduction study of ammonium perfluorooctanoic acid (APFO) in rats. Argus Research Laboratories, Inc. Protocol Number: 418-020, Sponsor Study Number: T-6889.6. (2002)
- 17. U.S. Environmental Protection Agency. Preliminary Risk Assessment of the Developmental Toxicity Associated with Exposure to Perfluorooctanoic Acid and its Salts. Division of Prevention, Pesticides and Toxic Substances, Washington, D.C. (2003)
- West Virginia Department of Environmental Protection. Ammonium Perfluorooctanoate (C8): Assessment of Toxicity Team (CATT) Report. Charleston, WV. (2002)
- Butenhoff, J.L., Gaylor, D.W., Moore, J.A., Olsen, G.W., Rodricks, J., Mandel, J.H., and Zobel, L.R. Characterization of risk for general population exposure to perfluorooctanoate. Regul. Toxicol. Pharmacol. 39:363-380. (2004)

ACSH BOARD OF DIRECTORS					
John H. Moore, Ph.D., M.B.A.	Thomas R. DeGregori, Ph.D.	Mark C. Taylor, M.D.			
Chairman of the Board ACSH	University of Houston	Physicians for a Smoke-Free Canada			
Grove City College	Henry I. Miller, M.D.	Lorraine Thelian			
Elissa P. Benedek, M.D.	Hoover Institution	<i>Ketchum Public Relations</i>			
University of Michigan	A. Alan Moghissi, Ph.D.	Kimberly M. Thompson, Sc.D.			
Norman E. Borlaug, Ph.D.	Institute for Regulatory Science	Harvard School of Public Health			
<i>Texas A&M University</i>	Albert G. Nickel	Elizabeth M. Whelan, Sc.D., M.P.H.			
Michael B. Bracken, Ph.D., M.P.H.	Lyons Lavey Nickel Swift, Inc.	American Council on Science and Health			
Yale University School of Medicine Christine M. Bruhn, Ph.D. University of California	Kenneth M. Prager, M.D. Columbia College of Physicians and Surgeons	Robert J. White, M.D., Ph.D. Metrohealth Medical Center, OH			
Taiwo K. Danmola, C.P.A. <i>Ernst & Young</i>	Stephen S. Sternberg, M.D. Memorial Sloan-Kettering Cancer Center				

