

GROWING UP TOXIC

*Chemical Exposures and Increases
in Developmental Disease*

Written by:
Travis Madsen
Yana Kucher
Teri Olle

ENVIRONMENT CALIFORNIA RESEARCH AND POLICY CENTER

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Environment California Research and Policy Center
3435 Wilshire Blvd, Suite 385
Los Angeles, CA 90010

For more information about Environment California and the Environment California Research and Policy Center, please call (213) 251-3688 or visit our website at www.environmentcalifornia.org.

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Dr. Linda Birnbaum
Director, Toxicology Division
U.S. Environmental Protection Agency

Dr. Gina Solomon
Senior Scientist, Natural Resources Defense Council
Assistant Clinical Professor of Medicine, University of California at San Francisco

Dr. Larry Silver
Professor of Psychiatry
Georgetown University Medical Center
Past President, Learning Disabilities Association of America

Dr. Shanna Swan (Sperm Declines)
Professor of Epidemiology
University of Missouri Medical School

Jo Behm, MS, RN
State and Federal Health and Education Public Policy Consultant, Learning Disabilities Association National Advocacy Committee, and Past President, Learning Disabilities Association of California

Dr. Joel Tickner
Research Assistant Professor, Work Environment
University of Massachusetts, Lowell

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Infancy



Childhood



Adolescence



Becoming a Parent



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EXECUTIVE SUMMARY

Californians face increasing obstacles to healthy development, from the moment of conception until they themselves attempt to conceive. Problems like premature birth; male genital defects; learning, attention, and emotional disturbances; early puberty; obesity; and low sperm quality have been increasing in California and the nation as a whole over the past several decades, impacting every stage of growth from conception to adulthood.

While a range of factors, from lifestyle to heredity, may contribute to any one of these trends, a growing body of research suggests that toxic chemicals play a significant role. Studies are revealing chemical contamination in human bodies, finding associations between chemical exposure and human disabilities and disease, and demonstrating toxic effects at increasingly lower levels of exposure.

The findings of this report are by no means comprehensive. While well-known toxicants like mercury, lead, dioxin, and PCBs have been clearly linked to human health damage, thousands of other chemicals that people are exposed to in the home have never been studied for health effects. Here we focus on the most recent science surrounding several emerging chemical hazards—a growing body of evidence showing that chemicals found in the home and in common consumer products may hinder normal development.

Chemical exposure is widespread.

Human bodies are the repository for countless chemicals encountered in everyday experiences and found in com-

mon consumer products. Exposure to these substances during fetal development is unavoidable.

- Phthalates, used to “plasticize” some food containers, plastic wrap, toys, shampoos, perfumes, and beauty products, are among the most frequently found contaminants in human bodies.
- Flame retardants, added to foams, plastics, and electronics, have been found at exponentially increasing levels in women in California; levels in U.S. women have reached up to 75 times the levels found in Europe and Japan.
- Bisphenol-A, the main ingredient in hard polycarbonate plastics for baby bottles, drinking water bottles, and food containers, has been detected in pregnant women in Germany and Japan. It is one of the top 50 production-volume chemicals in the U.S., and exposure likely is widespread.
- Pesticides and their breakdown products are commonly found in people. In a recent study, the U.S. Center for Disease Control and Prevention found 13 different pesticides in the average American, out of 23 pesticides under consideration.

At each stage of life, toxic chemicals may hinder normal development.

Even before their first breath, insurmountable challenges, from premature birth to birth defects, await an increasing number of children.

Premature birth, which raises the risk for reduced intelligence and learning and attention problems throughout life, is 23% more frequent now than in the 1980s in the United States. One potential factor may be phthalates:

- Babies exposed to a common phthalate *in utero* are born a week earlier on average than babies without exposure.

Birth defects are the leading cause of infant death in the U.S. While the specific causes of most birth defects are unknown, they could be linked to a variety of chemical exposures, including:

- Phthalates. In male lab rats, phthalate exposure *in utero* leads to undescended testicles and malformed urinary tracts. The frequency of these conditions in baby boys doubled from 1970 to 1993 in the United States.
- Bisphenol-A. In experiments with mice, bisphenol-A can induce the genetic defect that causes Down's syndrome, at levels comparable to those found in women tested to date.
- Pesticides. One study found an association between miscarriages caused by birth defects and commercial pesticide applications within a nine square mile area around the home. Another study found that boys conceived during the period of most intense application of the herbicide 2,4-D were five times more likely to have a birth defect than boys with no unusual exposure.

Infancy and early childhood is a time marked by rapid growth and learning. However, a growing number of California children are suffering from developmental disorders that impair their ability to learn normally.



Photo: Gail Kewney

Neurodevelopmental and mental health disabilities are rapidly rising in California. Autism cases in California have more than tripled since 1994, and the number of students in public schools with learning disabilities increased 65% from 1985 to 1999. No one cause has been implicated, but scientific evidence raises questions regarding numerous potential factors, including exposure to toxic flame retardants, bisphenol-A, perchlorate, pesticides, and the well-established culprits of lead, mercury, dioxin, and PCBs. Consider:

- Flame-retardant chemicals given to newborn mice in small doses permanently impair their learning and behavior, and small doses of bisphenol-A produce hyperactivity.
- The rocket fuel component perchlorate, found in the drinking water sources of 16 million Californians, affects the thyroid hormone system at very low levels of exposure. Children born to mothers with thyroid problems have higher rates of learning disabilities.



Photo: Teri Olle

- Children exposed to agricultural pesticides show deficiencies in intellectual development, stamina, balance, hand-eye coordination, and short-term memory.

As children develop into young adults, they struggle with the rapid changes in their bodies that lead to sexual maturity. However, several unexplained trends suggest that children face additional health challenges at this stage of life, including early puberty and obesity.

In the last four decades, the number of obese adolescents in the U.S. has quadrupled, and girls in the U.S. appear to be reaching puberty six months to one

year earlier than in the past, with a small number of girls developing breast tissue when they are as young as three years of age. Both trends could be tied to endocrine-disrupting chemical exposures in utero.

- Rodents exposed to bisphenol-A give birth to female offspring that grow faster, weigh more, and enter puberty earlier. If applicable to humans, these effects could predispose exposed children toward obesity and early puberty.

Finally, upon reaching adulthood, many people choose to have children of their own. However, chemical exposures may be contributing to infertility and other reproductive difficulties.

Sperm density has declined 40% in the U.S. since World War II. Exposure to phthalates, pesticides, and flame retardants may be contributing to this trend.

- Men with high levels of phthalates or pesticides in their urine (including diazinon, heavily used in California agriculture) tend to have low levels of sperm production.
- Male rats exposed to even a single low dose of PBDE flame retardants while in the womb have significantly decreased sperm counts.

Reducing exposure can prevent harm.

Several instances where regulatory agencies took action demonstrate the value of reducing exposure for human health:

- The EPA banned household uses of the pesticides chlorpyrifos and diazinon in 2001. It appears that this

health-protective action had a nearly immediate effect. After 2001, mothers in New York City had lower levels of these compounds in their bodies and, remarkably, gave birth to heavier and longer babies than those born before the pesticide ban.

- The phasing out of leaded gasoline and other efforts to reduce lead exposure have reduced the number of children with toxic levels of lead by half over the last decade.

Policy Reforms

The newly discovered connections between chemicals and disease outlined here just begin to scratch the surface of the potential impact of chemicals on public health. Tens of thousands of industrial chemicals on the market have not been tested for developmental health effects at low doses. No public health information exists for close to half of the high production-volume chemicals. Moreover, where significant evidence of harm to public health already exists, inadequate resources and legal authority often prevent regulatory agencies from taking protective action.

In order to protect children from toxic exposures, we must take firm steps to remedy the ignorance about health effects of widely-used chemicals and empower regulatory agencies to ensure that consumer products do not contain dangerous chemicals. These steps include:

- 1) Phasing out chemicals that persist in the environment, accumulate in organisms, or for which evidence of potential harm to human health exists from exposure.
- 2) Requiring chemical manufacturers to develop analytical techniques to detect the chemicals they produce, and relevant breakdown products, in environmental media and organisms, and to submit these techniques to the state. Currently, taxpayers pay for scientists to guess at what emerging chemical threats may be present in our environment and bodies and then develop the testing methods to detect them. This causes significant delay in determining which chemicals pose the greatest threat to public health.
- 3) Requiring chemical manufacturers to supply the state and federal government with toxicity data for their products, including low-dose effects on development and reproduction. The European Union recently developed a model policy, known as Registration, Evaluation and Authorization of Chemicals (REACH), that would vastly increase the amount of information available to determine the safety of chemical products.
- 4) Encouraging the federal government to stop lobbying heavily against the new European Union chemicals policy on behalf of U.S. industry, and to take a stronger stand for public health.

INTRODUCTION

In August of 2003, California passed legislation banning the sale of two types of toxic chemicals. These chemicals, used as flame retardants in furniture and plastics found in every California home, illustrate the dilemma society is facing when it comes to evaluating the safety of industrial chemicals.

On one hand, the ban represents the triumph of a basic principle of government: individual states have a duty to protect the health and well-being of their citizens.

On the other hand, this action reveals a profound failure. By the time the evidence of harm was strong enough to motivate action, exposure had become widespread. Flame retardants were already widely distributed in homes. In fact, the chemicals were widely distributed across the planet, from the blubber of Arctic seals to the breast milk of mothers in California. Product manufacturers had become accustomed to using the chemicals and the chemical industry was reliant on the profits from their sale.

Although the first evidence that flame retardants could be found in the environment surfaced as early as the 1980s, the problem did not attract widespread attention until 1997, when Swedish scientists found the chemical in human breast milk. As evidence of harm accumulated, worry began to mount. Policymakers chose to act when the evidence of harm was strong, with scientists finding exponentially rising concentrations of flame retardants in people and animals across the country, and evidence that small doses—below levels already documented in the breast milk of some California mothers—could cause permanent neurological damage in infant mice.

Flame retardants reveal a pattern of widespread exposure before regulatory action, a pattern that could be played out repeatedly with dozens, if not hundreds, of chemicals commonly used in consumer products. Flame retardants are just one class of over 75,000 industrial chemicals on the market in the United States. The health effects of almost half of the major industrial chemicals have not been studied at all.¹ Of those that have been studied, approximately 1,400 chemicals with known or probable links to cancer, birth defects, reproductive impacts, and other health problems are still in use today.²

All of these chemicals may pose serious risks for future generations while substantially affecting the health of today's children. As outlined in this report, the rates of many childhood diseases are rising. More children are suffering from asthma, allergies, autism, learning disabilities, attention deficit disorder, and certain types of birth defects than ever before. More children are developing cancer as well, although rates have leveled off in the last few years.³ No one fully understands what is happening to this generation of children. However, the mounting number of sick kids takes a toll on parents, families, schools, communities, local and state resources, and society as a whole.

The federal government is hoping to mount the largest study of children's health in U.S. history to unravel this mystery. If Congress grants funding for the project, known as the National Children's Study, researchers will spend \$2.7 billion dollars over the course of 20 years tracking the health of 100,000 children from womb to adulthood. The researchers will examine numerous po-

tential factors in childhood illness: genetics, chemical exposures, eating habits, home lives, and more.

Studying the issue on this grand scale will provide more answers than are available today. What it will not provide is assurance to parents that we are taking all reasonable and timely steps to prevent illnesses in children that may be caused, at least in part, by exposure to toxic chemicals.

Without a concerted effort by regulators and manufacturers to ensure that information is available to make responsible choices as a society about what chemicals we choose to include in our lives—and our bodies—future hazards will be unavoidable. Society may not discover the next toxic flame retardant until twenty years from now, after exposure has once again become commonplace and irreversible. Already, people everywhere are exposed to thousands of potentially dangerous chemicals that may be harming our health without our knowledge or consent.

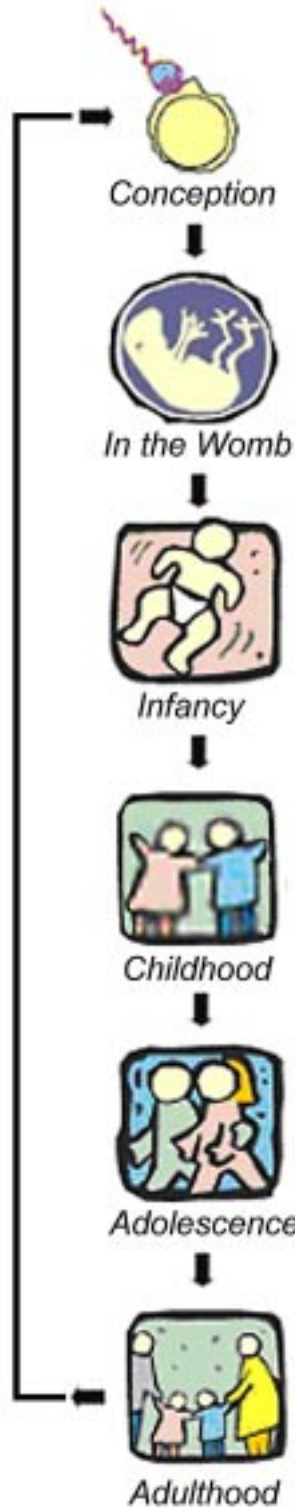
The evidence connecting chemical exposures to developmental disease—while not yet foolproof—is strong enough to justify a larger effort to pre-



Photo: Shawn Sutherland

vent harm to children's health. Parents deserve the assurance that everyday consumer products are safe to bring home from the store and to use in feeding, clothing, and caring for their families.

Figure 1: Timeline of Human Development and Summary of Disease Trends⁴



- Genetic damage to a mother’s egg or a father’s sperm can cause birth defects.

- The most vulnerable period for chemical exposure.

- Premature birth has risen 23% in the U.S. since the 1980s.⁵
- Although rates of birth defects related to nutritional deficiencies have fallen, other types of birth defects have increased.
- The CDC reported an increase in deaths from birth defects caused by chromo-

some sorting errors in sperm or egg cells from 1980 to 1995.⁶ These errors are the cause of Down’s Syndrome.

- The frequency of baby boys born with undescended testicles (cryptorchidism) or a malformed urethra (hypospadias) doubled from 1970 to 1993.⁷

- Neurodevelopmental disabilities that impair normal learning and social skills are rising. Autism cases tracked by the state of California have more than tripled since 1994.⁸ In California public schools, learning disabilities increased 65% from 1985 to 1999, rising from 5% to 6% of all students.⁹

- The prevalence of children with asthma doubled between 1980 and 1995, reaching 7.5% of all children.¹⁰

- Scientists are noticing changes in the timing of puberty that could signal an underlying developmental problem. Caucasian girls in the U.S. appear to be developing on average 6 months to one year earlier than previous studies sug-

gest, with African-American girls developing earlier at every stage.¹¹

- In the last four decades, the number of obese adolescents in the U.S. has quadrupled.¹²

- Parents may face more obstacles when attempting to have children. Scientists have found that sperm density has declined 40% in the U.S. since World War II, and that there are differences in male reproductive health in different regions of the country.¹³

veloping testicular cancer as men born in 1940.¹⁴

- Sperm density deficits could be related to male genital birth defects and testicular cancer, both of which have been rising and could be linked to similar types of chemical exposures. Men born in 1960 face 2.5 times the risk of de-

- Endometriosis – a painful condition in women where uterine lining tissue grows in inappropriate places – appears to be increasing as well. The Endometriosis Association estimates that over 5 million U.S. women and girls suffer from the condition. Before 1921, only twenty reports of the disease existed in the worldwide medical literature.¹⁵

- Breast cancer rates are increasing around 0.6% per year, and prostate cancer rates have climbed 150% over the last three decades.¹⁶

HOW CHEMICAL EXPOSURES MAY BE HARMING DEVELOPMENT

A human being begins existence as a single cell formed by the union of a mother's egg and a father's sperm. Within this one cell lie all of the ingredients required to produce a full-grown person. The process of growth and development unlocks this potential, leading from the first few cell divisions in the womb, to the birth of an infant, to learning and physical growth in childhood, to sexual development in adolescence, to full reproductive maturity in adulthood.

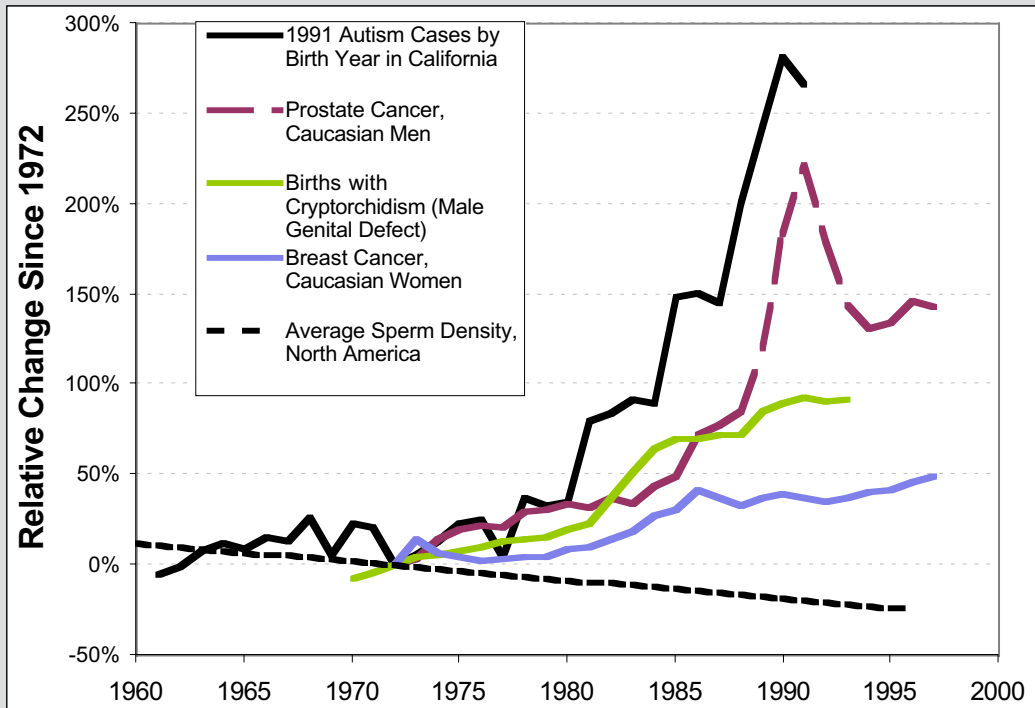
Unfortunately, the process of growth and development does not always occur flawlessly. Errors in the human blueprint in the egg or sperm may cause improper physical or neurological development. Problems can also occur when signals that guide the process do not happen as they should.

Public health researchers and agencies track the occurrence of some of these disorders. Although disease tracking capabilities are not nearly comprehensive enough in California or the U.S. as a whole, several alarming trends are arising from the data we do have. Taken together, they suggest that something is causing changes in fundamental processes of development. From conception to adulthood, many types of developmental disorders are rising, as summarized in Figures 1 and 2.

We have no completely satisfactory explanations for these rising trends in disease. Many different factors likely interact to produce these patterns, from heredity to changes in culture and lifestyle.

However, some scientists are testing the idea that exposures to synthetic

Figure 2: Relative Increase in Disease Incidence Rates Over the Last 40 Years



chemicals form a significant piece of the puzzle. Scientists are building evidence that toxic chemicals can interfere with the process of development in animals and people in ways that could lead to disease. First, they are discovering that chemicals can interfere with signal transmission in the body. Second, they are demonstrating toxic effects in animals given small doses of chemicals. Third, they are finding a variety of toxic chemicals in the blood and tissues of mothers at levels that could be contributing to health problems in their future children.

