

STATE OF ALASKA

DEPT. OF HEALTH AND SOCIAL SERVICES

DIVISION OF PUBLIC HEALTH, SECTION OF EPIDEMIOLOGY
ENVIRONMENTAL HEALTH, HIV/STD, IMMUNIZATION, INFECTIOUS DISEASES

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September 28, 2011

Scott Masten, PhD, DABT
Director, Office of Nominations and Selection
National Toxicology Program
National Institute of Environmental Health Sciences
National Institutes of Health
P.O. Box 12233, MD K2-02
530 Davis Drive, Room 2140
Research Triangle Park, NC, USA 27709

10-10-11P01:10 RCVD

Dear Dr. Masten,

On behalf of the Alaska Section of Epidemiology, I am submitting a letter of support to nominate the chemical sulfolane for additional toxicology studies by the National Toxicology Program (NTP).

As stated in the letter of nomination from the Alaska Department of Environmental Conservation (ADEC) to NTP, dated September 15, 2011, sulfolane was first detected in North Pole drinking water wells in October 2009. Since then, we have been working very closely with ADEC to fully understand the potential human health risks associated with sulfolane exposure in groundwater. However, the absence of any federal guidelines for sulfolane in drinking water, combined with the paucity of chronic toxicology studies in the scientific literature, has made it very challenging for the state to address ongoing community concerns about their exposure to sulfolane.

The sulfolane plume in the City of North Pole is the largest contaminated site in Alaska, and has affected hundreds of private wells and is a cause of substantial concern for the families that rely on those wells for drinking water and other household needs. Some of these families may have consumed sulfolane-contaminated well water for decades. While we have determined that household uses of affected well water for non-consumption purposes, such as cleaning and bathing, do not pose a health risk at the sulfolane concentrations detected in North Pole wells, the uncertainties around the potential chronic health effects from past ingestion have continued to raise ongoing concerns from residents, elected officials, and other community stakeholders.

Questions about whether sulfolane may have caused (or will cause) cancer, birth defects, and other health problems have been asked repeatedly, and responses from local health officials have been met with skepticism and frustration. Thus, additional toxicology studies that address the

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uncertainties around chronic sulfolane exposure would be invaluable to the affected families, the state, and the general public.

We hope you accept this chemical into your program. Thank you for your consideration.

Sincerely,
[Redacted]

[Redacted]

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