ACSH EXECUTIVE STAFF

Elizabeth M. Whelan, Sc.D., M.P.H. President

ACSH BOARD O	F SCIENTIFIC AND	POLICY ADVISORS
rnest L. Abel, Ph.D.	Francis F. Busta, Ph.D.	John Diebold
S. Mott Center	University of Minnesota	The Diebold Institute for Public Policy Studie
Gary R. Acuff, Ph.D.	Elwood F. Caldwell, Ph.D., M.B.A.	Ralph Dittman, M.D., M.P.H.
Texas A&M University	University of Minnesota	<i>Houston, TX</i>
ulie A. Albrecht, Ph.D.	Zerle L. Carpenter, Ph.D.	John E. Dodes, D.D.S.
Iniversity of Nebraska, Lincoln	Texas A&M University	National Council Against Health Fraud
ames E. Alcock, Ph.D.	C. Jelleff Carr, Ph.D.	Sir Richard Doll, M.D., D.Sc., D.M.
Slendon College, York University	<i>Columbia, MD</i>	University of Oxford
homas S. Allems, M.D., M.P.H.	Robert G. Cassens, Ph.D.	Theron W. Downes, Ph.D.
<i>an Francisco, CA</i>	University of Wisconsin, Madison	Michigan State University
tichard G. Allison, Ph.D.	Ercole L. Cavalieri, D.Sc.	Michael Patrick Doyle, Ph.D.
Imerican Society for Nutritional Sciences	University of Nebraska Medical Center	<i>University of Georgia</i>
ohn B. Allred, Ph.D.	Russell N. A. Cecil, M.D., Ph.D.	Adam Drewnowski, Ph.D.
Dhio State University	Albany Medical College	University of Washington
'hilip R. Alper, M.D.	Rino Cerio, M.D.	Michael A. Dubick, Ph.D.
Iniversity of California, San Francisco	Barts and The London Hospital Institute of	U.S. Army Institute of Surgical Research
arl E. Anderson, M.D.	Pathology	Greg Dubord, M.D., M.P.H.
Iniversity of Texas Medical Branch,	Morris E. Chafetz, M.D.	<i>RAM Institute</i>
<i>alveston</i> Jennis T. Avery	Health Education [,] Foundation Bruce M. Chossy, Ph.D. University of Illinois, Urbana-Champaign	Edward R. Duffie, Jr., M.D. <i>Savannah, GA</i>
Hudson Institute Conald Bachman, M.D.	Dale J. Chodos, M.D.	David F. Duncan, Dr.P.H. Duncan & Associates
Kaiser-Permanente Medical Center	<i>Portage, MI</i>	James R. Dunn, Ph.D.
Robert S. Baratz, D.D.S., Ph.D., M.D.	Martha A. Churchill, Esq.	Averill Park, NY
International Medical Consultation Services	Milan, MI Emil William Chynn, M.D.	Robert L. DuPont, M.D. Institute for Behavior and Health
llbert Einstein College of Medicine	New York Eye & Ear Infirmary	Henry A. Dymsza, Ph.D.
Stephen Barrett, M.D.	Dean O. Cliver, Ph.D.	University of Rhode Island
I <i>llentown, PA</i>	University of California, Davis	Michael W. Easley, D.D.S., M.P.H.
homas G. Baumgartner, Pharm.D., M.Ed.	F. M. Clydesdale, Ph.D.	International Health Management &
<i>Iniversity of Florida</i>	University of Massachusetts	Research Associates
I. Lawrence Beeson, Dr.P.H. oma Linda University School of Public Jealth	Donald G. Cochran, Ph.D. Virginia Polytechnic Institute and State University	J. Gordon Edwards, Ph.D. San José State University
ir Colin Berry, D.Sc., Ph.D., M.D.	W. Ronnie Coffman, Ph.D.	George E. Ehrlich, M.D., M.B.
istitute ₋ of Pathology, Royal London	Cornell University	<i>Philadelphia, PA</i>
larry L. Beyerstein, Ph.D.	Bernard L. Cohen, D.Sc. University of Pittsburgh	Michael P. Elston, M.D., M.S. Western Health
imon Fraser University	John J. Cohrssen, Esq.	William N. Elwood, Ph.D.
iteven Black, M.D.	Public Health Policy Advisory Board	Guidance Clinic of the Middle Keys
Kaiser-Permanente Vaccine Study Center	Neville Colman, M.D., Ph.D. St. Luke's Roosevelt Hospital Center	James E. Enstrom, Ph.D., M.P.H. University of California, Los Angeles
Kanosh, UT	Gerald F. Combs, Jr., Ph.D. USDA Grand Forks Human Nutrition Center	Stephen K. Epstein, M.D., M.P.P., FACEP Beth Israel Deaconess Medical Center
linrich L. Bohn, Ph.D. <i>University of Arizona</i>	Michael D. Corbett, Ph.D.	Myron E. Essex, D.V.M., Ph.D. Harvard School of Public Health
len Bolch, Ph.D.	Omaha, NE	Terry D. Etherton, Ph.D.
Rhodes College	Morton Corn, Ph.D.	Pennsylvania State University
oseph F. Borzelleca, Ph.D.	John Hopkins University	R. Gregory Evans, Ph.D., M.P.H.
Medical College of Virginia	Nancy Cotugna, Dr.Ph., R.D., C.D.N.	St. Louis University Center for the Study
Aichael K. Botts, Esq.	University of Delaware	of Bioterrorism and Emerging Infections
Inkeny, IA	H. Russell Cross, Ph.D. National Beef	William Evans, Ph.D. University of Alabama
Seorge A. Bray, M.D. Pennington Biomedical Research Center Lonald W. Brecher, Ph.D., C.Chem., DABT	James W. Curran, M.D., M.P.H. Rollins School of Public Health, Emory	Daniel F. Farkas, Ph.D., M.S., P.E. Oregon State University
GlobalTox International Consultants, Inc.	<i>University</i> Charles R. Curtis. Ph.D.	Richard S. Fawcett, Ph.D. Huxley, IA
tobert L. Brent, M.D., Ph.D. I <i>lfred I. duPont Hospital for Children</i> Ilan Brett, M.D.	Ohio State University Ilene R. Danse, M.D.	John B. Fenger, M.D. Phoenix, AZ
Iniversity of South Carolina	Bolinas, CA	Owen R. Fennema, Ph.D.
Lenneth G. Brown, Ph.D.	Harry G. Day, Sc.D.	University of Wisconsin, Madison
<i>CBinc</i>	Indiana University	Frederick L. Ferris, III, M.D.
Gale A. Buchanan, Ph.D.	Robert M. Devlin, Ph.D.	National Eye Institute
Iniversity of Georgia	University of Massachusetts	David N. Ferro, Ph.D. University of Massachusetts
Seorge M. Burditt, J.D. <i>Bell, Boyd & Lloyd LLC</i>	Seymour Diamond, M.D. Diamond Headache Clinic	Madelon L. Finkel, Ph.D.
dward E. Burns, Ph.D. Fexas A&M University	Donald C. Dickson, M.S.E.E. Gilbert, AZ	Cornell University Medical College

