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ONE HUNDRED TENTH CONGRESS

U.S. House of Representatives
Committee on Energy and Commerce
Washington, DC 20515-6115

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CHAIRMAN

July 6, 2007

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Anila Jacob, M.D., M.P.H.
Senior Scientist
Environmental Working Group
1436 U Street, N.W.
Washington, D.C. 20009

Dear Dr. Jacob:

Thank you for appearing before the Subcommittee on Environment and Hazardous Materials on Wednesday, April 25, 2007, at the hearing entitled "Perchlorate: Health and Environmental Impacts of Unregulated Exposure." We appreciate the time and effort you gave as a witness before the subcommittee.

Under the Rules of the Committee on Energy and Commerce, the hearing record remains open to permit Members to submit additional questions to the witnesses. Attached are questions directed to you from certain Members of the Committee. In preparing your answers to these questions, please address your response to the Member who has submitted the questions and include the text of the Member's question along with your response.

To facilitate the printing of the hearing record, your responses to these questions should be received no later than the close of business on July 20, 2007. Your written responses should be delivered to 2125 Rayburn House Office Building and faxed to (202) 225-2899 to the attention of Rachel Bleshman. An electronic version of your response should also be sent by e-mail to Ms. Bleshman at rachel.bleshman@mail.house.gov. Please send your response in a single Word or WordPerfect formatted document.

Thank you for your prompt attention to this request. If you need additional information or have other questions, please contact Rachel Bleshman at (202) 225-2927.

Sincerely,

A handwritten signature in blue ink, appearing to read "John D. Dingell", is written over the typed name and title.

JOHN D. DINGELL
CHAIRMAN

Attachment

cc: The Honorable Joe Barton, Ranking Member
Committee on Energy and Commerce

The Honorable Albert Wynn, Chairman
Subcommittee on Environment and Hazardous Materials

The Honorable John Shimkus, Ranking Member
Subcommittee on Environment and Hazardous Materials

The Honorable Joe Barton and the Honorable John Shimkus

1. You state that EPA must set a federal MCL for perchlorate that takes into account the most recent research, including the recent CDC study and the breast milk studies. How, in your estimate, does a 1 ppb. level definitively take those studies into account? What further analysis has been done since these studies to ensure this is an appropriate level?
2. As a doctor, can you tell us what other sources can act as iodide inhibitors in the body and have the potential to disrupt thyroid function? Are you aware if these other sources of iodine inhibitors are accounted for in these studies? What were the control factors in the Blount study? Are other states that have set an MCL less protective than 1 ppb. wrong on the science?
3. Is it accurate to state that roughly one third of women in the U.S. have a form of hypothyroidism that contributes to decreased iodine uptake? Are there other risks for these women from other sources of exposure?
4. Should there be other studies besides the CDC and Texas Tech study to look at other sources of exposure or are the CDC results conclusive in your opinion?
5. Does the Blount study definitively show that perchlorate caused the increase in TSH or decrease in T4 or does it suggest a potential association? Are there other factors that may also play a role that could alter the dose-response curve?
6. Does the Blount study demonstrate that the urinary perchlorate levels measured in the sample population are associated with any adverse effects – effects that will harm public health, even in the sensitive populations?
7. Dr. Utiger, your co-panelist, who has been a practicing physician specializing in thyroid function for 40 years, suggests that people with hypothyroidism should compensate for potential perchlorate exposures through greater dietary intake of iodine rich foods and vitamins. Yet, your testimony categorically rejects these notions as inappropriate. What about your medical and or scientific background makes you more qualified to reject the health advice of this clinician?
8. You testified that your concern about regulating perchlorate is centered solely on the protection of public health. I understand that it might be feasible to treat drinking water to 0.5 ppb. If the least amount of perchlorate in water is better from your perspective then why are you insisting on a standard that is higher (1 ppb.)?
9. In addition to the Environmental Working Group's (EWG) efforts to inform the public about what it considers to be the truth about perchlorate's effects on human health, EWG has been very active in promoting decreased uses of pesticides and greater consumption of organic foods. Considering the high amounts of perchlorate

The Honorable Joe Barton and the Honorable John Shimkus (continued)

in organic fertilizer from Chile as well as the foods imported from there, wouldn't these food safety goals be at cross purposes?

The Honorable Albert Wynn

1. The CDC studies found that levels of perchlorate common in the population, which are significantly less than EPA's RfD of 24.5 ppb., were associated with small to medium changes in thyroid hormone levels. Do changes in thyroid hormone levels correspond with adverse changes in thyroid function?
2. Based upon CDC's Studies and assuming that changes in thyroid hormone levels cause corresponding changes in thyroid function, then is it not the case that as many as 43 million woman in the United States can be adversely affected by the common levels of perchlorate that are present in the food and drinking water in the United States?
3. Is it correct that the longer the EPA delays in setting an MCL for perchlorate in drinking water, the more women, children and fetuses will unknowingly face exposure to perchlorate contamination from drinking water?