## SUBMITTED ELECTRONICALLY

Docket No. APHIS-2010-0103 Regulatory Analysis and Development, PPD APHIS, Station 3A-03.8 4700 River Road Unit 118 Riverdale, MD 20737-1238

**Re: Docket No. APHIS-2010-0103** (Petitions, Plant Pest Risk Assessments, and Environmental Assessments; Availability: Dow AgroSciences, LLC, Corn Genetically Engineered for Herbicide Tolerance)

Dear Secretary Vilsack,

On behalf of the 35 undersigned scientists, physicians, nurses, and other health professionals, we respectfully request that USDA deny the petition from Dow AgroSciences to deregulate its genetically engineered (GE), 2,4-D-resistant corn (DAS-40278-9). Widespread planting of 2,4-D GE corn is projected to substantially increase the use of 2,4-D; experts estimate that overall agricultural use of this herbicide may rise from 27 to over 100 million pounds over the next decade. 2,4-D soybeans and cotton would boost usage still more. Yet USDA has provided no analysis of the harm to human health that could result.

2,4-Dichlorophenoxyacetic acid (2,4-D) is an herbicide that was one of the two active ingredients in Agent Orange, the Vietnam War defoliant. Although the main health effects of Agent Orange were blamed on the other component of the mixture (2,4,5-T) and dioxin contamination, the data indicate that 2,4-D has significant health risks of its own. It remains unclear whether continuing low-level dioxin contamination of 2,4-D plays a role.

Dozens of studies in humans have reported associations between exposure to 2,4-D and non-Hodgkin's lymphoma, a cancer of the lymphocytes (white blood cells). This finding is consistent with other studies finding that 2,4-D increases lymphocyte replication in exposed farmworkers, and that 2,4-D formulations are cytotoxic and mutagenic. For example, in human lymphocytes, 2,4-D causes chromosome breakage and aberrant cells. In 2010, according to the National Cancer Institute, approximately 65,540 people in the United States were diagnosed with non-Hodgkin's lymphoma. The incidence of this disease in the United States has increased to about double the rate seen in the 1970s, even when adjusted for population growth and aging. 2,4-D is likely to be responsible for a fraction of cases of non-Hodgkin's lymphoma each year, although it is difficult to quantify the exact numbers.

Dozens of animal studies show that 2,4-D exhibits hormone-disrupting activity. 2,4-D also affects the function of the neurotransmitters dopamine and serotonin. Interference with hormones and neurotransmitters can cause serious and lasting effects during fetal and infant development, including birth defects, neurological damage, and interference with reproductive function. Human studies support the results of the animal studies. Male farm sprayers exposed to 2,4-D have lower sperm counts and more spermatic abnormalities compared to men who are not exposed to this chemical. In Minnesota, higher rates of birth defects have been observed in wheat-growing areas of the state with the highest use of 2,4-D and other herbicides of the same class. This increase was most pronounced among infants

who were conceived in the spring, the time of greatest herbicide use. A larger study in agricultural counties in Minnesota, Montana, North Dakota, and South Dakota found significant increases in malformations of the circulatory and respiratory systems, especially among infants conceived in April-June in wheat-growing counties. In the same study, infant deaths from birth defects among males were significantly elevated.

2,4-D is classified by the EPA as a hazardous air pollutant and by the State of California as a toxic air contaminant. Human exposure to 2,4-D is widespread, including among children. Studies in Iowa, North Carolina, and Ohio, for example, found 2,4-D in the carpet dust of 83-98 percent of homes sampled, despite the fact that most homeowners reported that they had not used the pesticide recently. These studies imply that 2,4-D is blowing in or being tracked in to homes, and many studies have shown that chemicals – including 2,4-D – in house dust end up on children's hands and in their bodies.

For all of the above reasons, we urge USDA to deny Dow's petition to deregulate 2,4-Dresistant corn. At the very least, USDA must conduct a comprehensive Environmental Impact Statement that addresses the serious issues discussed above, meaningfully considers restrictions on this crop system to prevent its foreseeable harms, and then use that EIS to inform its eventual decision, as required by the National Environmental Policy Act.