ACSH BOARD OF SCIENTIFIC AND POLICY ADVISORS

Jack C. Fisher, M.D. University of California, San Diego Kenneth D. Fisher, Ph.D. Office of Disease Prevention and Health Leonard T. Flynn, Ph.D., M.B.A. Morganville, NJ William H. Foege, M.D., M.P.H. Emory University Ralph W. Fogleman, D.V.M. Dovlestown, PA Christopher H. Foreman, Jr., Ph.D. University of Maryland E. M. Foster, Ph.D. University of Wisconsin, Madison F. J. Francis, Ph.D. University of Massachusetts Glenn W. Froning, Ph.D. University of Nebraska, Lincoln Vincent A. Fulginiti, M.D. University of Colorado Arthur Furst, Ph.D., Sc.D. University of San Francisc Robert S. Gable, Ed.D., Ph.D., J.D. Claremont Graduate University Shayne C. Gad, Ph.D., D.A.B.T., A.T.S. Gad Consulting Services William G. Gaines, Jr., M.D., M.P.H. Scott & White Clinic Charles O. Gallina, Ph.D. Raymond Gambino, M.D. Quest Diagnostics Incorpo Randy R. Gaugler, Ph.D. Rutgers University J. Bernard L. Gee, M.D. Yale University School of Medicine K. H. Ginzel, M.D. University of Arkansas for Medical Science: William Paul Glezen, M.D. Baylor College of Medicine Jay A. Gold, M.D., J.D., M.P.H. Medical College of Wisconsin Roger E. Gold, Ph.D. Texas A&M University Reneé M. Goodrich, Ph.D. University of Florida Frederick K. Goodwin, M.D. The George Washington University Medical Center Timothy N. Gorski, M.D., F.A.C.O.G. University of North Texas Ronald E. Gots, M.D., Ph.D. International Center for Toxicology and Medicine Henry G. Grabowski, Ph.D. Duke University James Ian Gray, Ph.D. Michigan State University William W. Greaves, M.D., M.S.P.H. Medical College of Wisconsin Kenneth Green, D.Env. *Reason Public Policy Institute* Laura C. Green, Ph.D., D.A.B.T. Cambridge Environmental, Inc. Saul Green, Ph.D. Zol Consultants Richard A. Greenberg, Ph.D. *Hinsdale, IL* Sander Greenland, Dr.P.H., M.S., M.A. UCLA School of Public Health Gordon W. Gribble, Ph.D. Dartmouth College William Grierson, Ph.D. University of Florida Lester Grinspoon, M.D. Harvard Medical School F. Peter Guengerich, Ph.D. Vanderbilt University School of Medicine Caryl J. Guth, M.D. Advance, NC Philip S. Guzelian, M.D. University of Colorado Terryl J. Hartman, Ph.D., M.P.H., R.D. The Pennsylvania State University

