**To:** Blackburn, Elizabeth[Blackburn.Elizabeth@epa.gov]; Mattas-Curry, Lahne[Mattas-Curry.Lahne@epa.gov]; Trovato, Ramona[Trovato.Ramona@epa.gov]
**Cc:** Belknap, Andra[Belknap.Andra@epa.gov]
**From:** Behringer, Caroline
**Sent:** Fri 2/14/2014 5:17:28 PM
**Subject:** RE: Final WV Health Professional Document (Freedom site) + a Ken Ward story about it

Good to know! Thanks!

Caroline Behringer

Deputy Press Secretary

Office of the Administrator

U.S. Environmental Protection Agency

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**From:** Blackburn, Elizabeth
**Sent:** Friday, February 14, 2014 12:17 PM
**To:** Behringer, Caroline; Mattas-Curry, Lahne; Trovato, Ramona
**Cc:** Belknap, Andra
**Subject:** RE: Final WV Health Professional Document (Freedom site) + a Ken Ward story about it

Thanks - as a heads up, this fact sheet was developed by both the WVa Poison Control center and the Region 3 Pediatric Environmental Health Specialty Unit (has a different name but that's what it is). These Units (or PEHSUs - http://www.aoec.org/PEHSU.htm) are jointly funded by ATSDR and EPA.

Liz

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**From:** Behringer, Caroline
**Sent:** Friday, February 14, 2014 12:05 PM
**To:** Blackburn, Elizabeth; Mattas-Curry, Lahne; Trovato, Ramona
**Cc:** Belknap, Andra
**Subject:** FW: Final WV Health Professional Document (Freedom site) + a Ken Ward story about it

FYI – Fact sheet distributed by WVa about MCHM and PPH.

CB

Caroline Behringer

Deputy Press Secretary

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**From:** Smith, Bonnie
**Sent:** Friday, February 14, 2014 12:00 PM
**To:** Behringer, Caroline; Jones, Enesta; Hull, George; White, Terri-A; schafer, joan
**Subject:** Final WV Health Professional Document (Freedom site) + a Ken Ward story about it

This fact sheet has been distributed by the WVa Posion Center. The attached is the updated and final copy, which will also be posted on line. It was sent to us by Lora Werner – FYI.

Lora Siegmann Werner, MPH

Regional Director, Region 3

Division of Community Health Investigations

Agency for Toxic Substances & Disease Registry (ATSDR)/Centers for Disease Control & Prevention

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**From:** Scharman, Elizabeth [mailto:escharman@hsc.wvu.edu]
**Sent:** Tuesday, February 11, 2014 3:52 PM
Attached is the final document. Dr. Pizon and I appreciate all of the assistance provided.

**Elizabeth J. Scharman, Pharm.D., DABAT, BCPS, FAACT**
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http://www.wvgazette.com/News/201402130129

CHARLESTON, W.Va. -- The state of West Virginia sent a fact sheet meant to answer questions about the health impacts of Crude MCHM to doctors, nurses and hospitals in counties affected by the Elk River chemical spill.

MCHM is the coal-cleaning chemical that contaminated the region's drinking water.

The fact sheet, prepared by the West Virginia Poison Center and the Mid-Atlantic Center for Children's Health and the Environment, provides helpful, well-publicized information about the chemical leak, but also reveals how little is still known about the chemical's health effects.

Dated Feb. 10, the fact sheet was not distributed to health professionals until more than a month after the leak was discovered, although Dr. Letitia Tierney, commissioner of the state Bureau of Public Health, requested it be made a few weeks ago, according to a spokeswoman for the Department of Health and Human Resources.

A prior fact sheet, sent the night of the leak, told health professionals that there was no information on the chemical's toxicity, but that skin irritation and vomiting were possible. That sheet was updated three days later to include additional symptoms, to warn of dehydration and to say that odor in the water was not an indicator that the water was toxic.

The Feb. 10, fact sheet is set up as a series of questions and answers. The authors ask themselves several simple "yes or no" questions that they do not answer quite so simply.

"Are there any long term health concerns for my patients?" the fact sheet asks.

As there are no long-term studies of the chemical, the answer is not definite.

"The short term exposures to MCHM and PPH in drinking water in West Virginia are not expected to result in long term health effects," the sheet answers.

"Will the health agencies be studying this event further?" the fact sheet asks.

Again, there is no "yes or no" answer.

The sheet says federal agencies have sent a response team to review medical records, survey hospitals and "assess disaster epidemiology capacity." It says the Poison Center is sharing information with public health agencies and evaluation is ongoing. It does not say if there will be any long-term studies or medical monitoring done in the region.

Wednesday night, in a House of Delegates committee meeting, an amendment was rejected that would have provided funding for local health departments to begin screening participants for a

long-term medical monitoring program.

The sheet asks: "Is the West Virginia Poison Center comfortable with what is currently known about the concentrations of MCMH [sic] in the affected counties when making its recommendations for use of the water?"

Again, a "yes or no" question without a "yes or no" answer.

The Poison Center has evaluated all testing done by the state as well as some private testing, and they are showing levels at or very close to "nondetect," the sheet says. It says the word "safe" is used in the federal Safe Drinking Water Act despite the fact the act says it's ok for contaminants to be found at levels above zero.

"The West Virginia Poison Center believes that water with an MCMH [sic] level less than or equal to 1 part per million can be used for any purpose a person desires," the sheet says. "While water with an odor or taste may make the water aesthetically undesirable for use in bathing or drinking, this concentration of MCMH [sic] is not expected to cause toxicity at the concentrations currently being reported."

The fact sheet asks if there are any medical tests that can be run for patients who have been exposed to the chemicals.

The answer is no.

"On the basis of available information about these and similar chemicals, these chemicals are likely to be very rapidly metabolized in the body," the sheet says. "Attempts to measure levels are likely to be fruitless and any results uninterpretable."

The sheet tells doctors and nurses if patients complain of continued symptoms from chemical exposure -- such as rashes, nausea, vomiting, diarrhea or eye irritation -- it is important to evaluate for other possible ailments.

"The Poison Center has fielded many calls from patients who thought they were ill from contaminated water, but were later formally diagnosed with influenza, for example," the sheet says. "Many patients have dry skin during the winter months and using hand sanitizer is desiccating as well. The Poison Center has noted many rashes were the result of frequent hand sanitizer use without the ability to wash because of the 'do-not-use' order