

MEETING
STATE OF CALIFORNIA
ENVIRONMENTAL PROTECTION AGENCY
AIR RESOURCES BOARD
SCIENTIFIC REVIEW PANEL
ON TOXIC AIR CONTAMINANTS

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY
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R O U G H D R A F T

A P P E A R A N C E S

PANEL MEMBERS:

Cort Anastasio, Ph.D., Chairperson

Ahmad Besaratinia, Ph.D.

Paul D. Blanc, M.D.

Stanton A. Glantz, Ph.D.

S. Katharine Hammond, Ph.D.

Michael T. Kleinman, Ph.D.

Joseph R. Landolph, Jr., Ph.D.

Lisa A. Miller, Ph.D.

Beate R. Ritz, M.D., Ph.D., M.P.H.

REPRESENTING THE AIR RESOURCES BOARD:

Dave Edwards, Ph.D., Assistant Chief, Air Quality Planning
& Science Division

Lori Miyasato, Panel Liaison

Gabe Ruiz, Manager, Toxics Inventory and Special Projects
Section, Air Quality Planning & Science Division

Beth Schwehr, Staff Air Pollution Specialist, Air Quality
Planning & Science Division

Melissa Traverso, Air Pollution Specialist, Air Quality
Planning & Science Division

REPRESENTING THE OFFICE OF ENVIRONMENTAL HEALTH HAZARD
ASSESSMENT:

John Budroe, Ph.D., Chief, Air Toxicology and Risk
Assessment Section

A P P E A R A N C E S C O N T I N U E D

REPRESENTING THE OFFICE OF ENVIRONMENTAL HEALTH HAZARD
ASSESSMENT:

Vice Cogliano, Ph.D., Deputy Director, Division of
Scientific Programs

Ken Kloc, Ph.D., Community Health and Environmental
Impacts Section

I N D E X

PAGE

1. Welcome and Introductions 1
2. Review of "p-Chloro-á,á,á-trifluorotoluene (p-Chlorobenzotrifluoride, PCBTF) - Cancer Inhalation Unit Risk Factor - Technical Support Document for Cancer Potency Factors - Appendix B" - Scientific Review Panel Draft - January 2020 Office of Environmental Health Hazard Assessment (OEHHA) staff will present a draft document summarizing the carcinogenicity and derivation of a proposed cancer inhalation unit risk factor for p-chloro-á,á,á-trifluorotoluene, also known as p-chlorobenzotrifluoride (PCBTF). Cancer unit risk factors are used to estimate lifetime cancer risks associated with inhalation exposure to a carcinogen. OEHHA is required to develop guidelines for conducting health risk assessments under the Air Toxics Hot Spots Program (Health and Safety Code Section 44360 (b)(2)). The proposed PCBTF unit risk factor in this report (<https://oehha.ca.gov/air/crnrr/p-chloro-aaa-trifluorotoluene-p-chlorobenzotrifluoride-pcbtf-cancer-inhalation-cancer-unit>) was developed using the most recent "Air Toxics Hot Spots Program Technical Support Document for Cancer Potency Factors," finalized by OEHHA in 2009. 3
3. Continuation of discussion of the chemical substances list in Appendix A of the AB 2588 Air Toxics "Hot Spots" Emission Inventory Criteria and Guidelines regulation. The California Air Resources Board (CARB) compiles air toxics emissions data for stationary sources as required by the Air Toxics "Hot Spots" Act (Health and Safety Code section 44300 et seq.; AB2588, Connelly). Under this program, stationary source facilities are required to report the types and quantities of toxic substances they routinely release into the air. The goals of this program are to compile information on toxics emissions; identify facilities having potential for localized impacts; evaluate their health risks; notify nearby residents about significant risks;

I N D E X C O N T I N U E D

PAGE

and ultimately reduce the risks below a health protective threshold.

The Toxics "Hot Spots" Emission Inventory Criteria and Guidelines (EICG) regulation was last updated in 2007. In the October 4, 2019 meeting, CARB staff presented and the Panel discussed draft proposed changes to the chemical substances list in Appendix A of the EICG regulation. The Panel continued its discussion of the chemical list in a teleconference meeting on November 22, and made additional recommendations to CARB staff. In this meeting, CARB staff will provide a brief update and will also discuss comments received for the November 22 meeting, and the Panel will discuss and vote on their preliminary findings regarding the chemical list. The proposed changes to the chemical list being reviewed are posted on the CARB "Hot Spots" Toxics Inventory web page at: <https://ww3.arb.ca.gov/ab2588/2588guid.htm>

80

4. Consideration of administrative matters. The Panel may discuss various administrative matters and scheduling of future meetings.	115
Adjournment	118
Reporter's Certificate	119

1 P R O C E E D I N G S

2 CHAIRPERSON ANASTASIO: Good morning, everyone.
3 I'd like to call this meeting to order. Welcome to the
4 Scientific Review Panel meeting. First, I'd like to
5 welcome everyone who's watching on the webcast. And let's
6 go around and introduce ourselves.

7 Court Anastasio, Chair of the Panel and a
8 Professor at UC Davis.

9 Lisa, would you go next.

10 PANEL MEMBER MILLER: Yes. Lisa Miller,
11 Professor at UC Davis.

12 PANEL MEMBER BESARATINIA: Ahmad Besaratinia,
13 Department of Preventive Medicine, University of Southern
14 California.

15 PANEL MEMBER BLANC: Paul Blanc, University of
16 California, San Francisco.

17 PANEL MEMBER KLEINMAN: Mike Kleinman, UC Irvine.

18 PANEL MEMBER RITZ: Beate Ritz, UCLA.

19 PANEL MEMBER LANDOLPH: Joe Landolph, Associate
20 Professor, Departments of Molecular and Microbiology and
21 Immunology and USC Norris Comprehensive Cancer Center at
22 University of Southern California.

23 CHAIRPERSON ANASTASIO: Kathy and Stan, can you
24 chime in?

25 PANEL MEMBER HAMMOND: This is Kathy Hammond at

1 UC Berkeley.

2 PANEL MEMBER GLANTZ: And Stan Glantz at UCSF.

3 CHAIRPERSON ANASTASIO: And Kathy and Stan, can
4 you please make sure to mute your phones when you're not
5 talking. And everyone else don't forget to turn on you
6 microphones when you are talking.

7 Okay. So handouts of today's materials,
8 including comments received from American Coatings
9 Association and the Southern California Alliance of
10 Publicly Owned Treatment Works are available on the table
11 in the back of the room.

12 A few administrative items. Restrooms are leave
13 the door, take a left. Drinking fountains are down there
14 too. If there's a fire alarm, please exit down the stairs
15 and proceed outside the building.

16 Okay. So today's meeting, two major agenda
17 items. The first item we're going to review the proposed
18 cancer inhalation unit risk factors for
19 para-chlorobenzotrifluoride, PCBTF. And then the second
20 item will be a review of the proposed updates to the
21 chemical lists in appendix A of the AB 2588 Air Toxics Hot
22 Spots Emissions Inventory Criteria and Guidelines
23 regulations. And we'll be discussing the draft letter of
24 interim findings from the Scientific Review Panel.

25 Okay. So with that, let us begin.

1 So I'm going to start the first agenda item, the
2 PCBTF. So this is a document we received from the Office
3 of Environmental Health Hazard Assessment. It went
4 through public review and comment during 2018 and '19.
5 The document was then revised and sent to the Scientific
6 Review Panel in January of 2020. Also posted on OEHHA's
7 website for the public.

8 And so today we're going to start by a
9 presentation from OEHHA staff on the proposed cancellation
10 inhalation unit risk factors. And then there will be a
11 panel discussion and we'll give our feedback to OEHHA. So
12 I'm going to turn it over to John Budroe from OEHHA.

13 (Thereupon an overhead presentation was
14 Presented as follows.)

15 DR. BUDROE: Thank you, Dr. Anastasio. I'd like
16 to make two introductions before we get started. One is
17 Dr. Ken Kloc, who is the lead author on this document and
18 is kindly on lone from the Community Health and
19 Environmental Impact Section at OEHHA. And then to his
20 right, Dr. Vince Cogliano, who is our new Deputy Director
21 for Scientific Programs at OEHHA.

22 CHAIRPERSON ANASTASIO: That's great. Welcome,
23 Vince.

24 DR. COGLIANO: Thank you very much.

25 DR. BUDROE: So the chemical for which we'll be

1 discussing the inhalation cancer unit risk factors this
2 morning is para-chloro-alpha,alpha,alpha-trifluorotoluene
3 And it's more commonly referred to in the literature
4 para-chlorobenzotrifluoride, or PCBTF.

5 And if somebody could launch the PowerPoint
6 presentation.

7 --o0o--

8 DR. BUDROE: Okay. The first slide shows
9 selective physical and chemical properties of PCBTF, and
10 that's also the structure.

11 --o0o--

12 DR. BUDROE: PCBTF is used in the preparation of
13 dyes, pharmaceuticals, pesticides, and as a solvent in --

14 PANEL MEMBER GLANTZ: This is Stan. I'm not
15 seeing the slides.

16 DR. BUDROE: Right now we aren't either. We seem
17 to be in sign-in limbo.

18 PANEL MEMBER GLANTZ: Okay. Now there -- I can
19 see them.

20 Can you hear me? My phone just made a weird
21 noise?

22 PANEL MEMBER BLANC: Yes, we can hear you.

23 PANEL MEMBER GLANTZ: Oh. Okay. Is there no
24 slides yet?

25 PANEL MEMBER BLANC: Yes, there are no slides

1 yet.

2 DR. BUDROE: Okay. It looks like we have slides
3 again.

4 --o0o--

5 DR. BUDROE: Okay. I'm going to restart the uses
6 and exposure potential slide.

7 PCBTF is used in the preparation of dyes,
8 pharmaceuticals, and pesticides, and as a solvent in
9 paints, inks, high solids, coatings, and it's also used
10 for metal cleaning. Production in and import into the
11 U.S. was roughly 5,000 to 25,000 tons per year from 2012
12 through 2015. However, little information is available
13 regarding air emissions of PCBTF in California. And I'll
14 note that right now, PCBTF is not on the hot spots
15 inventory list.

16 Exposure could occur from the use of products
17 that contains PCBTF from contact with contaminated
18 groundwater or soil or from consumption of food products
19 containing PCBTF residues.

20 --o0o--

21 DR. BUDROE: Now, looking at toxicokinetic data
22 for PCBTF, limited information from rat studies indicates
23 that it is readily absorbed, both orally and by
24 inhalation. NTP in 1992 noted 100 percent absorption in
25 rats exposed to 10, 50, or 400 milligram per kilogram by

1 oral gavage.

2 And a rat blood-air partition coefficient of 43.7
3 was noted by Knaak in 1997. And this is the ratio of the
4 concentration of blood versus the exposure concentration.

5 --o0o--

6 DR. BUDROE: And PCBTF is widely distributed
7 throughout the body with a tendency to concentrate in
8 fatty tissues. The table above shows tissue
9 concentrations in female rats exposed by inhalation to 390
10 milligram per meter cubed for six hours. And those
11 concentrations there are in micromoles per liter. And
12 they range from almost a thousand micromoles per liter of
13 fat down to about 20 for muscle.

14 --o0o--

15 DR. BUDROE: In rats, PCBTF is mainly excreted
16 unchanged via exhalation, in a range, depending on which
17 reference you look at, 60 to 80 or 80 to 90 percent. It
18 is secondarily metabolized via aromatic hydroxylation and
19 excreted conjugated phenolic compounds. And it is
20 converted in small amounts to mercapturic acid
21 metabolites.

22 --o0o--

23 DR. BUDROE: A physiologically-based
24 pharmacokinetic, or PBPK, model was developed for PCBTF in
25 inhalation exposure to rats in humans by Knaak in '95.

1 And then that model was improved in 1998. It included
2 compartments for liver, brain, fat, kidney slowly and
3 rapidly perfused organs. And metabolism is represented by
4 model components for CYP450 oxidation in the liver,
5 glucuronide conjugation of phenolic metabolites, and
6 glutathione conjugates.

7 --o0o--

8 DR. BUDROE: OEHHA did not use this model in the
9 document, because it was judged to be incomplete. The
10 model was inadequately validated. The only in vivo data
11 available to verify the model was from the single 50 parts
12 per million exposure concentration in female rats.

13 Second, the blood and tissue concentration of the
14 PCBTF predicted by the rat model deviated from the
15 experimental data during post-exposure periods.

16 Also, the human model was not based on
17 experimentally derived metabolic constants, nor was it
18 tested against experimental data.

19 And finally, it was less useful than it could
20 have been, since there was no mouse model.

21 --o0o--

22 DR. BUDROE: The cancer hazard and dose-response
23 evaluation of PCBTF is based on recent animal cancer
24 studies by the National Toxicology Program, or NTP. And
25 this -- they released this report in 2018. NTP exposed

1 both sexes of B6C3F1 mice and Sprague-Dawley rats in
2 groups of 50 by inhalation for 6.2 hours per day, five
3 days per week, 104 to 105 weeks exposure.

4 Mice were exposed to 100, 200, or 400 ppm, and
5 rats to 100, 300, or 1000 ppm. The animals were
6 necropsied at terminal sacrifice and histopathological
7 examination of all relevant tissues, more than 40 sites,
8 was performed.

9 --o0o--

10 DR. BUDROE: Now, this table shows the unadjusted
11 tumor incidence in exposed mice.

12 And sorry for the holdup, but I forgot my
13 distance glasses today, so I can't read the slides
14 correctly.

15 Tumor incidence in mice -- increased tumor
16 incidences compared to controls were seen at the mid and
17 high dose in female mice for harderian gland adenomas or
18 adenocarcinomas. Also at the mid and high dose for
19 hepatoadenomas, carcinomas or hepatoblastomas. And there
20 was also positive trend for test for both those tumor
21 types.

22 In male mice, increased hepatocellular adenomas,
23 carcinomas, or hepatoblastomas were seen at the mid and
24 high doses and again was a positive trend for tumor.

25 --o0o--

1 DR. BUDROE: In rats, female rats, significant
2 increase in adrenal medulla, benign or malignant
3 pheochromocytomas was seen at the high dose. Significant
4 increase was also seen at all doses for thyroid gland
5 C-cell adenomas or carcinomas. And there's also a
6 positive test for trend.

7 In -- a significant increase at the mid dose was
8 scene in uterine stromal polyps or sarcomas. And then
9 finally, there was no individual dose significant pairwise
10 comparison with controls, but there was a positive test
11 for trend for uterine adenocarcinomas.

12 And then in the male rats, there was a -- the
13 high does was significantly increased for thyroid gland
14 C-cell adenomas or carcinomas, and there's also a positive
15 test for trend.

16 --o0o--

17 DR. BUDROE: And no studies of increased cancer
18 incidence in humans resulting from PCBTF exposure were
19 identified in the literature.

20 --o0o--

21 DR. BUDROE: Now, ancillary data for supporting
22 car -- the carcinogenicity data for PCBTF. Genotoxicity
23 date for PCBTF came from several published studies and
24 unpublished industry reports. And there were three
25 studies on DNA damage and repair, one was positive; eight

1 studies on gene mutation, all were negative; and seven
2 studies on chromosomal damage, and two of those were
3 positive.

4 --o0o--

5 DR. BUDROE: Negative results were reported for
6 DNA damage and gene mutation assays in bacteria and yeast,
7 chromosomal damage assays in yeast, and gene mutations in
8 mouse lymphoma cells.

9 --o0o--

10 DR. BUDROE: Positive results were observed for
11 unscheduled DNA synthesis, or UDS, in human embryonic
12 epithelial cells, and sister chromatid exchanges, or SCEs,
13 in mouse lymphoma cells. And there mixed results for in
14 vivo mature erythrocyte micronucleus formation. It was
15 negative in male and female rats, and female mice,
16 positive in male mice.

17 --o0o--

18 DR. BUDROE: Now, the NTP studies were well
19 designed and implemented lifetime studies, carried out in
20 both sexes of B6C3F1 mice and Sprague-Dawley rats. And
21 the studies found that lifetime exposure of rats and mice
22 to PCBTF by inhalation can produce an elevated incidence
23 of tumors in the following tissues:

24 For female mice, harderian gland and liver; male
25 mice, liver; female rat, adrenal demand, thyroid gland,

1 and uterus; and in male rats, thyroid gland.

2 --o0o--

3 DR. BUDROE: PCBTF is readily absorbed in rats
4 and is subject to oxidative metabolism, which could result
5 the production of potentially genotoxic metabolites. The
6 metabolism of PCBTF in humans is likely to be
7 qualitatively similar to that observed in the rat. The
8 available genotoxicity data provides limited evidence that
9 PCBTF is a genotoxic substance. However, the carcinogenic
10 modes of action of PCBTF are not known.

11 OEHHA recently listed PCBTF as a substance known
12 to the State to cause cancer under Proposition 65. And we
13 just found out yesterday, in the 20 -- January 2020 issue
14 of Lancet Oncology, IARC has announced that in the volume
15 1 -- their monograph volume 125 that PCBTF will be listed
16 as a 2B carcinogen.

17 --o0o--

18 DR. BUDROE: Now, OEHHA's standard approach to
19 deriving a cancer slope factor and then the unit risk.
20 Cancer risk factors are calculated for tumors with
21 significant tumor incidence and/or positive dose response
22 trend.

23 The risk factors are estimated for the incidence
24 of one or more related tumors at each tumor site. And the
25 quote from the OEHHA 2009 cancer -- hot spots cancer

1 technical support document, or TSD, "Tumor types
2 considered to represent different stages of progression
3 following initiation of a common, original, normal cell
4 type are combined..."

