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To: John Graham/OMB/EOP@EOP

CC:

Subject: FW: BNA News - Dennis' views on the 2003 Proposed Cancer Guidelin es for Childhood Exposure - April 25, 2003

I would suggest that OMB should give my comments serious consideration. The impact on the regulatory community could be substantial. About 30-50, 000 in DC read it on Monday.

All the best,

Dennis

> Friday, April 25, 2003

> Risk Assessment

> > A VIEW ON THE 2003 PROPOSED CANCER GUIDELINES FOR CHILDHOOD EXPOSURE > By Dennis J. Paustenbach > Risk Assessment > Assessing Cancer Susceptibility from Early-Life Exposure > > There are, the author argues, more pressing environmental issues worthy of > our attention that do not require the leaps of faith needed to embrace the > Environmental Protection Agency's proposed guidelines for assessing cancer > susceptibility from early-life exposure to carcinogens. Eliminating > certain known hazards for children, improving education about lifestyle > choices, and promulgating rules for some chemicals which have vet to be > regulated almost certainly would be more likely to improve the well-being > of children than applying EPA's broad recommendations to future risk > assessments. Nonetheless, he says, as a society we have rightfully decided > to focus on the various potential hazards to children. The author would > not oppose many of the recommendations in this guidance, but says it would > be inappropriate for society to think "science was telling us to do it." > > Dennis J. Paustenbach is corporate vice president at Exponent, an > engineering and science consulting firm headquartered in Menlo Park, > Calif. He has 20 years of experience in risk assessment, environmental > engineering, toxicology, and occupational health. He has worked on many > high-profile projects, including the assessments of contaminated soils at > Times Beach, Love Canal, and The Meadowlands, and the sediments in the > Hudson River. He is the editor of a textbook, Human and Ecological Risk > Assessment: Theory and Practice, and of the new scientific publication, > "The Journal of Children's Health." The views expressed in this article > are those of the author and do not represent an editorial position of BNA, > which welcomes other points of view.

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> Supplemental Guidance for Assessing Cancer Susceptibility from Early-Life > Exposure to Carcinogens [hereafter called guidance]. This has also been > nicknames the "Cancer Guidelines for Children." Unlike many other > guidelines, EPA states in the Preface that "this Supplemental Guidance > will have no binding effect on EPA or any regulated entity." However, EPA > noted it reserves the right to use the "approaches in Supplemental > Guidance in developing a future risk assessment ... [if] the approaches > from the Supplemental Guidance that were employed are suitable and > appropriate." As a practical matter, it is guite likely that the final > version of this guidance will have significant impact on future decisions > by EPA and the courts.1 > Like so many regulatory policies, guidance or criteria this is a "good > news/bad news" story. The good news is EPA apparently believes the United > States has the financial resources to investigate more thoroughly whether > low level exposure to carcinogens at an early age (e.g., neonate or young > child) poses a larger cancer risk than for adults exposed to the same > dose. Most risk assessors and/or toxicologists who have studied > carcinogens for the past two decades have suspected the fetus or the very > young child was more susceptible than the adult to a later cancer hazard > from some genotoxic chemicals; but only if the dose were substantial. By

> On February 28, 2003 the Environmental Protection Agency issued the

Substantial, it was meant at the doses used in cancer bioassays or.

> perhaps, at doses to which some people might be exposed in the workplace.

> In general, the toxicology community has assumed, based on various lines

> of reasoning and basic scientific principles, that the doses associated

> with current regulations contain a sufficient margin of safety to protect
 > children.

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> The bad news is there is a dearth of published information upon which to

> offer quantitative, or even qualitative, guidance. In short, there have

> not been any published studies specifically designed to answer the

> question which EPA and the scientific community would like to address. The

> guidance does a good job of piecing together the very limited information

> from various studies to suggest the young child probably is more

> susceptible to mutagens during periods of rapid organ development.

> However, there is very little acknowledgment by EPA in this draft guidance

> that the doses in the studies they rely upon were significantly, often a

> thousand fold, above any likely environmental dose.

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> It should be noted that EPA is not intending this guidance to prevent

> childhood cancers but rather as a mechanism for reducing adult cancers due

> to early lifetime exposure. Also, the guidance only addresses exposure

> after birth and does not consider the possible risks associated with

> prenatal exposure through the mother.

