

TO: Health care providers in the Bennington and Rutland areas

FROM: Sarah Vose, PhD, State Toxicologist
802-863-7598 or Sarah.Vose@Vermont.gov

PFOA Contamination in North Bennington – UPDATED –

This replaces information provided in 2/26 and 2/29 health advisories.

We have reviewed further studies on this emerging contaminant, consulted with area physicians and national experts, and refined our recommendations.

PFOA, perfluorooctanoic acid or C8, has been found in private drinking water wells in the North Bennington area. PFOA is one of many perfluoroalkyl chemicals that are used in products including non-stick cookware, stain-resistant carpets, water-resistant clothing, paper and cardboard food packaging, and fire-fighting foam.

PFOA levels in serum are related to increased serum lipid levels, increased uric acid levels, and liver enzymes. These changes may or may not be biologically relevant. Providers may want to consider a liver panel, lipid panel and a uric acid analysis for patients who have drinking water contaminated with PFOA.

Providers should be aware that additional health outcomes are reported in scientific studies of PFOA. These studies do not prove causality of specific health effects due to PFOA exposure, and some outcomes may not be biologically relevant. We do not recommend specific screenings for these health outcomes unless they are warranted based on symptoms.

Studies have correlated PFOA levels in serum with:

- Cardiovascular effects: high blood pressure
- Developmental effects: pregnancy-induced hypertension and low birth weight
- Immune effects: decreased antibody titer following vaccination, ulcerative colitis
- Thyroid disease
- Kidney and testicular cancer

For people who have drinking water contaminated or potentially contaminated with PFOA, the most important action to take now is to stop exposure by using only bottled water or water from a known safe source for drinking, preparing food, cooking and brushing teeth.

The Vermont Department of Health is committed to testing people's blood for PFOA if their water is contaminated. We are working to identify a lab that can perform this testing at no cost to the patients. As soon as we have identified a lab, and have a protocol for collecting blood, we will send an update. The half-life of PFOA is two to four years, so there is no need to take blood samples before people stop drinking water containing PFOA.

PFOA is present in the blood of most Americans, and is documented in the NHANES survey. Background in the US is based on NHANES data:

http://www.cdc.gov/biomonitoring/PFOA_FactSheet.html

The blood test for PFOA is unlikely to provide health care providers with specific treatment protocols for affected individuals. The blood test for PFOA will only tell people if they have a higher level of PFOA in their blood than what is considered background for the U.S. If PFOA is present in drinking water, and people have been drinking it, they are likely to have higher PFOA in their blood than the background level.

The Vermont Department of Health has a website where you can find additional information and status updates:

<http://healthvermont.gov/enviro/pfoa.aspx>

For detailed summaries of the toxicology and epidemiology studies on PFOA and other perfluoroalkyl chemicals, check the ATSDR Toxicological Profile:

<http://www.atsdr.cdc.gov/toxprofiles/tp200.pdf>

For information on exposure and health studies conducted on a large population, visit the C8 studies:

<http://www.c8sciencepanel.org/>

HAN Message Type Definitions

Health Alert: Conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: Provides important information for a specific incident or situation; may not require immediate action.

Health Update: Provides updated information regarding an incident or situation; unlikely to require immediate action.

Info Service Message: Provides general correspondence from VDH, which is not necessarily considered to be of an emergent nature.