Increases in learning disabilities could be linked to chemicals that interfere with brain development, including brominated flame retardants (used in home furnishings and a huge variety of plastics), perchlorate (rocket fuel found in California drinking water and in produce), and plastic ingredients like bisphenol-A (used in food containers and plastic baby bottles). Increasing genital birth defects in males could be linked to chemicals that interfere with reproductive development, including pesticides (widely used in California agriculture and neighborhoods), and phthalates (used in PVC plastics and a wide variety of personal care products like perfume). Increasing rates of premature birth and earlier puberty in girls could be linked to chemicals that interfere with the reproductive system, including the plastic ingredients bisphenol-A and phthalates. Chemical exposures could even be playing a role in trends towards increased obesity in children today.

All of these contaminants and more can be found in products used in every California home. Most or all of them can be found in the body of the average California woman as well (see Table 1). When she becomes pregnant, they pass on to the developing fetus. For example, according to a 2000 study, approximately one in three pregnant women in



Photo: Teri Olle

the Los Angeles area had known endocrine-disrupting chemicals in their uteruses at levels approaching those that cause statistically significant damage to developing mice.¹⁷

The science of developmental toxicology is still relatively young. While the chemical industry often points to this fact as a reason not to worry, it only signals massive ignorance, not safety. There are still tens of thousands of chemicals on the market that we know little or nothing about. These chemicals acting alone, may cause effects at extremely low doses. In addition, the chemicals may be mixing together in our bodies and interacting with each other in complex ways that produce effects invisible when tested individually.

Emerging evidence suggests that toxic chemicals play an important role in the genesis of some types of developmental diseases. In the following sections we take a walk through the course of human development, outlining the evidence supporting the role toxic chemical exposures may play in current public health trends.

Table 1: Partial Summary of Chemicals, Exposures, and Effects

Chemical	Human Contamination Levels	Low Dose Effects
Bisphenol-A	1 to 105 ppb in German placenta, average 8.3 ppb in Japanese amniotic fluid. ¹⁸	<p>A 20 ppb dose per day for 6-8 days causes chromosome sorting errors in mice.¹⁹</p> <p>A 2-3 ppb dose given to rats during pregnancy yields female offspring that tend to grow larger and menstruate earlier.²⁰</p> <p>A 0.3 ppb dose in cell culture replicates the estradiol signal, important in brain development.²¹</p> <p>A single dose as low as 2 micrograms given to 5-day old male rats causes hyperactivity.²²</p>
Phthalates — DEP	The metabolite of diethyl phthalate (DEP), monoethyl phthalate (MEP), was present in urine at levels over 2,000 ppb in 5% of test subjects in the U.S. ²³	Levels within this range are associated with DNA damage in human sperm. ²⁴
Phthalates — DBP	The metabolite of dibutyl phthalate (DBP) was present in urine samples at levels above 149 ppb in 5% of test subjects. ²⁵	<p>Levels within this range are associated with reduced sperm quality in adult men.²⁶</p> <p>Larger doses cause male genital defects in rats.²⁷</p>
Phthalates — DEHP	The metabolite of diethylhexyl-phthalate (DEHP) was found above 21.6 ppb in the urine of 5% of women tested. ²⁸	<p>Young girls in Puerto Rico with premature breast development had 450 parts per billion DEHP in their blood.²⁹</p> <p>Larger doses cause male genital defects in rats.³⁰</p>
PBDE Flame Retardants	10 to 1080 ppb in fatty tissues of U.S. mothers. ³¹	<p>A dose leading to ~5000 ppb fat in infant mice leads to permanently impaired learning and behavior.³²</p> <p>A single dose <i>in utero</i> can delay onset of puberty in both males and females and impair development of reproductive organs in laboratory animals.³³</p>

The Home as A Toxic Environment

Not all toxic chemicals enter the environment dripping from a factory waste pipe, leaking from a hazardous waste dump at the edge of town, or billowing into the air from an incinerator smokestack. Products made in factories and shipped to homes and offices around the state also contain hazardous materials, where they become an intimate part of the life of every Californian.



Many times more chemicals are shipped from factories to homes, contained within consumer products, than are spilled or dumped into the environment. Massachusetts, one of the few states where companies are required to report the amounts of chemicals they use and ship in products, provides a good illustration. In Massachusetts in 2001, for every one pound of chemicals released or disposed of, eight pounds were distributed in manufactured products.³⁴ Companies shipped thousands of times more of certain toxic chemicals—especially ingredients in plastics and personal care products—than they released into the environment.³⁵

As a result, children today grow up surrounded by chemicals that did not exist a hundred years ago. Their food containers are made with plastic, from reusable bowls to throwaway wrapping. Their homes and yards

are treated with chemicals designed to kill: pesticides. Their families use cosmetics and personal-care products that contain hundreds of synthetic chemicals. The furniture and electronics in their homes contain flame retardant chemicals. Many of these chemicals escape from products and end up in household dust and in household air.³⁶ The chemicals have become such a close part of our lives that now they can be found in the blood and bodies of every mother and child.³⁷

Some common household items contain developmental toxicants, chemicals that can alter the sequence of events that brings forth healthy lives. For example, bisphenol-A can be found in plastic food containers and water bottles; phthalates are common in everything from vinyl flooring to food wrappings to beauty products; and flame retardants can be found in electronics and furniture. Developmental toxicants are capable of causing diseases, creating birth defects, reducing the mental or physical abilities of children, and altering normal behavior patterns.³⁸ Although it is usually impossible to connect a single chemical to a broad health trend, the evidence continues to mount that toxic chemicals may play a significant role in the health problems of today's children. The National Academy of Sciences estimated that toxic exposures play a role in at least one in four cases of developmental disorders.³⁹

Although the amounts of chemicals found in a typical person are relatively small—on the order of grains of salt in an Olympic size swimming pool—these levels matter. Scientists are showing that chemicals that act as signals within the body can disrupt the process of growth and development in levels found in some people today. See Appendices A and B for a discussion of the rise of chemical use in the U.S., and scientific support for the hypothesis that low-level exposure to certain chemicals may be linked to developmental disorders.

Conception Through Infancy



The course of human development begins at the moment a father's sperm merges with a mother's egg. The single cell that results from this union contains all the information required to produce a miniature human being. As the embryo grows within the woman's uterus, cells develop specialized characteristics and functions, becoming limbs, hearts, eyes, brains, and all of the critical organ systems that make life possible. From the time parents realize they are going to bring a new life into the world, they wait with anticipation for the first outlines of shape and the first signs of movement.

After approximately 38 to 40 weeks of dramatic growth and development, babies are born and enter into direct contact with the world. However, for some parents, pregnancy might bring unexpected and possibly heartbreaking complications, from miscarriages to birth defects.

Inexplicably, a growing number of children are entering the world earlier than normal or with some types of birth defects. Pre-term birth is becoming more frequent in the U.S. Premature babies, defined as babies born more than three weeks early, face a higher risk of disrupted cognitive development or behavioral problems later in life. Male infants have a higher frequency of reproductive birth defects than they did thirty years ago. Infant boys with birth defects such as undescended testicles (cryptorchidism) and malformed urinary tracts (hypospadias), face an increased risk of testicular cancer and reproductive dysfunction. While a variety of factors could be responsible for this trend, scientists are discovering that chemical exposures – involving the parents' sperm or egg cells, or the developing fetus – may play a major role.

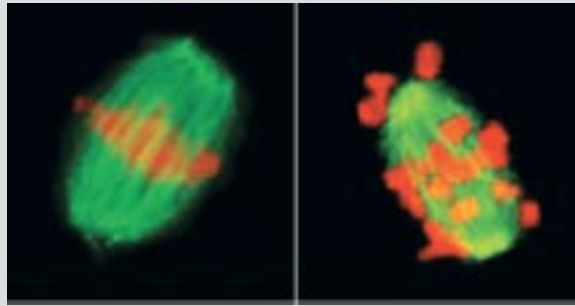
Miscarriages, Birth Defects and Plastic

Even before conception occurs, genetic damage to an egg or sperm can cause developmental problems for the resulting embryo. Severe genetic defects can lead to miscarriage before a woman even knows she is pregnant. For example, when chromosomes sort incorrectly in a father's sperm or mother's egg, diseases—or, more often, miscarriages—result. Incorrect sorting of chromosomes leads to diseases like Turner's syndrome, in which a female has only one X-chromosome and never develops ovaries; Klinefelter's syndrome, in which a male has one or more extra X-chromosomes and develops sterile; Down's syndrome, in which a child has an extra copy of chromosome 21 and suffers multiple mental and physical impairments; and sometimes miscarriages, when genetic problems disrupt development too drastically to make life viable. According to the *Los Angeles Times*, roughly 10% to 25% of human embryos have an incorrect number of chromosomes. Almost all of these end in miscarriage early in pregnancy.⁴⁰

Bisphenol-A, a chemical found in many household items including plastic baby bottles and compact discs, recently burst onto the scene as a potential factor in inaccurate sorting of chromosomes. In 2003, Dr. Pat Hunt and her colleagues at Case Western Reserve University made an accidental but dramatic discovery: bisphenol-A can cause chromosomes to sort incorrectly in mouse eggs, even at very low doses.⁴¹ While a variety of possible events could also lead to the same genetic outcome, the fact that a common chemical can cause this effect is cause for concern.

Dr. Hunt's research team was not studying bisphenol-A at the time the discovery was made. The lab was using

Figure 3: Bisphenol-A Causes Chromosomes to Sort Incorrectly During the Development of Egg Cells⁴²



In normal development (left), eggs and sperm develop when a germ cell splits in two, giving an equal set of chromosomes to each germ cell. The chromosomes (red) line up on the spindle (green) to ensure equal separation. However, bisphenol-A prevents the chromosomes from lining up correctly (right), resulting in chromosome sorting errors like the kind that cause Down's Syndrome.

mice for their research, and lab staff kept the mice in plastic cages and fed them water from plastic water bottles. The staff were shocked when they discovered severe chromosome sorting problems in developing egg cells of mice they were expecting to be normal. Dr. Hunt faced the question of how untreated mice developed such striking damage to their egg cells.

The answer to the mystery turned out to be contamination from the plastic cages and the plastic water bottles. Bisphenol-A leached out of these items into the diet of the mouse in appreciable quantities. Lab staff were able to replicate the effect in several ways: by feeding mice with plastic bottles purposefully washed to accelerate leaching of bisphenol-A, and by directly administering small doses of pure bisphenol-A to the mice.

Even at the lowest dose tested (20 nanograms/gram weight for 6-8 days), bisphenol-A caused significant and ob-

servable damage to developing eggs (Figure 3). Germ cells normally split into two cells when forming eggs, separating chromosomes equally into each daughter cell. These cells then enter the reproductive process, and when fertilized by sperm, develop into new organisms.

Interviewed by Marla Cone and the *Los Angeles Times* about this finding, Dr. Frederick vom Saal at the University of Missouri, a leading bisphenol-A scientist, noted that “these effects in the Hunt study and other studies happen at lower doses than what is actually found in human fetal blood—umbilical cord blood.”⁴⁰

In fact, tests of placental tissue and amniotic fluid of women in Germany and Japan found bisphenol-A at high levels—from 1 to 105 parts per billion, which is in the range of the doses that caused chromosome sorting errors in mice.⁴³

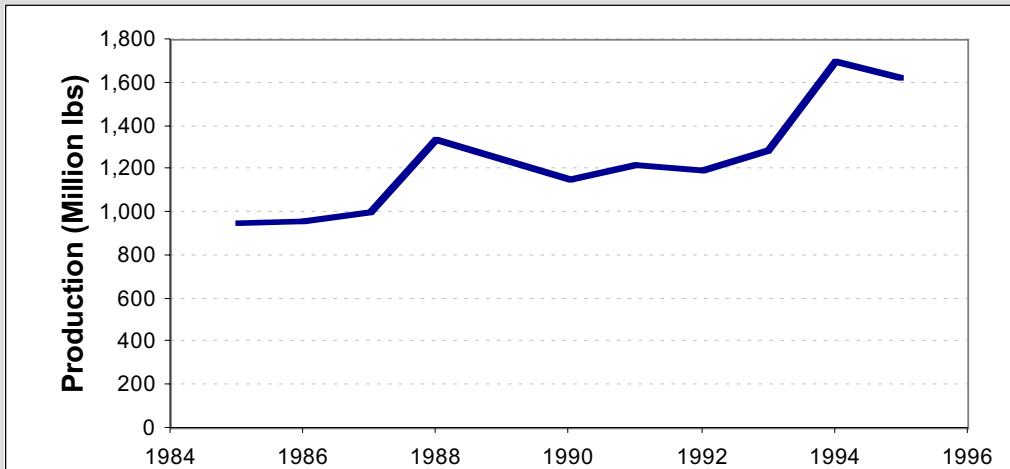
Bisphenol-A is Everywhere

Scientists first learned that bisphenol-A could act a synthetic substitute for the female hormone estrogen in the 1930s, close to 30 years after its invention.⁴⁴ However, in 1953 chemists discovered that bisphenol-A could be made into polycarbonate plastic. Despite the fact that bisphenol-A was known to be active in the human body, it went on to become commonplace in the manufacture of a variety of materials not meant to be drugs.

Dozens of common household items contain this chemical. Some of the most easily recognizable products include Nalgene drinking water bottles, hard plastic baby bottles, and CD and DVD disks. In addition, bisphenol-A is used to make the plastic found in some types of reusable and microwaveable food and drink containers, electrical and electronic equipment, automobiles, sports helmets and pads, eyeglass lenses, and more. Bisphenol-A is also useful in making epoxy resins, found in printed circuit boards, paints, glues, protective coatings—and more worrisome, in the lining of metal cans containing food and drink.⁴⁵

Bisphenol-A is one of the top 50 products produced by the chemical industry, generating revenues on the order of \$6 million per day in the U.S., Europe, and Japan.⁴⁶ In 1999, manufacturers in these regions produced 2 million metric tons of the chemical, with consumption expected to reach 2.6 million metric tons in 2004.⁴⁷ U.S. industry produces over one billion pounds of this chemical a year (Figure 4).

Figure 4: Production of Bisphenol-A in the United States from 1985 to 1995⁴⁸



Birth Defects, Plastic Additives, and Personal Care Products

Mutations in important genes, or the genetic blueprint of a human being, can also lead to birth defects. Mutations can be caused by a variety of factors, includ-

ing exposure to reactive chemicals. For example, if signals required during the development of bone and muscle structures are disrupted by a mutation, defects like cleft palate or dwarfism can result.

Phthalates are a family of chemical 'plasticizers,' added to PVC plastics to



All of these products, the Rubbermaid "Dip 'n Snack Tray," the 5 gallon water jug, and the 9oz baby bottle from Avent, are made with polycarbonate plastic containing bisphenol-A. Plastic items made from polycarbonate can sometimes be identified by the recycling code "7," although the code represents a few other types of plastic as well.

Trends in Birth Defects

The incidence rates of many birth defects in the U.S. have been declining with better nutrition and medical care. For example, adding folic acid to cereal in the 1990s has appeared to reduce the number of spina-bifida defects. However, birth defects remain the leading cause of infant death, and the specific causes of most birth defects remain a mystery.⁴⁹ According to the CDC, infant deaths due to birth defects have not declined as fast as other types of infant death over the last three decades.⁵⁰

Moreover, the CDC reported an increase from 1980 to 1995 in the number of fetal deaths from trisomy 13 and 18 (defects that could be caused by errors in chromosome sorting), reduced brain volume, and respiratory system defects.⁵¹ However, scientists face challenges in untangling the influences of increasing maternal age, increasing prenatal diagnosis of birth defects and elective termination, and other trends affecting infant death rates. While overall infant death rates are declining, important questions still remain to be answered about the origin of many birth defects. A national health-tracking network, which would systematically track the incidence rates of birth defects while controlling for changes in diagnosis, medical practice, and maternal age, could provide a lot of useful clues.

make them more flexible, and also added to personal care products such as perfumes, lotions, and nail polish. One type of phthalate may be linked to DNA damage in human sperm.⁵² Although no studies have yet confirmed a link between phthalates and a specific birth defect, this mechanism suggests that phthalates could be associated with genetic damage leading to birth defects.

Dr. Susan Duty and her colleagues at the Harvard School of Public Health looked at DNA damage in the sperm of

healthy men with no unusual exposure to phthalates in the Boston area. They found that levels of diethyl phthalate (DEP) and its breakdown products were associated with damage to the DNA in sperm cells.⁵³ In other words, men with high phthalate levels were more likely to have signs of DNA damage to their sperm. The plastics industry uses DEP to make PVC plastics more flexible in tools, automotive parts, toothbrushes, and food packaging; as well as adding it to cosmetics and insecticides. The levels of phthalate exposure seen in this study are common in American men.

Miscarriages, Birth Defects and Pesticide Exposure

Pesticides, which include insecticides, herbicides, fungicides, and rodenticides, are commonly used in agriculture, landscaping, and in and around the home. These chemicals are the only chemicals in this discussion that are created and used with the specific intent to kill something, be it weeds, insects, fungus, or rodents. However, the human organism is not so different.

Dozens of pesticides and their breakdown products can readily be found in people. In a recent study, the U.S. Center for Disease Control and Prevention found at least three different pesticides in one hundred percent of the people tested for pesticides in both blood and urine. Out of 23 different pesticides under consideration, the average person had 13 in their body.⁵⁴ These pesticides may be contributing to a variety of adverse health effects, including miscarriage.

One study found an association between pesticide use in California and an increased risk of miscarriage caused by birth defects. Dr. Erin Bell of the University of North Carolina and her col-

leagues showed that mothers who live within a 9-square mile area in which commercial pesticide spraying takes place during pregnancy are 40% to 120% more likely to suffer miscarriages due to congenital defects.⁵⁵ Risk is greater during gestation weeks 3-8, the critical period when many organ systems first begin to take shape. Associations were apparent for five major classes of pesticides: organophosphates, carbamates, pyrethroids, and endocrine disrupting pesticides, but strongest with halogenated hydrocarbons (examples of halogenated hydrocarbons include endosulfan, lindane, and pentachlorophenol).

In addition, studies of the herbicide 2,4-D (used in agriculture and for home lawn care) have linked exposure to reduced litter size in animal experiments and birth defects in people. Dr. Warren Porter at the University of Wisconsin discovered that rodents exposed to low doses (commonly found in the environment) of a commercial herbicide mixture including 2,4-D have reduced litter sizes.⁵⁶ This experiment is striking in that very low doses—as low as one seventh of the drinking water standard set by the EPA—produced the greatest effect.

Dr. Dina Schreinemachers at the U.S. EPA found that human babies born in wheat-growing areas of the western U.S. (where chlorophenoxy herbicides like 2,4-D are used in large amounts) are more likely to have birth defects than babies in non-wheat-growing areas of the West.⁵⁷ She found that:

- Children born in high-wheat areas were 60% to 90% more likely to have birth defects in the respiratory system, circulatory system, and in the muscles and skeleton (fused digits, clubfoot, extra digits, etc.).

- The frequency of birth defects were highest for babies conceived in the spring, when herbicide spraying is most intense. Boys conceived in high-wheat counties in April and May were almost five times more likely to have a birth defect than boys conceived in low-wheat counties at other times of the year.
- Infant death due to congenital abnormalities was more frequent for boys in wheat-growing counties compared to low-wheat counties.

In addition to agriculture, herbicides like 2,4-D are used in home lawn care and grounds maintenance. Common lawn care products, including Scotts and Weed-B-Gon weed killers and Miracle-Gro Weed and Feed contain 2,4-D.⁵⁸ In 2002 herbicide applicators used close to 470,000 pounds of 2,4-D and related herbicides across California.⁵⁹

Premature Birth is Becoming More Frequent

Rates of pre-term birth (defined as giving birth after 37 or fewer weeks gestation) rose in the latter part of the 20th century in the U.S. From 1975 to 1995, preterm delivery increased 22% among Caucasian women, from 6.9% to 8.4% of births.⁶⁰ The increase among African American women was smaller, 3.6%, but the percentage of pre-term births among African Americans is very high already, accounting for 16% of all births in 1995. The increase appears to be continuing. Researchers at the CDC observed the same trend from 1981 to 1998, independent of maternal age.⁶¹ Premature labor, which does not always result in pre-term birth, occurs in about 20% of all pregnancies in the U.S.⁶²



Photo: John Stevens

A variety of factors, including an increase in the age of childbearing women, could explain part of this trend. However, exposure to chemicals in the environment such as phthalates (used in some cosmetics and plastics – see box on Page 23) and pesticide residues could also be contributing to the trend toward shorter pregnancies.