5 --o0o--

6 DR. BUDROE: OEHHA takes the crude incidence
7 rates and adjusts them to correct for differential early
8 mortality amongst dose groups. For this document, the
9 data was modeled using U.S. EPA benchmark dose software,
10 PMDS version 2.7.

11 The multi-stage cancer model is chosen for
12 modeling, which is the OEHHA default for typical cancer
13 data sets. And a benchmark response, or BMR, of five
14 percent was used to calculate the benchmark dose or BMD.

15 --o0o--

16 DR. BUDROE: The 95 percent lower confidence
17 bound on the BMD (the BMDL) is then used to calculate
18 cancer potency. And a multi-site BMDL is calculated when
19 tumors occur at more than one site in the species. And
20 for this purpose, OEHHA uses the BMDS multi-site tumor
21 model, MS-Combo.

22 The resulting cancer slope factor, or CSF, is
23 equal to the BMR, which in this document is 0.05 divided
24 by the BMDL. And a cancer inhalation unit risk, or IUR,
25 is then calculated from the CSF.

1 --o0o--

2 DR. BUDROE: The -- now, the reason why OEHHA
3 does a differential early mortality adjustment is that it
4 avoids underestimation of risk if you have high early
5 mortality.

6 And we generally use two adjustment methods:

7 Effective tumor incidence is used, and in this
8 document, was used for the mouse data, where mortality
9 differences of less than 15 percent are observed at week
10 85 of the study.

11 And then poly-3 adjustment, which in this
12 document was used for the rat data is used where larger
13 mortality differences, in the range of 15 to 30 percent,
14 are seen at week 85.

15 --o0o--

16 DR. BUDROE: Now, the effective tumor incidence
17 is the number of tumor-bearing animals divided by the
18 number of animals alive at the time of the first
19 occurrence of the tumor.

20 In contrast, the poly-3 adjustment for each
21 animal dying early without the tumor of interest, a
22 fractional amount is added to the denominator according to
23 the following equation: The contribution to the
24 denominator is the time and study divided by two years to
25 the third power.

1 And I'd like to note here that Dr. Glantz asked
2 us to take a look at the difference in -- for the rat data
3 between the adjusted incidence with using adjust --
4 effective tumor incidence and a poly-3 adjustment. And it
5 made about a 10 to 30 percent difference between the tumor
6 incidences. And it wasn't directionally biased. I mean,
7 for some tumor types, poly-3 gave say a higher value for
8 some of the other tumor types, the effective number gave a
9 higher value, so -- but it's -- the difference between the
10 two methods was not that significant.

11 --o0o--

12 DR. BUDROE: This slide shows the adjusted tumor
13 incidence in mice. And as I stated earlier, this was done
14 just using effective number.

15 --o0o--

16 DR. BUDROE: And this slide shows the adjusted
17 tumor incidence in rats, and the adjustment was done using
18 poly -- the poly-3 correction.

19 --o0o--

20 DR. BUDROE: We then calculated a lifetime
21 average daily dose, or LADD, for each of the exposed
22 groups. And this was in units of milligram per kilogram
23 body weight per day. The equation used is IR times C
24 divided BW, where C is the time-adjusted exposure
25 concentration, BW is the body weight, and C -- IR is the

1 inhalation rate.

2 And then the -- at the bottom of the slide shows
3 the algorithms that were used to calculate either the
4 mouse or the rat inhalation rates.

5 --o0o--

6 DR. BUDROE: This slide shows the BMDS modeling
7 results for the mouse tumor data. In the middle column,
8 there is polynomial degree, that's the polynomial degree
9 that was used to model that particular tumor type. And
10 far right-hand corner -- column is the animal CSF in
11 milligram per kilogram day to the minus one.

12 --o0o--

13 DR. BUDROE: The next slide shows the BMDS
14 modeling results for rats. These were all -- like the
15 mouse data, these were all polynomial degree one. And for
16 one group, the uterine, female uterine stromal polyps or
17 sarcomas, the data from the highest dose group was dropped
18 in order to obtain an acceptable fit.

19 --o0o--

20 DR. BUDROE: And this slide shows the BMDS
21 multi-stage stage cancer model plot fit for male mouse
22 liver tumors.

23 --o0o--

24 DR. BUDROE: The animal CSF values are then
25 converted to human CSF values using body-weight scaling.

1 It's body weight to three-quarter power. The equation
2 used for this is human CSFs are equal to animal CSFs times
3 the body -- human body weight divided by animal body
4 weight to the one-quarter power.

5 And interspecies weight-scaling adjusts for
6 pharmacokinetic differences, such as breathing rate and
7 metabolism, and for pharmacodynamic considerations, such
8 as tissue responses to chemical exposure.

9 --o0o--

10 DR. BUDROE: And this slide shows the human CSF's
11 for male mice liver tumors. It was three times ten to the
12 minus two. For female mice, mouse liver and harderian
13 gland tumors multi-site, it was 8.8 times ten to the minus
14 three.

15 For male rat thyroid in lung, two times ten to
16 the minus three. And for female rat thyroid plus adrenal
17 gland plus uterine tumors, 7.9 times ten to the minus
18 three.

19 The largest human cancer slope factor was derived
20 from male mouse liver tumors. It was three times ten to
21 the minus two. And that was the value that was used to
22 develop a cancer inhalation unit risk for PCBTF.

23 --o0o--

24 DR. BUDROE: And the equation used to develop the
25 IUR is the slope factor times the breathing -- human

1 breathing rate, which is 20 cubic meters per day, divided
2 by an average human body weight is 70 kilograms, and a
3 milligram to microgram conversion of a thousand.

4 So the resulting unit risk derived from the male
5 mouse liver tumor data is an IUR of 8.6 times ten to the
6 minus six, micrograms per cubic meter to the minus one.

7 And this is -- continuous means continuous
8 lifetime exposure to one microgram per cubic meter PCBTF
9 is estimated to cause 8.6 additional cancers per million
10 people exposed.

11 --o0o--

12 DR. BUDROE: And this concludes the presentation
13 on the document. We also have a response to public
14 comments. I'd like the Chair to --

15 CHAIRPERSON ANASTASIO: Yeah. How about we pause
16 here and see if there are any questions about the
17 presentation and then we can continue with the response to
18 public comments.

19 Questions on the presentation?

20 We finish with everything, then we'll go through
21 like extensive comments. But I'm just wondering if there
22 are any specific comments on John's presentation.

23 I have two questions, John. The first one is
24 remind me, IARC 2B, what is the English translation of
25 that category?

1 PANEL MEMBER BLANC: Animal I means

2 DR. BUDROE: Possible. I think it's possible.

3 PANEL MEMBER ANASTASIO: Yeah, it means an animal
4 carcinogen, but no human data --

5 CHAIRPERSON ANASTASIO: Okay.

6 PANEL MEMBER BLANC: -- essentially.

7 CHAIRPERSON ANASTASIO: Okay. So carcinogenic in
8 animals, no human data. Okay. Thank you.

9 DR. COGLIANO: Yeah. I used to work at IARC. It
10 was, yeah, inadequate human evidence, sufficient animal
11 evidence for this. And the label they put is possibly
12 carcinogenic to humans.

13 CHAIRPERSON ANASTASIO: Okay. Thank you.

14 PANEL MEMBER BLANC: But it doesn't imply
15 possibly carcinogenic to animals. It is carcinogenic to
16 animals. That's how it got to be 2B.

17 CHAIRPERSON ANASTASIO: 2B, yeah.

18 PANEL MEMBER BLANC: So it's not inconsistent
19 with the -- the California listing. In fact, it's
20 consistent with it. It just happened slower.

21 CHAIRPERSON ANASTASIO: Right. Okay. Thank you.

22 Just one other question. I think it's just a
23 statistics question. Back on slide 11. IT people, can we
24 get to slide 11?

25 Just curious about the statistical significance

1 for the control. Can you just tell me conceptually what
2 does that mean? It's statistically different from what?

3 DR. BUDROE: Okay. For slide 11, which would be
4 the rat tumor incidence. By pairwise comparison, for
5 example, take the female rat thyroid gland C-cell, adenoma
6 carcinoma data all -- by pairwise comparison with controls
7 using the Fisher exact test, all three dose groups had
8 significantly increased tumor incidence compared to
9 controls.

10 CHAIRPERSON ANASTASIO: Right. So that's for the
11 exposed groups. They're statistically different from the
12 controls. I'm curious about, the controls are also marked
13 as statistically different and I don't understand that.

14 DR. BUDROE: That is a common convention -- it
15 confused me the very first time I encountered it. And
16 we're going to have to use different symbols I think.
17 What that means is that there was a positive -- one
18 asterisk would mean that there was a positive trend test
19 for control significant at the P less than 0.05 level.
20 And two would mean P less than 0.01.

21 CHAIRPERSON ANASTASIO: What's different from
22 that?

23 PANEL MEMBER GLANTZ: Yeah. This is -- this is
24 Stan

25 DR. BUDROE: So it -- it's we're kind of

1 conserving real estate there, but it would probably be a
2 lot more -- it would be less confusing if we used a symbol
3 other than an asterisk next time. So we can make that
4 change.

5 PANEL MEMBER GLANTZ: Well, this is Stan. I was
6 confused by the same thing. And I think what I suggested
7 to OEHHA was that rather than having asterisks in the
8 control column, that they add another column to the table
9 that says, you know, was there a significant trend?
10 Because all the other asterisks in the table represent
11 comparisons against control. And, I mean, I was very
12 confused by that. So I just think they -- you know, to
13 get rid of the asterisks in the control column and add
14 another column that says, you know, significant trend
15 question mark, and then put the P values in there. I
16 mean, it's buried in a footnote in two of the tables.

17 CHAIRPERSON ANASTASIO: Okay. Now I understand.

18 PANEL MEMBER GLANTZ: I didn't figure it out
19 until I asked them. So that needs to be -- you know, it's
20 just an editorial change. But since multiple people were
21 confused by it, I think they need to make it.

22 DR. BUDROE: Is there any chance, that we could
23 go to using a different symbol than an asterisk for the
24 control column?

25 PANEL MEMBER GLANTZ: No. No, because -- because

1 the symbols -- the symbols -- the symbols in the table
2 indicate significance testing of comparisons against
3 control. And it just -- I don't know why you're so
4 resistant just adding another column to the table. It
5 makes it explicit about the trend test.

6 DR. BUDROE: Real estate conservation.

7 (Laughter.)

8 DR. BUDROE: We can -- we can make that change.

9 DR. COGLIANO: Yeah. We'll think about how to do
10 that and be more clear in future documents.

11 CHAIRPERSON ANASTASIO: Beate.

12 PANEL MEMBER RITZ: I actually have another
13 suggestion. I hate seeing P values less than. I would
14 like a real P value, because a P value of 0.06 might be
15 just as relevant as one of 0.04. And we don't see that
16 here. And we have so few animals, that can easily happen
17 and then something that actually is just as informative is
18 called non-statistically significant and thrown around.
19 So P values, please, if you want to list them at all, list
20 the real P value, not a less than.

21 DR. BUDROE: Okay.

22 CHAIRPERSON ANASTASIO: There goes your concern
23 about real estate.

24 (Laughter.)

25 CHAIRPERSON ANASTASIO: But I agree, it's very

1 helpful information to know if it's closed.

2 Ahmad.

3 PANEL MEMBER BESARATINIA: Yes. We have table 1
4 and table 2 in the report. And then we have an adjusted
5 table listing the incidence of tumor in mice and rats.
6 And I'm wondering, these absolute numbers and the
7 percentages are indicated in the adjusted table. Are
8 there any differences? Because it looks like, at the
9 highest dose, there are some elevation in the number of
10 tumors. There is a -- hardly see a trend and there is no
11 statistics indicated for either table. The only thing
12 that I came across is the table 8 in the report itself,
13 which deals with modeling results. So I'm wondering if
14 there hasn't been any data analysis once you adjusted this
15 tumor incidence in the two models.

16 DR. BUDROE: All right. You're talking about
17 table 8 in the document itself?

18 PANEL MEMBER BESARATINIA: Table -- actually,
19 that would be table -- the adjusted table in the document.

20 CHAIRPERSON ANASTASIO: Sorry. Can I make a
21 suggestion? I think the comparison may be slide 10 versus
22 slide 23 for the mice -- the mouse example.

23 PANEL MEMBER BESARATINIA: Yeah, it's page 12 of
24 the -- page 12 of this handout you gave us, which is slide
25 23 and slide 24. Page 13 of the handout.

1 DR. BUDROE: Right. We didn't do pairwise
2 comparison or trend tests on the adjust --
3 mortality-adjusted. So is that something you'd like to
4 see added to the --

5 PANEL MEMBER BESARATINIA: Yes, but -- because
6 I'm thinking that your model is based on the adjusted
7 number, isn't it?

8 DR. BUDROE: Right.

9 PANEL MEMBER BESARATINIA: Okay.

10 DR. BUDROE: Right. We kind of showed the
11 unadjusted tumor incidence data first for the purposes of
12 doing essentially hazard identification. This is, of
13 course....., and then is there, you know, a positive,
14 you know, dose response test for trend?

15 And then we could do pairwise comparison on the
16 tumor incidence adjusted for mortality. We just didn't
17 include that in the document. That would be useful. We
18 could do that also.

19 CHAIRPERSON ANASTASIO: Yeah, THAT seems like a
20 useful -- I mean, the denominator doesn't change that
21 much, right, you'd lose one or two animals.

22 DR. BUDROE: Right.

23 CHAIRPERSON ANASTASIO: But it does seem like it
24 would be a useful comparison to make sure they're still
25 statistically significant.

1 DR. BUDROE: Right. And we wouldn't expect that
2 there's going to be that much change, but something --

3 CHAIRPERSON ANASTASIO: Right.

4 DR. BUDROE: -- could -- one could drop in, and
5 could drop out like that if you were --

6 CHAIRPERSON ANASTASIO: Right.

7 DR. BUDROE: -- on the edge of significance.

8 CHAIRPERSON ANASTASIO: Yeah.

9 PANEL MEMBER BESARATINIA: Because with the
10 limited number of animal, quite a few can have an impact
11 on your final P value when you're making such comparisons,
12 so...

13 PANEL MEMBER BLANC: Yeah, but if I understand --
14 I was going to not go to this until we had the other
15 discussion. But in terms of your expla -- detailing of
16 the method of the adjustment, which therefore allows for
17 fractional animals, because of the time, but all of these
18 are even integers here in the denominators. Did I
19 misunderstand something about the method?

20 DR. BUDROE: No. The reason you don't have
21 integers in the poly-3 correct is because you would have
22 fraction -- Essentially fractional animals in the
23 denominator. We didn't want to make it overly confusing.

24 PANEL MEMBER BLANC: No, but this is a table of
25 the adjusted incidence, right?

1 DR. BUDROE: Right.

2 PANEL MEMBER BLANC: And the adjusted incidence
3 allows for having 48.6 animals. Did I misunderstand that?

4 DR. BUDROE: Well, this, for example -- the mouse
5 tumor data was adjusted using effective number. So that
6 allows for whole integers in the denominator. You
7 wouldn't have fractionals. You only have that for a
8 poly-3 correction.

9 PANEL MEMBER BLANC: I see. So this is the --
10 and the unit risk derivation was not using these data, but
11 using the poly-3 data.

12 DR. BUDROE: Well, for the rat data it was.

13 PANEL MEMBER BLANC: I see. And this is the
14 mouse data?

15 DR. BUDROE: Correct.

16 PANEL MEMBER BLANC: And therefore, the
17 interpretation of this is that since we started with 50 --
18 let's go back for a second. Since we started with 50 in
19 each group, so the implication here is that three dropped
20 out, at some point? I mean, is that the correct
21 implication of this?

22 DR. BUDROE: That would -- yeah, that there were
23 three that died before the time of the first effective
24 tumor.

25 PANEL MEMBER BLANC: Right. So, you know, just

1 to respond to your comment, it's such a small difference
2 that I think it's actually pretty unlikely that even with
3 relatively small numbers, unless they had something which
4 was such a borderline relationship, prior to which
5 addresses Beate's point, that if there was something that
6 was 0.059, it might be, you know, 0.049 now, but it's
7 unlikely.

8 And then the reason why the next slide is only as
9 percentages is so that you don't confuse people with
10 fractional animals, is that why?

11 DR. BUDROE: Correct.

12 PANEL MEMBER BLANC: If I actually did the
13 algebra and multiplied that out, I'd come up with not
14 whole integers.

15 DR. BUDROE: Correct.

16 DR. COGLIANO: Yeah. I used to do a lot this at
17 the U.S. EPA. So, yeah, the previous one on the mice, it
18 was basically the mice that died before the first tumor.
19 Sometimes mice died within the first few weeks of a
20 study --

21 PANEL MEMBER BLANC: Yeah, yeah.

22 DR. COGLIANO: -- which is not a -- and you're
23 just removing them, because they lived so -- such a short
24 life, they didn't have a chance for the tumor.

25 The poly-3 correction was actually I think in one

1 of the earlier slides. And it's basically that fraction
2 of two years that the animal lived over the two years to
3 the third power. And so when you take that fraction and
4 put it to the third power, you're getting a non-integral
5 correction. What that Basically means is that an animal
6 that lived 12 months is going to contribute a little bit
7 to the denominator.

8 PANEL MEMBER BLANC: But --

9 DR. COGLIANO: Whereas, the effective number, if
10 you're taking the animals out before the first tumor, an
11 animal that lived 12 months if the first tumor was at 14
12 months wouldn't contribute anything. So it's a slightly
13 different way of making that adjustment. And with the
14 poly-3, yeah, you end up with fractional numbers. And
15 that's also confusing, so that's why this slide is
16 expressed terms of percentages.