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> Background

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> EPA correctly notes in its Supplemental Guidance that standard animal

> cancer bioassays generally begin dosing after the animals are six to eight

> weeks old, when many organs and systems are relatively mature, though

> substantial growth in body size continues thereafter. In the few review

> articles that compare the results of perinatal carcinogenesis testing to

> the standard cancer bioassay, the authors usually note that (1) the same

> tumor sites are usually observed following either perinatal or adult > exposure and (2) perinatal exposure in conjunction with adult exposure > usually increases the incidence of tumors or reduces the latency period > before tumors are observed. As noted previously, the extrapolation of this > information from relatively high dose animal studies to infer that > children, for example, are more susceptible to chemicals found in the air, > water, food, or soil is not easily justified given the available > information. > > In the Introduction, EPA correctly notes a number of possible reasons why > young children could be more susceptible to the adverse effects of > chemicals, but the guidance tends to talk more about evidence for the > developmental hazard than evidence they are more susceptible to > carcinogens. They list a few characteristics of early development, which > if perturbed, might increase the cancer hazard including: > > * More frequent cell division during development, which can result in > enhanced fixation of mutations due to the reduced time available for > repair of DNA lesions. Also, clonal expansion of mutant cells gives a > larger population of mutants. > * Some embryonic cells, such as brain cells, lack key DNA repair > enzymes. > * Some components of the immune system are not fully functional during > development. > * Hormonal systems operate at different levels during different life > stages. > * Induction of developmental abnormalities can result in a > predisposition to carcinogenic effects later in life. > It should be noted, however, that the above list definitely describes why, > following exposure to chemicals at some dose, the fetus or young child is > vulnerable to developmental effects but the list is not nearly so > compelling as evidence for an increased cancer hazard. Moreover, the > guidance specifically states that the safety factors apply to children > after birth, not fetuses, and the data on which these factors are based do > not include prenatal exposure. To EPA's credit, it recognizes the > available data only suggest the genotoxic carcinogens might be of concern > and acknowledges a lot more information is needed. > > > Mode Of Action > As in the primary document, EPA's Draft Final Guidelines for Carcinogen > Risk Assessment,2 a significant amount of discussion is directed at the > importance of the mode of action through which a chemical produces its > carcinogenic effect. For those scientists who have studied the mechanism > of action of the various classes of chemical carcinogens or specific > chemicals, this section deserves special attention, as it is in many ways > the foundation upon which the guidance is based. > > Without going into a detailed discussion of whether there is sufficient

> evidence to indicate certain modes of action present a greater

> carcinogenic hazard for the young child compared with the adult, there are

> a few parts of the EPA discussion which probably would benefit from

> comments of substance from members of the scientific community. In

> particular, there seems to be some degree of reliance on the assumption

> that cancer risks are proportional to exposure duration. Although the > assumption as applied in the guidance is acknowledged to be a bit weak, it > is nonetheless later used as a basis for some of the quantitative > recommendations. EPA noted that it had difficulty coming up with a good > estimate of the daily dose when trying to apply information from animals > studies not intended to assess risk to the young animals. This is because > the young animals eat and drink larger quantities per body weight when > they are young. This, regrettably, complicates the quantitative > interpretation of most of the published studies. > > Not surprisingly, perhaps the best information for determining whether the > neonate or child is at greater risk of developing cancer (per unit of > dose) than adults is contained within the radiation literature. Again, EPA > acknowledges very substantial differences between the toxicokinetics and > toxicodynamics of mutagenic chemicals and ionizing radiation. However, due > to a paucity of good studies on chemicals, they tend to rely on > information from the A-bomb survivors for inferring an increased cancer > risk to adults based on early-life exposure. Because of the reliance on > the radiation literature, it is clear throughout the document that EPA > would like to focus on the possible increased susceptibility of children > to chemicals which are clearly genotoxic. Even though this is a prudent > approach, it would have been useful for EPA to have spent more time > discussing why exposure to relatively high doses of ionizing radiation is > different from exposure to low doses of even fairly potent genotoxic > chemical carcinogens. > > > > The Database > Twenty three animal studies on sixteen chemicals are used to derive some > level of qualitative and quantitative understanding of the increased > susceptibility of the young child. The primary data sets relied upon by > EPA derive from seven multiple dose studies of five mutagenic > compounds--benzo[a]pyrene, benzidine, diethylnitrosamine, safrole, and > vinyl chloride--and six multiple dose studies of six non-mutagenic > carcinogens. EPA readily acknowledged that these studies were not designed > to answer the questions being asked. Many more data sets investigating > exposure of young animals to mutagens and carcinogens are available... > However, in an attempt to use the data to answer the question at > hand--does early life exposure increase carcinogenic risk--EPA chose to > use only studies from the same laboratories, using the same species and > strain of animal, the same route of exposure and similar doses. > > EPA attempts to adjust or normalize the doses from the studies of the five > mutagens and six non-mutagens so that it can determine whether a > consistent message surfaces from this data set. Because the studies do not > have an accurate estimation of dose for the young animals, EPA uses time > as a surrogate for dose. Since these studies were not intended for the > purpose to which EPA would like them to apply, it is quite possible that > no matter how much the data are scrutinized, no light will be shed on the > central issue of the Supplemental Guidance: Are children genuinely more > susceptible to low doses of chemical carcinogens? >