Chemical Ties to Premature Birth

New evidence ties leftover residues of the pesticide DDT, banned in the U.S. in 1972, to earlier births. In 2001, a research team led by Dr. Matthew Longnecker at the U.S. National Institute of Environmental Health Sciences reported that women with the highest levels of DDT in their blood were more than three times more likely to give birth to a premature child.⁶³

Chemicals still in widespread use today may also affect delivery timing. For example, a group of Italian scientists found phthalates and their breakdown products in the blood of newborn infants, with higher levels leading to a higher incidence of premature delivery.⁶⁴ They report that on average, babies exposed to common phthalates enter the

world a week earlier than babies with less exposure.

If chemical exposures are causing earlier birth times, it could have serious consequences for the health of children later on in life. Children born prematurely and undersized face more challenges than the average child growing up, including a greater risk for reduced intelligence and behavioral problems, including attention deficit hyperactivity disorder (ADHD).⁶⁵

Moreover, new research suggests that medication commonly used to halt pre-term labor and stave off birth could be making children more vulnerable to damage from other common chemicals. Dr. Theodore Slotkin and colleagues at Duke University Medical Center found that rat fetuses exposed to the pre-term labor drug terbutaline were more vulnerable to damage from the pesticide chlorpyrifos.⁶⁶ The damage affected regions of the brain associated with learning and memory, offering an explanation for previous studies that showed children whose mothers are administered terbutaline suffer cognitive defects.⁶⁷ According to the research team, over one million women per year in the U.S. receive terbutaline or related drugs.

Birth Defects of the Male Reproductive System are Increasingly Common

Genital defects in males are increasing. Although no researchers have precisely determined the cause, toxicants that affect the development of the reproductive system are a plausible factor.

The number of children born with hypospadias (a birth defect causing the opening of the urinary tract to develop on the underside of the penis), and with cryptorchidism (a birth defect disrupting the

Phthalates Everywhere You Look

Phthalates are a family of chemicals, including diethyl phthalate (DEP), diethylhexyl phthalate (DEHP), dibutyl phthalate (DBP), and many other distinct types. The polyvinyl chloride (PVC) plastic industry uses large amounts of phthalates as additives to improve the flexibility of their products, including home siding, flooring, furniture, food packaging, toys, clothing, car interiors, and medical equipment including IV bags. In addition, other manufacturers use phthalates in personal care products such as soaps, shampoos, hand lotion, nail polish, cosmetics, and perfumes, as well as industrial products like solvents, lubricants, glues, paints, sealants, insecticides, detergents, and inks.⁶⁸ The Worldwatch Institute estimates global phthalate production at roughly 5.5 million tons per year.

Scientists are finding phthalates everywhere they look. This class of chemicals is one of the most widespread contaminants in the environment today. In fact, according to EPA scientist Robert Menzer phthalates are so common that, “It has become very difficult to analyze any soil or water sample without detecting phthalate esters.”⁶⁹

The human body has not escaped contamination. In 2000, Dr. Benjamin Blount at the U.S. Centers for Disease Control and Prevention (CDC) found high levels of phthalates and their transformation products (known as metabolites) in every one of 289 adult Americans tested, including women of childbearing age.⁷⁰ The CDC confirmed widespread exposure with a larger study in 2003, finding disturbing levels of phthalates in practically every person they tested.⁷¹ The metabolite of diethyl phthalate (DEP) was present in urine at levels over 2,000 ppb in 5% of test subjects.⁷² The pattern of contamination reflected exposure to phthalates used mainly in personal care products. Children in California are contaminated as well. Dr. John Brock at the CDC found phthalates at average levels over 500 ppb in 19 children in the Imperial Valley.⁷³ The patterns of contamination suggested exposure from plastics, perhaps toys, as well as personal care products.



Plastics labeled with the recycling code 3 are made from polyvinyl chloride (PVC), and may likely contain phthalates.

Scientists began studying the toxicity of several phthalates as early as the 1950s, and discovered significant evidence of environmental and human contamination in the early 1970s, including the leaching of phthalates into human blood from PVC bags used in hospitals.⁷⁴ As noted by the Worldwatch Institute, NASA scientists were already warning against the use of PVC in the space program in 1971, because of poor physical properties and the presence of phthalates.⁷⁵ They noted that “substitute polymers . . . are available and in many cases they have far superior physical properties at a small sacrifice in immediate cost.”⁷⁶ However, phthalates remain in wide use today.

descent of the testicles into the scrotum) has doubled in the last three decades.⁷⁷ In the early 1990s, these problems affected about four children in 1,000 births, up from two in 1,000 in 1970 (Figure 5).

Exposure to chemicals in the environment could explain at least part of this trend. Scientists at Copenhagen University Hospital who study male defects note that in “perhaps the majority of newborns with malformations of genitalia, no chromosomal or other genetic defect can be demonstrated with our current knowledge.”⁷⁸

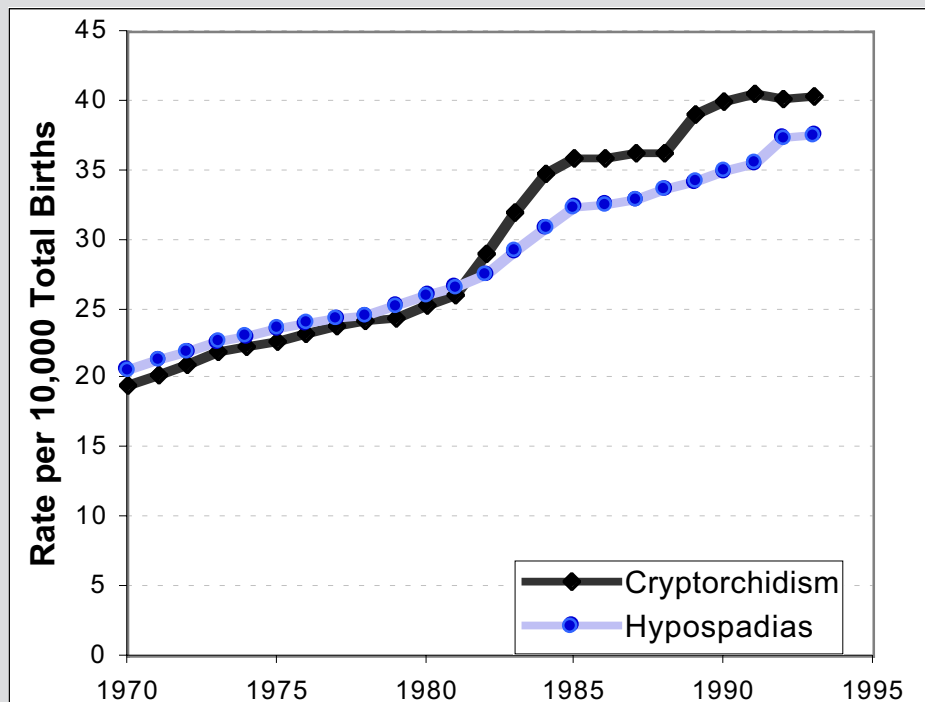
Reproductive Defects, Plastic Additives, and Personal Care Products

Phthalates from PVC (polyvinyl chloride) plastics and personal care products can cause reproductive defects in male rodents.

In 2000, Dr. L. Earl Gray and his colleagues at the U.S. EPA reported that three types of commonly used phthalates (DEHP, BBP and DINP) disrupt sexual development in the male rat.⁸⁰ When female rats were fed these phthalates during pregnancy, they gave birth to male pups that weighed less and showed symptoms of hypospadias, cleft phallus, reduced testes weight, and other reproductive malformations, including undescended testicles (cryptorchidism). Apparently, DEHP reduces testosterone production in the developing testes, interfering with the signals that direct normal male reproductive development.⁸¹ A maternal dose of 750mg/kg/day of DEHP after the second week of pregnancy reduces testosterone levels in male testes to the same level as in female rodents.

In 2004, Dr. Gray and others at the EPA followed up on this finding, showing that the phthalates DEHP, BBP, and DINP reduce the levels of insulin-like hormone #3.

Figure 5: Trends in Defects in the Male Reproductive System in the U.S., 1970-1993.⁷⁹



Reduced activity of this hormone is another known cause of undescended testicles in mice.⁸²

Other research groups have implicated another common phthalate (dibutyl phthalate or DBP) as a direct cause of hypospadias and cryptorchidism in rodents. When female rats are fed DBP at 500 mg/kg bodyweight during the third week of pregnancy, 60% of their male offspring suffer cryptorchidism, hypospadias, infertility, and/or other testicular defects.⁸³

The similarities between the male reproductive defects induced by phthalates in rodents and the features of male birth defects seen in humans are strong.⁸⁴ Although phthalates have not been proven to cause birth defects in human males, the evidence suggests that phthalate exposures are cause for concern.

Parallel evidence for other chemicals harming reproductive development in the female was published in 2002 and 2003. In this case, the culprit appears to be the plastic ingredient bisphenol-A and PBDE flame retardants.⁸⁵ Pregnant rats given 0.1 mg/kg/day of bisphenol-A gave birth to female offspring with vaginal deformations, apparently caused by a disruption of the estrogen signal required for normal development. Females exposed to PBDEs *in utero* develop structural defects in their ovaries.

Reproductive Defects and Pesticides

Pesticide exposures could also be contributing to an observed upward trend in male reproductive birth defects.

At exposure levels far beneath those found in lakes, rivers, streams, and even drinking water, the pesticide atrazine causes male frogs to develop ovaries, abnormal testicles, or a mixture of ovaries and testicles; and to become demasculinized. These effects occur at exposure levels more than 10,000 times lower than those previously identified as non-toxic



Photo: Bradley Mason

to frogs, as low as 0.1 ppb.⁸⁶ Atrazine contamination in California routinely exceeds this amount.

Atrazine is one of the most common water contaminants in California. In 2002, farmers used 58,939 pounds of atrazine in the state, mostly on crops such as trees, grasses, and corn. The top five counties for application were Imperial, Sacramento, Tuolumne, Humboldt, and Modoc.⁸⁷ After application the pesticide contaminates drinking water sources through runoff. In the mid 1990s, the U.S. Geological Survey looked for pesticide contamination around Los Angeles and through the Central Valley as a part of the National Water Quality Assessment. They found atrazine at levels between 1 and 73 parts per billion in dozens of groundwater and surface water locations across the state, up to 730 times higher than the levels associated with reproductive development problems in frogs.⁸⁸ In some areas, atrazine was detected in more than half of all surface water samples.⁸⁹

Atrazine appears to affect the testosterone signaling pathway by promoting the conversion of testosterone to estrogen. Adult male frogs exposed to 25 ppb atrazine show a ten-fold decrease in testosterone levels compared to controls – effectively lowering testosterone to female levels.⁹⁰

Childhood



As infants grow into children, they reach a number of traditionally celebrated milestones: taking their first steps, speaking their first words, and going to their first day of school. Parents often look forward to these moments and remember them with fondness. Parenting books describe the typical timelines of cognitive and physical development so that parents know when to look for the signs of proper growth in their children. For some parents, delayed or disrupted development will require minor adjustments in lifestyle and support from the community and schools. For other parents, more serious developmental disorders will mean years of testing, diagnosis, medication, and special education.

During their first few years, healthy children learn rapidly in a supportive, nurturing environment. However, if something goes wrong with brain de-

velopment, the effects begin to manifest themselves during this period.

Inexplicably, a growing number of California children are suffering from autism and greater numbers of students are requiring special attention at school because of learning disabilities. While a variety of factors could be responsible for this trend, scientists are building evidence that chemical exposures in the womb may play a critical role.

Learning Disabilities and Autism are Growing More Frequent

California's Autism Epidemic

Autism cases have increased dramatically in California since 1980, without any generally agreed-upon explanation. In the past decade, autism cases tracked by the Department of Developmental Services have tripled (Figure 6).

Children born with autism face a lifelong inability to form social relation-

Figure 6: Rising Numbers of People with Autism in California⁹¹

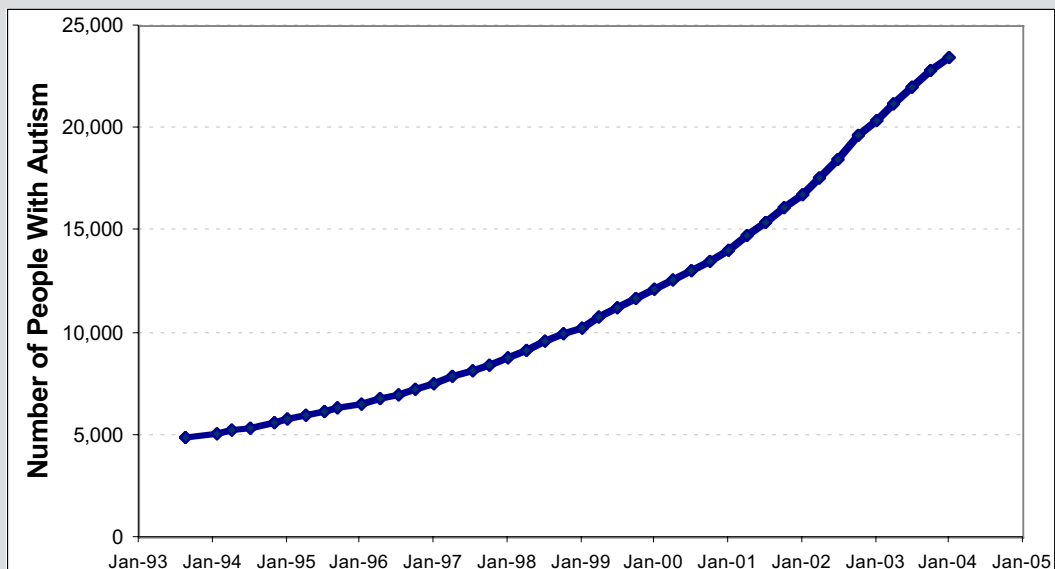
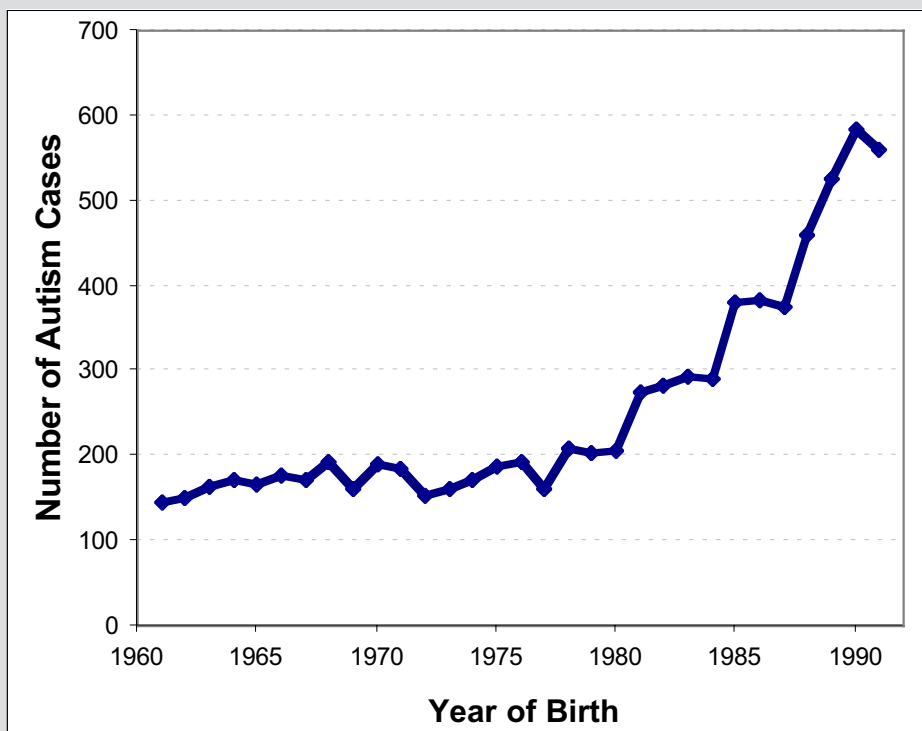


Figure 7: Year of Birth Distribution of the 1991 Autistic Population (7,915)⁹²



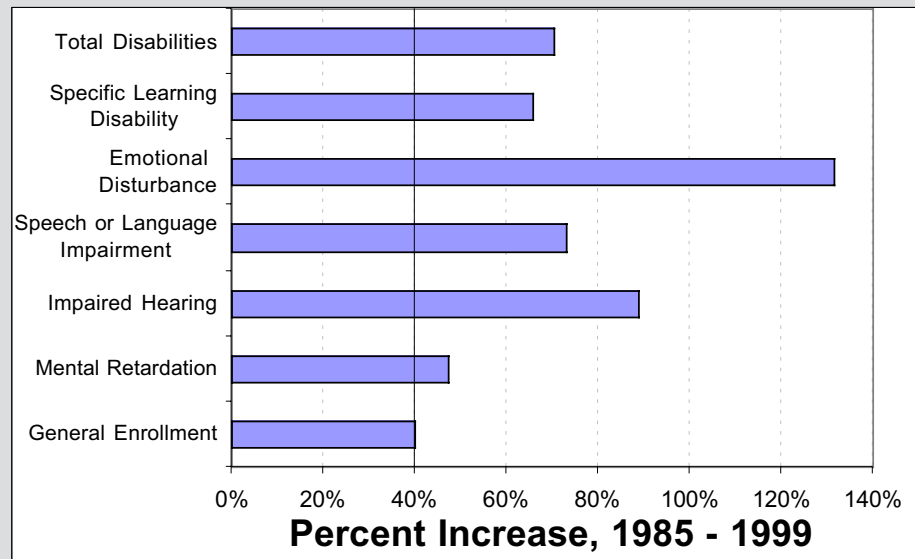
ships and an obsession with repetitive behaviors. As time passes, parents face a higher risk of having a child with autism, according to department statistics originally released in 1999. Figure 7 shows the dramatic increase in the number of autism cases tracked by the state for children born after 1980.

When these trends were first publicized, some doctors questioned whether they were real or caused by confounding influences. In October 2002, researchers at the University of California at Davis laid these doubts to rest. They ruled out population increases, trends in diagnosis, and other potentially misleading factors for the observed increase in autism cases, reporting that “some, if not all, of the observed increase represents a true increase in cases of autism in California.”⁹³

Learning, Attention and Emotional Disorders on the Rise

Learning disabilities have been increasing in California schools as well. The enrollment of children with specific learning disabilities has increased faster than the general student population in the last two decades (Figure 8). From 1985 to 1999, students enrolled in special education due to a learning disability increased 65%, while overall general enrollment increased 40%. Students with learning disabilities now make up roughly 6% of all students in the state.⁹⁴ In addition to learning disabilities, enrollment of children with emotional disturbance, speech or language disorders, and hearing impairment increased faster than general enrollment.