Clare M. Hasler, Ph.D. The Robert Mondavi Institute of Wine and Food Science, University of Calfornia, Davis David Kritchevsky, Ph.D. The Wistar Institute Robert D. Havener, M.P.A. Sacramento, CA Virgil W. Hays, Ph.D. University of Kentucky Cheryl G. Healton, Dr.PH. Columbia University Clark W. Heath, Jr., M.D. American Cancer Society Dwight B. Heath, Ph.D. Brown University Robert Heimer, Ph.D. Yale School of Public Health Robert B. Helms, Ph.D. American Enterprise Institute Zane R. Helsel, Ph.D. *Rutgers University, Cook College* Donald A. Henderson, M.D., M.P.H. Johns Hopkins Bloomberg School of Public Health James D. Herbert, Ph.D. Drexel University Gene M. Heyman, Ph.D. McLean Hospital/Harvard Medical School Richard M. Hoar, Ph.D. Williamstown, MA Theodore R. Holford, Ph.D. Yale University School of Medicine Robert M. Hollingworth, Ph.D. Michigan State University Edward S. Horton, M.D. Joslin Diabetes Center/Harvard Medical School Joseph H. Hotchkiss, Ph.D. Cornell University Steve E. Hrudey, Ph.D. University of Alberta Susanne L. Huttner, Ph.D. University of California, Berkeley Robert H. Imrie, D.V.M. Seattle, WA Lucien R. Jacobs, M.D. University of California, Los Angeles Alejandro R. Jadad, M.D., D.Phil., F.R.C.P.C. University of Toronto Rudolph J. Jaeger, Ph.D. Environmental Medicine, Inc William T. Jarvis, Ph.D. Loma Linda University Michael Kamrin, Ph.D. Michigan State University John B. Kaneene, Ph.D., M.P.H., D.V.M. Michigan State University P. Andrew Karam, Ph.D., CHP Rochester Institute of Technology Philip G. Keeney, Ph.D. Pennsylvania State University John G. Keller, Ph.D. *Olney, MD* Kathryn E. Kelly, Dr.P.H. *Delta Toxicology* George R. Kerr, M.D. University of Texas, Houston George A. Keyworth II, Ph.D. Progress and Freedom Foundation Michael Kirsch, M.D. Hiahland Heiahts. OH John C. Kirschman, Ph.D. *Emmaus, PA* Ronald E. Kleinman, M.D. Massachusetts General Hospital/Harvard Medical School Leslie M. Klevay, M.D., S.D.in Hyg. University of North Dakota School of Medicine David M. Klurfeld, Ph.D. U.S. Department of Agriculture Kathryn M. Kolasa, Ph.D., R.D. East Carolina University James S. Koopman, M.D., M.P.H. University of Michigan School of Public Health Alan R. Kristal, Dr.P.H. Fred Hutchinson Cancer Research Center

Stephen B. Kritchevsky, Ph.D. Wake Forest University Baptist Health Sciences Mitzi R. Krockover, M.D. Scottsdale, AZ Manfred Kroger, Ph.D. Pennsylvania State University Laurence J. Kulp, Ph.D. University of Washington Sandford F. Kuvin, M.D. University of Miami School of Medicine/Hebrew University of Jerusalem Carolyn J. Lackey, Ph.D., R.D. North Caroling State University J. Clayburn LaForce, Ph.D. University of California, Los Angeles Pagona Lagiou, M.D., DrMedSci University of Athens Medical School James C. Lamb, IV, Ph.D., J.D., D.A.B.T. Blasland. Bouck & Lee Lawrence E. Lamb, M.D. San Antonio, TX William E. M. Lands, Ph.D. College Park, MD Lillian Langseth, Dr.P.H. Lyda Associates, Inc. Brian A. Larkins, Ph.D. University of Arizona Larry Laudan, Ph.D. National Autonomous University of Mexico Tom B. Leamon, Ph.D. Liberty Mutual Insurance Company Jay H. Lehr, Ph.D. Environmental Education Enterprises, Inc. Brian C. Lentle, M.D., FRCPC, DMRD University of British Columbia Floy Lilley, J.D. Amelia Island, FIF Paul J. Lioy, Ph.D. IIMDNJ-Robert Wood Johnson Medical School William M. London, Ed.D., M.P.H. Walden University Frank C. Lu, M.D., BCFE Miami, Fl William M. Lunch, Ph.D. Oregon State University Daryl Lund, Ph.D. University of Wisconsin George D. Lundberg, M.D. Medscape General Medicine Howard D. Maccabee, Ph.D., M.D. Radiation Oncology Center Janet E. Macheledt, M.D., M.S., M.P.H. Houston, TX Roger P. Maickel, Ph.D. Purdue University Henry G. Manne, J.S.D. George Mason University Law School Karl Maramorosch, Ph.D. Rutgers University, Cook College Judith A. Marlett, Ph.D., R.D. Sun City, AZ James R. Marshall, Ph.D. Roswell Park Cancer Institute Margaret N. Maxey, Ph.D. University of Texas, Austin Mary H. McGrath, M.D., M.P.H. University of California, San Francisco Alan G. McHughen, D.Phil. University of California, Riverside James D. McKean, D.V.M., J.D. Iowa State University John J. McKetta, Ph.D. University of Texas, Austin Donald J. McNamara, Ph.D. Egg Nutrition Center Michael H. Merson, M.D. Yale University School of Medicine Patrick J. Michaels, Ph.D. University of Virginia Thomas H. Milby, M.D., M.P.H. Walnut Creek, CA Joseph M. Miller, M.D., M.P.H. University of New Hampshire

