

March 17, 2003

## Presentation of Louis Sullivan, M.D. 1

Thank you, Mr. Chairman, for the opportunity to share my views on this important topic this afternoon.

In August 2002 <sup>2</sup>, I addressed the debate concerning the safety of CCA treated wood. At that time, I concluded that children are safe, and that play structures constructed of this material have not been shown to pose a risk to health or safety.

This position was supported by the EPA, which stated that it, "does not recommend that consumers replace or remove existing structures made with CCA treated wood or the soil surrounding those structures." The State of Florida formed an expert panel of physicians to evaluate risks associated with CCA treated wood. This group "agrees with and supports" the EPA's position. As I explained at the time, the Florida physicians group also concluded that CCA treated wood has never been linked to increased risk of cancer, which, it concluded, "would be expected after 30+ years of use if toxic levels of arsenic were leaching from the wood."

The staff of this Commission recently issued a report which contains mathematical projections which purport to demonstrate that children who play on CCA treated play structures may face an increased risk of cancer. This report does not alter the conclusion I reached last August. That is, public health judgments must be based on research and evidence and the evidence does not show that CCA treated wood play structures are unsafe.

The Staff Report estimates potential arsenic exposure from treated wood play structures, highlighting the absence of any actual bio-monitoring data. Even if one accepts these theoretical exposures, they are well within the background levels to which most people, including children, will be exposed from food and drinking water. The CPSC Staff Report recognizes this. Neither these potential exposures, nor the theoretical risk derived from the Staff Report's calculations, warrant action by this Commission.

I understand that this product is being withdrawn from use in new play structures, and that EPA already is engaged on this issue. In light of these facts, it is important to ask whether any further activity by this agency is needed.

President emeritus of Morehouse School of Medicine, Atlanta, Georgia; Served as Secretary of the United States Department of Health and Human Services from March 1989 through January 1993; Serves as a member of the Board of Directors of BioSante Pharmaceuticals, Inc., Bristol-Meyers Squibb Company, CIGNA Corporation, Endovascular Instruments, Inc., Equifax Inc., Georgia-Pacific Corporation, a treater and seller of pressure-treated wood, Minnesota Mining and Manufacturing Company, and United Therapeutics, Inc.; Serves on the Boards of Medical Education for South African Blacks, Project Hope, Africare, and the Little League Foundation.

<sup>&</sup>lt;sup>2</sup> At that time, I was a medical adviser to the Treated Wood Council.

I believe this Commission could best serve the public by focusing its Staff and limited resources on addressing children's health and safety issues that pose documented threats. The Commission has done good work in minimizing the hazards from many products, such as flammable children's sleepwear, and choking hazards associated with toys. It should continue to focus on projects in which it can make a real difference, rather than in areas that have not been shown to pose a risk in real life.

Because the Surgeon General of the U.S. Public Health Service has identified being overweight as one of the major health problems of American children today, the Commission should be especially careful not to unnecessarily alarm parents and children, so that they avoid physical activity in playgrounds. Such an outcome from addressing a theoretical problem could exacerbate a real, and increasing, one.

In closing, I would urge the Commission to continue its good work by focusing on those issues that pose a real threat to the health and welfare of America's children. The present concerns about treated wood play structures do warrant more study, but there does not appear now to be a public health reason for the Commission to grant the potition that is before it.