Figure 8: Change in Enrollment in California Schools by Type of Disability, 1985-1999⁹⁵



Children with learning disabilities suffer from an impaired ability to concentrate, conceptualize, organize, and memorize. These impairments make it difficult for the child to perform basic school tasks, like reading, writing, spelling, and math. Memory deficits may affect rote, sequential, short- and long-term memory. Problems with speech development, language learning, and motor skills often co-exist. As a logical result, children with learning disabilities are not able to keep up with other children in their classes. Despite average or greater intelligence, students with learning disabilities are predisposed to dropping out of school and having social and employment problems throughout adulthood.⁹⁶ Children with learning and attention disorders can show common characteristics at birth, including low birth weight and reduced head circumference.⁹⁷

This increase appears to be happening across the United States as well:

- Cognitive development experts report that learning disabilities in the U.S. have risen 191% between 1977 and 1994.⁹⁸
- Estimates of the number of school children across the U.S. suffering from attention deficit hyperactivity disorder (ADHD) range between 3% and 6%, up to as high as 17%.⁹⁹
- In 1985, there were 650,000 to 750,000 people diagnosed with ADHD. By 2000, that number had risen to 4-5 million, mostly school-aged children.¹⁰⁰
- Scientists at the University of Washington found that visits to physicians resulting in a diagnosis of ADHD rose by 2.7 times for girls and doubled for boys from 1990 to 1998.¹⁰¹
- Dr. Kathy Kelleher at the University of Pittsburgh School of Medicine surveyed pediatricians about the frequency of psychosocial problems in their patients. She found that these types of problems increased from

6.8% of all visits among 4- to 15-year olds in 1979 to 18.7% of all visits in 1996. Attention deficit problems increased from 1.4% to 9.2% of all visits.¹⁰²

Autism and ADHD Appear to Arise During Fetal Development

The brain is the most complicated and delicate organ in the human body. Nestled within the skull, the brain consists of a vast collection of nerve cells designed to pass messages to one another, with more complexity and adaptability than any computer.

The development of the brain is a complex and lengthy process. Starting in the third week of pregnancy, the tissue destined to become the brain and spinal cord begins to differentiate from the rest of the embryo. This tissue curls into a tube during the fourth week. By the fifth week, this tube begins to divide into the different regions of the brain. Beginning in the eighth week, the brain tissue develops rapidly into the complicated structures that give children the capabilities to perceive and organize information, learn, remember, and grow into fully functional people. Most of the cognitive capability of the brain develops between the eighth week of pregnancy and the second year of life.¹⁰³ During this period, the developing brain is most vulnerable.

During this intensive period of development, nerve cells replicate, grow, and even die in response to chemical signals. These signals tell cells when and where to connect to other cells, what proteins to put on their surface, and when to die when their function is complete. Many types of chemical signals, including those provided by the thyroid hormone system, help direct brain development.¹⁰⁴

Thyroid hormone signals are particularly important. Scientists know that

disruptions in thyroid levels as early as week eight in the womb through the second year of life can disrupt children's normal brain development and impair their intelligence and coordination. Too much or too little thyroid hormone during brain development can decrease the number of cells in the mature brain, impairing neurological development, with consequences including learning disabilities, speech and memory problems, poor coordination and balance, or – in severe cases—mental retardation. Mothers with thyroid problems during pregnancy give birth to children suffering from varying degrees of these defects.¹⁰⁵ Reduced thyroid levels in the first few weeks of life for pre-term and low birth-weight babies are associated with increased risk of neurological disorders, including the need for special education by age nine.¹⁰⁶

Scientists and doctors do not really know what causes autism, ADHD, or other learning disabilities. However, there are strong indications that the cause is an event during fetal development, and that genetic makeup may affect people's vulnerability.

Signs of autism exist in the womb, even though behavioral symptoms normally do not become fully apparent until well after birth. Children with autism show delayed brain growth *in utero* and accelerated brain growth in the months after birth.¹⁰⁷

Early signs of ADHD exist as well, independent of any medication, indicating that increasing ADHD rates cannot be fully explained by cultural changes in society. Dr. Francisco X. Castellanos at the New York University Child Study Center found that the brains of children diagnosed with ADHD, whether receiving drugs for treatment or not, lagged behind their classmates in growth over ten years.¹⁰⁸ Children with ADHD had brains on average 3.4% smaller than

normal children, and the differences remained fixed. Dr. Castellanos believes that the fact that differences remain unchanged over time suggests that ADHD begins in the prenatal period or early in life.¹⁰⁹

Evidence exists that changes in thyroid hormone levels may be part of the cause of ADHD. Dr. Peter Hauser at the National Institutes of Health found that families with a genetic problem that reduces the function of the thyroid hormone system were more likely to have symptoms of ADHD. In the study, 70% of children from families with genetic thyroid problems had ADHD, while the disorder affected 20% of children in normal families.¹¹⁰ In another experiment, Dr. Michael McDonald at the National Institute of Mental Health showed that mice with the same genetic defect in their thyroid hormone systems developed symptoms of ADHD, including hyperactivity and impaired learning ability.¹¹¹

One study claiming no link between thyroid hormone levels in infants and learning-type disorders was performed by Consultants in Epidemiology and Occupational Health, Inc., a group that has done work for perchlorate manufacturers like Lockheed-Martin, as well as the American Wood Preservers Institute, an organization that promotes arsenic-treated wood products used in playgrounds.¹¹² Research funded by companies with a financial interest in vindicating their products tends to be less reliable than research without such conflicts of interest.¹¹³

Chemical Ties to Autism, Learning Disabilities and Behavioral Problems

Many different factors are likely contributing to the prevalence of diseases

related to abnormal brain development in California. There is ongoing debate in the medical community about the role of environmental triggers in the development of autism and similar diseases. However, given the increasing trends of neurodevelopmental disorders, the potential role of exposure to chemicals widespread in the home environment cannot be ignored.

Strong evidence exists that certain chemicals can impair the development of the brain, both in humans and in animals.

Chemicals can disrupt the thyroid hormone system.

Studies with wildlife show that certain synthetic chemicals can disrupt thyroid function. Studies also show impacts on human fetuses – especially in terms of cognitive function later on in childhood.¹¹⁴

Chemicals can affect the behavior of animals.

Monkeys exposed to lead and PCBs during development show symptoms similar to those of ADHD in humans, including an inability to plan and perform tasks in an efficient or sensible sequence, a short attention span, and deficiencies in learning.¹¹⁵

Chemicals can damage the development of human children.

Humans have been exposed to some chemicals at levels proven to cause harm. Among the most well known of these chemicals are lead, mercury, dioxin, and PCBs (chemicals used as an electric insulator in transformers and other items until they were banned in 1976).

The CDC estimates that at least a half million children in the U.S. suffer from irreversible neurological damage from lead poisoning.¹¹⁶ According to the U.S.

Environmental Protection Agency, one in six U.S. women has enough mercury in her body to risk brain damage in her children.¹¹⁷ Scientists are still discovering effects in the average population caused by PCBs and dioxin.

The Legacy of PCBs

The story of how scientists gradually and painstakingly revealed the toxic legacy left by manufacturers of PCBs is particularly revealing. Children born to mothers exposed to PCBs by accidental poisoning in 1978 showed signs of irreparable damage associated with developmental toxicants: immune suppression, altered sexual development, delayed brain development and increased social dysfunction like hyperactivity and behavioral problems at school.¹¹⁸

Over the next two decades, these results were confirmed at far lower levels of exposure by studies in North Carolina, Michigan, upstate New York, and the Netherlands: as the level of PCB exposure before birth rose, the mental and physical abilities of infants after birth declined. Even at very low levels, prenatal PCB exposure contributed to hyperactivity and attention problems discovered later in childhood.¹¹⁹

As recently as 1994, scientists found that the levels of PCBs in the general population were still high enough to affect thyroid hormone balance in mothers and their nursing infants.¹²⁰

Lead, mercury, dioxin, and PCBs are just four of many different threats that children are exposed to daily in modern society. New evidence about chemicals used in commonplace household items reveals that a variety of exposures could be causing increased incidence of abnormal brain development and related diseases.

Endocrine Disruption, Neurological Harm, and Plastics

Many items in every California home are made from plastic. Some of the chemicals used to make plastic, including the main ingredient in polycarbonate, can interfere with the transmission of signals in the body. In addition, some additives designed to confer properties like flame-resistance to plastic also show endocrine-disrupting effects.

Flame Retardants

Household products made from flammable materials, such as polyurethane foam in furniture and plastics in computers and electronics, contain chemicals designed to reduce the spread of fire in the event of an accident. Three of the most common such additives are polybrominated diphenyl ethers, or PBDEs, tetrabromobisphenol-A, or TBBPA, and hexabromocyclodecane, or HBCD. North American industry produced and used close to 130 million pounds of these chemicals in 1999.¹²¹

First introduced 30 years ago, these types of flame-retardant additives are now widely used, despite minimal health testing. The testing that has been done indicates that PBDEs are toxic to development, and the levels found in some mothers and fetuses are rapidly approaching the levels shown to impair learning and behavior in laboratory experiments.¹²²

PBDEs build up in fatty tissue and do not readily leave the body. As a result, these chemicals are building up rapidly in the tissues of women across California. Contamination levels in the breast tissue of California women and in the breast milk of women throughout America are up to 75 times higher than those found in European countries.¹²³

Flame retardants have been shown to alter thyroid hormone levels, an effect

similar to that caused by PCBs. Tetrabromobisphenol-A and pentabromophenol (a related flame retardant and pesticide) are better able to bind to a part of the thyroid system than the natural hormone itself.¹²⁴ Metabolites of PBDEs have the same effect. When rodents are exposed to PBDEs, they show depressed thyroid hormone levels and physical changes in the thyroid gland.¹²⁵ These effects occur in mice when exposed to a common PBDE at single doses as low as 0.8 milligrams per kilogram of body weight.¹²⁶ These effects appear to be additive with the effects of PCBs and dioxins on thyroid hormone levels.¹²⁷

Flame retardants also cause irreversible neurological damage to infant mice. Mice exposed to PBDEs as newborns develop learning and movement problems that worsen as the animals grow older, an effect similar to that seen with PCBs.¹²⁸

Evidence in animals suggests that exposure will have the same effect in humans. In the case of PCBs, humans were actually more sensitive than rodents used in experiments by at least 1,000 times.¹²⁹

To date, less attention has been paid to TBBPA and HBCD. TBBPA can be found in the blood of electronics workers, although it does not appear to bioaccumulate.¹³⁰ In contrast, scientists in Sweden recently discovered HBCD in the shells of peregrine falcons, suggesting that HBCD is climbing the food chain.¹³¹ Both TBBPA and HBCD can prevent the uptake of neurotransmitter molecules important in delivering messages between nerve cells in the brain. These two chemicals, PCBs, and the drug ecstasy have the same effect at similar concentrations.¹³² Potential developmental consequences of this effect are not fully known.

Bisphenol – A

Recent work by Dr. Angel Nadal and colleagues at Miguel Hernández University in Spain demonstrated that the chemical bisphenol-A can mimic a signal that regulates how cells in the brain develop.¹³³ Their experiment showed that bisphenol-A is biologically active at extremely low levels, and that it has a potency and effect similar to that of the hormone estradiol.

Estradiol plays an important role in the development of connections between nerve cells in the brain and long-term memory formation. It controls the process of cleaning out unnecessary cells when nerves are making connections between each other. Known as controlled cell death, this process is a crucial part of development. For example, controlled cell death transforms webbed hands and feet into functional appendages with separate digits by freeing each finger and toe. A similar process helps the brain to become functional as well.

Bisphenol-A is able to mimic the effects of this hormone at levels as low as 0.3 parts per billion (ppb). Although very few tests have looked for bisphenol-A in pregnant women, results suggest widespread contamination of fetuses at or above this level.

The discovery that bisphenol-A can interfere with estradiol signals raises the possibility that bisphenol-A could be triggering steps important in the development of the brain at the wrong times, or encouraging improper connections to be made. Unfortunately, scientists do not yet know what happens to the developing brain when an external contaminant interferes with how nerve cells are connecting with one another.

Evidence is beginning to gather that bisphenol-A damages brain development in animals. Dr. Masatoshi Morita and his colleagues at the Japanese Na-

tional Institute for Environmental Studies recently studied the effects of bisphenol-A on rat development.¹³⁴ They found that a single dose given to a 5 day old rat lead to significant levels of hyperactive behavior, with greater hyperactivity resulting from higher doses of the chemical. They also found that bisphenol-A exposure changed how the dopamine signaling system developed in brain cells, resulting in less dopamine receptors and transporters. Dopamine is an important transmitter of nerve signals in the brain. Other Japanese laboratories recently showed that mice exposed to bisphenol-A in development and infancy were temporarily more aggressive and had smaller brains, kidneys, and testes than unexposed mice.¹³⁵

These results suggest that bisphenol-A could be a serious factor in increasing rates of neurobehavioral disease.

Thyroid Disruption and Perchlorate in Drinking Water

Otherwise known as rocket fuel, perchlorate is a workhorse of the defense industry. Beginning in the 1950s, large amounts of the chemical were made at factories owned by American Pacific and Kerr-McGee corporations outside Las Vegas, in an area draining into Lake Mead and the Colorado River.¹³⁶ The chemical was used by numerous aerospace contractors, road-flare manufacturers, and pyrotechnic companies throughout the state. Perchlorate now pollutes the source of drinking water for over 16 million Californians, as well as much of the water used to irrigate the nation's winter produce.¹³⁷

Perchlorate inhibits the uptake of iodine into the thyroid gland, reducing the production of thyroid hormone at very low levels of exposure.¹³⁸ Rats exposed to perchlorate at levels as low as 10 nanograms per kilogram body weight



Photo: Teri Olle

per day show changes in thyroid hormone levels, brain structure, thyroid structure, and behavior.¹³⁹ Interference with thyroid hormone in pregnant women and bottle-fed infants can lead to long-term brain development impairment.¹⁴⁰

These studies suggest that perchlorate could be playing a role in increased rates of learning disabilities in California. Only two studies not funded by corporations with a financial stake in the results have looked for evidence of these effects in people actually exposed to perchlorate. First, the Arizona Department of Health Services found differences in thyroid hormone levels among infants whose mothers were exposed to perchlorate-contaminated drinking water from the Colorado River and those who had not been exposed to perchlorate while pregnant.¹⁴¹ Second, Jackie Schwartz, then a public health graduate student at U.C. Berkeley, found that infant thyroid hormone levels were significantly lowered when mothers were exposed to drinking water contaminated with perchlorate at levels as low as 1 to 2 ppb, with stronger effects at higher doses.¹⁴²

Perchlorate levels in the Colorado River have been measured as high as 24 parts per billion, in Lake Mead.¹⁴³ Water taken from the river by the Metropolitan Water District of Southern California contains somewhere between 4 and 6 parts per billion perchlorate.¹⁴⁴ Perchlorate also concentrates in leafy vegetables like lettuce, which creates a concern for consumers of Imperial Valley crops irrigated with Colorado River water. Tests by the Environmental Working Group, an independent advocacy organization, found perchlorate in lettuce at levels more than 100 times higher than what the EPA considers safe in a liter of drinking water.¹⁴⁵

Neurological Damage and Pesticides

Hundreds of different herbicides and insecticides are used daily to control weeds, cockroaches, flies, rodents, and other common pests across California, in agricultural areas, homes and schools.

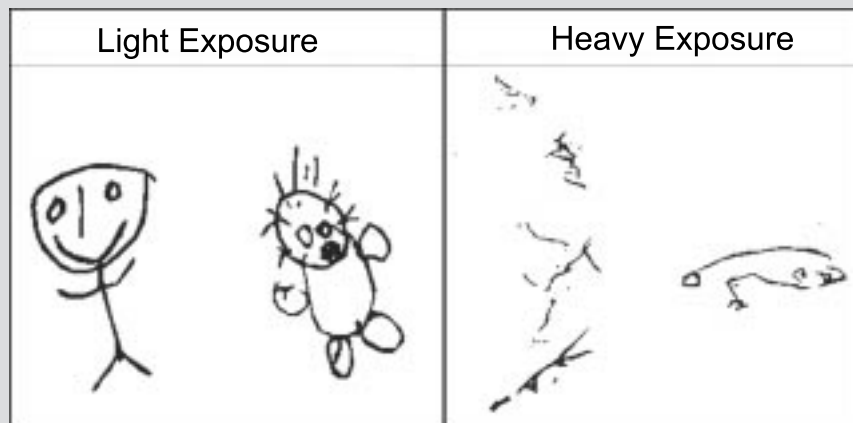
Evidence from rodent studies shows that certain types of pesticides can harm brain development. Infant mice exposed to neurotoxic pesticides early in life develop irreversible defects in learning and hyperactivity.¹⁴⁶ However, even more dramatic evidence that chemical mix-

tures in use today are already affecting human cognitive development come from an agricultural area in Mexico, where two groups of children grew up separated by a small difference in geography, and in their exposure to pesticides.

Dr. Elizabeth Guillette at the University of Arizona and her colleagues in Sonora, Mexico looked at the effect of pesticides on preschool-age children in the Yaqui Valley, Mexico. Farmers in the community had used pesticides in the valley since the 1940s, while farmers in the foothills avoided pesticide use. Dr. Guillette compared children from both areas, and discovered dramatic functional differences.

While the children did not differ in physical growth patterns, children exposed to high levels of pesticides were less mentally able to perform basic tasks and showed behavioral problems. For example, Dr. Guillette asked 4-year olds to draw a picture of a person. Less-exposed children were able to produce recognizable drawings, while children with high levels of pesticides were not (Figure 9). Heavily exposed children were also deficient in stamina, balance, hand-eye coordination, and in short-term memory compared to their less-exposed counterparts.

Figure 9: Drawings of People by 4-Year-Old Children Exposed to Pesticides in Mexico's Yaqui Valley¹⁴⁷



Adolescence



During adolescence, children become young adults. They grow taller. They enter junior high school and high school, often awkwardly filling out the boundaries of their future selves. Children at this age develop the secondary sexual characteristics that will eventually bring them to sexual maturity, including pubic hair, active menstrual cycles, and other signs of reproductive development. Eventually, they develop the ability to have children of their own. Developmental textbooks generally describe this as the period between 10 and 15 years of age.

This time of a child's life can be confusing and challenging, but with the guidance of trusted adults, it can also be one of exciting change as the child begins to transition into adulthood.

Unfortunately, several unexplained trends suggest that children face growing challenges in their health and development at this stage of life. First, girls appear to be reaching puberty at an earlier age than in the past. In some cases, girls develop breast tissue as early as three years of age. Second, increasing numbers of youth in California are becoming obese. Obesity is now one of the most serious public health problems facing the state, and the nation.

Although changes in nutrition, lifestyles, and genetics certainly play a role in the development of these trends, scientists have recently discovered evidence that toxic chemicals in the environment may also be contributing factors.

Chemical Exposure Could Be Causing Changes in the Timing of Puberty

Girls in the U.S. appear to be undergoing puberty at an earlier age than in the past. In a 1997 study of tens of thousands of girls visiting pediatricians, Caucasian girls appeared to be developing 6 months to one year earlier than previous studies suggest is normal. Even at three years of age, 3% of African-American and 1% of Caucasian girls showed breast and/or pubic hair development in this study. By seven years of age, the numbers increased to 27.2% and 6.7%, respectively.¹⁴⁸

Dr. Anne-Simone Parent at the University of Liege in Belgium and other scientists have suggested that exposure to hormone-like chemicals in the environment could partially explain this trend.¹⁴⁹ A tragic accident exposing thousands of Michigan residents in the 1970s to polybrominated biphenyl (PBB), a now banned flame retardant chemical, proves that chemical exposures can cause earlier menstruation and pubic hair development in humans.¹⁵⁰ Girls exposed *in utero* to meat and dairy products contaminated with PBB, which was accidentally added to cattle feed in the place of a nutritional supplement, started menstruating a year earlier than normal. Other chemicals in wide use today may also have this effect.

Early Puberty, Plastic Additives, and Pesticides

Plastic ingredients bisphenol-A, phthalates, flame retardants, and several types of pesticides have been shown to alter the timing of puberty in rodents. Although there is little evidence in humans, girls with early breast development in Puerto Rico have high levels of certain types of phthalates in their blood.

Bisphenol-A from polycarbonate plastics can alter the timing of puberty in experimental animals. When given in an extremely small dose (2-3 ppb) to a pregnant mouse, female offspring tend to grow larger and menstruate earlier.¹⁵¹ A Japanese lab confirmed these findings in 2002.¹⁵² Rats fed doses as low as 20 ppb bisphenol-A during the third week of pregnancy gave birth to daughters that had earlier vaginal opening (a developmental marker of sexual maturity in rodents), lower body weight at this point in maturity, and earlier menstruation than unexposed rats. A lower 2 ppb dose was also associated with significant difference in body weight at this point in maturity.

