

**Miller, Diane M. (CDC/NIOSH/EID)**

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**From:** Tracey Easthope <tracey@ecocenter.org>  
**Sent:** Friday, December 30, 2011 2:20 PM  
**To:** NIOSH Docket Office (CDC)  
**Subject:** Ecology Center comments: Docket number NIOSH-240  
**Attachments:** NIOSHDocket.EcologyCenter

Please find the attached comments for Docket number NIOSH-240

Can you acknowledge receipt of these comments?

Thank you so much and best wishes for the New Year.

Tracey Easthope

# ECOLOGY CENTER



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Date: December 29, 2011

To: NIOSH Docket Office  
Robert A. Taft Laboratories  
4676 Columbia Parkway, MS-C34  
Cincinnati, Ohio 45226  
Submitted by e-mail to: [nioshdocket@cdc.gov](mailto:nioshdocket@cdc.gov)

From: Tracey Easthope, MPH, Director, Environmental Health Project, Ecology Center

RE: Request for Information: Announcement of Carcinogen and Recommended Exposure Limit (REL) Policy Assessment, Docket Number NIOSH-240

The Ecology Center is pleased that NIOSH has engaged the public at this early stage of the process in revising its carcinogen policy. The Ecology Center works at the local, state, and national levels for clean production, healthy communities, environmental justice, and a sustainable future. Given this mission, we are deeply concerned about the health of workers, their families and communities, as well as the upstream and downstream impacts of the use of carcinogens in the workplace. The health of workers, the environment and the public are intimately connected. We encourage NIOSH to revise its carcinogen policy and identify solutions that avoid any risk shifting. We welcome the opportunity to share our thoughts as NIOSH revises its carcinogen policy.

**(1) Should there explicitly be a carcinogen policy as opposed to a broader policy on toxicant identification and classification (e.g. carcinogens, reproductive hazards, neurotoxic agents)?**

Cancer remains one of the leading causes of morbidity and mortality in the country, suggesting that there is much work to do, and increased policy and programmatic attention are needed to better prevent cancer and its associated human suffering and economic costs. Occupational cancer is the leading cause of cancer attributed to involuntary exposures, followed by cancers caused by environmental exposures. These involuntary exposures share some risk factors. The Ecology Center is particularly concerned about the steady rise in some children's cancers, which research suggests can be associated with parental exposures. We strongly believe that NIOSH should continue to have a carcinogen policy that is updated based on the best available science. The stated, explicit and vigorously pursued goal of that policy should be primary prevention. However, we also firmly support NIOSH moving forward to develop a more comprehensive toxicant policy that addresses a larger array of significant health endpoints.

**(2) What evidence should form the basis for determining that substances are carcinogens? How should these criteria correspond to nomenclature and categorizations (e.g., known, reasonably anticipated, etc.)?**

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Our most important recommendation for NIOSH is that its carcinogen policy be strongly prevention-orientated. NIOSH should use the breadth of relevant scientific data available regarding the carcinogenicity of a substance, which includes animal, human, in vitro and computer modeling data. As an organization that is engaged in the protection of public health by pursuing chemicals policy reform in Michigan and nationally, we are very concerned about the backlog of untested chemicals in commerce and the need to use data emerging from rapid screening assays and other relevant studies to detect and act on early warnings of harm. Thus we encourage NIOSH to evaluate existing classification systems to ensure that these data are incorporated into the carcinogen categorization/classification scheme in a manner that promotes preventative action.

**(3) Should 1 in 1,000 working lifetime risk (for persons occupationally exposed) be the target level for a recommended exposure limit (REL) for carcinogens or should lower targets be considered?**

We strongly urge a much more protective standard. A 1 in 1,000 lifetime risk is not a target that fulfills NIOSH's obligation to protect workers. NIOSH should focus on providing exposure levels that are truly safe for workers. As such, NIOSH should adopt its earlier hazard-based policy "no detectable exposure level to proven carcinogenic substances." Our efforts to promote clean production and green chemistry suggest that there are ample opportunities for NIOSH to use its technical assistance efforts in a more proactive manner to support employers in transitioning to the use of safer chemicals and processes rather than recommending an exposure level for a carcinogen when the vast array of research on cancer still suggests that there is no safe level to a carcinogen.

**(4) In establishing NIOSH RELs, how should the phrase "to the extent feasible" (defined in the 1995 NIOSH Recommended Exposure Limit Policy) be interpreted and applied?**

As a public health agency, NIOSH, should remain focused on recommending policies to fully protect workers, based on the best available science, and leave the immediate feasibility of policy decisions to OSHA. While NIOSH should recognize best practice, NIOSH's recommendations still must be a strong driver of clean and safe manufacturing and production by encouraging the necessary innovation to transition away from using carcinogens. Redesign and reformulation of processes, products and chemistries is often more cost effective, and can reduce costs throughout the use of the material, process or product. NIOSH should pioneer cost models that take into consideration the long-term benefits of switching to safer chemistries, or different processes or materials. NIOSH should remain focused on those processes and chemistries with the greatest potential for protecting workers, the public and the environment.

**5) In the absence of data, what uncertainties or assumptions are appropriate for use in the development of RELs? What is the utility of a standard "action level" (i.e., an exposure limit set below REL typically used to trigger risk management actions) and how should it be set? How should NIOSH address worker exposure to complex mixtures?**

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When one in two men, and one in three women are predicted to get cancer in their lifetimes, and some significant proportion of those cancers are the result of occupational exposure, or occupational exposure contributes to the development of cancer, it is quite clear that our current approach to fighting cancer is not yet working well enough. NIOSH's carcinogen policy should prioritize protection over inaction despite uncertainties in the science. Workers are exposed to complex mixtures of carcinogens and other toxicants at work and outside of work thus emphasizing the need for precautionary action and protective action levels. To more effectively prevent cancer, NIOSH's resources would be best used by eliminating wherever possible worker exposures. The more NIOSH can focus resources on the redesign of problematic processes and the reduction in the exposure of workers to complex mixtures, the better resources will be spent. Risk assessment techniques to assess hazard from complex mixtures will always and necessarily be flawed. However, our organization strongly supports the critique of current risk assessments in the National Academy of Sciences Science and Decisions: Advancing Risk Assessment Report and we urge NIOSH to adjust your risk assessment practice in keeping with those recommendations.

We look forward to reviewing NIOSH's draft revised policy. Please contact me if you have any questions.

Sincerely,

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