> The rest of the discussion about the database is clear and relatively

> concise. In fact, this guidance document is as readable and understandable

> as any of the dozens of documents EPA has produced over the past 30 years. > The thought process was relatively easy to follow. However, the handling > of data from the various studies presented in the tables was not entirely > transparent. Specifically, it was not always clear why certain data were > presented from the studies and not others. In addition, the use of acute > dosing studies, without appropriate complementary long-term studies, to > try to understand the cancer hazard seemed to involve a lot of wishful > thinking on the part of the agency. Also, there was not sufficient > discussion of the importance of separating those chemicals requiring > activation (metabolism) to form the reactive chemical species versus those > that are direct acting carcinogens. This is important because, when > compared to the adult, one of the genuine differences between the fetus, > the newborn, and the developing child, is that certain metabolic enzymes > are not fully functional. Thus, if metabolic activation of a chemical is > required, the fetus or young child would be less susceptible to the > carcinogenic hazard compared to later in life. > One could take issue with the mathematical model used by EPA (i.e., the > ratio of early exposure tumor incidence/ratio of adult exposure tumor > incidence=risk adjustment factor) since it may mask two significant > problems with the methodology. First, EPA is not sure of the dose to the > young animals in the various studies. Second, one might expect earlier > exposure would shift the latency curve to the left, thus resulting in an > apparent increase in tumors. EPA would do well to reexamine this method. > The database and results section closes with a discussion of "carcinogen > with modes of action other than mutagenicity." It seems EPA simply had to > concede not enough is known about the non-genotoxic chemicals at this time > to conclude that they do or do not pose an increased cancer hazard to > children at any dose. This was courageous and, given what is known, a > valid position. > > > Implementation Guidance for Assessing Cancer Risks from Early-Life > Exposure

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> This section is only about five pages in length, but EPA makes a number of

> recommendations that surely will stimulate discussion within the

> scientific community.

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> In an attempt to give the Supplemental Guidance some substance, EPA offers
> some quantitative recommendations about estimating the cancer risk due to
> early life exposures. One must assume these recommendations were thought
> to be reasonable given the data presented in the animal studies and what
> was learned from the human experience with ionizing radiation. These
> recommendations, in fact, are useful for generating thoughtful discussion
> and for generating research hypotheses but are probably lacking sufficient
> foundation to warrant being the basis of EPA's future risk assessments of
> scenarios involving newborns or young children.

> The key recommendations within this section are almost certainly those
 > listed in item 2a on page 34 of the Implementation Guidance section of the
 > draft document:

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> When the data indicate a mutagenic mode of action, the available > science indicates that higher cancer risks typically result from a given > exposure occurring early in life when compared with the same amount of
 > exposure during adulthood. Consequently, in the absence of early-life
 > studies on a specific agent under consideration, U.S. EPA generally
 > should:

> Use linear extrapolation to lower doses. This choice is based on
 > mode-of-action data indicating that mutagens can give risk to cancers with
 > an apparently low-dose-linear response.