A variety of other chemicals have also been found to alter the timing of puberty in rodent experiments, although most chemicals in use today have not been tested for this effect (Table 2).

No firm links have been made between chemical exposures and earlier puberty in humans, because of the large number of variables and difficulty of sound experiment design. However, one study of Puerto Rican girls suggests that phthalates may be playing a role in trends toward earlier sexual maturity.

Puerto Rican girls suffer from the highest rates of premature breast development ever recorded. Dr. Ivelisse Colon at the University of Puerto Rico and her colleagues searched for a link between chemical exposures and this phenomenon. They looked for foreign chemicals in blood samples from a set of very young girls with premature breast development, girls with an average age of 31 months. They found high levels of phthalates in these girls compared to normal children.¹⁵⁴ In particular, the phthalate DEHP was seven times higher in girls with premature breast development than normal girls. It is unclear where the exposure was coming from, but potential sources could be food and drink contaminated by contact with plastic wrappings and containers and chewing or mouthing of plastic toys and pacifiers.

The Obesity Epidemic and Plastics

Obesity and Bisphenol-A

More California children are becoming obese, and growing up into obese

Table 2: Toxicants that Affect the Timing of Puberty in Rats and Mice (partial list)¹⁵³

Chemical	Affects Timing of Sexual Development?
Pesticides (Aldrin, Atrazine, Chlordecone, DDT and metabolites, Linuron, Methoxychlor, Vinclozolin)	YES
Phthalates (Dibutyl Phthalate, Diethylhexyl Phthalate)	YES
Bisphenol-A	YES
Dioxin, Polychlorinated Biphenyls, PBDE Flame Retardants	YES

Figure 10: Rising Obesity Trend in Adolescents¹⁵⁷

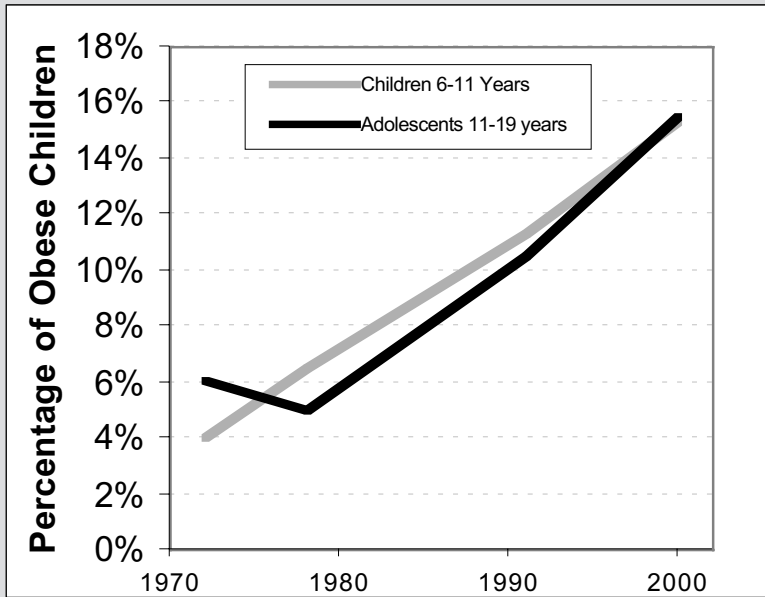
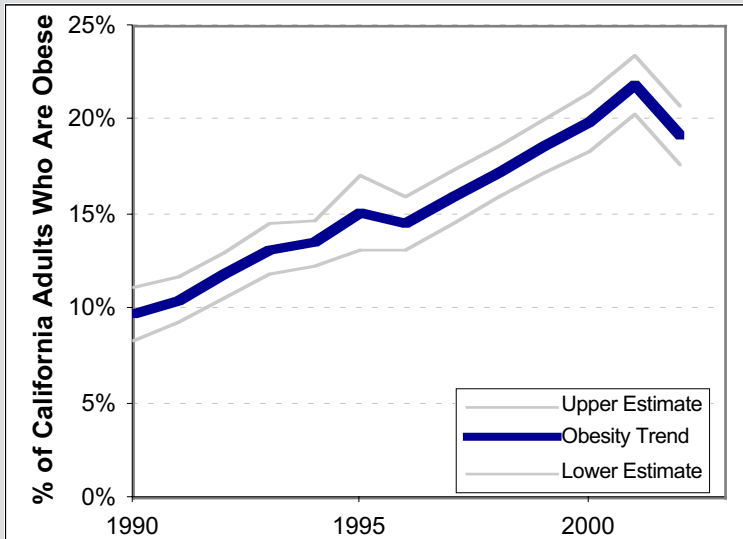


Figure 11: Rising Obesity in California¹⁵⁹



adults. Even children less than four years of age are becoming overweight at higher rates.¹⁵⁵ In the United States overall, the number of overweight children between 2 and 5 years of age grew from 7.2% in the late 1970s to 10.4% in 2000. The overall prevalence of this condition in children and adolescents

quadrupled in the past four decades (Figure 10).¹⁵⁶

As defined by the U.S. Centers for Disease Control, close to 20% of adults in California were obese as of 2002, double the number in 1990 (Figure 11). Diseases associated with obesity are rising as well, especially type II diabetes.¹⁵⁸



In 1995, just over 5% of Californians reported having diabetes. By 2002, over 30% more Californians suffered from the disease.

The increase in obesity rates is happening faster than changes in human genetics can fully account for, while human culture and environment are changing faster now than at any time in history.¹⁶⁰ The causes of obesity are many and intertwined. Dependence on automobiles, sprawling development patterns, increased television watching, decreased exercise, and changes in diet all contribute to the problem of obesity.

But the fact that obesity is increasing in very young people as well as adults points to events in child development that could predispose people towards obesity. Starting in the womb, chemical signals direct the development of fat tissues that take up and store energy in the body.

Scientists are beginning to look beyond the usual suspects of diet and behavior—in February of 2004, the National Institute of Environmental Health Sciences (NIEHS) and the Duke University Integrated Toxicology Program sponsored a symposium titled *Obesity: Developmental Origins and Environmental Influences*. Presenters discussed recent data that support the hypothesis that in utero exposures to environmental chemicals, particularly endocrine disruptors, could play a role in predisposing children toward obesity later in life. (See *Environmental Health*

Perspectives Volume 112, Number 6, May 2004)

In 2002, a team of researchers at the Ehime College of Health Science in Japan first discovered that bisphenol-A can trigger the conversion of fiber cells into fat storage cells.¹⁶¹ In the body, this effect could result in larger numbers of fat cells developing. In addition to converting to fat cells, treated cells increased their fat content by 150% over 11 days. Combined with insulin, bisphenol-A increased the fat content of cells by 1,300%. In other words, this experiment documented that bisphenol-A could trigger and promote the two main processes in developing obesity. In 2004, another Japanese laboratory confirmed these findings, showing that bisphenol-A alone and with insulin increased the uptake of sugar into fat cells.¹⁶²

In 2001, Dr. Beverly Rubin at Tufts University Medical School in Boston and her colleagues showed that bisphenol-A makes rodents grow larger after they are exposed in the womb, confirming similar findings from Frederick vom Saal's laboratory.¹⁶³ When pregnant rats were fed 100 ppb bisphenol-A during pregnancy through lactation, their offspring were notably heavier after birth and into adulthood. The fact that the effect persisted long after exposure suggests that bisphenol-A may increase the number of fat cells in the rats and predispose them towards heavier weight through life.

Although these findings are just the beginning of the work that needs to be done to definitively show whether or not obesity is partially due to exposure to chemicals like bisphenol-A, they do challenge the traditional understanding of obesity. In addition to significant changes in our culture and our built environment, we must consider toxic exposures as we attempt to solve this public health crisis.

Becoming a Parent



By the time a child has become an adult, most growth and development is complete. The child is now fully developed, with bones that have stopped growing. All of the grown-up child's organs are fully functional, including the reproductive system.

Many adults choose to have children of their own, starting the process of child development all over again. However, the influence of chemical exposures, beginning perhaps even before they themselves were born, may extend to their ability to reproduce.

Parents in the modern industrial world may now face more obstacles when attempting to have children. Over the past century, sperm production has declined in the average U.S. or European male. Regional differences in sperm health suggests an environmental influence may be responsible.

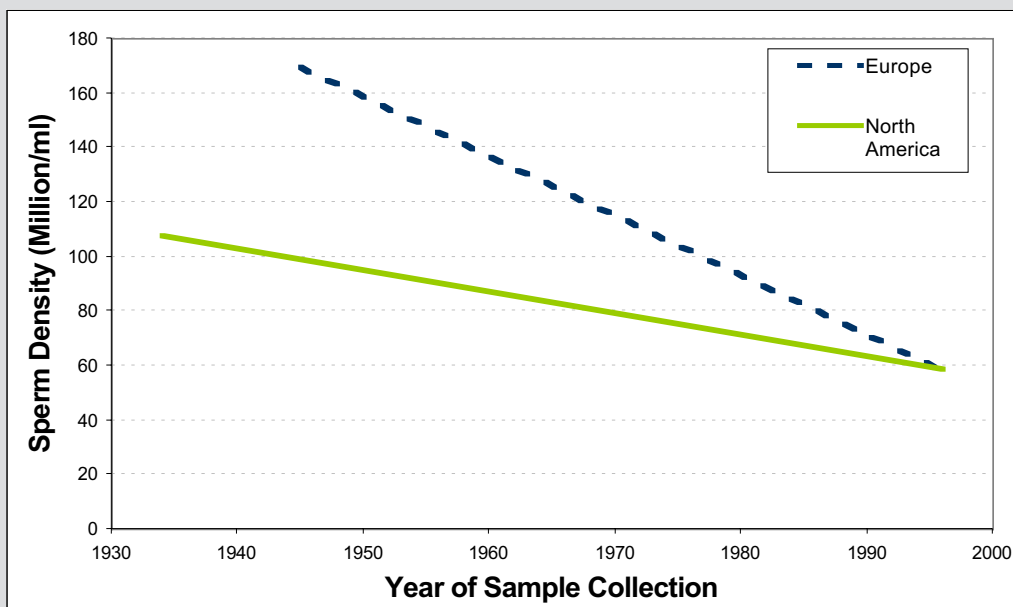
Declines in Male Reproductive Health

Sperm quality has declined in industrialized nations over the latter half of the 20th century. In 2000, Dr. Shanna Swan at the University of Missouri found a statistically significant decline in mean sperm concentration in U.S. and Europe, based on studies published between 1934 and 1996.¹⁶⁴ In the U.S., data showed an average decline in sperm density of about 1% per year during this period (Figure 12).

By 1996, the average sperm density had fallen to 60 million per milliliter (ml). This raises the possibility that impaired sperm quality is leading to infertility problems in parts of the U.S. population. When sperm density falls below 40 million per ml, couples begin to have difficulty in becoming pregnant.¹⁶⁶

One study in Scotland found a trend toward lower sperm quality for people born more recently.¹⁶⁷ This suggests that

Figure 12: Average Decline in Sperm Density Across North America and Europe in the 20th Century¹⁶⁵



deficiencies in sperm production could be caused during the development of the reproductive system, in addition to being influenced by external factors later in life. It also suggests that growing exposure to an environmental contaminant during this period could be responsible for the decline in sperm quality.

Decreased Sperm Quality and Pesticide Exposures

Dr. Swan also found that there are regional differences in sperm quality across the U.S. These regional differences could offer clues as to why sperm quality overall has shown a decline.

Dr. Swan demonstrated in the spring of 2003 that men from Columbia, Missouri have lower sperm counts than men from Minneapolis, New York or Los Angeles.¹⁶⁸ She wondered if this could be due to higher levels of agricultural pesticide use in Missouri, with exposure potentially resulting from drinking contaminated groundwater.

Dr. Swan subsequently showed that in fact, men with high exposure to pesticides, especially alachlor, diazinon, and atrazine, were much more likely to have poor semen quality than men with lower levels of these pesticides in their urine.¹⁶⁹ These pesticides are also heavily used in California's agricultural areas, including the central valley. In 2002, California farmers applied 28,000 pounds of alachlor, 59,000 pounds of atrazine, and 680,000 pounds of diazinon on fields in the state.¹⁷⁰

Decreased Sperm Quality, Plastics, and Personal-Care Products

Scientists have linked both Phthalates and bisphenol-A to sperm defects.

In 2003, Dr. Susan Duty and Dr. Russ

Hauser of the Harvard School of Public health published one of the first studies linking phthalate exposures with harm to human reproductive health.¹⁷¹ They analyzed semen and urine samples from over 150 men in the Boston area. Men who had monobutyl or monobenzyl phthalate in their urine tended to have lower sperm counts, with the highest concentrations leading to the lowest sperm counts. These two chemicals are produced in the body from parent phthalates added to PVC plastics, food wrappings, nail polish, and a variety of other common items. Tests by the U.S. Centers for Disease Control and Prevention show phthalate levels in the average U.S. population in the same range associated with sperm damage in this study (see box on phthalates on page 23.)

In 1998, Dr. Frederick vom Saal at the University of Missouri at Columbia published one of the first studies linking reduced sperm production with bisphenol-A exposure. He and his colleagues fed bisphenol-A to female rats at a dose of 20 nanograms per gram (ng/g) of body weight for six days during pregnancy. They found that males born to exposed rats produced 20% less sperm after they matured than normal males did.¹⁷² They also found that treated offspring had physical changes in hormone-secreting glands not found in untreated mice, even at a dose ten times smaller.

In 2001, Dr. Motoharu Sakaue and his colleagues in Japan added to these findings, discovering that bisphenol-A reduces the number of sperm in rats, even when given doses after puberty.¹⁷³ After feeding small doses to rats (20 ng/g for six days at week 13 of life), they noted a generalized decline in the ability of treated rats to produce sperm. Dr. Sakaue concluded that bisphenol-A retarded the development of germ cells

that normally takes place as the male rat reproductive system matures from week 14 to week 18. In 2003, another Japanese lab demonstrated that fetal

exposure to bisphenol-A led to reduced testes weight at concentrations found in humans.¹⁷⁴

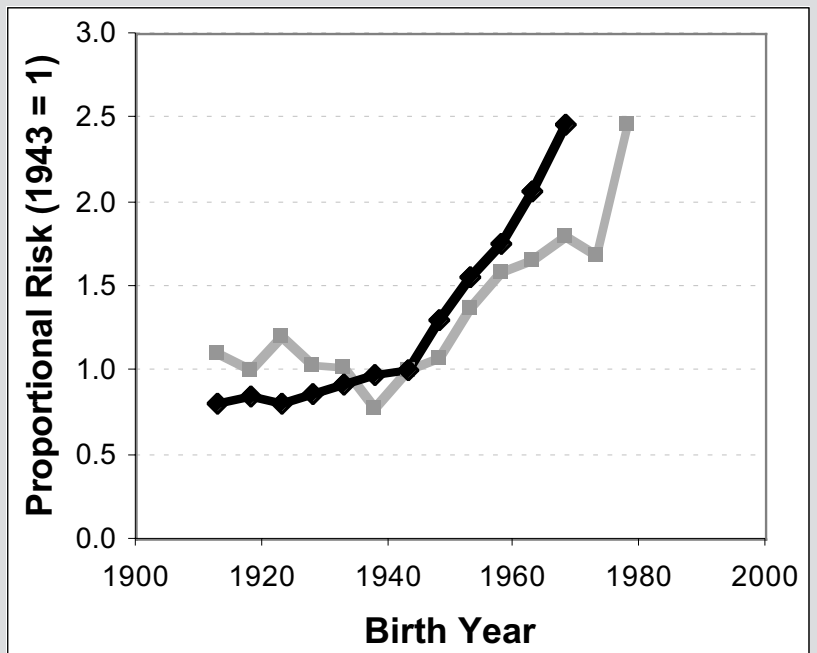
A Connection Between Low Sperm Quality and Increased Testicular Cancer?

Impacts on reproductive health may all be related, from declining sperm counts to increased male birth defects to testicular cancer. The unifying factor lies in the process of sexual development *in utero*. The cells and processes that result in healthy males are all formed during this window of time, when they are most vulnerable to disruption. From 1973 to 1995, incidence of testicular cancer in the U.S. increased 51%.¹⁷⁵ Additionally, the increase is correlated to year of birth – in other words, people who share a common time period of birth share a common risk of disease – suggesting that some early developmental event or prolonged exposure to an environmental contaminant may be the trigger for developing disease (Figure 13).¹⁷⁶

Cancer, Plastics and Pesticides

Testicular cancer could be linked to phthalate exposure from PVC plastics and personal care products, as well as organochlorine chemicals such as pesticides and PCBs. The cause of testicular cancer is unknown. The only known risk factor is cryptorchidism, (undescended testicles).¹⁷⁸ Because phthalates can cause cryptorchidism in rats, it could be involved in creating pre-cancerous cells in the testes as well. Additionally, phthalates could be acting after development to promote the growth of latent cancer cells. Dr. Carl-Göran Ohlson and Dr. Lennart Hardell of the Orebro Medical Centre in Sweden found that men with testicular cancer had a significantly increased likelihood of having worked in the production of PVC plastics.¹⁷⁹ Organochlorine pesticides and PCBs could be linked to testicular cancer as well. A 2003 study by Dr. Hardell and his colleagues showed a strong correlation between maternal levels of PCBs, hexachlorobenzene, and chlordanes and testicular cancer in their sons.¹⁸⁰ For each chemical, mothers with high levels were about four times more likely to have sons affected by testicular cancer.

Figure 13: Rising Risk of Two Types of Testicular Cancer in the U.S. by Time of Birth¹⁷⁷



SUCCESS STORIES: REDUCING EXPOSURE, PROTECTING HEALTH

In the last four decades, regulatory agencies have occasionally taken action to reduce or eliminate exposure to a toxic substance after evidence of harm was discovered. Many of these efforts have successfully reduced human contamination and produced real improvements in human health.

Most recently, the U.S. EPA banned household uses of two pesticides, chlorpyrifos and diazinon. As these products were phased out of residential use in Manhattan, exposures in expecting mothers declined and they gave birth to larger and healthier babies. In the 1970s, the EPA phased out leaded gasoline. As a result, the number of children in the U.S. with lead levels higher than the EPA health target of 10 micrograms per deciliter of blood has fallen by half since the early 1990s. Finally, efforts to reduce the use of toxic flame retardants in Sweden resulted in a reversal of rapidly increasing levels in breast milk. Forthcoming efforts to reduce the use of toxic flame retardants in California should have the same effect, especially when questions about the unregulated “Deca” flame retardant are resolved.

Unfortunately, in two, if not three, of these cases, human exposures were allowed to reach the point where harm to human health was unavoidable before action was taken.

Increased Birth Weight After Ban of Two Pesticides

After the U.S. EPA banned household uses of two pesticides, chlorpyrifos and diazinon, in 2001, women in New York City gave birth to larger babies.

Until 2001, the pesticides chlorpyrifos

and diazinon were commonly used to kill insects in homes, schools, gardens and agricultural crops. The EPA banned chlorpyrifos at the end of 2001 and diazinon at the end of 2002, due to significant evidence of harm to children. Products containing these ingredients began to dwindle on shelves while commercial applicators switched to new pesticides. (The products are still used in agriculture and can still be found on some produce, except for certain crops that kids often eat, such as tomatoes and apples).

In March of 2004, Dr. Frederica Perera, Dr. Robin Whyatt, and their colleagues at Columbia University studied the connection between exposure to these two pesticides and birth weight.