ACSH BOARD OF SCIENTIFIC AND POLICY ADVISORS

William J. Miller, Ph.D. University of Georgia Dade W. Moeller, Ph.D Harvard University Grace P. Monaco, J.D. Medical Care Manage nt Com Brian E. Mondell, M.D. Baltimore Headache Institute Eric W. Mood, LL.D., M.P.H. Yale University School of Medicine John W. Morgan, Dr.P.H. California Cancer Reaistry W. K. C. Morgan, M.D. University of Western Ontario Stephen J. Moss, D.D.S., M.S. New York University College of Dentistry/ Health Education Enterprises, Inc. Brooke T. Mossman, Ph.D. University of Vermont College of Medicine Allison A. Muller, Pharm.D The Children's Hospital of Philadelphia Ian C. Munro, F.A.T.S., Ph.D., FRCPath Cantox Health Sciences International Harris M. Nagler, N.D. Beth Israel Medical Center/Albert Einstein College of Medicine Daniel J. Ncayiyana, M.D. Durhan Institute of Technology Philip E. Nelson, Ph.D. Joyce A. Nettleton, D.Sc., R.D. John S. Neuberger, Dr.P.H. University of Kansas School of Medicine Gordon W. Newell, Ph.D., M.S., F.-A.T.S. Palo Alto. CA Thomas J. Nicholson, Ph.D., M.P.H. Western Kentucky University Steven P. Novella, M.D. Yale University School of Medicine James L. Oblinger, Ph.D. North Carolina State University Deborah L. O'Connor, Ph.D. University of Toronto/The Hospital for Sick Children John Patrick O'Grady, M.D. Tufts University School of Medicine James E. Oldfield. Ph.D. State University Stanley T. Omaye, Ph.D., F.-A.T.S., F.AON, C.N.S. Michael T. Osterholm, Ph.D., M.P.H. University of Minnesota Michael W. Pariza, Ph.D. University of Wisconsin, Madison Stuart Patton, Ph.D. University of California. San Diego James Marc Perrin, M.D. Mass General Hospital for Children Timothy Dukes Phillips, Ph.D. Texas A&M University Mary Frances Picciano, Ph.D. David R. Pike, Ph.D. University of Illinois, Urbana-Champaign Thomas T. Poleman, Ph.D. Cornell University Gary P. Posner, M.D. Tampa, FI John J. Powers, Ph.D. University of Georgia William D. Powrie, Ph.D. University of British Columbia C.S. Prakash, Ph.D. Tuskegee University Marvin P. Pritts, Ph.D. Cornell University Daniel J. Raiten, Ph.D. National Institute of Health David W. Ramey, D.V.M. Ramey Equine Group R.T. Ravenholt, M.D., M.P.H. Russel J. Reiter, Ph.D. University of Texas, San Antonio James H. Steele, D.V.M., M.P.H.