> Adjust risk estimates that pertain to childhood exposure. This
 > choice is proposed because risk estimates based on a lifetime-average
 > daily dose do not consider the potential for higher cancer risks form
 > early life exposure. The following adjustments represent a practical
 > approach that reflects the results of the preceding analysis, which found
 > that cancer risks generally were higher from early-life exposure than from
 > similar exposure durations in life:

* For exposures before two years of age, a ten-fold adjustment.
 * For exposures between two and 15 years of age, a three-fold
 > adjustment

>* For exposures after 15 years of age, no adjustment.

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These adjustments reflect the potential for early-life exposure to
 make a greater contribution to cancers appearing later in life; any
 differences in early life also should be accounted for.

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Other general recommendations are offered and although one can support
 many of them and take issue with others, they do not have the potential
 impact on health risk assessment of the above-mentioned recommendations.

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> One View of the Guidelines

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> It was only a matter of time before the environmental revolution, which

> began nearly 40 years ago, would have the luxury of having a serious

> debate about whether standards or guidelines initially established to

> protect both adults and children were truly adequate, since they were

> based on testing of mature animals or human studies of exposed adults.

> Many of the genuinely significant and obvious, public health hazards

> associated with the presence of industrial chemicals in our environment

> have been identified and regulated. To a large extent, the concentrations

> to which the vast majority of Americans are now exposed are quite small.

> It has been inferred that, therefore, the possible risks to the typical

> America must also be quite small.

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> However, as EPA points out, an argument can be made that it is logical to

> infer children may well be at some greater risk of harm to some agents

> simply because they inhale and ingest larger quantities per body weight

> than adults, and because cell turnover is great during the periods of

> development; thus increasing the risk of mutations if there is exposure to

> a genotoxic agent. Indeed, this is true, if the doses which may result

> even from compliance with current environmental regulations do not have an

> appreciable margin of safety built into them. The scientific community

> does not have solid information to indicate the majority of current

> regulations do not have an adequate margin of safety to protect children.

> On the other hand, it is probably not possible to demonstrate complete

> safety one way or the other using either animal or epidemiology studies.

> This brings up a point worth mentioning. Ever since the passage of the

> Food Quality Protection Act of 1996, many people have suggested current

> exposure limits of all types (i.e., air, food, water, soil) were not

> intended originally to protect children or adults who were first exposed

> as children. This is not the case. Going back to the work of Dr. Arnold

> Lehman, children were considered by the FDA in the 1950s when tolerances

> were established using the safety factor approach. Children were also

> considered in the first Carcinogenic Risk Assessment Guidelines

> promulgated by EPA in 1976. One is hard pressed to find many examples

> where this approach has not been adequate to protect our children.

> However, as noted previously, it is equally difficult to show there is a

> large margin of safety inherent in these criteria.

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> This particular Supplemental Guideline is, in all likelihood,

> representative of the next generation of guidelines to be issued in the

> United States and Western Europe. The goal is to keep the pressure on

> society to be vigilant about how it uses chemicals and releases them into

> the environment. To apply this pressure is, de facto, the duty of EPA.

> Twenty years ago, issuance of these kinds of guidance documents or

> assessments of particular agents was termed "science forcing." That is,

> EPA or other agencies announced it was going to issue strict regulations

> in light of the possible hazards to workers or society unless the

> regulated community would conduct the scientific research convincing them

> that the risk was, in fact, negligible. Regrettably, this approach has not

> been used frequently over the past decade.

>

> Some might claim, as EPA has indicated, that because this guidance is not

> binding, it will have only modest impact on how risk assessments are

> conducted in the coming years. This is probably naive. History is quite

> clear that even draft EPA guidelines take on a life of their own--both

> here and in other countries. Further, EPA headquarters has only limited

> control over what the agency's regional offices do with its draft or final

> guidelines. For those who might not believe this, one need only look at

> the decision by EPA Region V to rely on EPA's Draft Dioxin Reassessment as

> part of its justification for not accepting a rather important risk

> assessment submitted by Dow Chemical for its Midland site (even though

> reliance on draft documents is discouraged by EPA headquarters).