The researchers reported that pregnant women in upper Manhattan who had higher exposure to two common pesticides had smaller babies than women with less exposure.¹⁸¹ Women with the highest pesticide exposures had babies that were more than 0.4 lb lighter and 0.33 inch shorter than babies from women with the least exposure. These findings suggested harm to the health of exposed children not just in the womb, but later in life as well. Interviewed in the *New York Times*, Dr. Perera noted that “birth weight is a very good predictor of later health and development of children, including physical development, mental development, and school performance.”¹⁸²

But the most striking finding of the work was the immediate benefit of the phase-out of chlorpyrifos and diazinon from household uses. The scientists noted that after the ban, women had much less chlorpyrifos in their blood. Before the ban, one third of children fell

into the high exposure group. From 2001 on, just one in 77 fell into that group. Remarkably, as pesticide levels fell, birth weight and body length rose.

The scientists were astounded that such an effect was visible so soon, since the phase-out of the pesticide products was not immediate. Surveyors still found remaining stocks of products containing chlorpyrifos and diazinon on the shelves of some stores in Manhattan as late as mid-2003.¹⁸³ Accordingly, exposure levels should continue to decline as the products become more scarce. In the *New York Times*, Dr. Whyatt noted that “the exposure levels are still going down... We may continue to see added benefits of this ban over time.”¹⁸⁴

Declining Lead Levels in Children after the Phase-Out of Leaded Gasoline

The story of lead in the United States is one of success, but also one of profound failure.

In the 1920s, oil companies decided to put tetraethyl lead into gasoline to keep car engines from “knocking.” Emitted from the tailpipes of millions of cars, lead contaminated the blood of millions of mothers and children to the point where developmental damage, including brain damage, were unavoidable. Industry continued to promote the use of lead for decades, opposing efforts by the public health community and regulatory agency staff to ban lead in gasoline. Finally in the 1970s, advocates were successful in overriding industry concerns and winning a phase-out. The U.S. EPA began with mandated reductions of lead in gasoline and enforced a total ban in 1986. Other EPA actions eliminated lead from house paint. As a result, average blood lead levels for both

children and adults have dropped more than 80 percent since the late 1970s.¹⁸⁵

In 1997, then EPA administrator Carol Browner said, “The ongoing reduction in blood lead levels is a great American success story of environmental and public health protection. Years of aggressive action against lead exposure, particularly EPA’s banning of lead in gasoline two decades ago, is yielding a brighter future for our children.”¹⁸⁶

However, the efforts of the EPA and countless public health agencies to reduce lead exposure would not have been necessary had the oil companies chosen ethanol, a relatively safer compound, to add to their fuel. Oil companies forced lead on the American public partially because of fears over competition with ethanol as an alternative fuel. They vigorously defended their product for decades against mounting evidence of harm to children’s health. Lead was a known poison before it was introduced: lead manufacturers were aware of health risks and the U.S. public health community was clearly communicating such risks over 80 years ago. The introduction and widespread use of lead, plus delay in eliminating it, unnecessarily exposed roughly 68 million children to toxic levels of lead from gasoline from 1927 to 1987.¹⁸⁷

Although exposure is much lower today than in 1970, toxic lead levels still persist in close to half a million children—far too many to claim victory over this pervasive health threat. Efforts must be aimed at eliminating the threat to children in low-income housing developments and older housing, where lead exposure is still high. Hopefully, individuals making decisions about the use of potentially hazardous chemicals in the future can learn from the story of lead in the U.S.

Declining Breast Milk Contamination in Swedish Mothers Following Decreased Use of Flame Retardance

Sweden and Germany were the first countries in the world to scale back the use of the toxic flame retardants known as polybrominated diphenyl ethers, or PBDEs.

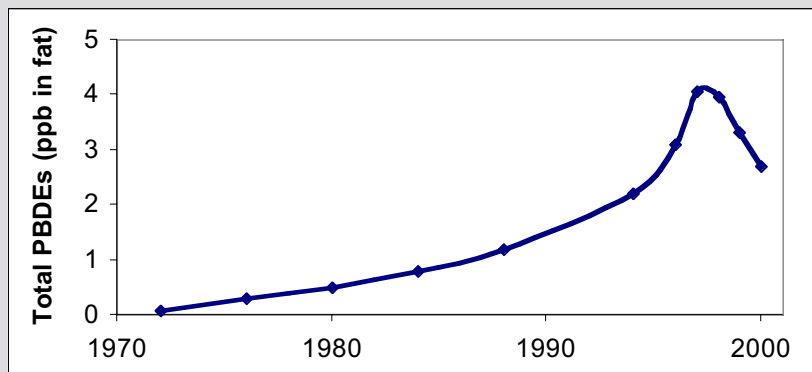
Swedish scientists were also the first to detect the exponential increase in contamination soon found to be sweeping the world. Dr. Ake Bergman and his colleagues at the University of Stockholm took advantage of Sweden's breast milk monitoring program, which enabled them to look back in time and document rising levels of toxic flame retardants in the breast milk of Swedish mothers¹⁸⁸ The group discovered that samples of milk from Swedish mothers in 1972 had PBDE levels of about 0.072 parts per billion in fat. In 1997, levels had increased about sixty-fold to 4 ppb in fat, doubling every 5 years.

This finding caused a stir in the scientific community, especially since the flame retardants were not readily leaving the body and showed similar structural features to polychlorinated biphenyls (PCBs), a well-known public health tragedy. Public concern about the potential health con-

sequences of this trend led to sharply decreased usage of products treated with PBDEs in European countries. Germany had banned PBDEs in 1989 because of concern that they could form dioxins when burned. Sweden had scaled back the use of one type of flame retardant in the mid 1990s. In addition, from 1997 to 1998, the EU cut down on PBDE use by two thirds, or 180,000 pounds. Toward the late 1990s, levels of contamination in the breast milk of Swedish mothers began a consistent decline (Figure 14). Although it is unclear whether a particular action triggered the decrease, it occurred following a reduction in flame retardant usage.

In 2003, California passed a ban of two types of PBDEs mainly used in furniture foam. One manufacturer of these chemicals made an agreement with the EPA shortly thereafter to phase out national production of the two chemicals. As these actions take effect, California should see a similar decline in human contamination levels. Linger questions over a third type of flame retardant (known as "Deca"), used in high volumes and shown to degrade in the environment to form the banned substances, could delay or reduce the response.¹⁹⁰ Full phase-out of all three chemicals would likely result in the swiftest reduction in exposure.

Figure 14: Recently Declining Toxic Flame Retardant Levels in Breast Milk from Swedish Mothers.¹⁸⁹



The amount of synthetic chemicals manufactured in the United States has increased dramatically over the past half-century. In the U.S., over 75,000 industrial chemicals are on the market. Unfortunately, regulators have very little information to determine the danger posed by these chemicals. Tens of thousands of industrial chemicals on the market have not been tested for developmental health effects at low doses. No public health information exists for close to half of the high production-volume chemicals.¹⁹¹ The newly-discovered connections between chemicals and disease outlined here just begin to scratch the surface of the potential impact of chemicals on public health.

Scientists at major universities and government agencies valiantly try to fill the void of information. Over the past several decades, they have accumulated significant knowledge of the potential for toxic chemicals to harm human health. Recently, scientists have paid particular attention to the ability of chemicals to interfere with human growth and development. From PCBs to pesticides, the work of these scientists has yielded several general lessons:¹⁹²

- 1) Once a developmental toxicant is identified, further study almost always identifies more subtle health effects at lower levels of exposure;
- 2) The idea that the “dose makes the poison,” or that certain chemicals dangerous in large amounts are safe in small amounts, is overly simplistic. Sometimes, small doses are more potent than large ones, and exposures can lead to profound effects during some developmental periods, but no effect at other times;



Photo: Jeff Osborn

- 3) Mixtures of chemicals, which people are most likely to encounter in the real world, can have cumulative effects or effects that individual chemicals don't have on their own; and
- 4) Ending or preventing exposure is the quickest way to reduce harm.

Unfortunately, current chemical regulatory policy in California and the U.S. as a whole does not reflect these lessons. When the federal government created the Toxic Substances Control Act in response to the PCB crisis 30 years ago, the chemical industry succeeded in making sure there were no new testing requirements placed on the tens of thousands of chemicals already in use. For new chemicals, the law required only a rapid pre-market screening based on existing information, and did not require any additional toxicity testing for health effects. This approach runs directly counter to other regulatory frameworks, such as the way pharmaceuticals



Photo: Nik Frey

are evaluated by the Food and Drug Administration.

As a result, U.S. chemical regulation stumbles blindly, using an “innocent until proven guilty” model, allowing widespread exposure to toxic chemicals before they have been tested for safety, and often before methods have even been developed to test for the chemical’s presence in our bodies, air, and water. The burden of proving harm remains on those who suffer the harm—the public. Moreover, where significant evidence of harm to public health already exists, inadequate resources and legal authority often prevent regulatory agencies from taking protective action.

This state of ignorance and inaction is unacceptable in a society suffering from the burden of so many public health crises.

Policymakers in the European Union have designed a draft policy known as REACH, or Registration, Evaluation, and Authorization of Chemicals. This policy would require safety testing for thousands of chemicals that are already on the market. Although lobbying by the U.S. State Department on behalf of the U.S. chemical industry recently suc-

ceeded in weakening the overall proposal, the idea remains sound.¹⁹³ The policy would dramatically increase the ability of regulators to identify and eliminate chemical threats to public health, and encourage manufacturers to replace dangerous products with safer alternatives.

Similar reforms in California and at the federal level would give regulators more tools to protect children from chemical threats to their health. Chemical policy reform would enable regulators to require the full spectrum of information necessary to ensure that consumer products are safe. Accompanied by efforts to eliminate the worst toxic chemicals and to develop safer alternatives, chemical policy reform can lead to a safer and healthier world for our children.

In order to protect children from toxic exposures, we must take firm steps to remedy the ignorance about health effects of widely-used chemicals and empower regulatory agencies to ensure that consumer products do not have dangerous chemicals in them. These steps include:

- 1) **Phasing out potentially harmful chemicals from uses leading to human exposure.** Although complete toxicity information is not available for most chemicals, evidence of potential harm exists for thousands of chemicals. These chemicals should not be allowed for uses that lead to human exposure. For example, the recent U.S. EPA action phasing out household uses of the pesticides chlorpyrifos and diazinon has been successful at reducing human exposure and improving infant health. When strong potential for harm exists, chemicals should be completely removed from the market and manu-

facturers should seek and switch to alternatives. Chemicals known to persist in the environment, accumulate in the food chain, or harm human health and development fall into this category. Additionally, toxicity exposure standards for chemicals like perchlorate that have already contaminated the environment should be set at levels that will definitively protect developing fetuses from harm, and cleanup to those levels should be required of those who caused the contamination.

- 2) **Requiring chemical manufacturers to develop analytical techniques to detect their chemicals in environmental and tissue samples, and supply those techniques to the state.** U.S. and California chemicals policy should ensure that manufacturers and industrial users provide regulatory agencies and the public with adequate information about their products so that agencies can act to protect public health from potentially dangerous substances before damage is done. Currently, manufacturers can put chemicals on the market before detection methods have even been developed to test for the presence of the chemical in air, water, soil, or our bodies. Scientists then guess at what chemicals are present in our environment and bodies and then develop these analytical methods—an expensive and time consuming process ultimately paid for by taxpayers. The costs of developing analytical methods as well as methods to test for a chemical’s safety should fall to the manufacturers who stand to profit from the product.
- 3) **Requiring chemical manufacturers to supply the state with detailed toxicity data from independent laborato-**

ries for every chemical on the market, including low-dose effects on development and reproduction. In the case of toxic flame retardants, harm may have been more avoidable had regulators known the potential hazards associated with the chemicals before exposure became widespread. Manufacturers can contribute to preventing public health damage in the future by testing their products for toxicity, and substituting dangerous substances with safer ones. California and federal chemicals policies should require testing information for every chemical on the market, beginning with high production-volume chemicals and ingredients in consumer products.

- 4) **Encouraging the federal government to stop lobbying against the new European Union chemicals policy on behalf of U.S. industry.** The European Union recently developed a chemicals policy with thorough testing requirements that will vastly increase the amount of information available to determine the safety of chemical products (REACH). The goal of the policy is not zero risk, but to restructure regulations to determine how much risk is avoidable from the start. The federal government has been lobbying against the new EU chemicals policy, working behind the scenes with the U.S. chemical industry.¹⁹⁴ The federal government should acknowledge significant concerns about the environment and public health and take a more preventive approach to public health. California leaders should encourage the White House to change its stance and advocate in favor of policies that will protect public health.

APPENDICES

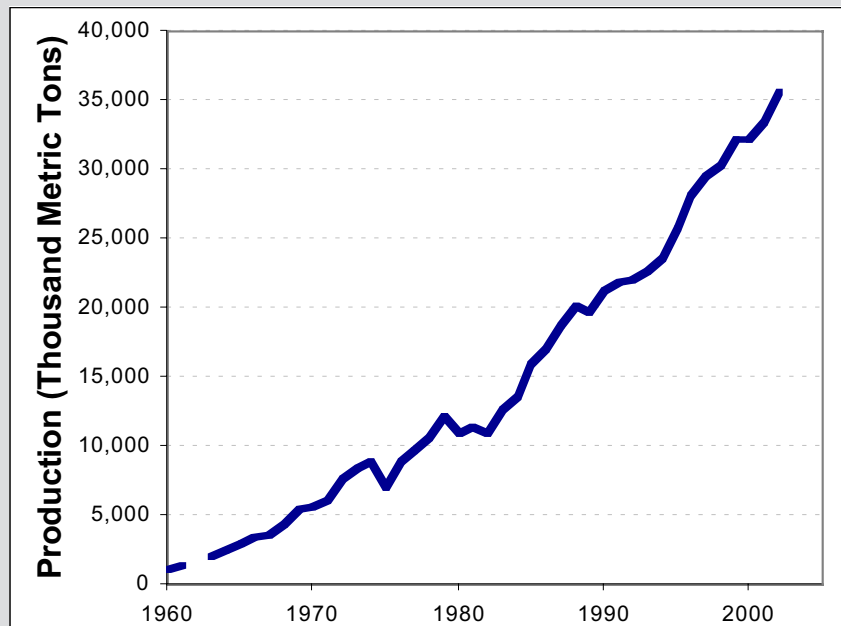
A. Exposure to Synthetic Chemicals Has Skyrocketed in the Last Half-Century

In the last 50 years, people have been exposed to rapidly growing amounts of man-made chemicals. Since World War II, annual chemical production in the United States has grown more than 15-fold. Today, U.S. companies are the world's largest chemical producers, generating 1.2 billion tons of chemicals each year and earning after-tax profits of \$44.6 billion on \$439 billion worth of sales.¹⁹⁵

Over the last half-century, the chemical industry introduced thousands of new products – chemicals that did not exist anywhere on the Earth before the industrial revolution. From plastics to pesticides, the modern world contains potentially hazardous substances in far greater amounts than at any time in human history.

Today, plastics can be found in every home and pesticides in every supermarket. After 1960, growth in plastics production grew exponentially, with over 35 million metric tons produced each year by 2002 (Figure 15). Since 1960, U.S. industry has produced over 622 million metric tons of plastics like polystyrene and polyvinyl chloride, over two metric tons of plastic per person in the U.S. Pesticide synthesis and use grew dramatically as well. Since the mid-1940s, pesticide production increased by over 40 times, from 60,000 tons in 1945 to roughly 2.5 million tons in 1995.¹⁹⁶ While these chemicals have had many undeniable benefits for society, from improved medical care to increases in economic productivity made possible by electronics, the benefits may have come with unintended side effects.

Figure 15: Growth in U.S. Plastics Production Since 1960¹⁹⁷



B. Small Exposures and Large Impacts: The Theory of Endocrine Disruption

In the past two decades, scientists have built a theory explaining how some synthetic chemicals can interfere with communication between cells in the body, sometimes leading to permanent damage during irreversible steps in growth and development. Scientists dub this process “endocrine disruption,” and new evidence supporting the idea mounts daily.

The human body depends on accurate and timely exchange of information in order to function correctly. Chemicals produced by the body carry information from one cell to another. For example, chemicals called hormones direct growth and development, regulate mood and behavior, adjust the flow of energy and nutrients, and time the menstrual cycle, among many other important functions.

The levels of hormones are finely controlled in the body. During development, changes in the levels of signaling molecules trigger important steps, from the folding of cells into tissue that will become the brain to the organization of cells into what will become the reproductive system. Hormones transmit signals at very low concentrations, equivalent to grains of salt in an Olympic-size swimming pool.

Hormones transmit messages by physical contact. Hormones are released from one cell and bind to receptors inside or on the surface of other cells like a key fitting into a lock, triggering chemical reactions that lead to physical responses. Rising hormone levels function like a finger flipping a switch. For example, during the development of a male, the presence of testosterone tells the brain and body to develop male characteristics.

Some synthetic chemicals can act as signals within the body, in much the same way as hormones. In some cases, they have a similar structure to a hormone and can bind to a receptor – in other words, they fit in the lock. In other cases, they modulate hormone levels by interfering with how the hormone is made or by blocking the signal at a different point. These types of chemicals are known as endocrine disruptors.

The effects of endocrine disruptors are difficult to detect because signaling systems are complex. Exposure to an endocrine disruptor can cause profound changes during specific windows of time, but have different or no effects at other times. Chronic exposures to low levels can have different effects than short exposures to high levels. As a result, scientists face enormous challenges trying to untangle all of the factors that can harm the normal course of development.

Low Doses Matter

Any chemical that can interfere with signal transmission can cause harm at potentially tiny doses. Signals begin with tiny changes in the concentrations of hormones. Accordingly, exposure to low levels of contaminants can have significant effects, particularly during critical developmental windows.

In a recent paper, Dr. Frederick vom Saal at the University of Missouri demonstrated how chemicals can affect signaling at very low doses, while much higher doses are required to have toxic effects.¹⁹⁸ Dr. vom Saal and his colleagues measured the ability of a hormone, estradiol, to make cancer cells grow in a dish. Doses as low as 10 parts per quadrillion begin to increase cell growth, and reach their maximum effect at around 1 part per trillion (Figure 16). These levels are roughly parallel to

a few hundred postage stamps on a letter the size of California and Oregon. Most of the normal functions inside the human body happen with tiny signals in this concentration range. In contrast, hormone doses over a million times higher are required to kill the cell.

If an endocrine-disrupting chemical is present at physiologically relevant levels, it will prevent the accurate transmission of the signal. For example, when Dr. vom Saal added DES (a synthetic estrogen hormone that caused reproductive defects in daughters of mothers who were treated with it while pregnant) to the cancer cells in the experiment above, adding the hormone

estradiol produced no effect until it reached doses toxic to the cell (Figure 17). In other words, the signal pathway was already activated when the hormone was added, and the cells were not able to respond normally.

Most toxicity tests of chemicals are not designed to detect low-dose effects. Many tests do not test a wide enough range of doses, and many do not control adequately for the possibility that contaminants are present in all samples. As a result, many tests are more likely to detect toxic effects and not signaling effects, and therefore are predisposed to overestimate exposure levels that are safe.

