Art Kaufman - Globe Democrat

Q. How was study done

A. Have concern about PCBs – look at what was published; dev summary. literature and done on epidemiology = risk of ill health. Pop. exposure 21 studies – 17 of them various kinds of health effects; 4 of mortality

Q. High exposures

A. Some seem to indicate ↑ exp. People w/ no past. exp. is 10-20 ppb; occ. exp. people – levels = 100 to 500 ppb.

Q. No cancer link

A. Yes

Q. Latency ? =

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A. Is conceivable however, one of later studies look at pop. of 2500 people = of 1/2 group had latency is 20 yrs.

That study showed no excess cancer related to PCB exp. Pt. about latency well late, but some studies are showing up now.

Q. What are latency periods?

A. Japanese A-bomb of 5 yrs = leukemia; as probably 15, 20 - 25 —

Q. Animal studies a PCB

A. Talk to Kimbrough

Q. What was purpose of study

A. Summarize toxic effects

Q. Will the study be there for litigate

A. What we really wanted to know about carcinogenicity — dig out what is basis

Q. Would you lift ban of PCB

A. Not question the ban, less PCBs in environment better, but look at the health effects.

Q. What are the symptoms

A. Skin rash = chloracne - not clear if comes from PCBs or contaminants. Occ. exp. do it rashes - appears to be worse in occ. exp. skin problems. Go away when exp. ceases.

Q. PCB problems

A. Liver function, alteration in but clears up after exp. ceases

Q. Other major finding

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A. Alterations in fat metabolism - 3 studies = 3 different answers.

(5)



Q. Skin rashes related to cancer

A. Not I'm aware of

A. Existing evidence indicates no cancer. What does mean that what have = nothing are hand justifies calling PCB cancer.

Q. Why so important, your study?

A. Puts together in one place = Opp. to see first hand, the evidence of what, where

Publish in proceedings of ACS & in some professional journal