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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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Robert David Utiger, M.D.  
Senior Physician, Brigham and Women's Hospital  
Clinical Professor of Medicine  
Harvard Institutes of Medicine  
77 Avenue Louis Pasteur  
Boston, MA 02115

Dear Dr. Utiger:

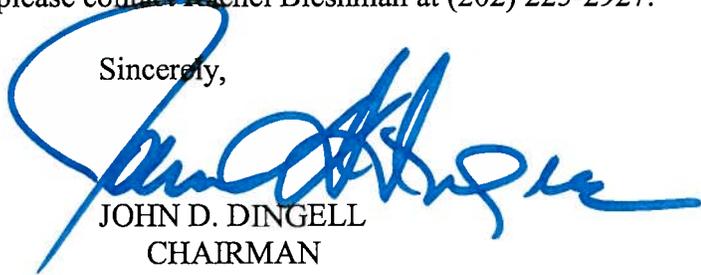
Thank you for appearing before the Subcommittee on Environment and Hazardous Materials on Wednesday, April 25, 2007, at the hearing entitled "Perchlorate: Health and Environmental Impacts of Unregulated Exposure." We appreciate the time and effort you gave as a witness before the subcommittee.

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](mailto: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,



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 testified that people with hypothyroidism should compensate for potential perchlorate exposures through greater dietary intake of iodine rich foods and vitamins. This was also the recommendation of the National Academy's Committee to Assess the Health Implications of Perchlorate Ingestion. Could you please talk about why you consider this so important? Please also detail what medicinal therapies or protocols are used to treat iodine deficiency, how widely available these are, what their costs are, and whether such treatments can be undergone when a woman is pregnant or breastfeeding?
2. You started talking about therapies for thyroid damage, but due to time constraints were not allowed to finish your answer. Could you please expound on the points you wanted to make about thyroid damage, treatment or replacement, and the effects of perchlorate?
3. Were there any other human health related topics concerning perchlorate effects or exposures that were discussed or alluded to during the hearing that you believe need to be addressed or clarified? Are there any comments you would like to make or questions you would like to more fully answer which you did not get a chance to due to time constraints at the hearing?
4. There is much discussion about perchlorate's health effects on pregnant women, fetuses, and young children. When the National Academy's Committee to Assess the Health Implications of Perchlorate Ingestion was reviewing existing studies on human perchlorate exposures, did you consider work on neo-natal health and breast feeding impacts from perchlorate? Was any of the information you evaluated compelling in showing an increase in hyperthyroidism?
5. The CDC/Blount study showed an "association" between urinary perchlorate and increased TSH and decreased total T4 in women 12 and older, who had urine iodine levels < 100 µg/L. It is possible people might assume then that perchlorate actually "caused" the thyroid changes. Was the CDC/Blount study designed to evaluate whether there is a causal relationship between low levels of perchlorate exposure and thyroid function? Can you please clarify how you view the difference between "an association" and "causation?"
6. As a medical doctor, specializing in thyroid function, what do you make of the split in the CDC/Blount study findings between perchlorate's iodine effects on men and women?
7. Your testimony talks about the compensatory nature of the thyroid. Do you agree with this statement published by the National Academy's Committee to Assess the Health Implications of Perchlorate Ingestion: "inhibition of iodide uptake by the thyroid is duration-dependent, the effect should decrease rather than increase with time, because compensation would increase the activity of the sodium-iodide symporter and therefore increase iodide transport into the thyroid"?