

Congress of the United States
Washington, DC 20515

August 9, 2013

Dr. Thomas R. Frieden
Director
U.S. Centers for Disease Control and Prevention
1600 Clifton Road
Atlanta, GA 30333

Dear Director Frieden:

We write to you regarding the Agency for Toxic Substances and Disease Registry's (ATSDR) ongoing work regarding the water contamination at Camp Lejeune, North Carolina. ATSDR has already completed several critical studies which have helped Congress and the public understand the scope and severity of the contamination at Camp Lejeune. However, much more work remains to be done to get a complete understanding of this environmental exposure. We expect you will ensure ATSDR continues to fulfill its Congressional mandate to "expand the knowledge base about health effects from exposure to hazardous substances" and that you will do so by re-issuing a Public Health Assessment (PHA) as required by Title 42 US Code.

We are concerned human exposures to harmful levels of contaminants continued to take place in buildings located in the Hadnot Point area years after the contaminated water supply wells were removed from service in 1985. Data obtained from Navy and Marine Corps documents indicate harmful human exposures to contaminants at the Hadnot Point area of Camp Lejeune did not end with the removal of the contaminated wells. In 1999, two years after the ATSDR issued their Public Health assessment (PHA) for Camp Lejeune, base personnel were evacuated from buildings located above known underground contamination plumes because gasoline (benzene) fumes inside the buildings had reached hazardous levels. A Department of the Navy (DoN) contractor identified the possibility of this hazard in a May 1988 report and recommended that in-door ambient air quality sampling be conducted in the buildings at risk. ATSDR's 1997 PHA for Camp Lejeune failed to evaluate the hazard of vapor intrusion and did not address the potential for harmful exposures via inhalation. If ATSDR does not have the records of vapor intrusion and air quality sampling from the DoN, we request you provide us with an alternate scientific process to reconstruct and analyze this particular aspect of potential exposure.

Public Health Assessments are essential and critical to ensuring full and complete information about exposures to hazardous substances is available to the public. This is especially necessary in the instance of Camp Lejeune, where hundreds of thousands of unwitting military service members and their families were exposed to extremely high levels of known human carcinogens over a span of more than three decades. ATSDR withdrew the PHA for Camp Lejeune in 2009 due to numerous factual errors and omissions. We have learned your agency is now considering issuing a health consultation instead of reissuing a corrected PHA.

As you know, a health consultation is a verbal or written response from ATSDR or to a specific request for information about health risks related to a specific site, a chemical release, or the presence of hazardous material. A PHA is a written report that reviews available information about hazardous substances at a site and evaluates whether exposure to them might cause any harm to people. As such, a PHA reviews sites in more detail than a health consultation. Issuing a health consultation in lieu of a PHA would be contrary to your statutory obligation to issue a PHA for each site on the National Priority List under the Superfund Amendments and Reauthorization Act of 1986. We expect that you will comply with your statutory obligation in this matter, so that all contaminants and exposure pathways of concern at Camp Lejeune are fully addressed in a PHA.

Given the prominence of the Camp Lejeune issue and the procedural challenges ATSDR has encountered in obtaining the necessary data to conduct its important analysis and studies on behalf of public health, it is essential that we continue to have an open and transparent process on this issue. Therefore, we request your written response to this correspondence by August 19, 2013.

Sincerely,



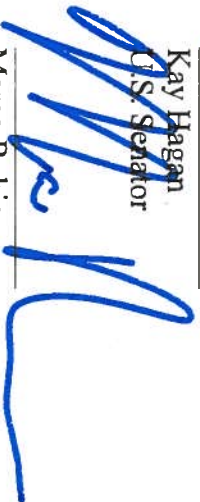
Richard Burr
U.S. Senator



Kay Hagan
U.S. Senator



Bill Nelson
U.S. Senator



Marco Rubio
U.S. Senator



Dennis Ross
Member of Congress



John D. Dingell
Member of Congress

Congress of the United States
Washington, DC 20515

August 16, 2013

Dr. Thomas R. Frieden
Director
U.S. Centers for Disease Control and Prevention
1600 Clifton Road
Atlanta, GA 30333

Dear Director Frieden:

We write to you regarding the Agency for Toxic Substances and Disease Registry's (ATSDR) ongoing work regarding the water contamination at Camp Lejeune, NC. ATSDR has already completed several critical studies which have helped Congress, and the American people, understand the scope and severity of the contamination at Camp Lejeune. However, much more work remains to be done to get a complete understanding of the issue. We expect you will ensure ATSDRs fulfills its Congressional mandate to "expand the knowledge base about health effects from exposure to hazardous substances".

One piece of ATSDR's work on the water contamination at Camp Lejeune is a mortality study, which provides essential information about those who lost their lives from exposure to hazardous substances. However, this is only one part of the knowledge base. Further study is needed on this issue to fully understand the entire effects of the contamination at Camp Lejeune. Fortunately, medical advances in recent years have allowed many people to survive a diagnosis of cancer and other diseases. This is certainly welcome news, but it also underscores the fact that a mortality study alone is unable to gauge the effects of the contamination on those who are living, but who have fallen ill with some form of cancer. In 2005, ATSDR's Report of the Camp Lejeune Scientific Advisory Panel stated "There was agreement...that a study of mortality outcomes would be feasible (assuming the availability of adequate personal identifiers) and that a study of cancer incidence might be feasible". ATSDR agreed that the mortality and cancer incidence studies would be feasible if a sufficient cohort could be identified. As we are well aware, that cohort was established by the use of the Defense Manpower Data Center (DMDC), which identified all active duty personnel and civilian employees who served or worked on the base dating from 1973-1987.

We think a cancer incidence study would help the public and science better understand how many people contracted cancer as a result of exposure to three known human carcinogens in the contaminated water at Camp Lejeune. We urge you to ensure ATSDR promptly explores the feasibility of such a study with an eye toward shedding light on aspects of public health that a mortality study cannot accomplish and helping inform Congress and the Administration about the best ways to provide care for those in need.

Given the prominence of the Camp Lejeune issue and the procedural challenges ATSDR has encountered in obtaining the necessary data to conduct its important analysis and studies on behalf of public health, it is essential that we continue to have an open and transparent process on this issue. Therefore, we request your written response to this correspondence by August 26, 2013.

Sincerely,



Richard Burr
U.S. Senator



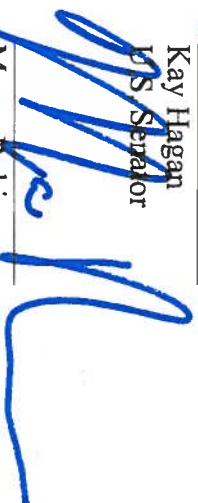
Bill Nelson
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U.S. Senator



John D. Dingell
Member of Congress