Figure 16: The Response of Cancer Cells to the Signaling Hormone Estradiol¹⁹⁹

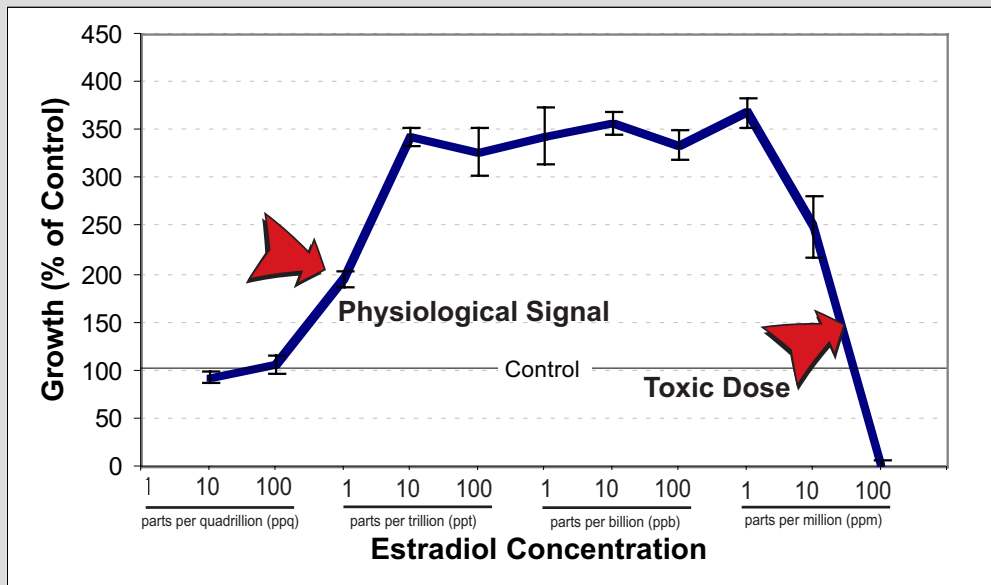
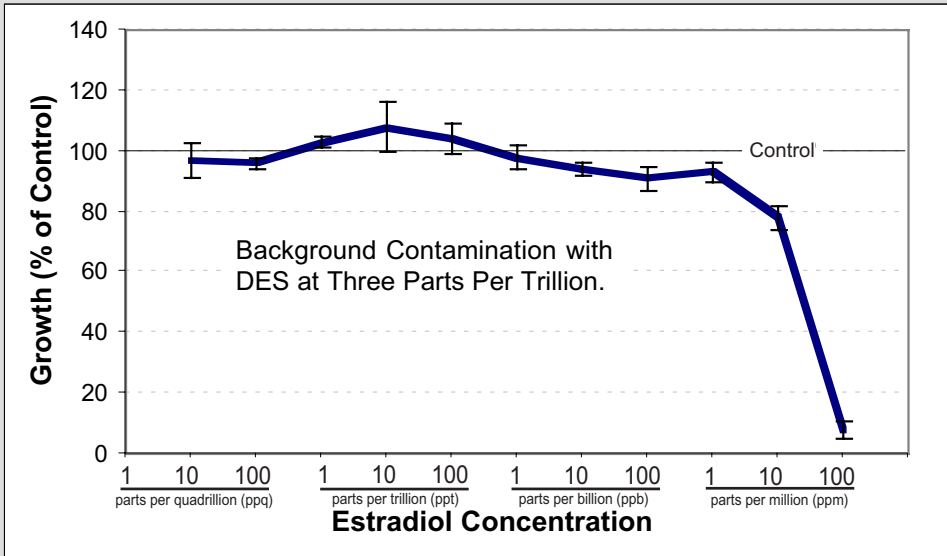


Figure 17: DES Disrupts the Function of Estradiol²⁰⁰



NOTES

1. U.S. Environmental Protection Agency, *Chemical Hazard Data Availability Study*, 1998. Major chemicals are defined as those produced or imported in amounts exceeding one million tons per year.
2. Commission of the European Communities, *White Paper: Strategy for a Future Chemicals Policy*, COM(2001) 88 final, 27 February 2001; Carcinogenic, mutagenic, and reprotoxic chemicals, plus chemicals defined as category 1 or 2 in EU Directive 67/548, plus persistent organic pollutants.
3. Samuel Epstein and Quentin Young, Cancer Prevention Coalition, "Escalating Incidence of Childhood Cancer Ignored," (Press Release), 9 May 2002; Tracey Woodruff et al, U.S. Environmental Protection Agency, "Trends in Environmentally Related Childhood Illnesses," *Pediatrics* 113: 1133-1140, April 2004.
4. Figure adapted from: U.S. Environmental Protection Agency, Office of Research and Development, *Perchlorate Environmental Contamination: Toxicological Review and Risk Characterization (External Review Draft)*, Washington, D.C., NCEA-1-0503, 2002.
5. AM Branum and KC Schoendorf, "Changing Patterns of Low Birthweight and Preterm Birth in the United States, 1981-98," *Paediatric and Perinatal Epidemiology*, 16: 8-15, January 2002.
6. U.S. Centers for Disease Control and Prevention, "Trends in Infant Mortality Attributable to Birth Defects—United States, 1980-1995," *Morbidity and Mortality Weekly Report* 47: 773-778, 25 September 1998
7. Leonard J. Paulozzi, National Center for Environmental Health, Centers for Disease Control and Prevention, "International Trends in Rates of Hypospadias and Cryptorchidism," *Environmental Health Perspectives* 107: 297-302, March 1999.
8. California Department of Developmental Services, *Autistic Spectrum Disorders: Changes in the California Caseload*, April 2003; California Department of Developmental Services, *Quarterly Client Development Evaluation Reports*, March – December 2003.
9. California Department of Education, Special Education Division, *California's Special Education Statewide Enrollment Data, Special Education Statewide Enrollment by Disability Category* on December 1, 1985-1999, Downloaded from www.cde.ca.gov on 16 April 2004, document updated 4 January 2001.
10. Tracey Woodruff et al, U.S. Environmental Protection Agency, "Trends in Environmentally Related Childhood Illnesses," *Pediatrics* 113: 1133-1140, April 2004.
11. ME Herman-Giddens et al, "Secondary Sexual Characteristics and Menses in Young Girls Seen in Office Practice: A Study From the Pediatric Research in Office Settings Network," *Pediatrics* 99(4): 505-512, 1997.
12. CL Ogden et al, "Prevalence and Trends in Overweight Among US Children and Adolescents, 1999-2000," *Journal of the American Medical Association* 288: 1728-1732, 2002.
13. Shanna H. Swan, EP Elkin, and L Fenster, "The Question of Declining Sperm Density Revisited: An Analysis of 101 Studies Published 1934-1996," *Environmental Health Perspectives* 108: 961-966, 2000; Shanna H Swan et al, "Geographic Differences in Semen Quality of Fertile U.S. Males," *Environmental Health Perspectives* 111: 414-420, April 2003.
14. JM McKiernan et al, "Rising Risk of Developing Testicular Cancer by Birth Cohort in the United States from 1973 to 1995," *Journal of Urology* 162, 361-363, 1999.
15. The Endometriosis Association, *What is Endometriosis (Factsheet)*, viewed at www.endometriosisassn.org, 2002; John Peterson Myers, *Our Stolen Future: New Science: Reproduction: Endometriosis*, viewed at www.ourstolenfuture.org on 29 April 2004.
16. GE Dinse et al, "Unexplained Increases in Cancer Incidence in the United States from 1975 to 1994," *Annual Review of Public Health* 20: 173-209, 1999; Limin Clegg et al, "Impact of Reporting Delay and Reporting Error on Cancer Incidence Rates and Trends," *Journal of the National Cancer Institute* 94: 1537-1545, 2002.
17. W. Foster, S. Chan, L. Platt, and C. Hughes, "Detection of Endocrine-Disrupting Chemicals in Samples of Second Trimester Human Amniotic Fluid," *The Journal of Clinical Endocrinology and Metabolism* 85, 1-1, 2000.
18. G Schonfelder et al, "Parent Bisphenol-A Accumulation in the Human Maternal-Fetal-Placental Unit," *Environmental Health Perspectives* 110: A703-A707, 2002; Ikezuki Y et al, "Determination of Bisphenol A Concentrations in Human Biological Fluids Reveals Significant Early Prenatal Exposure," *Human Reproduction* 17:2839-41, November 2002.
19. PA Hunt et al, "Bisphenol-A Exposure Causes Meiotic Aneuploidy in the Female Mouse," *Current Biology* 13: 546-553, 2003.
20. K Howdeshell et al, "Exposure to Bisphenol-A Advances Puberty," *Nature* 401, 763-764, 1999.
21. I Quesada et al, "Low Doses of the Endocrine Disruptor Bisphenol-A and the Native Hormone 17 β -Estradiol Rapidly Activate Transcription Factor CREB," *Federation of American Societies for Experimental Biology (FASEB) Journal* 16: 1671-1673, 2002.

22. M Ishido et al, "Bisphenol A Causes Hyperactivity in the Rat Concomitantly with Impairment of Tyrosine Hydroxylase Immunoreactivity," *Journal of Neuroscience Research* 76: 423-433, PubMed ID 15079872, 1 May 2004.
23. U.S. Centers for Disease Control and Prevention, *95th Percentiles for Blood and Urine Levels of Chemicals Measured in CDC's Second National Report on Human Exposure to Environmental Chemicals*, 27 January 2004.
24. SM Duty et al, "The Relationship Between Environmental Exposures to Phthalates and DNA Damage in Human Sperm Using the Neutral Comet Assay," *Environmental Health Perspectives* 111: 1164-1169, 2003.
25. See Note 23.
26. SM Duty et al, "Phthalate Exposure and Human Semen Parameters," *Epidemiology* 14: 269-277, 2003.
27. JS Fisher et al, "Human 'Testicular Dysgenesis Syndrome': A Possible Model Using *in-utero* Exposure of the Rat to Dibutyl Phthalate," *Human Reproduction* 18: 1383-1394, 2003.
28. See Note 23.
29. I. Colón, D Caro, CJ Bourdony and O Rosario, "Identification of Phthalate Esters in the Serum of Young Puerto Rican Girls with Premature Breast Development," *Environmental Health Perspectives* 108: 895-900, 2000.
30. LE Gray et al, "Perinatal Exposure to the Phthalates DEHP, BBP, and DINP, but not DEP, DMP, or DOTP, Alters Sexual Differentiation of the Male Rat," *Toxicological Science* 58: 350-365, December 2000.
31. A. Schecter et al, "Congener Specific Measurement of Polybrominated Diphenyl Ethers in 47 Individual Milk Samples From Nursing Mothers in the U.S.A.," *Organohalogen Compounds* 61, 13-16, 2003; Sonia Lunder and Renee Sharp, Environmental Working Group, *Mothers' Milk: Record Levels of Toxic Fire Retardants Found in American Mothers' Breast Milk*, September 2003.
32. A study found that a dose of 0.8 milligrams of PBDEs per kilogram of weight given to infant mice on their tenth day of life produced permanent developmental damage, including abnormal behavior and impaired learning skills. An average mouse is 10% to 20% fat. If the mouse is assumed to absorb 100% of the administered dose, and contains 15% body fat, then levels of PBDEs will be 5,300 parts per billion (ppb) in the fat; P Eriksson et al, "Brominated Flame Retardants: A Novel Class of Developmental Neurotoxicants in Our Environment?" *Environmental Health Perspectives* 109, 903-8, 2001; P Eriksson et al, "A Brominated Flame Retardant, 2,2',4,4',5-Pentabromodiphenyl Ether: Uptake, Retention, and Induction of Neurobehavioral Alterations in Mice During a Critical Phase of Neonatal Brain Development," *Toxicological Science* 67, 98-103, 2002; H Viberg et al, "Neonatal Exposure to the Brominated Flame Retardant 2,2',4,4',5-Pentabromodiphenyl Ether Causes Altered Susceptibility in the Cholinergic Transmitter System in the Adult Mouse," *Toxicological Science* 67, 104-7, 2002; H. Viberg, A. Fredriksson, and E. Jakobsson, "Developmental Neurotoxic Effects of 2,2,4,4,5-Pentabromodiphenyl Ether in the Neonatal Mouse," *Toxicologist* 54, 1360, 2000; H. Viberg, A. Fredriksson, E. Jakobsson, U. Ohrn, and P. Eriksson, "Brominated Flame Retardant: Uptake, Retention, and Developmental Neurotoxic Effects of Decabromodiphenyl Ether in the Neonatal Mouse," *Toxicologist* 61, 1034, 2001; I. Branchi et al, "Effects of Perinatal Exposure to a Polybrominated Diphenyl Ether (PBDE 99) on Mouse Neurobehavioural Development," *Neurotoxicology* 23, 375-84, 2002.
33. Walter Lichtensteiger, et al., "Effect of Polybrominated Diphenylether and PCB on the Development of the Brain-Gonadal Axis and Gene Expression in Rats," *Organohalogen Compounds*, 61(84-87), 2003; Sergio Kuriyama, Ibrahim Chahoud, "Maternal Exposure to Low Dose 2,2', 4,4', 5-Pentabromo Diphenyl Ether (PBDE 99) Impairs Male Reproductive Performance in Adult Rat Offspring," *Organohalogen Compounds* 61(92-95), 2003; Chris Talsness, et al., "Ultrastructural Changes in the Ovaries of Adult Offspring Following a Single Maternal Exposure to Low Dose 2,2', 4,4', 5-Pentabromodiphenyl Ether," *Organohalogen Compounds*, 61(88-91), 2003.
34. Toxics Use Reduction Institute, *Toxics Use Reduction Act Reports: Report for Massachusetts as a Whole, 2001*, downloaded from turadata.turi.org on 9 April 2004.
35. For example, see diethylhexyl-phthalate or butylbenzyl-phthalate: Toxics Use Reduction Institute, *Toxics Use Reduction Act Reports: Report for Massachusetts as a Whole, 2001*, downloaded from turadata.turi.org on 9 April 2004.
36. Ruth Rudel et al, Silent Spring Institute and Harvard School of Public Health, "Phthalates, Alkylphenols, Pesticides, Polybrominated Diphenyl Ethers, and Other Endocrine-Disrupting Compounds in Indoor Air and Dust," *Environmental Science and Technology* 37: 4543-4553, 15 October 2003.
37. U.S. Centers for Disease Control and Prevention, *Second National Study on Human Exposure to Environmental Chemicals*, 31 January 2003; Environmental Working Group, *Body Burden: The Pollution in People*, January 2003.
38. Ted Schettler, "Toxic Threats to Neurologic Development of Children," *Environmental Health Perspectives* 109 Supplement 6: 813-816, 2001; Ted Schettler et al., Physicians for Social

Responsibility and the Clean Water Fund, *In Harm's Way: Toxic Threats to Child Development*, May 2000.

39. National Research Council Commission on Life Sciences, *Scientific Frontiers in Developmental Toxicology and Risk Assessment*, 1, 2000.

40. Marla Cone, "Study Links Plastics to Embryo Ills," *The Los Angeles Times*, 1 April 2003.

41. See Note 19.

42. Figure reprinted from Note 19.

43. See Note 18.

44. EC Dodds and W Lawson, "Molecular Structure in Relation to Estrogenic Activity: Compounds Without a Phenanthrene Nucleus," *Proceedings of the Royal Society of London B* 125: 222-232, 1938.

45. American Plastics Council, *Questions and Answers About BPA*, downloaded from www.bisphenol-a.org on 14 April 2004.

46. Elvira Greiner, Thomas Kaelin and Goro Toki, SRI Consulting, *Chemical Economics Handbook Report: Bisphenol A*, February 2001.

47. Ibid.

48. William J. Storck et al, "Facts and Figures for the Chemical Industry," *Chemical and Engineering News*, 24 June 1996.

49. U.S. Centers for Disease Control and Prevention, "Surveillance Summaries Temporal Trends in the Incidence of Birth Defects—United States," *Morbidity and Mortality Weekly Report* 46: 1171-1176, 12 December 1997.

50. See Note 6.

51. Ibid.

52. SM Duty et al, "The Relationship Between Environmental Exposures to Phthalates and DNA Damage in Human Sperm Using the Neutral Comet Assay," *Environmental Health Perspectives* 111: 1164-1169, 2003.

53. Ibid.

54. As documented in: Kristin S. Schafer, Margaret Reeves, Skip Spitzer, and Susan E. Kegley, Pesticide Action Network North America, *Chemical Trespass: Pesticides in Our Bodies and Corporate Accountability*, May 2004.

55. EM Bell, IHertz-Picciotto, and JJ Beaumont, "A Case-Control Study of Pesticides and Fetal Death Due to Congenital Anomalies," *Epidemiology* 12: 148-156, 2001.

56. MF Cavieres, J Jaeger, and W Porter, "Developmental Toxicity of a Commercial Herbicide Mixture in Mice: I. Effects on Embryo Implantation and Litter Size," *Environmental Health Perspectives* 110: 1081-1085, 2002.

57. DM Schreinemachers, "Birth Malformations and Other Adverse Perinatal Outcomes in Four

U.S. Wheat-Producing States," *Environmental Health Perspectives* 111: 1259-1264, 2003.

58. National Library of Medicine, U.S. National Institutes of Health, *Household Products Database*, accessed at hpd.nlm.nih.gov on 12 May 2004.

59. Orme and S. Kegley, Pesticide Action Network North America, *California Pesticide Use Database*, (A Cleaned Version of California Department of Pesticide Regulation Pesticide Use Reporting Data), viewed at www.pesticideinfo.org on 1 April 2004.

60. Cande Ananth et al, "Rates of Preterm Delivery among Black Women and White Women in the United States over Two Decades: An Age-Period-Cohort Analysis," *American Journal of Epidemiology* 154: 657-665, 2001.

61. See Note 5.

62. Kendall Morgan, Duke University Medical Center, *Pre-Term Labor Drug Sensitizes Brain to Pesticide Injury*, (Press Release) 30 March 2004.

63. MP Longnecker et al, "Association Between Maternal Serum Concentration of the DDT Metabolite DDE and Preterm and Small-for-Gestational-Age Babies at Birth," *Lancet* 358: 110-114, July 2001.

64. G Latini et al, "In-Utero Exposure to Di-(2-ethylhexyl)-phthalate and Human Pregnancy Duration," *Environmental Health Perspectives* 111:1783-1785, 2003.

65. AT Bhutta et al, "Cognitive and Behavioral Outcomes of School-Aged Children Who Were Born Preterm: a Meta-Analysis," *Journal of the American Medical Association* 288: 728-737, 2002.

66. Kendall Morgan, Duke University Medical Center, *Pre-Term Labor Drug Sensitizes Brain to Pesticide Injury*, (Press Release) 30 March 2004.

67. MC Rhodes et al, "Terbutaline is a Developmental Neurotoxicant: Effects on Neuroproteins and Morphology in Cerebellum, Hippocampus, and Somatosensory Cortex," *Journal of Pharmacology and Experimental Therapeutics* 308: 529-537, February 2004.

68. Phthalate Esters Panel of the American Chemistry Council, *What are Phthalates?*, downloaded from www.phthalates.org on 14 April 2004; Catherine Dorey, Greenpeace, *Chemical Legacy: Contamination of the Child*, October 2003.

69. Robert E. Menzer, "Water and Soil Pollutants," in Mary O. Andur, John Doull, and Curtis D. Klassen, EDS., *Casarett and Doull's Toxicology: The Basic Science of Poisons, 4th Edition*, New York: Pergamon Press, 1991; as cited in Anne Platt McGinn, Worldwatch Institute, *Why*

Poison Ourselves? A Precautionary Approach to Synthetic Chemicals, Worldwatch Paper 153, ISBN: 1-878071-55-6, November 2000.

70. BC Blount et al, "Levels of Seven Urinary Phthalate Metabolites in a Human Reference Population," *Environmental Health Perspectives* 108: 979-982, 2000.

71. Manori J Silva et al, "Urinary Levels of Seven Phthalate Metabolites in the U.S. Population from the National Health and Nutrition Examination Survey (NHANES) 1999-2000," *Environmental Health Perspectives* 112: 331-338, March 2004.

72. See Note 23.

73. JW Brock et al, "Phthalate Monoester Levels in the Urine of Young Children," *Bulletin of Environmental Contamination and Toxicology* 68:309-314, 2002.

74. CP Carpenter et al, "Chronic Oral Toxicity of Di-(2-ethylhexyl) Phthalate of Rats, Guinea Pigs, and Dogs," *AMA Archives of Industrial, Hygiene and Occupational Medicine* 8: 219-226, 1953; FL Mayer et al, "Phthalate Esters as Environmental Contaminants," *Nature* 238: 411-413, 18 August 1972; AR Singh et al, "Teratogenicity of Phthalate Esters in Rats," *Journal of Pharmacological Science* 61: 51-55, January 1972; RJ Jaeger and RJ Rubin, "Migration of a Phthalate Ester Plasticizer from Polyvinyl Chloride Blood Bags into Stored Human Blood and its Localization in Human Tissues," *New England Journal of Medicine* 287: 1114-1118, 30 November 1972.