17 PANEL MEMBER BLANC: Percentages and not...

18 CHAIRPERSON ANASTASIO: Beate.

19 PANEL MEMBER RITZ: I mean, in the human analyses
20 and literature, what we do is person time, right? So I
21 don't know why you're not saying mouse survival time.
22 That's a pretty simple way of getting at the denominator.
23 That's actually correct.

24 DR. COGLIANO: Poly-3 is perhaps a bit simple --
25 more similar to person years than an epidemiology study,

1 but it is with a third power of the fraction of the
2 lifespan correction, so it's still a little different.
3 And that I think is from some of the earlier Armitage-Doll
4 modeling that tumor incidence tends to go up at some
5 higher power like three, four, five, sixth power of dose
6 and -- or time. And so it was, you know, more than just
7 the per -- the month -- the mouse months. It's --

8 PANEL MEMBER RITZ: Right, I do understand that.
9 But as long as the mouse didn't have an event, it doesn't
10 matter whether the mouse dropped out at age three months
11 or 12 months, right?

12 DR. COGLIANO: In the effective number, it might
13 not. If the first tumor was at 14 months, it doesn't
14 matter if it dropped out at three months or 12 months. In
15 the poly-3, three months would be, three out of 24 months
16 to the third power, and the 12-month would be 12 out of 24
17 months to the third power. And a 12-month mouse would
18 make a larger contribution to the denominator.

19 PANEL MEMBER RITZ: Okay.

20 CHAIRPERSON ANASTASIO: Okay. Thank you.

21 Any other questions on the presentation so far?

22 All right. If not, let's continue then with the
23 response to public comments.

24 PANEL MEMBER GLANTZ: Actually -- actually, this
25 is Stan.

1 CHAIRPERSON ANASTASIO: Yeah, Stan.

2 PANEL MEMBER GLANTZ: So I'd just like to -- so
3 I'm -- so are you guys saying that you don't think the
4 poly-3 adjustment was appropriate? I'm a little confused
5 by the discussion.

6 PANEL MEMBER BLANC: Paul Blanc here. I wasn't
7 suggesting that at all. I was just trying to understand
8 which -- which slide applied to which -- which table.
9 And -- and it helped clarify for me why one table had
10 whole numbers, because it wasn't poly-3. It was the other
11 way of doing it. And one table with the rats was
12 presented -- presented in percentages, but that was to
13 avoid confusing people with, you know, 47.4 rats or
14 whatever it would have led to.

15 So I have no problem with them using what are
16 accepted as standard approaches to these problems in the
17 interpretation of small animal studies to derive risk
18 estimates. So that was just for my own edification.

19 PANEL MEMBER GLANTZ: Okay. Thank you.

20 CHAIRPERSON ANASTASIO: All right, John.

21 --o0o--

22 DR. BUDROE: Okay. During the public comment
23 period, OEHHA received comments from the American Coatings
24 Association.

25 --o0o--

1 DR. BUDROE: And we've paraphrased the comments
2 that were received in the interests of brevity in the
3 presentation.

4 Comment number one, OEHHA incorrectly assumed the
5 mutagenicity of PCBTF and employed this assumption to
6 incorrectly support the use of a low-dose linear risk
7 model.

8 And OEHHA used a technical approach that is
9 inconsistent with U.S. EPA's 2005 guidelines.

10 Our response to this comment. OEHHA's decision
11 to use the low-dose linear assumption for dose response
12 modeling was not based upon an assumption that PCBTF is
13 genotoxic or mutagenic, but instead upon the lack of
14 information indicating that a nonlinear threshold modeling
15 approach should be used.

16 In these situations, OEHHA uses a health
17 protective approach that includes assuming low-dose
18 linearity in the dose-response model.

19 --o0o--

20 DR. BUDROE: Additionally, contrary to ACA's
21 assertion, OEHHA's use of the low-dose linear risk model
22 is consistent with U.S. EPA's 2005 guidelines on page
23 3-21, which state quote, "When the weight of evidence
24 evaluation of all available data are insufficient to
25 establish the mode of action for a tumor site and when

1 scientifically plausible based on the available data,
2 linear extrapolation is used as a default approach,
3 because linear extrapolation generally is considered to be
4 a health-protective approach. Nonlinear approaches
5 generally should not be used in cases where the modes of
6 action have not been ascertained".

7 PANEL MEMBER GLANTZ: So this is Stan. I
8 apologize. I can't -- I'm not seeing the slides again.

9 CHAIRPERSON ANASTASIO: We're seeing them, so I'm
10 not sure if it's a webcast issue, but our crack IT staff
11 is on it.

12 PANEL MEMBER HAMMOND: Yeah, I'm not seeing them
13 either. This is Kathy. So I assume it't the web
14 broadcast.

15 CHAIRPERSON ANASTASIO: John, I'm wondering if
16 you have the slides and we could email to Kathy and Stan?

17 CHAIRPERSON ANASTASIO: Well, they're on that
18 laptop. If they email to that laptop.

19 PANEL MEMBER GLANTZ: The slides just appeared.

20 CHAIRPERSON ANASTASIO: They appeared. Oh,
21 perfect. All right. Thank you, John. Please continue.

22 PANEL MEMBER GLANTZ: I'm seeing slide 36 right
23 now.

24 CHAIRPERSON ANASTASIO: Yes, that's right.

25 DR. BUDROE: Correct.

1 Okay. Comment number two. ACA Challenges
2 OEHHA's assessment that the available genotoxicity data as
3 providing quote, "some evidence", unquote, that PCBTF is a
4 genotoxic substance. In particular, ACA criticizes the
5 use of genotoxicity results obtained for unscheduled DNA
6 synthesis by Benigni 1982 for sister chromatid exchanges,
7 or SCEs, by Litton Bionetics 1979, and for micronucleus
8 formation, NTP 2018.

9 --o0o--

10 DR. BUDROE: Our response to comment number two
11 was in Benigni 1982, a monotonic dose response for UDS was
12 observed for concentrations between zero and two
13 microliters per ml. A positive, but relatively decreased
14 response to the highest dose, ten microliters per ml, may
15 be due to cytotoxicity.

16 --o0o--

17 DR. BUDROE: In the 1979 Litton Bionetics report,
18 SCEs per chromosome in the non-activated test were
19 significantly increased the controls at all tested
20 concentrations of PCBTF, with t-test p-values of less than
21 0.01; and three of five tested concentrations with
22 activation displayed elevated SCEs. And the chart up
23 there on the slide shows the data from the non-activated
24 SCE tests and indicates a clear dose-response trend.

25 --o0o--

1 DR. BUDROE: And then finally, in NTP 2018,
2 significantly increased micronuclei were observed in male
3 mice. The NTP report states quote, "In mice from the
4 3-month study, small but statistically significant
5 increases in micronucleated mature erythrocytes were seen
6 at the highest exposure concentration (2,000 ppm)... For
7 the male mice, the observed response was outside the
8 historical control range for the laboratory and was
9 therefore judged to be positive".

10 And I'd like to also note that the -- for female
11 mice, there was also a statistically significant increase
12 seen at the high dose. But that value fell within the
13 historical control range for NTP and they decided it
14 wasn't -- wasn't judged -- it was significant but not
15 judged to be positive.

16 So based on the ACA's comment, OEHHA revised the
17 wording of its conclusion in the document from "some
18 evidence" to "limited evidence" that PCBTF is genotoxic.

19 --oOo--

20 DR. BUDROE: Comment number three, ACA states
21 that OEHHA hypothesized quote, "The generation of a
22 reactive and genotoxic metabolic intermediate that could
23 potentially be of concern in determining the mutagenic
24 potential of PCBTF. However, the potential for a
25 mutagenic metabolite is not supported by the available

1 evidence provided in table 4 of...", the document.

2 And our response to this comment is that although
3 the mutagenicity data for PCBTF that's reported in table 4
4 of the document, including tests with metabolic
5 activation, were uniformly negative, this does not
6 invalidate the hypothesis that the metabolism of PCBTF,
7 the phenolic compounds involves enzymatic oxidation of
8 PCBTF's aryl ring, with a potential to form reactive
9 electrophilic intermediates, such as aryl oxides quinones.
10 These intermediates may covalently bind the cellular
11 macromolecules including DNA.

12 --o0o--

13 DR. BUDROE: Comment 4. ACA states that OEHHA
14 did not conduct a proper assessment of the constitutive
15 androstane receptor, or CAR, mode of action for mouse
16 liver tumors, and that quote, "The available science for
17 PCBTF is consistent when a mode of action(CAR activation)
18 proposed by NTP for male mice liver tumors(the endpoint
19 relied upon for the OEHHA recommended IUR). Further,
20 tumors occurring by this mode of action in rodents are not
21 REL rant to human health".

22 Our response is to that comment is that ACA is
23 incorrect to say that NTP proposed a CAR-based mode of
24 action. NTP only discussed some of the evidence
25 indicating that PCBTF may be a CAR activator in rats and

1 mice. In the same report section, NTP also concluded that
2 further mechanistic studies are needed to better
3 understand [PCBTF-induced] hepatocellular carcinogenesis".

4 --o0o--

5 DR. BUDROE: Additionally, it has not been
6 adequately demonstrated that rodent liver tumor data from
7 chemicals fitting the putative CAR adverse outcome
8 pathway, or AOP, are irrelevant to human cancer risk.
9 Similar recent studies -- several recent studies with
10 CAR/PXR humanized or transgenic mice indicate that the
11 induction of mouse and human CAR/PXR can produce similar
12 responses leading to liver tumors.

13 And the evidence supporting the CAR MOA for PCBTF
14 liver tumor formation in mice is incomplete. The main
15 elements of the CAR AOP are:

16 Activation of CAR; altered expression of hepatic,
17 CAR-dependent genes related to cell cycle control with
18 CYP2B and CYP3A induction, increased liver weight, and
19 hepatocellular hypertrophy; this is followed by increased
20 mitogenic cell proliferation of hepatocytes; increased
21 pre-neoplastic liver foci; and increased hepatocellular
22 adenomas or carcinomas.

23 --o0o--

24 DR. BUDROE: Although increased liver weight,
25 hepatocellular hypertrophy, and liver foci were observed

1 in the NTP 1992 and 2018 mouse studies, OEHHA has not
2 identified any published studies demonstrating that PCBTF
3 activates CAR in mice or that PCBTF causes CAR-related
4 altered gene expression, CYP2B enzyme induction, or
5 hepatocellular proliferation in mice.

6 CAR knockout mouse studies should be completed
7 that show that CAR activation is a required event for the
8 induction of live tumors in male mice exposed to PCBTF.

9 And I'll also note that there was rat data that
10 indicated that, for example, CYP2B enzyme induction,
11 however there was no increase in liver tumors in rats.

12 --o0o--

13 DR. BUDROE: Comment number five. ACA cites an
14 unpublished 1982 epidemiological report of Occidental
15 Chemical Corporation workers as providing evidence that
16 PCBTF exposure in humans does not produce and increased
17 risk -- increased rate of the tumor types observed in
18 animals following exposure to PCBTF.

19 And our response to that comment is the workers
20 in this study were exposed to approximately 80 chemicals,
21 in addition to PCBTF, including known or suspected
22 carcinogens such as benzene, trichloroacetic acid,
23 trichloroethylene, perchloroethylene, lindane, mirex and
24 asbestos.

25 Statistically significant increases in

1 respiratory system and stomach cancer were found in the
2 study cohort. However, individual chemical risk could not
3 be identified in the study to the lack of -- due to the
4 lack of chemical-specific, worker, or workstation exposure
5 data.

6 --o0o--

7 DR. BUDROE: Had the workers in the study been
8 exposed to PCBTF alone, the observed elevated rates of
9 respiratory and stomach cancer would provide qualitative
10 evidence of PCBTF's carcinogenic potential in humans. The
11 fact that the elevated tumor types observed in humans were
12 different than the types found in rodents exposed to PCBTF
13 is not relevant, since tumor concordance is not generally
14 observed across different species, nor is it required for
15 cancer risk assessment.

16 Finally, given that plant workers were actually
17 exposed to unknown concentrations of multiple potential
18 carcinogens, including PCBTF, the study provides no useful
19 information with which to assess PCBTF's carcinogenicity.

20 --o0o--

21 DR. BUDROE: Comment number six. ACA stated
22 quote, "OEHHA did not use generally accepted modeling
23 approaches". Specifically, OEHHA relied upon draft 2014
24 BMDS guidance instead of U.S. EPA's prior final BMDS
25 guidelines in 20 -- from 2012.

1 Also, that OEHHA only reported p-values to
2 characterize goodness-of-fit and did consider Akaike's
3 Information Criteria, or AIC, values. Thus, the fit of
4 the models to the data has not been adequately assessed.

5 And our response to that comment is that OEHHA
6 generally follows U.S. EPA guidance on the proper use of
7 its BMD software. This includes the 2012 BMDS guidelines
8 and the 2014 guidelines addendum. According to U.S. EPA,
9 the 2014 guideline has been reviewed in accordance with
10 U.S. Environmental Protection Agency policy and approved
11 for publication.

12 OEHHA contacted U.S. EPA staff about the status
13 of the 2014 guidance and they verified that it has been
14 officially recommended by the Agency Statistical Workgroup
15 for use in use in U.S. EPA risk assessments.

16 --o0o--

17 DR. BUDROE: Additionally, ACA is incorrect that
18 we only use chi-squared measures of fit, that is p-values,
19 to judge the fit of the multi-stage models to the data.
20 We also used: the scaled residual for the dose nearest the
21 benchmark dose; visual inspection of the overall curve
22 fit; and, AIC comparison when recommended by the 2014 BMDS
23 addendum.

24 OEHHA also -- we also note that using the 2014
25 BMDS guidelines for male mouse liver tumors, upon which

1 the proposed IUR is based, produces the same BMDL value as
2 used only to -- is obtained by using only the procedures
3 contained in the 2012 BMDS guidelines.

4 Now, in response to those comments, we have added
5 a column to table 8 of the IUR document indicating cases
6 in which the AIC or an alternative method was used to
7 choose the model for each tumor site. We also provided
8 text to the model calculations section of the document
9 describing the reasons for those choices.

10 --o0o--

11 DR. BUDROE: Comment number 7. ACA states that
12 quote, "The method OEHHA used to adjust for differential
13 early mortality or significant differences in survival is
14 a crude approach and is not recommended in either the U.S.
15 EPA 2005 guidelines for carcinogen risk assessment or the
16 OEHHA 2009 technical support document. Rather, the
17 application of time-to-tumor models are noted in both
18 guidance documents to account for significant decreases in
19 survival. And therefore, currently accepted scientific
20 approaches were not relied upon to adjust for survival".

21 And our response to these comments are that OEHHA
22 used two standard methods to adjust tumor-incidence data
23 for differential early mortality in the animal studies.
24 The effective number method was used for mice and the
25 poly-3 method was used for rats. These methods, which are

1 described in more detail in the IUR document, have been
2 used regularly by OEHHA, U.S. EPA, and other risk
3 assessors.

4 --o0o--

5 DR. BUDROE: ACA stated that the effective-number
6 and poly-3 methods are not recommended in either U.S. EPA
7 2005 or the OEHHA 2009 TSD. More precisely, these methods
8 are not directly addressed in the guidelines.

9 Both OEHHA and U.S. EPA guidelines present
10 time-to-tumor analysis as an option, not a requirement,
11 that may be used when survival is poor in some dose
12 groups, and when the appropriate information to run the
13 model is available.

14 --o0o--

15 DR. BUDROE: Comment number eight. ACA notes
16 quote, "PCBTF was developed as a substitute for use in ACA
17 member products precisely because it assists in reducing
18 the public health effects of ground level ozone.
19 Currently, there are no viable alternatives available to
20 replace PCBTF where it is used as an exempt solvent...
21 Overregulating this chemical to avoid an uncertain hazard,
22 that is potential health effects in humans will only bring
23 about the near certain public health impacts of increased
24 ground-level ozone".

25 And our response to this comment is that the

1 comment is relevant to risk management of chemicals
2 subject to the hot spots regulations. OEHHA is
3 responsible for developing risk assessment guidelines,
4 including IURs, for hot spots facility health risk
5 assessments, but is not generally responsible for risk
6 management activities, resulting from hot spots risk
7 assessments. Such responsibilities are the purview of the
8 California Air Resources Board and the regional air
9 quality management districts.

10 And that concludes the response to comments
11 presentation.

12 CHAIRPERSON ANASTASIO: Great. Thank you, John.

13 I think in the panel discussion, we'll probably
14 touch on some of these public comments and the response,
15 so let's not have questions specifically about the
16 response now. We'll do that as part of the panel
17 discussion.

18 I do want to make one note, we received comments
19 from two organizations in the last ten days, but that's
20 not sufficient time for OEHHA to address them. So, John,
21 I would ask that you guys assess those comments and
22 perhaps report to us at our July meeting on your response
23 to those comments. Will that work?

24 PANEL MEMBER GLANTZ: Well, this is Stan. You
25 know, I -- I mean, I don't know how the discussion of the

1 document as a whole is going to go, but, you know, I find
2 it quite objectionable to get these last second comments
3 in a time that, you know, precludes OEHHA from responding
4 and then us from considering the responses.

5 And, you know, I would -- you know, depending on
6 how the discussion goes today, you know, if the committee,
7 you know, feels the document is good enough to approve, I
8 don't think we should delay it till July, you know, just
9 because these comments came in so late.

10 I mean, I read them, but -- I mean, we did, once
11 upon a time, basically have a policy that to be
12 considered, a comment had to come in, I think it was, a
13 month before the meeting or three weeks before the meeting
14 to avoid just this problem. We've gotten kind of sloppy
15 about that. But I actually think we should reinstate a
16 formal policy that we should -- in order to be considered,
17 comments need to come in far enough in advance to allow
18 proper consideration.