Katherine L. Rhyne King & Spalding LLP Robert D. Steele, Ph.D. Pennsylvania State University William O. Robertson, M.D. University of Washington School of Medicine J. D. Robinson, M.D. Georgetown University School of Medicine Bill D. Roebuck, Ph.D., D.A.B.T. David B. Roll, Ph.D. The United States Pharmacopeia Dale R. Romsos, Ph.D. Michigan State University Joseph D. Rosen, Ph.D. Cook College, Rutgers University Steven T. Rosen, M.D. Northwestern University Medical School Kenneth J. Rothman, Dr.P.H. Boston University School of Public Health Stanley Rothman, Ph.D. Smith College Edward C. A. Runge, Ph.D. Texas A&M University Stephen H. Safe, D.Phil. Texas A&M University Wallace I. Sampson, M.D. Stanford University School of Medicine Harold H. Sandstead, M.D. University of Texas Medical Branch Charles R. Santerre, Ph.D. Purdue University Sally L. Satel, M.D. American Enternrise Institute Lowell D. Satterlee, Ph.D. Vergas, MN Jeffrey W. Savell Texas A&M University Marvin J. Schissel, D.D.S. Roslyn Heights, NY Lawrence J. Schneiderman, M.D. University of California, San Diego Edgar J. Schoen, M.D. Kaiser Permanente Medical Center David Schottenfeld, M.D., M.Sc. University of Michigan Joel M. Schwartz, M.S. Reason Public Policy Institute David E. Seidemann, Ph.D. Brooklyn College Patrick J. Shea, Ph.D. University of Nebraska, Lincoln Michael B. Shermer, Ph.D. Skeptic Magazine Sidney Shindell, M.D., LL.B. Medical College of Wisconsi Sarah Short, Ph.D., Ed.D., R.D. A. J. Siedler, Ph.D. University of Illinois, Urbana-Champaign Mark K. Siegel, M.D. New York University School of Medicine Lee M. Silver, Ph.D. Michael S. Simon, M.D., M.P.H. Wayne State University S. Fred Singer, Ph.D. Science & Environmental Policy Project Robert B. Sklaroff, M.D. Elkins Park, PA Anne M. Smith, Ph.D., R.D., L.D. Ohio State University Gary C. Smith, Ph.D. Colorado State University John N. Sofos, Ph.D. Colorado State Univer Roy F. Spalding, Ph.D. University of Nebraska, Lincoln Leonard T. Sperry, M.D., Ph.D. Barry University Robert A. Squire, D.V.M., Ph.D. Johns Hopkins University Ronald T. Stanko, M.D. University of Pittsburah Medical Center

Judith S. Stern, Sc.D., R.D. University of California, Davis Ronald D. Stewart, O.C., M.D., FRCPC Martha Barnes Stone, Ph.D. Colorado State University Jon A. Story, Ph.D. Purdue University Michael M. Sveda, Ph.D. Gaithersbura, MD Glenn Swogger, Jr., M.D. Toneka, KS Sita R. Tatini, Ph.D. University of Minnesota Steve L. Taylor, Ph.D. University of Nebraska, Lincoln James W. Tillotson, Ph.D., M.B.A. Dimitrios Trichopoulos, M.D. Harvard School of Public Health Murray M. Tuckerman, Ph.D. Robert P. Upchurch, Ph.D. Mark J. Utell, M.D. University of Rochester Medical Center , Shashi B. Verma, Ph.D. University of Nebraska, Lincoln Willard J. Visek, M.D., Ph.D. University of Illinois College of Medicine Lynn Waishwell, Ph.D., C.H.E.S. University of Medicine and Dent. New Jersey, School of Public Hea ntistry of Donald M. Watkin, M.D., M.P.H., F.A.C.P. George Washington University Miles Weinberger, M.D. University of Iowa Hospitals and Clinics John Weisburger, Ph.D. Institute for Cancer Prevention/New York Medical College Janet S. Weiss, M.D. The TaxDoc Simon Wessley, M.D., FRCP King's College London and Institute of Psychiatry Steven D. Wexner, M.D. Cleveland Clinic Florida Joel Elliot White, M.D., F.A.C.R. A.L.K. e Cancer Center Carol Whitlock, Ph.D., R.D. Rochester Institute of Technology Christopher F. Wilkinson, Ph.D. Mark L. Willenbring, M.D. National Institute on Alcohol Abuse and Alcoholism Carl K. Winter, Ph.D. University of California. Davis James J. Worman, Ph.D. Rochester Institute of Technology Russell S. Worrall, O.D. University of California, Berkeley Steven H. Zeisel, M.D., Ph.D. University of North Carolina Michael B. Zemel, Ph.D. Nutrition Institute, University of Tennessee Ekhard E. Ziegler, M.D. *University of Iowa*