



Testimony
Subcommittee on Consumer Protection,
Product Safety, and Insurance
Committee on Commerce, Science, and
Transportation
United States Senate

**Health Issues Associated with
Contaminated Drywall**

Statement of
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Good morning Chairman Pryor, Ranking Member Toomey, and other distinguished members of the Subcommittee. Thank you for the opportunity to be here today. I am Dr. Christopher Portier, Director of the National Center for Environmental Health (NCEH) at the Centers for Disease Control and Prevention (CDC) and Director of the Agency for Toxic Substances and Disease Registry (ATSDR).

The CDC and ATSDR are concerned for the health and safety of people who have been living with or exposed to sulfur compounds emitted from contaminated drywall used in the construction or renovation of their homes. My testimony today will focus on three aspects of CDC/ATSDR's support of the Consumer Product Safety Commission (CPSC) response to this issue:

- CDC/ATSDR's current knowledge and recommendation on human health effects from exposure to sulfur compounds emitted from contaminated drywall;
- CDC/ATSDR's role and efforts to date in the coordinated federal response to contaminated drywall; and
- CDC/ATSDR's public health consultation underway to learn more about potential health effects from exposure to sulfur compounds emitted from contaminated drywall.

CDC/ATSDR's Current Knowledge and Recommendation on Human Health

Effects from Exposure to Sulfur Compounds Emitted from Contaminated

Drywall

Indoor air tests of homes with contaminated drywall conducted by Environmental Health & Engineering Inc. (EH&E) on behalf of the CPSC, the lead Federal agency in the investigation of contaminated drywall, found low levels of reactive sulfur gases, including hydrogen sulfide and carbonyl sulfide.

This is a concern because at some concentrations, exposure to sulfur gases may result in eye, nose, and throat irritation and exacerbation of respiratory problems such as asthma or chronic obstructive pulmonary disease (COPD). These same symptoms are consistent with what has been reported. However, the levels measured inside of homes with contaminated drywall were below levels linked to human health effects as demonstrated in the scientific literature. Some people are more sensitive than others to chemical exposures; an exposure that causes no problems for one person can make a different person uncomfortable or sick. There are currently no tests available that would identify people in the general public who are more susceptible to exposure to the sulfur compounds emitted from contaminated drywall.

With respect to public health, CDC/ATSDR believes that preventing continued exposure to reactive sulfur gases is the best method to address problem drywall. We support the CPSC and U.S. Department of Housing and Urban Development (HUD)

recommendations for remediation that “consumers replace all problem drywall; smoke and carbon monoxide (CO) alarms; electrical distribution components, including receptacles, switches and circuit breakers, but not necessarily wiring; and fusible-type fire sprinkler heads.”

Recommendations from the Pediatric Environmental Health Specialty Units (PEHSU), a CDC/ATSDR partner, include eliminating, if possible, or reducing exposure through remediation and ventilation; minimizing aggravating environmental factors such as secondhand tobacco smoke and harsh cleaners; monitoring mental health; seeking medical specialty care; and seeking guidance on medical monitoring from a health care provider.

CDC/ATSDR’s Role and Efforts to Date in the Coordinated Federal Response to Contaminated Drywall

Since 2009, CDC/ATSDR has provided public health expertise in support of the CPSC’s leadership of the federal response to concerns with contaminated drywall. As part of this response, CDC/ATSDR collaborated with the CPSC, the U.S. Environmental Protection Agency (EPA), HUD, the Florida Department of Health (FLDOH), the Louisiana Department of Health and Hospitals, the Virginia Department of Health, the Association of Occupational and Environmental Health Clinics (AOEC), and other state and local health and environmental agencies to assess possible health implications from living in a home with contaminated drywall.

CDC /ATSDR has put significant effort into helping residents understand the potential health implications associated with exposure to sulfur compounds emitted from contaminated drywall.

To date, we have conducted the following activities:

- CDC/ATSDR worked with poison control centers and state health departments to develop and share health guidance. This guidance came in the form of easy-to-read fact sheets to help the public understand health and safety issues and recommendations on how to protect themselves. We provided guidance to health care providers who may be evaluating patients living in homes with contaminated drywall;
- CDC/ATSDR supported federal response efforts with our extensive network of state health and environmental agencies to understand the types of health complaints being reported, to ensure that up-to-date and accurate information and approaches were rapidly shared, and to ensure that coordination among the involved federal and state agencies and other partners is effective;
- CDC/ATSDR assisted the EPA and the FLDOH in developing the sampling plan for homes with and without contaminated drywall and in interpreting the results;
- CDC/ATSDR engaged our partners AOEC and PEHSUs with specialties in pediatrics, medical toxicology, industrial hygiene, and occupational environmental medicine. This resulted in precautionary health guidance document for families and their physicians;

- CDC/ATSDR coordinated with states to review 11 deaths reported to the CPSC. In the judgments of the state medical authorities who reviewed these cases, exposure to contaminated drywall was not believed to be a contributing factor to these deaths.

CDC/ATSDR's Public Health Consultation Underway to Learn More about

Potential Human Health Effects from Exposure to Contaminated Drywall

CDC/ATSDR's current public health effort is modeling indoor air levels of sulfur gas compounds to estimate potential exposures. These estimates will then be used to calculate risks of health effects in homes with contaminated drywall. Results should be available in spring 2012, and we expect that this work will provide important and appropriate information to help answer questions related to potential health effects from contaminated drywall.

The consultation involves three main phases. First, we have engaged experts at Georgia Institute of Technology to model indoor air concentrations. They will be using data that measure sulfur gases coming off of contaminated drywall in a controlled laboratory setting. These data were collected by Lawrence Berkley National Laboratory on behalf of CPSC. In the second phase, CDC/ATSDR scientists will use these estimates to simulate a range of plausible human exposures to several drywall-related sulfur compounds. This will include a range of home types and patterns of air movement in and out of the homes. Finally, CDC/ATSDR scientists will determine if the levels of exposure could result in possible adverse health outcomes and, what

those outcomes might be. This will be based upon health information summarized in existing ATSDR Toxicological Profiles, EPA guidance values, and in evaluations of recent scientific literature.

Conclusion

In conclusion, CDC/ATSDR recognizes the serious concerns of people living in homes and exposed to contaminants from problem drywall. We are committed to providing appropriate and necessary information to better understand residents' concerns related to health effects.

Thank you for the opportunity to present this testimony to you today. I would be happy to answer any questions.