19 I mean, if the committee decides the report needs
20 so much work that it will have to come back in July, then
21 I'm -- I think it's -- you know, there's no reason not to
22 discuss the comments then. But about would hate to allow
23 this kind of sandbagging behavior to delay a decision on a
24 document that's otherwise warranted.

25 PANEL MEMBER BLANC: I concur. So I suggest we

1 defer how we handle in a formal way the comments that were
2 received too late for review, until after we do everything
3 else.

4 CHAIRPERSON ANASTASIO: Okay. I think that's
5 reasonable. I'm looking over at Lori now. So, Lori, what
6 is our -- do we have some guidance for commenters in terms
7 of when we need to receive it in order for it to actually
8 be considered by the Panel?

9 PANEL LIAISON MIYASATO: It hasn't actually been
10 put in the public announcement. We usually give about two
11 weeks. We ask for the comments two weeks beforehand, but
12 it wasn't written into this public notice.

13 CHAIRPERSON ANASTASIO: Oh, I see. Okay. And,
14 John, is two weeks generally enough time that OEHHA could
15 respond?

16 DR. BUDROE: That would be about the bare
17 minimum. I mean, it depends on the length of the comments
18 and the technical complexity.

19 CHAIRPERSON ANASTASIO: Yeah. So Lori, is
20 there --

21 PANEL MEMBER GLANTZ: Yeah, but the -- but --
22 well, but the -- but the point is it's not just OEHHA
23 responding, it's us getting a chance to read the responses
24 and think about them before the meeting. So, I mean, I
25 think we should -- I mean, I, you know, participated as a

1 commenter in many other government dockets. And, you
2 know, the dockets typically close, you know, reasonable
3 time before the meeting.

4 And, I mean, the fact is whatever the last minute
5 is, that's when they'll come in. And I think we -- I
6 mean, we can come back to this at the end of the meeting,
7 but I personally think that we ought to have a deadline
8 for comments of a month before the meeting, which would
9 give OEHHA a couple of weeks to respond, and then -- so we
10 would get the stuff in enough time to actually read the
11 comments, and responses, and think about them, and have an
12 intelligent discussion, rather than getting kind of
13 sandbagged like this at the last second.

14 So, I mean, we did actually do that once upon a
15 time, but somebody said, well, we shouldn't tell people
16 they can't send comments in. But, I mean, these last
17 minute -- I mean, in addition to the ACA one, a couple
18 came in just a couple days ago. I'm actually on vacation
19 right now and, you know, having to plow through
20 last-minute comments when OEHHA doesn't have a chance to
21 respond is just -- it just -- it's a perversion of the
22 whole process.

23 We can come back to this. But I feel quite
24 strongly that we should not let people come in with these
25 last-second comments where nobody has time to really think

1 about them.

2 CHAIRPERSON ANASTASIO: Yeah. I think the entire
3 panel agrees with that assessment, Stan. And so I'm
4 looking to Lori now. Lori, do we have the ability to set
5 a deadline that -- if comments are to be considered, that
6 they need to be in say a month before the meeting?

7 PANEL LIAISON MIYASATO: We can try to do that.
8 The thing is we only posted the public notice a month
9 before the meeting. And so we'd have to speed up the
10 entire process, which means the program staff as well
11 would have to get all the materials together and know what
12 the agenda is going to be for the meeting. So that means
13 everyone is going to have basically speed up the process.
14 We can try to do that earlier, but that would also depend
15 on the program leads.

16 PANEL MEMBER KLEINMAN: This is Mike. I thought
17 that when the documents are released for public review,
18 there is some statement in the release note that comments
19 will be, you know, accepted up to a certain point.

20 DR. BUDROE: Well, the documents are commonly
21 released for public comment for a 45- or 60-day period or,
22 you know, longer. But the -- when the documents are
23 released to the panel, they're commonly been released 30
24 days upfront. And these comments that are coming in
25 essentially are comments on the revised document. So

1 there's not really a public comment period at that point,
2 but you're still getting public comments.

3 CHAIRPERSON ANASTASIO: Okay. So I suggest that
4 I discuss this with agency leads at our next kind of
5 Chair's meeting and try to see if we can't come up with a
6 process that makes this better for the Panel and makes it
7 better for the agencies.

8 PANEL MEMBER GLANTZ: Yeah. I just -- I don't
9 want to beat a dead horse here, but I mean, I don't have
10 any problem with giving the public an opportunity to
11 comment on the revised document. But it just has to be --
12 you know, they -- it has to happen in enough time that it
13 becomes a meaningful part of the discussion.

14 PANEL MEMBER BESARATINIA: Well, if the document
15 is posted one month in advance of the meeting, so it's
16 only understandable that they are responding two weeks
17 after or three weeks after. So there should be some sort
18 of reorganization here.

19 PANEL MEMBER GLANTZ: Well, maybe -- I don't
20 want -- we should get back to the document. Maybe the
21 document should be posted six weeks before the meeting or
22 something. And then -- and then, you know, then -- and
23 people would have two weeks to put comments in. And that
24 would then give OEHHA time to respond and us time to think
25 about the responses. I mean, we don't want -- but we

1 don't want this to become an infinitely recursive process.

2 CHAIRPERSON ANASTASIO: Yes. I think we all
3 agree with that.

4 Okay. So that brings us to the end of the OEHHA
5 presentation.

6 DR. BUDROE: Yeah, if I could beg the Chair's
7 indulgence for a five minute break.

8 CHAIRPERSON ANASTASIO: Yeah, I was just going to
9 suggest we're going to take a five-minute break now. And
10 then we'll come back and the leads will start the
11 discussion of the document, and then we'll have a chance
12 for the Panel to weigh in.

13 All right. So we'll reassemble in five minutes.

14 (Off record: 10:49 a.m.)

15 (Thereupon a recess was taken.)

16 (On record: 10:57 a.m.)

17 CHAIRPERSON ANASTASIO: Hello.

18 Okay. Kathy and Stan can you hear us?

19 Kathy and Stan, are you with us?

20 Well, let's give them another minute or two.

21 PANEL MEMBER HAMMOND: Is that right.

22 PANEL MEMBER GLANTZ: Yeah. This is Stan is here
23 too. I was just across the room.

24 CHAIRPERSON ANASTASIO: Okay. Great. All right.
25 We are all reassembled, so we're going to begin. So

1 this -- the two leads for this document were Dr. Joseph
2 Landolph and Dr. Lisa Miller.

3 And Dr. Landolph is going to start us off.

4 PANEL MEMBER LANDOLPH: Okay. Thank you. I read
5 the document carefully a number of times and I wrote
6 myself a critique on it just so I had some notes to read
7 off.

8 I thought the document was scientifically
9 accurate and very well written. Clear to me the authors
10 did a very good job writing the document and the reviewers
11 have done a good job reviewing it. There were no
12 typographical errors in it. This authors of the document
13 answered all of the comments of the coatings manufacturers
14 appropriately, in my opinion. The authors invested a lot
15 of time and effort into answering the comments of the
16 coatings group.

17 My specific comments were the introduction was
18 fine, well-written, clear -- clearly stated the purpose of
19 the document. They described what PCBTF was used for,
20 it's various uses and its air emissions and exposure
21 potential. They looked through the noncancer effects and
22 capsulized them.

23 And they noted that no studies on the noncancer
24 toxicity of PCBTF to humans were found in the
25 peer-reviewed literature. And they said no studies of the

1 noncancer -- I'll skip that.

2 Next, they discussed that OEHHA found four
3 published reports evaluating the subchronic/chronic
4 noncancer effects of PCBTF exposure in mice and they
5 discussed those in great detail. And then they went to
6 the cancer risk assessment document itself as prepared for
7 PCBTF. And they went through that in excruciating detail
8 and listed all the physical and chemical properties of the
9 compounds and how they calculated the cancer slope factor
10 and inhalation unit risk in great detail. And it was very
11 clear to me how they did this. So that was fine.

12 They reviewed the information on the absorption,
13 distribution, metabolism, and excretion of PCBTF in
14 mammals. Although, this data, they pointed out, was
15 somewhat sparse. They noted PCBTF is really absorbed
16 orally and by inhalation, widely distributed throughout
17 the body with a tendency to concentrate in fat and fatty
18 tissue. Primarily excreted unchanged via inhalation,
19 secondarily metabolized by aromatic hydroxylation and
20 excreted through urine and feces as conjugated phenolic
21 compounds; and converted into small amounts of mercapturic
22 acid metabolites.

23 They went over the genotoxicity as it exists in
24 great detail. And they showed it was negative in the Ames
25 reverse mutation assay in four studies with and without

1 metabolic activation, negative and forward mutation in
2 salmonella typhimurium, and negative and forward mutation
3 in L5178Y mouse lymphoma cells with and without metabolic
4 activation. They noted that it did not induce mitotic
5 recombination in A. nidulans. And they reviewed that it
6 does induce sister chromatid exchange in L5178Y mouse
7 lymphoma cells, both with and without S-9 metabolic
8 activation.

9 They noted that PCBTF does not induce chromosomal
10 aberrations in Chinese hamster ovary cells with or without
11 metabolic activation. They also noted that it does not
12 induce chromosomal aberrations in vivo in Sprague-Dawley
13 mice or female rat bone marrow assays without S-9
14 metabolic activation. And it did not induce micronucleus
15 formation in vivo in Sprague-Dawley male or female rats
16 peripheral blood, but does induce micronucleus formation
17 in vivo in B6C3F1 mice and female mice and peripheral
18 blood without S-9 metabolic activation.

19 So I agreed completely with their assessment of
20 the genotoxicity. It was balanced and there is some, but
21 a limited amount of genotoxicity studies. So I agreed
22 exactly how they characterized it.

23 And they went through the cancer hazard summary
24 very well and a quantitative cancer risk assessment. And
25 they presented their results from calculating the human

1 cancer slope factor from the animal cancer slope factor,
2 which in turn was calculated from the animal BMDL. And
3 that was all very straightforward and transparent to me.

4 In a separate document, the authors also replied
5 very carefully and completely, in my opinion, to the
6 criticisms of the ACA of their cancer inhalation unit risk
7 factor document for PCBTF. I was satisfied that the
8 replies of OEHHA to the ACA's comments were scientifically
9 correct and explained carefully what we had done in
10 constructing this document and why.

11 I also agree with OEHHA that the use of linear no
12 threshold dose response for carcinogenesis induced by
13 PCBTF in male and female mice, and in male and female rats
14 was correct as they justified it, which means basically
15 that nobody really understands the mechanism. We need a
16 whole research project to ferret that out and that data is
17 not available now. So it's correct, when you don't know
18 the mechanism, to use the default linear, no threshold
19 dose response curve for carcinogenesis.

20 So overall, I thought this was a very good
21 document. I compliment the -- Dr. Budroe and his
22 colleagues and the co-authors on the construction of the
23 document. I think it's a fair document. It's well
24 rationalized. And I agree with the conclusions in the
25 document and their conclusions as they replied politely

1 and carefully to ACA.

2 CHAIRPERSON ANASTASIO: All right. Thank you,
3 Joe.

4 Lisa.

5 PANEL MEMBER MILLER: So I don't have a lot to
6 add to Dr. Landolph's very comprehensive review.

7 I found the science associated with the animal
8 studies to be very compelling. And it certainly was
9 supported by the NTP document, in the fact that that
10 document clearly went through peer review, through the NTP,
11 and I -- I actually went through the meeting minutes and
12 notes, and it was a unanimous approval from their
13 perspective. So I think that adds weight to the animal
14 data presented here and used here. So I think that's
15 appropriate.

16 My only comment, and this is, you know, coming
17 from somebody who does more translational -- I guess I
18 would say translational work. The lack of data from -- or
19 the limited, I should say, not complete lack, but limited
20 data in human subjects could be perceived as problematic.
21 And it's likely that we just haven't looked carefully
22 enough or we haven't had the opportunity to look very
23 specifically at exposure, whether it's occupational or
24 non-occupational. And I think where -- and this just
25 could be a minor edit in the document to simply strengthen

1 the argument of why this is so important.

2 I noted in the paragraph where you indicate major
3 sources in uses of PCBTF, and it -- and you mentioned the
4 total production and import of PCBTF in the U.S. from --
5 ranged from 5,000 to 25,000 tons per year. And -- and in
6 looking at the NTP document, they used two ranges. And I
7 can't remember, off the top of my head, what those numbers
8 were. But it almost sounded like the levels were going
9 down in terms of usage. And I suspect that's not the
10 case. I think it would be helpful if that info -- if this
11 information is available to you is to provide some clarity
12 on whether the use of this solvent is actually going up.

13 And I think that the fact -- if, in fact, you
14 can -- you can clarify that, yes, this is a -- this is a
15 chemical that's -- that is likely to be used. And the use
16 is going to potentially be increased over time, thus
17 adding to the concern that this could increase exposure
18 levels to the human public. I think if you can identify
19 or find that information and put that into your
20 introduction, I think it would strengthen it.

21 And again, it just -- it increases the concern
22 that the exposure levels to the human population could be
23 high, and could increase with time, thus adding to the
24 concern that the findings in the animal studies would
25 def -- could potentially translate into the human

1 population.

2 So that -- that's -- that is my only major
3 comment that I had is to -- to enhance or strengthen the
4 introduction, so that it would have a great -- it could --
5 it would have a greater impact on the potential concern
6 for this chemical in making it back to human pop -- the
7 human population.

8 CHAIRPERSON ANASTASIO: Thank you, Lisa.

9 So related to that, John, do you have a sense of
10 whether use is increasing?

11 DR. BUDROE: We do not, because it's -- there's
12 remarkably little information about the use of the
13 chemical certainly in California. In fact, it's not
14 currently on the hot spots inventory emissions --
15 emissions inventory list. It's actually been proposed to
16 be added to the list. And the panel I think has heard
17 about -- I believe that will be the afternoon's
18 discussion. So -- but it's -- we would like to put the
19 information there. But if nobody is generating it, you
20 know, you -- you're kind of stuck.

21 So it's -- I get the sense it is certainly still
22 important in use in California, given its use in things
23 like paints, and metal cleaning, and such, so -- but it is
24 important. It's worth doing the cancer potency for it.
25 Whether use is going up, down, or staying the same, we

1 don't have a handle on it. Although, Dr. Anastasio did
2 provide us with a reprint that we'll be using when we
3 revise document post-meeting regarding PCBTF
4 concentrations in urban air. And we will include that in
5 next revis -- next document revision.

6 PANEL MEMBER MILLER: That would certainly
7 strengthen the document. I was not aware of that. Was
8 that a recent publication?

9 CHAIRPERSON ANASTASIO: Yeah, I think it was in
10 the last year.

11 PANEL MEMBER MILLER: Okay.

12 CHAIRPERSON ANASTASIO: Yeah.

13 Yes, Joe.

14 PANEL MEMBER LANDOLPH: Just a quick addendum
15 comment, particularly since Dr. Cogliano is here. You
16 know, the ACA tried to really provide evidence for a
17 threshold. And as far as I'm aware, I've not seen
18 anything regulated as a threshold carcinogen yet. I know
19 the EPA tried TCDD thinking that that would be, because it
20 bound to a receptor. And the modeling showed that that
21 was linear, no threshold.

22 So I don't -- I'm not aware of anything that's
23 been regulated by a threshold yet. Are you?

24 DR. COGLIANO: There are very few. I think
25 chloroform at the U.S. EPA was considered to be a

1 threshold, where the carcinogenicity was secondary to
2 cytotoxicity, at which you find that threshold dose. But
3 I mean, that might be the only one I can think of out of
4 really hundreds of chemicals. And you really do need a
5 large amount of mechanistic evidence to be able to really
6 feel confident with a threshold.

7 And when I looked at the dose response curves for
8 this chemical in rats and mice, there certainly doesn't
9 seem to be any evidence of low, low, low, and then going
10 up at the high dose. It really seemed to be going up at
11 the mid -- at the mid-doses as well.

12 So I think that it's rare to find a threshold.
13 And I think, in this case, there really doesn't seem to be
14 evidence that would push you towards a threshold.

15 PANEL MEMBER LANDOLPH: Yeah. My impression is
16 the same. And I think if they were going to use the CAR
17 model, a heck of a lot more data has to be produced.
18 That's not accepted either. That is just not enough data.

19 CHAIRPERSON ANASTASIO: Thank you, Joe.

20 So I open up to the panel now. Let's start with
21 our remote participants.

22 Kathy, any comments?

23 PANEL MEMBER HAMMOND: No, thank you.

24 CHAIRPERSON ANASTASIO: Okay. Stan?

25 PANEL MEMBER GLANTZ: No, I -- this is -- I think

1 it's been a good presentation. I really appreciate the
2 review of the two panel leads. I guess the one thing I
3 would add -- and I did carefully read the ACA letter of
4 February 18th and was sort of looking through it as John
5 was making his presentation and the response to comments.
6 And, I mean, it would have been nice to have had a formal
7 response to this letter. But I didn't see anything new in
8 the February 18th letter that John didn't address in
9 response to the previous letter.

10 And in hooking at the February 26th letter from
11 the Roof Coatings Association, my sense of most of what
12 they were talking about dealt with risk management not --
13 rather than risk assessment. So I that be worth just
14 noting that. But no, I -- I don't have any other comments
15 beyond what I already said.