> Because of the increasing expectations of citizens for cleaner air, water,

> food, soil and sediments EPA has a mandate to be absolutely certain

> current guidelines are amply protective. This is the rub: The science on

> the increased susceptibility of children compared to adults is simply not

> available, and it may not be obtainable, to answer these questions. For

> this reason, adoption of the Precautionary Principle has significant

> appeal to some citizens and many nongovernmental organizations. Many may

> believe that it is regrettable, but for multiple reasons, legal and

> otherwise, EPA is not yet able to implement the Precautionary Principle.

> However, EPA is able to conduct analyses like those presented in the

> so-called "Children's Cancer Guidelines" and use them to suggest

> quantitative changes are needed in how the country conducts risk

> assessments. Whether this guidance meets the expectation of the new Data

> Quality Act is unclear.3

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> When faced with the very sparse data upon which the recommendations are

> based, to the extent that EPA is in fact embracing the Precautionary > Principle, it should say so. Perhaps, EPA would be better off to simply > state that "in light of the concern about this possible hazard, we > recommend that the following approach be implemented beginning one to five > years from the date of issuance unless certain data gaps are filled.." > Accordingly, it would be useful if the agency, based on its efforts to > develop these guidelines, identified the areas of research that could > potentially satisfy its concerns and negate the need for promulgating the > recommendations in these guidelines. Perhaps the regulated community and > academia then would rise to the occasion and help to inform future > decisions about the possible risks associated with childhood exposures. > Applying the "science forcing" approach is likely a more useful approach > to achieving what the citizens expect of EPA without going through the > process of trying to make the available data support a position for which > the data are inadequate. Virtually all companies and scientists find it > difficult not to support reducing the concentrations of chemicals in our > environment, and it is especially difficult not to support efforts that > might ultimately be of some benefit to our children. If EPA believes some > action is needed, it would be more appropriate to simply say it is > embracing the Precautionary Principle as the justification for its > recommendations rather than try to rely on the available data. > This is not to say that I embrace or reject the Precautionary Principle. > For one thing, there are many different proposed approaches for > implementing the principle. The advantage of the approach is that it is > simple. Some variations of the principle, including those which require > corporations to arbitrarily reduce emissions of specific contaminants by > 50 percent every 5 years, have certain benefits over traditional > approaches to dealing with chemicals. This approach has proven to be > effective, for example, in the Scandinavian countries where it was applied > to the emissions of dioxins. However, one of the biggest shortcomings is > that the approach is expensive and a poor tool for prioritizing the > hazards posed by the 2,000 or more chemicals used frequently in industry. > In short, the hazard is that the nation might spend a great deal of money > controlling trivial hazards at the expense of not dealing with those that > are significant. > > EPA has probably done the best job that it can with what is known about > the possible increased susceptibility of children but it is not sufficient > to warrant the quantitative recommendations offered by EPA. If adopted, > the costs of dealing with the more strict cleanup and emissions limits > could be quite substantial. For example, already some prognosticators have

> used these guidelines to support requests to "reopen" Records of Decisions
 > at Superfund sites across the nation. They allege "new evidence has been

> presented in these guidelines" and that one can infer these sites were not

> cleaned to standards which will protect children.

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> There are, in my view, many other more pressing environmental issues

> worthy of our attention which don't require the leaps of faith that are

> needed to embrace these proposed guidelines. Eliminating certain known

> health hazards for children, improving the public education about

> lifestyle choices and promulgating rules for some chemicals in our

> environment which have yet to be regulated would almost certainly be more

> likely to improve the well being of children than applying these broad

> recommendations to future risk assessments. Nonetheless, as a society we

> have rightfully decided to focus on the potential hazard to children posed

> by chemicals in our environment, and I would not be opposed to supporting

> many of the recommendations in this Supplemental Guidance but it would be

> inappropriate for society to think that the "science was telling us to do

> it."

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> http://www.epa.gov/ncea/raf/cancer2003.htm on the World Wide Web.

> 3 "EPA Guidelines for Information Quality Include Procedures for

> 'Influential' Data" (193 DEN A-1, 10/4/02) and "Drive Under Way to Enact

> Legislation On Data Quality, Access at State Level" (29 DEN A-14,

> 02/12/03).

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> 1 "Draft Guidance on Cancer Assessments Called Major Step to Improve > Analyses" (42 DEN A-9, 03/4/03).

> 2 The draft guidelines are available at