CC: Administrator Jackson, U.S. Environmental Protection Agency

## **SIGNED:\***

Gina Solomon, MD MPH Clinical Professor of Medicine, University of California San Francisco

Martha Arguello, Executive Director Physicians for Social Responsibility- Los Angeles chapter

Toni Bark, MD, MHEM LEEDap Boston University, School of public Health-Healthcare Emergency Management

Alison Bleaney, OBE MB ChB FACRRM Tasmanian Public and Environmental Health Network

James Brophy, PhD Adjunct Assistant Professor, University of Windsor, Windsor, Ontario Canada

Margaret Christensen, MD FACOG Christensen Center for Whole Life Health

Rupali Das, MD MPH Chief, Exposure Assessment Section, California Department of Public Health

Kathleen Diane Drum, RN AE-C Multnomah County Environmental Health

Robert Gould, MD President, Physicians for Social Responsibility - SF-Bay Area Chapter Tyrone B. Hayes, PhD Professor, University of California, Berkeley, CA

Julie Hohmeister, MS, APRN Littleton, NH

Margaret Keith, PhD Adjunct Assistant Professor, University of Windsor, Windsor, Ontario Canada

Matt Landos, BVSc (Hons I), MANZCVS Director, Future Fisheries Veterinary Service Pty Ltd Honorary lecturer, associate researcher, University of Sydney

Michael D. Levin Health Business Strategies, Clackamas, OR

Rick Liva, RPh ND Chief Medical Officer & Director of Quality, Vital Nutrients, Middletown, CT

James Neal-Kababick Director, Flora Research Laboratories, Fellow, AOAC International Adjunct Faculty, Bastyr University, Botanical Medicine Department

Peter Orris, MD, MPH Professor and Chief of Service, Occupational and Environmental Medicine (MC684) University of Illinois Hospital and Health Science System

John A Patterson MD, MSPH, FAAFP Associate Professor, Community-Based Faculty, Dept of Family and Community Medicine University of Kentucky College of Medicine, Lexington KY

David Pepper, MD Board Certified Family Physician Co-Founder - Medical Advocates for Healthy Air

Joanne Perron, MD Program on Reproductive Health and the Environment, University of California at San Francisco

Warren Porter, MD PhD University of Wisconsin, Madison Beth Rosenberg, ScD MPH Tufts University School of Medicine, Boston, MA

Lynn Ringenberg, MD President, Physicians for Social Responsibility, Florida/Tampa University of South Florida Emeritus Professor Pediatrics

Mike Rowland, MD MPH Vice President for Medical Affairs Medical Director, Occupational Medicine, Franklin Memorial Hospital, Farmington, Maine Ted Schettler, MD, MPH Science Director, Science and Environmental Health Network

Paulette Schreiber, CRNP Elk Regional Health Center, Saint Marys, PA

Kathleen Schuler, MPH Institute for Agriculture & Trade Policy

Ana M. Soto, MD Professor, Department of Anatomy and Cell Biology Tufts University School of Medicine, Boston, MA

Sandra Steingraber, PhD Scholar in Residence, Department of Environmental Studies, Ithaca College, Ithaca, New York

Patrice Sutton, MPH Research Scientist, Program on Reproductive Health and the Environment University of California San Francisco, Dept. of Obstetrics, Gynecology and Reproductive Sciences

Claudia Thomas, MD Fellow, American Academy of Pediatrics Fellow, American Academy of Emergency Physicians

Catherine Thomasson, MD Executive Director, Physicians for Social Responsibility, Washington DC

Harry Wang, MD Physicians for Social Responsibility- Sacramento chapter

David Wallinga, MD Institute for Agriculture & Trade Policy

Diana Zuckerman, PhD President, Cancer Prevention and Treatment Fund, Washington, DC

Edward Zuroweste, MD Assistant Professor of Medicine, Johns Hopkins School of Medicine Chief Medical Officer, Migrant Clinicians Network, PA

\*Institutional affiliation provided for identification purposes only