16 CHAIRPERSON ANASTASIO: Okay. Thank you, Stan.

17 Other Panel members?

18 Beate, do you want to go first?

19 PANEL MEMBER RITZ: Yeah, I have two things.

20 One, I really appreciated that you were referring to the
21 noncancer effects in the preliminary introduction. And I
22 just would recommend when you're looking over those, it's
23 very clear that they actually are seen in the same organs
24 with see the cancers in. And some of those changes could
25 actually be seen as pre-carcinogenic lesions. And it

1 seems from the write-up that there -- that these were
2 actually seen at subchronic and chronic dosing.

3 So maybe some -- different from the cancer
4 effects. But I don't know whether there is any way to
5 state that a little more clearly, that this is actually
6 relevant. It's also relevant to the argument that there
7 is a threshold, right, for carcinogenicity. If these are
8 pre-cancerous lesions, then that underscores that there's
9 probably not a threshold. We just need to wait long
10 enough and the cancer will come, if you get old enough.
11 So that was one comment. Maybe you can see whether
12 there's any wording or any -- you know, anything you might
13 want to change or dare to change in that introduction.

14 And one more question. The Kaplan-Meier survival
15 curves that are in the appendix, clearly they say
16 probability of survival. And is that really what is shown
17 here, not events, right? It's the survival of the animal,
18 it's not the -- the cancer events. Because you can use
19 these curves for anything, right? You can show mortality
20 on the onset of the event.

21 DR. BUDROE: Right. That does -- that --

22 PANEL MEMBER RITZ: Page 30.

23 DR. BUDROE: Those graphs do show the survival
24 curves. They're note --

25 PANEL MEMBER RITZ: They're mortality.

1 DR. BUDROE: Right.

2 PANEL MEMBER RITZ: I think that just needs to be
3 added, because it could be events, and then you wonder
4 which events, which cancers, like liver cancer or
5 something. But if it's mortality of the animal, it should
6 just be stated more clearly.

7 DR. BUDROE: Okay.

8 PANEL MEMBER RITZ: And then it's actually really
9 amazing that the rats seem to be dying off quite early in
10 these exposure studies compared to the mice. They have a
11 pretty steep mortality.

12 DR. BUDROE: More so. Yeah, and that's why we
13 wound up having to use the --

14 PANEL MEMBER RITZ: Right.

15 DR. BUDROE: -- the poly-3 correction on them.

16 PANEL MEMBER RITZ: Yeah.

17 CHAIRPERSON ANASTASIO: Thank you, Beate.

18 PANEL MEMBER RITZ: That's it.

19 CHAIRPERSON ANASTASIO: Mike.

20 PANEL MEMBER KLEINMAN: Yeah. On -- this is
21 Mike. On the question of the possibly carcinogenic or
22 genotoxic oxidation products, would it help -- you -- I
23 don't know if you actually ran the PBPK model to see what
24 concentrations you might see in the liver of these
25 oxidized compounds, but it might be useful to be able to

1 say there is a non-zero amount of this material that could
2 be produced in the liver through C4 -- cytochrome P450.

3 DR. KLOC: Let's see, it's been a while since
4 I -- we did -- we actually did set up the model, to the
5 extent that we could, based on the papers that we had.
6 And it's -- it was done in the very early part of this
7 analysis, so I'm a little rusty on it. But I'm -- I'm
8 not -- I'm not so sure that the model was capable of
9 calculating metabolites. I think it was mainly focused on
10 the parent compound and concentrations of the parent
11 compound in various organs.

12 PANEL MEMBER KLEINMAN: Oh, because it -- at
13 least in the write-up, you have on -- in the slide show,
14 it said that there was metabolism represented in the
15 model. So I thought maybe it would actually give you some
16 output.

17 DR. KLOC: I think the -- as I remember, and I
18 have to go back and double check this, but I think the
19 metabolism was used in order to subtract away from the
20 parent compound in order to get a steady -- steady state
21 concentrations, or actually non-steady state
22 concentrations.

23 In other words, you know, you -- the model
24 basically considers the intake of the parent compound and
25 its breakdown in the body in order to come up with a

1 concentration at any particular time. We can -- we can go
2 back and look at that.

3 PANEL MEMBER KLEINMAN: Yeah. I'm just thinking
4 that it takes the teeth out of the argument that you're
5 putting in something that's mythical, as opposed to there
6 is a finite probability that there is something there.

7 DR. BUDROE: Okay. We can go back and look and
8 see if the model would lend itself to doing that.

9 CHAIRPERSON ANASTASIO: Joe.

10 PANEL MEMBER LANDOLPH: Was there anywhere in the
11 literature, any suggestion that people had shake --
12 incubated the compound with S-9, and DNA, and looked to
13 see whether there were any DNA adducts or whether there
14 were any oxidative stress fluxes generated?

15 DR. BUDROE: No. That kind of data is -- it's a
16 data gap.

17 CHAIRPERSON ANASTASIO: Ahmad.

18 PANEL MEMBER BESARATINIA: I'm wondering if you
19 can comment on the carcinogenic potential of this chemical
20 relative to other known or suspected carcinogens? As I
21 understand, in the rodent tumor tumorigenicity experiment,
22 nearly 40 different anatomical sites were examined for
23 tumor formation upon on necropsy, of which only liver in
24 both male mice and rats showed signs -- positive sign of
25 tumor formation.

1 And in female, one or two, mostly at the highest
2 dose, yielded tumor. I'm wondering, in your judgment,
3 would you ascribe this effect to site specificity of this
4 chemical to induce tumor, or alternatively this chemical
5 being a weak tumorigenic agent or a combination of the
6 two?

7 DR. KLOC: I'd have to think a little bit about
8 that.

9 DR. BUDROE: I wouldn't say that there is a great
10 deal of site specificity with regard to PCBTF. I mean,
11 there is for -- obviously for the mice. But for the rats,
12 there's enough varied organ types that are being affected
13 that you're not seeing a lot of site specificity there.

14 PANEL MEMBER BLANC: Can you clarify in terms of
15 the gland that was highlighted in that regard
16 specifically?

17 DR. BUDROE: Well, harderian gland.

18 PANEL MEMBER BLANC: Yes, harderian.

19 DR. BUDROE: Uterine, thyroid -- thyroid gland.

20 PANEL MEMBER BLANC: Harderian. Yeah. Yeah. SO
21 for those of who treat humans, can you clarify what a
22 harderian gland is? Because humans don't have one.

23 DR. BUDROE: Have one.

24 PANEL MEMBER BLANC: I don't know. It's not a
25 socratic question I have.

1 DR. COGLIANO: It's a gland that does not have a
2 direct counterpart in humans. So, yeah, its relevance is
3 sometimes debatable.

4 Now, if you had a genotoxic compound which caused
5 cancer, there you would say, well, you know that tumor it
6 probably was through a genotoxic mechanism. But in this
7 case, it's -- that's un -- yeah, it's really uncertain
8 what the relevance of the harderian gland tumors are. You
9 do have the liver tumors that are strong. And in the rats
10 you have several hormonal related cancers. You have your
11 uterine. You have the thyroid cancers, and -- yeah, those
12 two.

13 So I would basically make -- I mean, I think the
14 judgment here, the unit risk is based on the liver tumors.
15 It's not based on the harderian gland tumors.

16 PANEL MEMBER BLANC: No, no. I understand that.
17 I'm just -- was just stimulated to make that comment, that
18 it wouldn't be absurd to insert a parenthetical the first
19 time you refer to those tumors to say this is a rodent
20 tumor that doesn't have a human corollary.

21 DR. BUDROE: Right. Just kind of specify what
22 that -- what a harderian gland is. And this is rodent
23 specific.

24 PANEL MEMBER BLANC: Right

25 DR. COGLIANO: That's a very good suggestion and

1 I think we can try to do that.

2 DR. BUDROE: We can do that.

3 CHAIRPERSON ANASTASIO: Okay. So sorry, can
4 you -- I think Ahmad's first question was how does the
5 cancer potency factor of PCBTF compare to some other
6 carcinogens, you said? Can you speak a little bit about
7 that?

8 DR. BUDROE: Not having prepared a list of where
9 it is in the -- you know, compared to benzene or tri --
10 you know, hexavalent chromium and such, my sense was that
11 it's not overwhelmingly potent. It's more potent, I
12 believe, than, for example, tert-butyl acetate was that
13 the panel considered awhile back. But it's less potent
14 than say 1,3-butadiene. And to make a more detailed
15 comparison, I don't have the information in front of me.

16 CHAIRPERSON ANASTASIO: Okay. Thanks.

17 Paul, comments?

18 PANEL MEMBER BLANC: Yeah. I mean, but that
19 wouldn't be an absurd edit to consider, as in your
20 discussion. You know, this is -- this is a cancer potency
21 factor, which is well within the family of cancer potency
22 factors typically arrived at. It's not at the extreme end
23 in either way, something like that.

24 DR. BUDROE: Kind of a point of information item
25 if there.

1 PANEL MEMBER BLANC: Yeah.

2 DR. BUDROE: Just this is where here -- here's a
3 number of other unit risks and this is where PCBTF falls.

4 PANEL MEMBER BLANC: Without killing yourselves,
5 just, you know, a little bit.

6 So I -- I agree with -- certainly, with the main
7 lead comments. I think there were two issues here, one
8 was a sort of weak attempt to bring into question the
9 carcinogenicity of the compound. Although, I believe that
10 the people that were doing the -- this is about the
11 critiques -- the main critique, but I think they realized
12 that was not a fight they were going to win, so they
13 didn't pursue that. It was a sort of subtle implication.

14 And then the issue about using a -- some kind of
15 nonlinear response, you're not -- nonlinear modeling, I
16 fully agree that you responded to the comment. And
17 that in the main document, that was the appropriate way to
18 do it. And if you hadn't done that, you would have gotten
19 a lot of grief from this Panel, I'm sure.

20 So the other comments I have are -- none of them
21 are particularly cogent. A very small one is in your
22 model of the metabolism, which is derived from obviously
23 other sources where there are three pathways and one of
24 them is, I think, glucuronidation and two of them are
25 mixed function oxidase CYP. I assume that the document

1 you based that on doesn't specify which CYPs they are.

2 DR. KLOC: Yes, that's correct.

3 PANEL MEMBER BLANC: So I would also, I think,
4 like a little parenthetical that you can't specify which
5 they are. Otherwise, it doesn't make sense to have --
6 well, actually, how do you know they're two different
7 CYPs, if you don't know what they are? Why are there two
8 arrows? Because it's going to two different metabolites,
9 so presumably they're two different CYPs, is that the
10 story?

11 DR. KLOC: No. We didn't -- we didn't intend
12 that to be the implication. We were just trying to say
13 that the CYP system, meaning all the various different
14 isoforms, and one of them -- some of them, which we --
15 we're not sure which ones are acting, can produce either
16 one pathway, or the other, or both.

17 PANEL MEMBER BLANC: Well, I think it would be
18 good to have a little parenthetical that says that too,
19 because otherwise it's like why do you have -- you know --
20 or you're trying -- you know, in other words, it's to tell
21 the reader we realize that there are specific C -- you
22 know, CYPs and we're just using it, but we don't actually
23 have the data to specify.

24 DR. BUDROE: Right. We can add that.

25 PANEL MEMBER BLANC: Right.

1 And then can I ask another thing which touches on
2 both the parent document and the response? When you use
3 data that you refer to as unpublished, which the term --
4 you use that term in several places, what does unpublished
5 mean to you when you say that?

6 DR. BUDROE: Oh, for example, the Litton
7 Bionetics genetox data?

8 PANEL MEMBER BLANC: Yeah.

9 DR. BUDROE: Yeah. That was an unpublished
10 industry report that we got. I believe we got it from
11 U.S. EPA.

12 PANEL MEMBER BLANC: And then you cited in the
13 references, as the report, it's in the reference list, is
14 that -- is that what the means?

15 DR. BUDROE: Correct

16 PANEL MEMBER BLANC: All right. So this is not
17 specific to this document, but -- unpublished -- when I
18 see the word unpublished, I actually wouldn't even
19 necessarily look for it in the reference list. I would
20 think it was a personal transmission of some sort. You're
21 saying it was not -- you mean, it wasn't -- it was an
22 industry report, which wasn't published in the
23 peer-reviewed literature, is what you mean you?

24 DR. BUDROE: Correct.

25 PANEL MEMBER BLANC: So I think we need different

1 wording to make that clear, because there is a document.
2 You have the document. It wasn't a personal
3 communication, right?

4 DR. BUDROE: Right. We could put something in
5 there like non-peer reviewed.

6 PANEL MEMBER BLANC: You could say
7 non-peer-reviewed industry document, whatever it us you
8 mean. Because otherwise, I'm looking for where -- you
9 know, was it a personal communication or is it something
10 you got from a Freedom of Information Act, right? It
11 actually was published in a sense, or, you know, it was
12 promulgated in someway. So that's just a very minor
13 point.

14 DR. BUDROE: We can clarify that.

15 PANEL MEMBER BLANC: Yeah. And that will come up
16 in other documents. It struck me for some reason more
17 prominently here, because it was addressing important
18 issues of data.

19 And then the final question I have for you is,
20 you know, when you look up this chemical just online,
21 there are some analogs to it, right? There are some
22 related chlorobenzenes with -- without the fluorine on the
23 carbon, or with only two fluorines, or are -- well, it's a
24 question. Are there? It seemed to me they -- there is
25 one compound that gets mentioned. It mentions a kind of

1 similar type material. Are you aware of that at all?
2 Because if that's true, it amplifies your comment about
3 how important is this chemical?

4 So I'm just curious, is this one of a family of
5 similar esoteric solvents. And these are all solvents, is
6 that correct? None of these are -- it is -- it is also
7 used as an intermediate in the manufacture of selected
8 herbicides, or pesticides of some sort. But in most of
9 the uses we're talking about is just purely as a fancy
10 solvent, not as an intermediate that polymerizes, or
11 binds, or does something else?

12 DR. BUDROE: Right. The importance for
13 California is going to be pretty much its use either in
14 things like brake shops or someplace where they're using
15 it as a solvent for metal cleaning or it's going to be in
16 paints, inks, coatings --

17 PANEL MEMBER BLANC: As a solvent.

18 DR. BUDROE: -- as a -- well, as a carrier. So
19 not -- I mean, in terms of actually formulating the paint.

20 PANEL MEMBER BLANC: But then it evaporates off.

21 DR. BUDROE: Right.

22 PANEL MEMBER BLANC: It doesn't polymerize.

23 DR. BUDROE: No, it's -- it evaporates off and
24 leaves the solids and the coating --

25 PANEL MEMBER BLANC: Right. Does it -- when you

1 said it has a moderate vapor pressure, at one point in the
2 physical description, I kind of underlined it for myself,
3 because I wasn't impressed it was very volatile at all,
4 based on that vapor pressure. So I was wondering was
5 that -- your use of the term "moderate" was based on a
6 standard criteria for what counts as moderate?

7 DR. KLOC: I think it's vapor pressure is
8 somewhere between toluenes and xylene.

9 PANEL MEMBER BLANC: Oh, really?

10 DR. KLOC: Yeah.

11 PANEL MEMBER BLANC: That's -- that would be --
12 are you sure? That would be pretty --

13 DR. KLOC: I'd have to double check. That was
14 something I was reading earlier on in passing. But I
15 remember seeing -- I remember being somewhat surprised
16 about that.

17 PANEL MEMBER BLANC: I think that would be easy
18 to clarify. And again, it plays back to this question of
19 how -- okay. This is an exercise that we had to go
20 through because it got listed as a -- you know, a Prop 65
21 carcinogen, and therefore -- and there was some use in
22 industry and so forth versus this is kind of a sleeping,
23 underrecognized issue. And that case is not very well
24 made in the document.

25 Now, it's not your obligation necessarily to

1 argue that, but it would be nice to have a little bit more
2 context.

3 DR. BUDROE: Well, we did -- we actually started
4 the cancer -- this document request of the South Coast Air
5 Quality Management District. And it's important to them,
6 in terms of the -- being a VOC-exempt chemical. So PCBTF
7 has been granted a VOC exemption for certain rules, where
8 they have -- you know, South Coast has VOC limits on
9 products that are sold down there. And PCBTF gets a pass
10 on that --

11 PANEL MEMBER BLANC: Right.

12 DR. BUDROE: -- but it has to be relatively
13 nontoxic. And this got raised as soon as the NTP study
14 got -- came out. It got raised as an issue with South
15 Coast. And they in turn raise it. They formally asked us
16 to evaluate the carcinogenicity of PCBTF, so --

17 PANEL MEMBER BLANC: When it was evaluated and
18 put on the list, Prop 65 list or did they formally ask you
19 to do this risk assessment?

20 DR. BUDROE: Well, it -- they asked us to enter
21 it into the Hot Spots Program.

22 PANEL MEMBER BLANC: Okay.

23 DR. BUDROE: So -- and --

24 PANEL MEMBER BLANC: And to enter it in the Hot
25 Spots Program, you need this document?

1 DR. BUDROE: Right, to produce this.

2 PANEL MEMBER BLANC: Right. So I -- that's very
3 helpful. And I wonder are you allowed to put some of that
4 in your introduction?

5 DR. BUDROE: We -- well, there wouldn't be any
6 reason we couldn't put the fact that South Coast had asked
7 us to produce this document into the introduction. We can
8 do that.

9 PANEL MEMBER BLANC: Because it's a -- otherwise
10 was exempt from the VOC -- I mean, this has been a -- this
11 has been a recurring problem with very highly toxic
12 solvents, which go into commercial appeal, because they
13 don't -- they don't count for VOCs or they don't count for
14 as a greenhouse gas, you know. And so I think whatever
15 extent you're allowed to make that point, I don't think
16 you -- you have to scientifically, but I think it's nice
17 context.

18 And returning again to the solvent issue, I think
19 it's very possible to read this and not understand that
20 this is a solvent, or carrier, which by its technical, is
21 only tech -- used technically, so that it can off-gas.

22 DR. BUDROE: Okay. So just making --

23 PANEL MEMBER BLANC: If -- can somebody else jump
24 in here? Am I making the point that --

25 PANEL MEMBER LANDOLPH: I don't know if I would

1 amplify your point or make another one, but I would just
2 say maybe get rid of the moderate and just say it has a --
3 it has a volatility on the order of benzene and toluene,
4 BTEX, you know, which is a typical petroleum solvent that
5 boils around 78 degrees, or something like that. That
6 just get rid of moderate and just say similar to BTEX
7 components, and you're -- you can get rid of the rest of
8 it.

9 PANEL MEMBER GLANTZ: Hi. This is Stan. I -- I
10 found this discussion that Paul made very enlightening,
11 because I have to say when I was reading the document, I
12 couldn't quite figure out why you were bothering with it.
13 And I think adding that in the kind of preparatory
14 material will do a lot to help put the document into
15 context.

16 CHAIRPERSON ANASTASIO: Yeah. And essentially,
17 all the PCBTF in the application is expected to go into
18 the atmosphere.

19 DR. BUDROE: Correct.

20 CHAIRPERSON ANASTASIO: Right. There's no
21 reaction as Paul was asking about. It's strictly a
22 carrier, as you mentioned, of the non-volatile components
23 of the paint or what have you. Yeah. So that would be
24 good to clarify.

25 Sorry, Ken, did you want to say something?

1 DR. KLOC: Oh, I was just going to say that that
2 will give us a chance to double check just exactly where
3 it sits in relative vapor pressure and boiling point.

4 CHAIRPERSON ANASTASIO: Yeah, that would be
5 great.

6 I just had two comments. The first one was
7 nomenclature. In the response, you talk about a humanized
8 mouse. I'm just curious what is that?

9 DR. KLOC: I believe a humanized mouse is --
10 well, it would be for -- I guess in that particular case
11 that we were referring to, it would be mouse liver. So a
12 humanized mouse liver would be a mouse liver in which the
13 human -- human liver cells are introduced and the mouse
14 is -- the mouse is --

15 DR. BUDROE: It's -- well, what it is, it's a
16 transgenic mouse that has liver -- where the mouse liver
17 cells have human CAR receptors.

18 DR. KLOC: Well, a -- yeah, that's a transgenic,
19 and -- but there's -- there's also the so-called chimeric
20 mouse model. And that's where human cells are introduced
21 into the mouse liver and you have to do some special
22 techniques to reduce the mouse's immune system in order to
23 make that happen.

24 CHAIRPERSON ANASTASIO: I see. Okay. Thank you.
25 My other comment was related to the noncancer

1 impacts of PCBTF. So you have this compound that has
2 noncancer toxicity and cancer toxicity. And how do you
3 decide whether you're going to do a REL or you're going to
4 do an inhalation unit risk factor? How does that calculus
5 work?

6 DR. BUDROE: Well, the South Coast specifically
7 asked us to evaluate the carcinogenicity of PCBTF. And
8 that all essentially came off the NTP 2018 data. When
9 that was released final, then, you know, everybody -- a
10 lot of people were concerned about that. So that were --
11 that was the specific ask from South Coast was for a
12 cancer unit risk for PCBTF.

13 CHAIRPERSON ANASTASIO: I see. Do you have any
14 sense of where the REL would fall? I mean, is it -- is
15 the noncancer toxicity high enough that maybe it deserves
16 a REL or it's not an issue?

17 DR. BUDROE: I can't answer that question. We
18 didn't go back and run the studies through our
19 methodology.

20 CHAIRPERSON ANASTASIO: Um-hmm.

21 DR. BUDROE: But it's -- a lot of times, it's --
22 cancer is what drives risk in a hot spots risk assessment.
23 That tends to be --

24 CHAIRPERSON ANASTASIO: Okay.

25 DR. BUDROE: -- a major driver.

1 CHAIRPERSON ANASTASIO: So that -- that tends to
2 be the more sensitive endpoint.

3 DR. BUDROE: Potentially, yeah.

4 CHAIRPERSON ANASTASIO: Yeah. Okay. All right.
5 Any other questions from the Panel?

6 PANEL MEMBER BLANC: Just -- it sort of got -- we
7 went down a different tangent, but will you please check
8 if there's any analogous chemicals in this group that you
9 should look at. There may not be, but I came across
10 something.

11 DR. BUDROE: Right. There may be analogs of this
12 chemical, but --

13 PANEL MEMBER BLANC: That are in commercial use
14 that you might want to refer to. I mean, just --

15 DR. BUDROE: Okay. Well, the reason I'm being
16 hesitant is because it's hard enough to get information on
17 PCBTF that is -- you know, has a fairly robust use, both
18 in the U.S. and in California. Some of the derivatives
19 like you're talking about, it is practically -- you cannot
20 get information on. It's just not out there.

21 PANEL MEMBER BLANC: Okay. So that means you
22 have looked. So that means that there isn't.

23 DR. BUDROE: Yeah. Well, I mean, you can do -- I
24 mean, you wind up doing a Google search and you'll get
25 Aldrich or, you know, a bunch of chemical companies,

1 they'll probably, yeah, we can make this for you. But
2 then trying to find out is anybody actually selling it?
3 You have no way to know.

4 PANEL MEMBER BLANC: Okay.

5 CHAIRPERSON ANASTASIO: So you don't have any
6 sense that this is part of a class of solvents or carriers
7 that are being -- that are used, because they're exempt
8 from the VOC regulation?

9 DR. BUDROE: It's -- I haven't heard of any
10 analogs being raised as an issue like they're also being
11 used. That doesn't mean that if, for example, PCBTF loses
12 its VOC exemption that somebody won't come up with a
13 replacement for it. That could happen. But we just have
14 no way to know -- know that at this point in time.

15 CHAIRPERSON ANASTASIO: Okay. Thank you.

16 Any other comments from the Panel?

17 All right. So with this discussion, and our very
18 minor recommended changes, the Panel has fulfilled its
19 statutory responsibility to review the health values being
20 added to the risk assessment guidelines, so that the
21 guidelines reflect the latest scientific understanding and
22 data.

23 It seems that the panel is quite happy with the
24 document, so thank you, OEHHA, for that. And based on
25 Stan's comments, it seems that the most recent ACA public

1 comments don't add much compared to what their previous
2 comments were, which were very well addressed by OEHHA.

3 So can I get a motion that we will take the
4 revised document from OEHHA. I will look it over, and
5 assume it looks fine, based on these very minor changes,
6 it will be approved. Does the Panel --

7 PANEL MEMBER LANDOLPH: I so move.

8 CHAIRPERSON ANASTASIO: Joe, so moved?

9 PANEL MEMBER LANDOLPH: Yes.

10 CHAIRPERSON ANASTASIO: Can we get a second?

11 PANEL MEMBER KLEINMAN: Second.

12 CHAIRPERSON ANASTASIO: Okay. All in favor?

13 (Hands raised.)

14 (Ayes.)

15 CHAIRPERSON ANASTASIO: So it's unanimous in --

16 PANEL MEMBER GLANTZ: Stan votes yes, so you have
17 it on the record.

18 PANEL MEMBER HAMMOND: Kathy votes yes.

19 CHAIRPERSON ANASTASIO: Okay. So it's unanimous
20 in Sacramento and it's unanimous at SRP east and west.

21 So thank you very much, OEHHA.

22 DR. BUDROE: Thank you.

23 CHAIRPERSON ANASTASIO: So I'm looking over at
24 Lori now for our lunch update.

25 PANEL LIAISON MIYASATO: Lunch is on its way. It

1 should be here in a few minutes.

2 CHAIRPERSON ANASTASIO: Lunch is on its way. And
3 then can we try to move up then the AB 2588 discussion?

4 PANEL LIAISON MIYASATO: I'll check with them.

5 CHAIRPERSON ANASTASIO: Okay. Okay. So we're
6 going to try to -- since we're a little early, we're going
7 to try to move things a little earlier, so we'll be done
8 sooner.

9 All right. Thank you, everyone. And please turn
10 off your mics during the break.

11 (Off record: 11:45 a.m.)

12 (Thereupon a lunch break was taken.)

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1 A F T E R N O O N S E S S I O N

2 (On record: 12:31 p.m.)

3 CHAIRPERSON ANASTASIO: It's 12:30. We're
4 missing Ahmad, but I'm sure he'll be here shortly. So
5 let's get started.

6 So I'm going to -- well, I'll give a little
7 introduction first. So this is major agenda item number
8 2.

9 PANEL MEMBER GLANTZ: This is Stan. I'm here.

10 CHAIRPERSON ANASTASIO: Okay. Thank you, Stan.

11 Kathy, are you here as well?

12 We'll take that as a no, but we still have a
13 quorum. So I'm going to push forward. Oh, and here is
14 Ahmad. Perfect.

15 So this is major agenda item number 2, review of
16 proposed changes to the chemical substances list in
17 appendix A of the AB 2588 Air Toxics Hot Spots Emissions
18 Inventory Criteria and Guidelines Regulations.

19 As we've discussed, under AB 2588, certain
20 facilities are required to report their emissions of
21 specified toxic chemicals. The implementing regulation
22 has not been updated since 2007. So CARB has been doing
23 this Herculean effort to update the list. We've talked
24 with them about this several times.

25 Today, Dave Edwards, Assistant Division Chief of

1 the Air Resources Board's Air Quality Planning and Science
2 Division is going to give us an overview of where we
3 stand, a response to the SRP's comments from the November
4 conference call that we had, and perhaps some brief
5 responses to public comments that we received from
6 November. And then CARB staff, Beth and Melissa, will
7 discuss the draft letter of interim findings from the
8 Panel on the adequacy of the proposed chemical list and
9 functional group characterization of certain chemical
10 classes.

11 So Dave, I turn it over to you.

12 AQPSD ASSISTANT DIVISION CHIEF EDWARDS: Thank
13 you, Cort. And thank you once again to the Panel for
14 listening to our item. And we've definitely really
15 appreciated your input to this process. And I do think
16 our chemical list has been stronger due to the comments
17 that you've made over the past few months on this topic.

18 So just to kind of frame a little bit of where
19 we've been with this and where we're going to be going,
20 this is our fourth meeting on the AB 2588 chemical list
21 proposed updates. We started last June giving you a brief
22 overview and then provided the draft chemical list back in
23 August of last year, and had two follow-up discussions in
24 early October and late November of last year.

25 At each of those times, there was many different

1 discussions and comments for different lists of chemicals
2 we should look at. And we've really appreciated the input
3 that we received on the are we missing any important air
4 toxic chemicals and are the functional groups appropriate
5 for this regulation.

6 So, for today, there's going to be a few more
7 follow-up items. I'm going to have staff go over some of
8 the comment letters that we've received late last year and
9 then as recently as a couple days ago; go over some of the
10 outstanding discussion items that we had; and then go over
11 the interim findings.

12 So with that, I did just want to sort of talk a
13 little bit about our public process moving forward. So
14 while we have been talking about this list now for the
15 past few months, almost a year, this really is the
16 beginning of our public process. And how we will move
17 forward is that we will start our own rulemaking process
18 in hopefully April of this year to have workshops across
19 the state, because this is a very air district-centric
20 rule as far as implementation goes. We'll be looking to
21 have workshops in the five major air districts across the
22 State, so that's Sacramento, Oakland, Los Angeles, San
23 Diego, and Fresno. So that will be hopefully in the April
24 time frame.

25 During that time, we'll take -- go over all of

1 our edits, provide documentation for the public to review,
2 provide informal comments on, and then put out our formal
3 rulemaking documents for an additional 45-day comment
4 period. And we do hope to go to the Board in -- later
5 this year.

6 And then following that, we do hope to come back
7 to the Panel to give a report on where the chemical list
8 ended up, what the final state of it looks like, and then
9 hopefully have some findings or memorandum of what that
10 looks -- that there is an acknowledgement that we came
11 back and sort of have addressed all the comments that
12 we've had.

13 So with that, I will turn it over to Beth to give
14 an overview of the comments, discussion points, and
15 interim findings.

16 --o0o--

17 (Thereupon an overhead presentation was
18 Presented as follows.)

19 AQPSD STAFF AIR POLLUTION SPECIALIST SCHWEHR:

20 Thank you, Dave. Thank you, Cort and panel. The
21 topics for discussion today are summarized on this slide.
22 First, CARB staff would like to provide some of our
23 perspectives on the comment letters that were submitted to
24 the Panel from the American Chemistry Council, or ACC, and
25 from the Council's Siloxanes Group, and most recently from

1 the Southern California Alliance of Publicly Owned
2 Treatment Works.

3 Then we could provide some follow-up on a few
4 items discussed prior -- at prior meetings, and then we
5 can open up discussion on how the Panel would like to
6 proceed with the draft interim findings as was mentioned.

7 If that sounds appropriate, I'll continue
8 starting with the comment letters.

9 The first comment letter was submitted to the
10 panel November 21st, 2019 from Steve -- Steve Risotto,
11 Senior Director of the American Chemical Council.

12 Is that okay?

13 CHAIRPERSON ANASTASIO: (Nods head.)

14 AQPSD STAFF AIR POLLUTION SPECIALIST SCHWEHR:
15 Okay. We'll summarize the main points in the letter and
16 then provide some CARB staff perspectives.

17 So first, the main points in the ACC letter are
18 that ACC expressed concern about moving from a traditional
19 chemical-by-chemical approach to one that considers
20 multiple chemicals within a group or class, and that such
21 a broader group approach must be founded on similar
22 toxicity within the group.

23 ACC requested an outline of the staff decision
24 process regarding similarity of impacts and indicated
25 objection to listing of groups of substance. The letter

1 stated that regulatory and policy measures should be
2 substance specific.

3 The letter provided additional discussion about
4 four specific groups: brominated and chlorinated flame
5 retardants, isocyanates, perfluoro and polyfluoro
6 compounds and the Per- and polyfluorinated chemical
7 functional groups, and phthalates.

8 The letter cited the AB 2588 statute and
9 commented that they are not aware of existing data that
10 demonstrate that some of the PFAS chemicals have been
11 detected in area.

12 Here are some CARB staff perspectives. We
13 appreciate the detailed information and citations
14 provided, and we have discussed the letter with our
15 colleagues at OEHHA.

16 Some clarifications might be helpful about the
17 groups. First, it is, in fact, our intention that
18 substances be individually reported to the greatest extent
19 possible. In the case of phthalates, for example, the
20 group header is meant to be a convenient way to list the
21 set of individual phthalate-related compounds together, so
22 that they show up clustered on the list to provide better
23 overall context, as opposed to having them structured --
24 scattered alphabetically throughout the list. We are not
25 intending reporting of a lumped group of undifferentiated

1 phthalates.

2 Second, in some cases, there are examples of an
3 actual group that is reportable. This is most often due
4 to the group being cited in its entirety by one of the
5 international, national, or other source lists that the
6 hot spots statute requires us to use to compile the
7 substance list.

8 However, even in those cases, to the greatest
9 extent possible, we have also tried to list any key
10 individual chemicals under the group, so that they will be
11 reported explicitly, to the extent it is possible, for the
12 reporting facility to make that distinction. The text of
13 the full Emission Inventory Criteria and Guidelines, the
14 EICG, provides more details on how mixtures are to be
15 treated for emissions reporting. It stipulates reporting
16 of individual chemicals, to the greatest extent possible.

17 Third, even for the three new classes of chemical
18 functional groups that we are proposing, the intent is
19 that the functional group defines whether a chemical would
20 be applicable, but we would still be requesting the
21 particular name and identification number for the chemical
22 when a facility reports their chemical.

23 This would be clarified further in the text of
24 the EICG during the formal public process for the
25 amendments. And the three classes of functional groups

1 that we are proposing at this time have been carefully
2 chosen to be cases where all chemicals having that
3 functional group can be reasonably expected to have
4 important toxicity that warrants inclusion on the AB 2588
5 list.

6 The overall EICG text will also address some
7 other concerns that were raised in the letter that are
8 separate from the chemical list itself. For example, the
9 EICG specifies a relatively few types of industries,
10 devices, and substances for which actual source testing
11 and measurement is required versus the more typical cases
12 where estimation methods are acceptable for most
13 substances.

14 And then last, the provisions in the Hot Spots
15 Statute that require CARB to compile the chemical list do
16 not require a determination by CARB that the substance has
17 been detected in air. In fact, the statute has language
18 in one section that sets a high bar that limits CARB from
19 even removing some substances, unless there is quote,
20 "...no possibility that it will become airborne".

21 That was first he comment letter.

22 Turning to the second comment letter, shall I go
23 ahead?

24 CHAIRPERSON ANASTASIO: (Nods head.)

25 AQPSD STAFF AIR POLLUTION SPECIALIST SCHWEHR:

1 Okay. The second comment letter was submitted to
2 the Panel on November 21st, 2019 from the American
3 Chemistry Council's Silicones Environmental Health and
4 Safety Center, SEHSC. The main points in the ACC Silicon
5 Center letter are that:

6 The Center requests that the underlying
7 toxicological threat be explicitly identified for the
8 chemicals being considered for inclusion using the
9 statute's provision of CARB's own authority. In other
10 words, these are the chemicals where we have listed the
11 source list code as seven in our proposed appendix A.

12 The letter states that certain cyclosiloxanes,
13 D4, D5, D6, and their group header, do not warrant
14 inclusion in the AB 2588 program and do not present a
15 chronic or acute threat to public health when present in
16 the air.

17 The letter cites evaluations by Canada and
18 Australia agencies. It quotes the Canada assessment as
19 saying the substance was quote, "...not entering the
20 environment in a quantity, or concentration, or under
21 conditions that constitute, or may constitute, a danger in
22 Canada to human life or health", unquote.

23 The letter states that the Australian assessment
24 reached similar conclusions. The Silicone Center letter
25 also states that the U.S. Environmental Protection Agency,

1 EPA, has excluded such cyclosiloxanes from the definition
2 of volatile organic compound, VOC, for ozone-controlled
3 purposes, based on negligible photochemical reactivity.
4 The letter concludes that quote "The concentrations of D4,
5 D5, and D6 found in ambient air do not pose a risk to
6 human health, and as a result, including those substances,
7 would not further the goals of the AB 2588 Hot Spots
8 Program", unquote.

9 Here are some CARB staff Perspectives. As CARB
10 staff, in consultation with OEHHA, has been reviewing the
11 candidate chemicals, we have been documenting both the
12 uses and the toxicity concerns for each of those source
13 list seven chemicals, in order to address the rationale
14 for each one being proposed for inclusion. This
15 information will be part of our formal public rulemaking
16 process for the Emission Inventory Criteria and Guidelines
17 Regulation.

18 In our consultation with OEHHA staff, they have
19 indicated there is sufficient toxicity data to warrant
20 concern and the eventual development of various health
21 effect values for the indicated cyclosiloxanes. Their
22 photochemical reactivity in forming ozone is not an
23 indication of their toxicity.

24 Moreover, the very fact that the U.S. EPA has
25 designated these substances as exempt, in terms of VOC and

1 ozone control purposes, presents the very real likelihood
2 that their usage may increase in the U.S., which is
3 consistent with early information, and with what has
4 occurred with other exempt VOC chemicals.

5 Also, the Canada assessment appears to be based
6 on evaluating current levels of usage in that country. We
7 would expect that those conclusions would not be
8 applicable here, if usage and conditions in the U.S. trend
9 upward. In fact, it is particularly important that exempt
10 VOCs that have toxicity concerns should be included on the
11 AB 2588 substance list, to help communicate these toxicity
12 concerns before decisions about increased usage as a
13 possible VOC substitute are made, which could have adverse
14 effects on public health.

15 Turning to the third comment letter, this was
16 submitted on February.

17 PANEL MEMBER BLANC: Can I just clarify. These
18 letters have already gone out? You've already sent these
19 responses?

20 AQPSD STAFF AIR POLLUTION SPECIALIST SCHWEHR:

21 No.

22 PANEL MEMBER BLANC: Oh. Because you might want
23 to parenthetically say that the chemical that we just
24 considered was exactly the kind of chemical you're talking
25 about.

1 AQPSD STAFF AIR POLLUTION SPECIALIST SCHWEHR:

2 Yes, indeed.

3 PANEL MEMBER BLANC: What's that?

4 AQPSD STAFF AIR POLLUTION SPECIALIST SCHWEHR:

5 Yes, that's the truth.

6 PANEL MEMBER BLANC: You know, it doesn't -- it's
7 just as grown up. It's a carcinogen.

8 AQPSD STAFF AIR POLLUTION SPECIALIST SCHWEHR:

9 Thank you. That's helpful.

10 The third comment letter that was just submitted
11 on February 26th, 2020, was submitted to Dr. John Budroe
12 of OEHHA regarding this 2588 item, and which we understand
13 was forwarded to the Panel. The letter was from the
14 Southern California Alliance of Publicly Owned Treatment
15 Works, or SCAP.

16 This letter addresses future activities in the
17 hot spots process that are separate from the chemical list
18 itself. It is addressing a proposal that CARB has been
19 starting to consider and discuss, and which we have been
20 planning to recommend that we bring before this Panel in
21 the near future.

22 Some clarifications may be helpful at this time
23 to understand and address this comment letter. So first,
24 the Hot Spots Statute defines a process for facilities to
25 propose a plan for how they will estimate their emissions,

1 often using fairly generic emission factors and only where
2 their emissions exceed the level of reporting accuracy
3 that is specified for each chemical in the Emission
4 Inventory Criteria and Guidelines.

5 Then, the air district reviews and approves the
6 facility plan and a upon completion of reporting, the air
7 district will use the facility's reported emission
8 estimates, along with other parameters, to assign a
9 prioritization status to their facilities. This helps
10 districts set priorities for further evaluation of
11 facilities, such as the need for health risk assessments.

12 Until now, the prioritization process only
13 considered chemicals for which OEHHA and the SRP have
14 formally approved cancer and non-cancer health effects
15 values, leading many to be concerned which of the new or
16 other chemicals emitted by a facility could possibly be
17 either important or unimportant to public health.

18 So recently, CARB managers, in consultation with
19 OEHHA managers, have been exploring the idea of grouping
20 the new substances into default categories related to
21 their estimated likely levels of health effects.

22 These default bins of their estimated health
23 effects values are not intended to be used for formal
24 health risk assessments or public notifications under the
25 AB 2588 process. Rather, they're meant to provide useful

1 advance indications of situations where chemicals and
2 sources could be important, and likewise where there are
3 not likely to be impactful. This type of advance
4 indication could be very valuable to facilities in
5 understanding what aspects of their operations may have
6 the greatest potential for concern and perhaps
7 opportunities to mitigate those concerns well in advance
8 of formal health risk assessments being acquired.

9 In addition, a very important benefit of these
10 sorts of advance indications will be to assist OEHHA and
11 the SRP in the process of prioritization of substances,
12 most needing to be brought before the SRP for development
13 of formal health effects values. At this point, we could
14 pause for Panel questions and discussions of the comment
15 letters, if desired.

16 CHAIRPERSON ANASTASIO: Any comments or questions
17 on the panel?

18 Any comments or questions on the Panel?

19 I'll take that as a no.

20 AQPSD STAFF AIR POLLUTION SPECIALIST SCHWEHR:

21 Okay. All right, then. As the next topic of
22 discussion, we'd like to follow up on a few items from
23 the --

24 PANEL MEMBER GLANTZ: This is Stan. I have a
25 comment. It would -- I really wish had -- you guys had

1 sent us this stuff in writing in advance for the same
2 reasons that I was complaining about some of the industry
3 comments in the early item, because -- you know, you're
4 going through a lot of fairly technical stuff and I think
5 it would be a lot easier to think about whether we agree
6 with you or not, if we'd had a chance to actually read it
7 and think about it before the meeting, rather than trying
8 to pick it up all on the fly.

9 CHAIRPERSON ANASTASIO: Yeah. So just to follow
10 up on Stan's comment, you know, our process with OEHHA
11 typically is when they receive public comments, they'll
12 respond to public comment and we'll get a written version
13 of that. And that's very helpful for us to understand
14 both sides of the argument. So if we have similar pieces
15 moving forward, it would be great if you could provide us
16 with written comments before the meeting.

17 AQPSD ASSISTANT DIVISION CHIEF EDWARDS: Yeah.
18 Thanks for the clarification. We can do that in the
19 future.

20 CHAIRPERSON ANASTASIO: Yeah, that would be
21 great. Thank you.

22 Thank you, Stan.

23 Stan or Kathy, any other comments?

24 PANEL MEMBER HAMMOND: I agree totally with the
25 need to see these ahead, especially something like this,

1 where it is complicated to think about doing groups --
2 functional groups. And I understand where ACC is coming
3 from, at the same time as I support this attempt to do
4 this broader thing. I think it's a good thing to do, but
5 we need to think very carefully having time to read this
6 over and think it through ahead of time would improve our
7 ability to respond.

8 CHAIRPERSON ANASTASIO: Yeah.

9 AQPSD STAFF AIR POLLUTION SPECIALIST SCHWEHR:
10 Okay. Thank you.

11 As the next topic of discussion, we would like to
12 follow up --

13 PANEL MEMBER KLEINMAN: Excuse me. Sorry. This
14 is Mike. I wanted to just ask you to touch a little bit
15 more on the comment about compounds for which they don't
16 have adequate measures for emission source testing.
17 Will -- you know, is there going to be something in the
18 documentation that allows for them to come up with some
19 alternative method for, you know, documenting what their
20 emissions might be?

21 AQPSD STAFF AIR POLLUTION SPECIALIST SCHWEHR:

22 Yes. The -- the overall Emission Inventory
23 Criteria and Guidelines specifies sort of a hierarchy of
24 methods that are applicable to estimating various
25 substances. In some cases, it actually requires source

1 testing, where that is really probably the only way to get
2 at something like complicated set of dioxins.

3 In other cases, it specifies that you might be
4 able to use emission factors derived from prior testing.
5 You might be able to find emission factors from EPA or
6 other sources that are satisfactory. And sometimes
7 that's -- a material mass balance might be an acceptable
8 method. Each of the chemicals does carry with it a level
9 of reporting accuracy that's expected. And so if the
10 method is sufficient to get you to within that range of
11 reporting accuracy, these estimation methods are fine.

12 PANEL MEMBER KLEINMAN: Thank you.

13 AQPSD STAFF AIR POLLUTION SPECIALIST SCHWEHR:
14 Anything else?

15 CHAIRPERSON ANASTASIO: Yeah. Please continue,
16 Beth.

17 AQPSD STAFF AIR POLLUTION SPECIALIST SCHWEHR: As
18 the next topic of discussion, we'd like to follow up on a
19 few items from the previous meetings.

20 I think as Dave said, we have very much
21 appreciated the many fruitful suggestions by the Panel,
22 which we have explored regarding candidate chemicals for
23 inclusion.

24 These suggestions have helped us strengthen the
25 list considerably. We've utilized many, many hours of

1 time of our OEHHA colleagues in researching and
2 interpreting toxicity data for many hundreds of these
3 suggested individual chemicals, as well as understanding
4 the nature of the uses of the chemicals. And we do thank
5 them greatly.

6 We pursued the suggestions of the Panel members
7 to explore other lists. And in many cases, this resulted
8 in quite a few additional chemicals being proposed for
9 inclusion from various other lists. In other cases, the
10 review of toxicity data and usage information appeared not
11 to warrant some of the chemicals on those other lists to
12 be added at this time.

13 As we've reported in prior meetings, we have
14 pursued some of the suggestions for possible additional
15 functional group classes. It became clear in our
16 consultations with OEHHA that for some, quite a bit of
17 further delving into literature and evolving structure
18 activity and mechanistic understanding would be needed to
19 define appropriate classes and subclasses that would be
20 fully defensible in a regulatory process.

21 In those cases, we identified as many appropriate
22 specific chemicals as we could within the class, and we
23 will be keeping our attention on the state of the science
24 as we plan to amend the chemical list more frequently in
25 the future.

1 We would like to highlight that the suggestions
2 to consider the list from National Institute for
3 Occupational Safety and Health, NIOSH, and the American
4 Conference of Governmental Industrial Hygienists, ACGIH,
5 including their under-study list, were quite intensive but
6 also fruitful.

7 These lists cover about 700 chemicals in the net.
8 And after accounting for existing appendix A1 substances
9 and ones already being proposed for new inclusion, it
10 still meant needing detailed review of close to 300
11 candidates. We are still wrapping up the last of the
12 review. We estimate there will be on the order of no more
13 than about a hundred proposed for inclusion.

14 One of the benefits of working more with these
15 lists, particularly the ACGIH publications, is that it has
16 helped us fill in more of the other types of health
17 effects that have also been suggested. ACGIH in
18 particular does flag effects, such as lower respiratory
19 tract and some cardiopulmonary effects, as well as things
20 like liver damage, kidney damage, thyroid effects, and
21 they have notation for respiratory sensitizers and asthma
22 as well.

23 The Panel's suggestion to take note of their
24 inhalable particle and vapor flag was very helpful in
25 evaluating heavier molecular weight and solid chemicals

1 that may still have the potential to cause airborne
2 concern.

3 We have also continued to directly pursue
4 information on many of these types of health effects. We
5 have confirmed that the list already was covering a
6 multitude of important chemicals having these other health
7 effects, but this has helped us to flag them better.
8 We've also been utilizing data sources such as the
9 bioconcentration factors in the U.S. EPA's CompTox
10 Dashboard to help identify persistent bioaccumulative
11 toxics, in addition to the PBTs identified under the
12 federal TRI list and the EU REACH list.

13 At this point, we could pause for Panel questions
14 and discussion of the follow-up items, if desired?

15 CHAIRPERSON ANASTASIO: Any comments related to
16 the follow-up items from our last meeting?

17 PANEL MEMBER KLEINMAN: Just one. Within -- the
18 last time we talked, I did raise the issue of the AB 617
19 communities, and that they had selected were identified
20 specific compounds. And I just wanted to know that those
21 compounds were somehow incorporated through all the other
22 research you've done.

23 AQPSD STAFF AIR POLLUTION SPECIALIST SCHWEHR:

24 Yes. Yes. And, in fact, the -- when we talked
25 with some of the liaisons for those communities, we did

1 identify a couple of extra ones and we added them to the
2 list for proposed inclusion.

3 PANEL MEMBER KLEINMAN: Thank you.

4 PANEL MEMBER RITZ: Just one clarification
5 question. You did not mention a reproductive or
6 neurotoxicity. Are those health outcomes you're
7 considering.

8 AQPSD STAFF AIR POLLUTION SPECIALIST SCHWEHR:

9 Yeah. So the easy ones for us were -- were where
10 there is an authoritative body. So, for cancer, there are
11 many authoritative bodies already suggested for this list.
12 For the developmental and reproductive toxicants, we are
13 primarily relying on the Prop 65 listings. But in
14 reviewing individual chemicals, if OEHHA has brought
15 forward a chemical that the panel has reviewed, and that
16 that was one of the endpoints we will also give it a DART
17 indication for example.

18 And then we have also been tracking the
19 neurotoxins to the greatest extent where we can find that
20 data.

21 CHAIRPERSON ANASTASIO: Stan or Kathy, anything
22 on the line?

23 All right. Please proceed, Beth.

24 PANEL MEMBER HAMMOND: I just would say -- it's
25 excellent. And I'm very pleased that you were able to

1 find some good information there. Good.

2 AQPSD STAFF AIR POLLUTION SPECIALIST SCHWEHR:

3 Thank you. Anything else?

4 Okay. At this point, the last topic of
5 discussion for this agenda item is regarding the draft
6 interim findings. And I believe -- Lori, has that been
7 handed out.

8 PANEL LIAISON MIYASATO: (Nods head.)

9 AQPSD STAFF AIR POLLUTION SPECIALIST SCHWEHR:

10 Okay. So that has been handed out and copies are
11 also available in the back for the public. Some possible
12 draft language that might be helpful to the Panel for
13 developing an interim findings document, as was suggested
14 at the last meeting.

15 So CARB staff has provided some of the background
16 language and some basic ideas that the Panel might choose
17 to build upon. Should we open this item up for
18 discussion, Cort? How would you like to proceed? Is
19 there a need for an overview?

20 CHAIRPERSON ANASTASIO: So this is something we
21 talked about at our November teleconference. And so this
22 list is from the panel to CARB about our findings -- or
23 our interim findings related to the revisions to the 2588
24 list.

25 This has been sent out by email to the Panel a

1 week or two ago. But here is my suggestion, I suggest
2 let's take ten minutes, everybody on the Panel reads the
3 letter, and then we'll have a discussion and any potential
4 edits that we would like to make to it. Because the idea
5 is at the end we're going to vote on this, as the letter
6 coming from the Panel, going to CARB, talking about our
7 interim findings related to the revisions to 2588.

8 So let's spend until 1:10 reading this, and then
9 we'll re-adjourn[SIC] and Panel members can then give
10 their comments. If anyone doesn't have the letter on the
11 Panel, I think Lori has additional copies.

12 All right. Thank you.

13 (Off record: 1:02 p.m.)

14 (Thereupon a recess was taken.)

15 (On record: 1:10 p.m.)

16 CHAIRPERSON ANASTASIO: Is everyone finished?

17 Okay. So, Beth, maybe so that we have it in the
18 record, and it's fresh in everyone's mind, could you
19 perhaps read on page two. I mean, the -- essentially,
20 read the interim findings itself. So "The materials, as
21 noted above, convincingly demonstrate that:", maybe read
22 there to the end and then we can have a discussion.

23 AQPSD STAFF AIR POLLUTION SPECIALIST SCHWEHR:

24 Right. I'll start with the sentence just before
25 that.

1 "Based on its review of the materials
2 provided, the Panel prepared the following
3 interim findings, which are submitted to the CARB
4 Executive Officer.

5 "The materials, as noted above, convincingly
6 demonstrate that:

7 "1) CARB staff has proposed appropriate new
8 substances compiled in accordance with the six
9 lists outlined in Section 44321, subdivisions (a)
10 to (e) of the AB 2588 statute.

11 "2) The substances proposed for addition
12 based the authority granted to CARB by Section
13 44321(f) of the statute have been recognized to
14 present a chronic or acute threat to public
15 health when present in ambient air.

16 "3) Substances in the three broad
17 'functional group', categories proposed by
18 CARB (poly- and per-fluorinated chemicals;
19 derivatives and substituted versions of
20 polycyclic aromatic compounds containing any
21 halogen atom; and isocyanates) can be reasonably
22 expected to present a chronic or acute threat to
23 public health when present in ambient air. The
24 Panel supports the functional group concept,
25 along with its continued development and

1 evaluation".

2 Should I continue?

3 CHAIRPERSON ANASTASIO: Go to the end, please.

4 AQPSD STAFF AIR POLLUTION SPECIALIST SCHWEHR:

5 Okay.

6 "The Scientific Review Panel commends CARB
7 and OEHHA for a comprehensive review of the
8 chemical lists, available health data, and other
9 scientific information. We are supportive of the
10 proposed revisions to Appendix A of the EICG
11 regulation.

12 "The Panel has reviewed the scientific data
13 on which the proposed revisions to the Appendix A
14 list of chemicals is based, and concludes that
15 the revisions are supported by sound scientific
16 knowledge about the health threats posed by these
17 chemicals.

18 "Upon conclusion of CARB's rulemaking
19 process, the Panel wishes to have a presentation
20 on the overall outcome and incorporation of the
21 chemical list and any other items of interest
22 into the final regulation".

23 CHAIRPERSON ANASTASIO: Thank you, Beth.

24 So I now bring it to the Panel. Comments about
25 our letter of interim findings?

1 PANEL MEMBER BLANC: I have a purely technical a
2 question. Since you're still in the midst of making your
3 list, Dave, per your -- per your comments, so here our
4 findings are that we endorse the list, but the list is
5 still somewhat in flux. So I'm a little confused or
6 seeking clarification if we can come up with wording that
7 allows for that, because the wording, as such, it's like a
8 done deal. But we're saying that we are approving
9 something that we actually haven't seen the final version
10 of, which would be fine if we said, you know -- you know,
11 we've seen it an advanced version of this and are
12 confident that the -- that the changes that are in process
13 will also be consistent, or some wording like that.

14 Cort, do you see where I'm coming from?

15 CHAIRPERSON ANASTASIO: I think so. Can you show
16 me specifically where in the text, like which sentence,
17 and then we can --

18 PANEL MEMBER BLANC: Well, it's more than one
19 place --

20 CHAIRPERSON ANASTASIO: Oh, okay.

21 PANEL MEMBER BLANC: -- but it's CARB provided
22 the a list of over 800. We gave our input to the
23 substances. We -- it's all done in the past tense.

24 CHAIRPERSON ANASTASIO: I see.

25 PANEL MEMBER BLANC: I think there just needs to

1 be a phrase or a sentence --

2 CHAIRPERSON ANASTASIO: Right.

3 PANEL MEMBER BLANC: -- saying, you know, we
4 realize that the list is not completely finalized, but,
5 you know -- anticipating it will continue on in this way,
6 we approve it or something -- it's a -- it's approval --
7 it's almost a contingent approval. It says we approve
8 what we've seen and what we anticipate --

9 CHAIRPERSON ANASTASIO: Right, I understand --

10 PANEL MEMBER BLANC: -- what will evolve.

11 CHAIRPERSON ANASTASIO: -- right, what you're
12 saying. I mean, so, Dave, will CARB be -- I mean, I know
13 you'll be coming back to the Panel. Would you -- are you
14 expecting or would it be helpful to have a -- instead of
15 an interim letter of findings, at some point, a final
16 letter of findings, or is this going to be the letter from
17 the Panel?

18 AQPSD ASSISTANT DIVISION CHIEF EDWARDS: Sorry.
19 So this is Dave Edwards. We do anticipate coming back at
20 the end of our process to sort of get a -- to get a final
21 findings.

22 CHAIRPERSON ANASTASIO: Okay.

23 AQPSD ASSISTANT DIVISION CHIEF EDWARDS: That
24 would sort of conclude -- so this would be after we go
25 through our Board process.

1 PANEL MEMBER BLANC: So again, I would just put
2 in a sentence saying we realize that this list is, to an
3 extent, still interim, but are confident that evolving
4 changes will be consistent with -- you know, with --

5 CHAIRPERSON ANASTASIO: Right. We could add a
6 phrase, something along the lines of, based on the list as
7 it exists at this point.

8 PANEL MEMBER BLANC: Bearing in mind that it will
9 have additional -- I don't know, items.

10 CHAIRPERSON ANASTASIO: There will be additional
11 changes to the list.

12 AQPSD ASSISTANT DIVISION CHIEF EDWARDS: If I may
13 make a suggestion. The first full paragraph after number
14 three on page two, the last sentence. So, "We are
15 supportive of the proposed revisions to Appendix A of the
16 EICG regulation"...."understanding that the Panel
17 anticipates changes..." --

18 PANEL MEMBER BLANC: Further changes.

19 AQPSD ASSISTANT DIVISION CHIEF EDWARDS:
20 "...further changes to be consistent with the direction
21 given.

22 PANEL MEMBER BLANC: Yes.

23 CHAIRPERSON ANASTASIO: That's great.

24 PANEL MEMBER BLANC: And then in the theme of
25 there IS nothing which IS too trivial, in general, I would

1 put "acute" first and "chronic" second in the two places
2 where it appears, just logically, unless that's statutory
3 language.

4 AQPSD ASSISTANT DIVISION CHIEF EDWARDS: It is
5 statutory language.

6 AQPSD STAFF AIR POLLUTION SPECIALIST SCHWEHR:
7 That is -- that is a quote from the statute,
8 but --

9 PANEL MEMBER BLANC: Then do it that way. That's
10 fine. And what about -- and that's why it doesn't say
11 present a potentially chronic or acute, because you can't
12 say potentially either?

13 AQPSD STAFF AIR POLLUTION SPECIALIST SCHWEHR:
14 Yes, it's a direct quote from the statute.

15 PANEL MEMBER BLANC: All right. That's fine.
16 Never mind.

17 CHAIRPERSON ANASTASIO: Other comments from the
18 Panel?

19 PANEL MEMBER KLEINMAN: I think I brought this up
20 the last time as well, but it would help -- yeah, I think
21 it would be helpful to have a clear delineation of what
22 are the criteria that are going to be used to select which
23 of these compounds from the huge list of potential
24 compounds are going to be selected for review. I know
25 it's always -- there are many, many factors involved. But

1 I think it would be helpful just to have, you know, some
2 clarification of what it takes to put a compound on the
3 high priority list of potential compounds to review.

4 CHAIRPERSON ANASTASIO: So I'll just speak up a
5 minute. My understanding is that's an OEHHA decision, is
6 that -- I'm looking over at John Budroe for a visual.

7 DR. BUDROE: (Nods head.)

8 CHAIRPERSON ANASTASIO: He's giving me that's a
9 big yes.

10 (Laughter.)

11 CHAIRPERSON ANASTASIO: So to the extent that
12 CARB would like to talk about their process, I suppose
13 that's okay. You know, I imagine you have specific
14 criteria, John, that decide who rises to the top?

15 AQPSD ASSISTANT DIVISION CHIEF EDWARDS: I guess
16 just maybe to sort of speak to that a little bit for
17 the -- within the context of here. Would it be useful to
18 maybe put a little bit about what the process is moving
19 forward? So I guess sort of what I'm thinking here is, as
20 this regulation takes effect and these chemicals are
21 starting to be reported over time, CARB will share this
22 information with OEHHA and work on prioritizing the new --
23 the new chemicals. Is that too simplistic or --

24 PANEL MEMBER KLEINMAN: I know the process has --

25 AQPSD ASSISTANT DIVISION CHIEF EDWARDS: Okay.

1 PANEL MEMBER KLEINMAN: -- you know, got to be
2 kept flexible.

3 AQPSD ASSISTANT DIVISION CHIEF EDWARDS: Um-hmm.

4 PANEL MEMBER KLEINMAN: There are always things
5 that are going to bring something to the top of the list.
6 But I guess I'm sensitive to the communities that are
7 taking part in this AB 617, you know, process. And they
8 have compounds that they think should at least be given
9 consideration. And so is there a way for that sort of
10 information to get to CARB and to OEHHA to help, you know,
11 at least raise the issue, so that their minds can be put
12 at rest. You could be -- you know, they could be told
13 that maybe this is already taken into account. It's on a
14 list or whatever.

15 But I think there is some underlying, let's say,
16 uncomfortableness about the fact that the process isn't as
17 transparent as it might be, because there are lots of
18 other -- there are too many factors, you know, to put it
19 on this totally. But just some wording to the effect of
20 how, you know, one can bring a topic of concern up and
21 have it, you know, evaluated.

22 AQPSD ASSISTANT DIVISION CHIEF EDWARDS: So sort
23 of -- I'm going to be looking to Beth right now. I'm
24 going to make some -- a suggestion. Beth is familiar that
25 I make these sometimes in there that's not exactly the

1 most logical.

2 But one thought that I'm having is not
3 necessarily with the chemical list, but potentially add an
4 action item that we will look into, when we are doing our
5 regulatory updates on the textual part of this to put some
6 mechanism for notification or an -- a sort of -- I'm
7 thinking like as simple as like an email contact for
8 anyone to contact us to talk about a chemical that they
9 feel is important and that we will have a follow-up
10 evaluation type of process associated with that.

11 PANEL MEMBER KLEINMAN: I think something like
12 that would be very helpful.

13 AQPSD ASSISTANT DIVISION CHIEF EDWARDS: Okay.
14 Beth.

15 All right.

16 CHAIRPERSON ANASTASIO: Other comments from the
17 Panel?

18 Yes, Beate.

19 PANEL MEMBER RITZ: This might just be my
20 misunderstanding, but I'm having trouble with that second
21 to the last paragraph. To me, it reads as if we've
22 already seen the results of --

23 PANEL MEMBER BLANC: That was --

24 PANEL MEMBER RITZ: That was your comment too.

25 PANEL MEMBER BLANC: -- a good point, and I think

1 that they're --

2 PANEL MEMBER RITZ: They're going to rewrite it.

3 PANEL MEMBER BLANC: -- be inserted -- an
4 inserted line would address that.

5 PANEL MEMBER RITZ: Okay.

6 PANEL MEMBER BLANC: That we have seen interim
7 versions, but not the final version.

8 PANEL MEMBER RITZ: Okay. So that's that one as
9 well.

10 PANEL MEMBER BLANC: That's why -- that was the
11 rationale.

12 PANEL MEMBER RITZ: Okay. Good.

13 CHAIRPERSON ANASTASIO: Yeah.

14 AQPSD ASSISTANT DIVISION CHIEF EDWARDS: Going
15 back to Dr. Kleinman's comment. What I would propose to
16 do at the end of page two, so after the paragraph, "Upon
17 conclusion", just sort of put as an action item, one,
18 "CARB staff will evaluate, including a mechanism for
19 public feedback in the prioritization of risk factors into
20 the EICG".

21 How about a -- just leave it at "A mechanism for
22 public feedback". So, "CARB staff will evaluate,
23 including a mechanism for public feedback in
24 developing..."

25 Okay. Here we go again. "CARB staff will

1 evaluate, including a mechanism for public feedback, in
2 weighing the importance of chemicals".

3 Does that sound --

4 PANEL MEMBER KLEINMAN: Thanks. That would be
5 great. Thank you.

6 AQPSD ASSISTANT DIVISION CHIEF EDWARDS: Thank
7 you.

8 CHAIRPERSON ANASTASIO: Are other comments?

9 PANEL MEMBER BESARATINIA: What happens after
10 your evaluation for the mechanism of feedback? What would
11 be the next step?

12 AQPSD ASSISTANT DIVISION CHIEF EDWARDS: I think
13 that would be then talking to OEHHA about that. I guess
14 just as a corollary to this, we are going through a
15 similar process with our criteria -- reporting regulation
16 for the reporting of criteria and air toxics. And we've
17 received a couple of comments regarding ground-truthing of
18 sources. So we're considering including a mechanism for
19 the AB 617 communities, but also general public, or anyone
20 that's interested to sort of set up a procedure for how we
21 would follow up on a request to evaluate a source that
22 potentially doesn't have an air permit.

23 So I would envision something -- whatever sort of
24 comes out of that process, which is a little bit ahead of
25 this one, will likely have similar language to notify CARB

1 by this email address or something like that, and then we
2 would have X number of days to follow up with some sort of
3 written feedback.

4 PANEL MEMBER BESARATINIA: Thanks.

5 CHAIRPERSON ANASTASIO: Okay. Thank you, Dave.

6 Any other comments from the Panel?

7 All right. So since the edits proposed were
8 relatively minor, I would say, I'd like to call a vote.
9 So I will work with CARB to revise it, based on the
10 Panel's feedback. And I would like to have a vote, so
11 that we either accept the draft -- or, sorry, accept the
12 interim letter of findings or not.

13 So could I get a motion on accepting the letter?

14 PANEL MEMBER KLEINMAN: I move that we accept the
15 letter on interim findings.

16 CHAIRPERSON ANASTASIO: Thank you. Could I get a
17 second.

18 PANEL MEMBER LANDOLPH: Second.

19 CHAIRPERSON ANASTASIO: Joe. Thank you.

20 So let's take the vote. All in favor of the
21 letter?

22 (Hands raised.)

23 (Ayes.)

24 CHAIRPERSON ANASTASIO: So it's in unanimous in
25 Sacramento.

1 Kathy and Stan?

2 PANEL MEMBER HAMMOND: Aye.

3 CHAIRPERSON ANASTASIO: Stan?

4 PANEL MEMBER GLANTZ: Aye.

5 CHAIRPERSON ANASTASIO: Okay. Great. Thank you
6 very much. So the Panel unanimously approves the letter
7 of interim findings.

8 We'd like to thank you CARB again for all your
9 work on this very important update of the a appendix A of
10 AB 2588. And we look forward to your future presentations
11 about how things are moving forward.

12 AQPSD ASSISTANT DIVISION CHIEF EDWARDS: Yeah.
13 And also, yeah, thank you, Cort and to the rest of the
14 panel for all the support you have provided on this
15 appendix A update. And we'll now be proceeding forward
16 with our public rulemaking process. And we'll look
17 forward to coming back and giving you an update once we're
18 completed with that later.

19 CHAIRPERSON ANASTASIO: Great. Thank you Dave,
20 Beth, and Melissa.

21 The last agenda item is consideration of
22 administrative matters. I actually have a question for
23 OEHHA. So, John, could I -- could I bother you for a
24 minute to come to the microphone. I forgot to ask you
25 this before the meeting, and I apologize for that. But

1 can you just give us a quick update on where we stand with
2 tolu -- where were we? We were doing cobalt. Who are the
3 two that are unfinished at this point?

4 DR. BUDROE: I was afraid you were going to ask
5 me about that. I dearly wanted to have toluene to the
6 Panel Chair by the meeting, so that we could check that
7 one off. But we're probably about three to four weeks
8 away from getting it to you.

9 CHAIRPERSON ANASTASIO: Okay.

10 DR. BUDROE: And cobalt is -- we actually have a
11 revised document that we're in the process of internal
12 review with right now. So I would say, looking over there
13 at Daryn -- Dr. Daryn Dodge in the audience, two months.

14 CHAIRPERSON ANASTASIO: Two months. Okay.
15 That's great. Thank you for that update. Appreciate
16 that.

17 Any other questions from the Panel?

18 PANEL MEMBER BLANC: These are -- what nature
19 documents are these?

20 DR. BUDROE: These were the toluene REL document
21 that the Panel had reviewed and was scheduled to go back
22 to the Chair for concurrence in the post-SRP meeting
23 revisions in the cobalt cancer document also.

24 PANEL MEMBER BLANC: So they both -- they're just
25 for the Chair's review.

1 DR. BUDROE: Correct.

2 PANEL MEMBER BLANC: So then what are we
3 anticipating of new documents?

4 DR. BUDROE: Right now, it looks like we're -- we
5 won't have anything for the July meeting. For the fall
6 meeting, I'm assuming -- kind of assuming there's going to
7 be in roughly September or October, and we will have most
8 likely a trivalent chromium REL document, and possibly a
9 trimethylbenzene REL document.

10 CHAIRPERSON ANASTASIO: Yeah. So we're working
11 with OEHHA to figure out the timing for that. And Kath --
12 or Lori will be asking for availability at some point
13 soon, so that we can set up that meeting and consider
14 those documents.

15 Anything else on that, Paul?

16 PANEL MEMBER BLANC: No.

17 CHAIRPERSON ANASTASIO: Okay.

18 PANEL MEMBER BLANC: No.

19 CHAIRPERSON ANASTASIO: So while we're on that,
20 I'd like to remind the Panel that our next meeting is
21 going to be a conference call. So it will be on the
22 morning of July 9th. Now, there is a typo on your agenda,
23 so make sure you have in calendar that it's July 9th and
24 it's going to be 9:00 to 11:30. That will be our plan.
25 And we're going to potentially continue hot spots

1 discussion, if Dave and company have additional items to
2 discuss then. We will get an update on the AB 617
3 Consultation Group from Mike Kleinman who's been
4 participating in that.

5 Any other items before we adjourn?

6 I can't remember. Do I need a motion to adjourn?

7 PANEL MEMBER BLANC: I move we adjourn.

8 CHAIRPERSON ANASTASIO: Can I get a second?

9 PANEL MEMBER KLEINMAN: Second.

10 CHAIRPERSON ANASTASIO: All in favor?

11 (Hands raised.)

12 (Ayes.)

13 CHAIRPERSON ANASTASIO: All right. Great. Thank
14 you everyone for your hard work.

15 (Thereupon the California Air Resources Board,
16 Scientific Review Panel adjourned at 1:31 p.m.)

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1 C E R T I F I C A T E O F R E P O R T E R

2 I, JAMES F. PETERS, a Certified Shorthand
3 Reporter of the State of California, do hereby certify:

4 That I am a disinterested person herein; that the
5 foregoing California Air Resources Board, Scientific
6 Review Panel meeting was reported in shorthand by me,
7 James F. Peters, a Certified Shorthand Reporter of the
8 State of California;

9 That the said proceedings was taken before me, in
10 shorthand writing, and was thereafter transcribed, under
11 my direction, by computer-assisted transcription.

12 I further certify that I am not of counsel or
13 attorney for any of the parties to said meeting nor in any
14 way interested in the outcome of said meeting.

15 IN WITNESS WHEREOF, I have hereunto set my hand
16 this 4th day of March, 2020.

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23 JAMES F. PETERS, CSR
24 Certified Shorthand Reporter
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