75. Anne Platt McGinn, Worldwatch Institute, *Why Poison Ourselves? A Precautionary Approach to Synthetic Chemicals*, Worldwatch Paper 153, ISBN: 1-878071-55-6, November 2000.

76. Frederick C. Gross and Joe A. Colony, "The Ubiquitous Nature and Objectionable Characteristics of Phthalate Esters in Aerospace Technology," *Environmental Health Perspectives*, January 1973.

77. See Note 7.

78. NE Skakkebaek et al., "Testicular Dysgenesis Syndrome: An Increasingly Common Developmental Disorder with Environmental Aspects," *Human Reproduction* 16: 972-978, 2001.

79. Adapted from Note 7.

80. See Note 30.

81. Louise Parks et al, U.S. EPA, "The Plasticizer Diethylhexyl Phthalate Induces Malformations by Decreasing Fetal Testosterone Synthesis during Sexual Differentiation in the Male Rat," *Toxicological Sciences* 58, 339-349, 2000.

82. Vickie Wilson et al, "Phthalate Ester-Induced Gubernacular Lesions are Associated with Reduced Insl3 Gene Expression in the Fetal Rat

Testis," *Toxicology Letters* 146: 207-215, 2 February 2004.

83. JS Fisher et al, "Human 'Testicular Dysgenesis Syndrome': A Possible Model Using *in-utero* Exposure of the Rat to Dibutyl Phthalate," *Human Reproduction* 18: 1383-1394, 2003.

84. Jane Fisher, "Environmental Anti-Androgens and Male Reproductive Health: Focus on Phthalates and Testicular Dysgenesis Syndrome," *Reproduction* 127: 305-315, 2004.

85. G Schonfelder et al, "In Utero Exposure to Low Doses of Bisphenol A Lead to Long-Term Deleterious Effects in the Vagina," *Neoplasia* 4:98-102, 2002; Chris Talsness, et al., "Ultrastructural Changes in the Ovaries of Adult Offspring Following a Single Maternal Exposure to Low Dose 2,2', 4,4', 5-Pentabromodiphenyl Ether," *Organohalogen Compounds*, 61: 88-91, 2003.

86. TB Hayes et al, "Hermaphroditic, Demasculinized Frogs After Exposure to the Herbicide Atrazine at Low, Ecologically Relevant Doses," *Proceedings of the National Academy of Sciences (US)* 99: 5476-5480, 2002.

87. See Note 59.

88. USGS, *NAWQA National Water Quality Data Warehouse*,

89. Neil M. Dubrovsky et al, "Pesticide Occurrence as a Function of Land Use, Application, and Hydrology, San Joaquin River, California," *Society of Environmental Toxicology and Chemistry, SETAC 17th Annual Meeting*, Washington, D.C., November 17-21, 1996, Abstract Book, p. 69

90. TB Hayes et al, "Hermaphroditic, Demasculinized Frogs After Exposure to the Herbicide Atrazine at Low, Ecologically Relevant Doses," *Proceedings of the National Academy of Sciences (US)* 99: 5476-5480, 2002.

91. California Department of Developmental Services, *Autistic Spectrum Disorders: Changes in the California Caseload*, April 2003; California Department of Developmental Services, *Quarterly Client Development Evaluation Reports*, March - December 2003.

92. California Department of Developmental Services, *Changes in the Population of Persons with Autism and Pervasive Developmental Disorders in California's Developmental Services System: 1987 through 1998*, Report to the Legislature, 1 March 1999.

93. R.S. Byrd et al., MIND Institute, University of California, Davis, *Report to the Legislature on the Principle Findings from The Epidemiology of Autism in California: A Comprehensive Pilot Study*, 17 October 2002.

94. See Note 9.

95. Ibid.

96. S Cramer and E Ellis, eds. *Learning Disabilities: Lifelong Issues*, (Baltimore, MD:Paul H. Brookes Publishing) 1996.
97. JW Gilger and BJ Kaplan, "Atypical Brain Development: A Conceptual Framework for Understanding Developmental Learning Disabilities," *Developmental Neuropsychology* 20: 465-481, 2001.
98. KA Kavale, SR Forness, and CT Ramey, "Co-Variants in Learning Disability and Behavior Disorders: An Examination of Classification and Placement Issues," *Advances in Learning and Behavioral Disabilities* 12:1-42, 1998; as cited in: Ted Schettler et al., Physicians for Social Responsibility and the Clean Water Fund, *In Harm's Way: Toxic Threats to Child Development*, May 2000.
99. L Goldman et al, "Diagnosis and Treatment of Attention Deficit Hyperactivity Disorder in Children and Adolescents," *Journal of the American Medical Association* 14: 1100-1107, 1998.
100. Rich Mayes, University of Richmond VA, *Rise of ADHD Prevalence and Psychostimulant Use: A Historical Perspective*, Presented at the 130th Annual Meeting of the American Public Health Association, 11 November 2002.
101. LM Robison et al, "Is Attention Deficit Hyperactivity Disorder Increasing Among Girls in the U.S.: Trends in Diagnosis and the Prescribing of Stimulants," *CNS Drugs* 16(2): 129-37, 2002.
102. Kathy J Kelleher et al, "Increasing Identification of Psychosocial Problems: 1979-1996," *Pediatrics* 105(6): 1313-1321, June 2000.
103. G. Koren, *Maternal-Fetal Toxicology (2nd Ed.)*, Marcel Dekker, Inc. 1994.
104. S.P. Porterfield, C.E. Hendrich, "The Role of Thyroid Hormones in Prenatal and Neonatal Neurological Development-Current Perspectives," *Endocrinology Review* 14:94-106, 1993.
105. V.J. Pop et al, "Low Maternal Free Thyroxine Concentrations During Early Pregnancy are Associated with Impaired Psychomotor Development in Infancy," *Clinical Endocrinology* 50, 149-155, 1999; J.E. Haddow et al, "Maternal Thyroid Deficiency During Pregnancy and Subsequent Neuropsychological Development of the Child," *New England Journal of Medicine* 341, 549-555, 1999; G. Morreale de Escobar et al, "Is Neuropsychological Development Related to Maternal Hypothyroidism or to Maternal Hypothyroxinemia?" *Journal of Clinical Endocrinology and Metabolism* 85, 3975-3987, 2000; K. Howdeshell, "A Model of the Development of the Brain as a Construct of the Thyroid Hormone System," *Environmental Health Perspectives* 110, 337-348, 2002.
106. AL den Ouden et al, "The Relation Between Neonatal Thyroxine Levels and Neurodevelopmental Outcome at Age 5 and 9 Years in a National Cohort of Very Preterm and/or Very Low Birth Weight Infants," *Pediatric Research* 39, 142-145, 1996.
107. E. Courchesne, R. Carper, and N. Akshoomoff, "Evidence of Brain Overgrowth in the First Year of Life in Autism," *Journal of the American Medical Association* 290: 337-344, 2003.
108. FX Castellanos et al, "Developmental Trajectories of Brain Volume Abnormalities in Children and Adolescents with Attention-Deficit/Hyperactivity Disorder," *Journal of the American Medical Association* 288: 1740-1748, 2002.
109. Shari Roan, "A Different View of Attention Deficit," *Los Angeles Times*, 14 October 2002.
110. Peter Hauser et al, National Institutes of Health, "Attention Deficit-Hyperactivity Disorder in People with Generalized Resistance to Thyroid Hormone," *The New England Journal of Medicine* 328: 997-1001, 1993.
111. Michael P McDonald et al, National Institute of Mental Health, "Hyperactivity and Learning Deficits in Transgenic Mice Bearing a Human Mutant Thyroid Hormone beta 1 Receptor Gene," *Learning and Memory* 5: 289-301, 1998.
112. OP Soldin, S Lai, SH Lamm, and S Mosee, "Lack of a Relation Between Human Neonatal Thyroxine and Pediatric Neurobehavioral Disorders," *Thyroid* 13: 193-198, February 2003.
113. For example, studies with conflicts of interest abound in the history of PCBs: Janna Koppe and Jane Keys, European Environment Agency, *Late Lessons From Early Warnings: The Precautionary Principle 1896-2000; Chapter 6: PCBs and the Precautionary Principle*. Environmental Issue Report 22, 10 January 2002; Eric Francis, "Conspiracy of Silence: The Story of How Three Corporate Giants — Monsanto, G.E., and Westinghouse — Covered Their Toxic Trail." *Sierra Magazine*, September/October 1994; and Environmental Working Group, *Chemical Industry Archives: Poisoned by PCBs*. viewed at www.chemicalindustryarchives.org/dirtysecrets on 10 Feb 2003.
114. Reviewed in F Brucker-Davis, "Effect of Environmental Synthetic Chemicals on Thyroid Function," *Thyroid* 8: 827-855, 1998.
115. Deborah C Rice, "Parallels Between Attention Deficit Hyperactivity Disorder and Behavioral Deficits Produced by Neurotoxic Exposure in Monkeys," *Environmental Health Perspectives* 108, Supplement 3: 405-408, 2000.
116. U.S. Centers for Disease Control and Prevention, *Childhood Lead Poisoning Prevention Factsheet*, downloaded from www.cdc.gov on 19 April 2004; Pamela Meyer et al, CDC, *Surveillance for Elevated Blood Lead Levels Among Children — United States, 1997—2001*, 12 September 2003.

117. Joan Lowy, "EPA Raises Estimate of Newborns Exposed to Mercury," *Scripps Howard News Service*, 04 February 2004.
118. W.J. Rogan, et al, "Congenital Poisoning by Polychlorinated Biphenyls and Their Contaminants in Taiwan," *Science* 241, 334-338, 1988; Y.C. Chen, Y.L. Guo, and W.J. Rogan, "Cognitive Development of Yu-Cheng (Oil-Disease) Children Prenatally Exposed to Heat Degraded PCBs," *Journal of the American Medical Association* 268, 3213-8, 1992.
119. J.L. Jacobson and S.W. Jacobson, "Effects of in Utero Exposure to PCBs and Related Contaminants on Cognitive Functioning in Young Children," *Journal of Pediatrics* 116, 38-45, 1990; J.L. Jacobson and S.W. Jacobson, "Intellectual Impairment in Children Exposed to Polychlorinated Biphenyls in Utero," *New England Journal of Medicine* 335, 783-789, 1996.
120. C. Koopman-Esseboom, et al, "Effects of Dioxins and Polychlorinated Biphenyls on Thyroid Hormone Status of Pregnant Women and Their Infants," *Pediatric Research* 36, 468-473, 1994.
121. Bromine Science and Environmental Forum, *An Introduction to Brominated Flame Retardants*, 19 October 2000.
122. Travis Madsen, Susan Lee, and Teri Olle, Environment California Research and Policy Center, *Growing Threats: Toxic Flame Retardants and Children's Health*, April 2003; Marla Cone, "Cause for Alarm Over Chemicals; Levels of Common Fire Retardants in Humans are Rising Rapidly, Especially in the U.S. Animal Tests Show Effects on the Brain," *Los Angeles Times*, 20 April 2003.
123. See Note 31.
124. A Ilonka et al., "Potent Competitive Interactions of Some Brominated Flame Retardants and Related Compounds with Human Transthyretin in Vitro," *Toxicological Sciences* 56: 95-104, 2000.
125. Zhou et al, "Effects of Short Term *in vivo* Exposure to Polybrominated Diphenyl Ethers on Thyroid Hormones and Hepatic Enzyme Activities in Weanling Rats," *Toxicological Science* 61, 76-82, 2001.
126. J.R. Fowles et al, "Immunologic and Endocrine Effects of the Flame-Retardant Pentabromodiphenyl Ether (DE-71) in C57BL/6J Mice," *Toxicology* 86, 49-61, 1994.
127. S. Hallgren and P.O. Darnerud, "Effects of Polybrominated Diphenyl Ethers (PBDEs), Polychlorinated Biphenyls (PCBs), and Chlorinated Paraffins (CPs) on Thyroid Hormone Levels and Enzyme Activities in Rats," *Organohalogen Compounds* 35, 391-394, 1998.
128. P Eriksson et al, "Brominated Flame Retardants: A Novel Class of Developmental Neurotoxicants in Our Environment?" *Environ Health Perspectives* 109, 903-8, 2001; P Eriksson et al, "A Brominated Flame Retardant, 2,2',4,4',5-Pentabromodiphenyl Ether: Uptake, Retention, and Induction of Neurobehavioral Alterations in Mice During a Critical Phase of Neonatal Brain Development," *Toxicological Science* 67, 98-103, 2002; H Viberg et al, "Neonatal Exposure to the Brominated Flame Retardant 2,2',4,4',5- Pentabromodiphenyl Ether Causes Altered Susceptibility in the Cholinergic Transmitter System in the Adult Mouse," *Toxicological Science* 67, 104-7, 2002; H. Viberg, A. Fredriksson, and E. Jakobsson, "Developmental Neurotoxic Effects of 2,2,4,4,5-Pentabromodiphenyl Ether in the Neonatal Mouse," *Toxicologist* 54, 1360, 2000; H. Viberg, A. Fredriksson, E. Jakobsson, U. Ohrn, and P. Eriksson, "Brominated Flame Retardant: Uptake, Retention, and Developmental Neurotoxic Effects of Decabromodiphenyl Ether in the Neonatal Mouse," *Toxicologist* 61, 1034, 2001; I. Branchi et al, "Effects of Perinatal Exposure to a Polybrominated Diphenyl Ether (PBDE 99) on Mouse Neurobehavioural Development," *Neurotoxicology* 23, 375-84, 2002; J.L. Jacobson., S.W. Jacobson, H.B. Humphrey, "Effects of in Utero Exposure to Polychlorinated-Biphenyls and Related Contaminants on Cognitive-Functioning in Young Children" *Journal of Pediatrics*, 116:38-45, 1990.
129. DC Rice et al, "Lessons for Neurotoxicology from Selected Model Compounds: SGOMSEC Joint Report," *Environmental Health Perspectives* 104, Supplement 2:205-15, 1996.
130. Andrew Sjodin, DG Patterson, and A Bergman, "A Review on Human Exposure to Brominated Flame Retardants—Particularly Polybrominated Diphenyl Ethers," *Environment International* 29: 829-839, September 2003.
131. P Lindberg, U Sellstrom, L Haggberg, CA de Wit, "Higher Brominated Diphenyl Ethers and Hexabromocyclododecane Found in Eggs of Peregrine Falcons (*Falco peregrinus*) Breeding in Sweden," *Environmental Science and Technology* 38: 93-96, 1 January 2004.
132. Espen Mariussen and Frode Fonnum, "The Effect of Brominated Flame Retardants on Neurotransmitter Uptake into Rat Brain Synaptosomes and Vesicles," *Neurochemistry International* 43:533-42, 2003.
133. See Note 21.
134. See Note 22.
135. Keisuke Kawai et al, "Aggressive Behavior and Serum Testosterone Concentration during the Maturation Process of Male Mice: The Effects of Fetal Exposure to Bisphenol A," *Environmental Health Perspectives* 111: 175-178, 2003; H Kabuto, M Amakawa, and T Shishibori, "Exposure to Bisphenol-A During Embryonic/

Fetal Life and Infancy Increases Oxidative Injury and Causes Underdevelopment of the Brain and Testes in Mice,” *Life Sciences* 74: 2931-2940, 30 April 2004.

136. Environmental Working Group, *Rocket Science: Perchlorate and the Toxic Legacy of the Cold War*, 16 July 2001.

137. Issue summarized in: Environmental Working Group, *Rocket Fuel in Drinking Water: Perchlorate Pollution Spreading Nationwide*, Downloaded from www.ewg.org on 15 April 2004.

138. U.S. Environmental Protection Agency, *Perchlorate Environmental Contamination: Toxicological Review and Risk Characterization Based on Emerging Information*, Washington D.C., 1998.

139. KM Crofton, U.S. Environmental Protection Agency, National Health Effects and Environmental Research Laboratory, *Revised Analysis of the Thyroid Hormone Data from the Rat Developmental “Effects” Study - Argus Protocol 1416-003*, [memorandum with attachments to Annie M. Jarabek], Research Triangle Park, NC, 14 December (revised December 28), 2001; Argus Research Laboratories Inc., *Hormone, thyroid and Neurohistological Effects of Oral (Drinking Water) Exposure to Ammonium Perchlorate in Pregnant and Lactating Rats and in Fetuses and Nursing Pups Exposed to Ammonium Perchlorate During Gestation or via Maternal Milk*, Horsham, PA, 2001.; Both studies cited in: U.S. Environmental Protection Agency, Office of Research and Development, *Perchlorate Environmental Contamination: Toxicological Review and Risk Characterization (External Review Draft)* Washington, D.C., NCEA-1-0503, 2002.

140. V.J. Pop et al, “Low Maternal Free Thyroxine Concentrations During Early Pregnancy are Associated with Impaired Psychomotor Development in Infancy,” *Clinical Endocrinology* 50, 149-155, 1999; J.E. Haddow et al, “Maternal Thyroid Deficiency During Pregnancy and Subsequent Neuropsychological Development of the Child,” *New England Journal of Medicine* 341, 549-555, 1999; G. Morreale de Escobar et al, “Is Neuropsychological Development Related to Maternal Hypothyroidism or to Maternal Hypothyroxinemia?” *Journal of Clinical Endocrinology and Metabolism* 85, 3975-3987, 2000; K. Howdeshell, “A Model of the Development of the Brain as a Construct of the Thyroid Hormone System,” *Environmental Health Perspectives* 110, 337-348, 2002; AL den Ouden et al, “The Relation Between Neonatal Thyroxine Levels and Neurodevelopmental Outcome at Age 5 and 9 Years in a National Cohort of Very Preterm and/or Very Low Birth Weight Infants,” *Pediatric Research* 39, 142-145, 1996.

141. RJ Brechner et al, Arizona Department of Public Health, “Ammonium Perchlorate Contamination of Colorado River Drinking Water

is Associated with Abnormal Thyroid Function in Newborns in Arizona,” *Journal of Occupational and Environmental Medicine* 42: 777-782, 2000.

142. Jackie Schwartz, “Gestational Exposure to Perchlorate is Associated with Measures of Decreased Thyroid Function in a Population of California Neonates.” PH 292(12). Masters Dissertation UC (Berkeley) School of Public Health, Spring 2001.

143. American Rivers, “Colorado River “Most Endangered”: Colorado #1 on Annual List Released Today,” *Press Release*, 14 April 2004.

144. Miguel Bustillo, “Colorado River Taint Worries Some Officials,” *Los Angeles Times*, 2 February 2003; According to the Los Angeles Metropolitan Water District, levels are now lower: Sujatha Jahagirdar, Environment California, Personal Correspondence, 13 May 2004.

145. Environmental Working Group, “High Levels of Toxic Rocket Fuel Found in Lettuce,” Downloaded from www.ewg.org on 15 April 2004.

146. J Ahlbom, A Fredriksson, and Per Eriksson, “Exposure to an Organophosphate (DFP) During a Defined Period in Neonatal Life Induces Permanent Changes in Brain Muscarinic Receptors and Behaviour in Adult Mice,” *Brain Research* 677:13-19, 1995; Per Eriksson and A Fredriksson, “Neurotoxic Effects of Two Different Pyrethroids, Bioallethrin and Deltamethrin, on Immature and Adult Mice: Changes in Behavioural and Muscarinic Receptor Variables,” *Toxicology and Applied Pharmacology* 108:78-85, 1991.

147. Elizabeth Guillette et al, “An Anthropological Approach to the Evaluation of Preschool Children exposed to Pesticides in Mexico,” *Environmental Health Perspectives* 106: 347-353, June 1998.

148. See Note 11.

149. Anne-Simone Parent et al, “The Timing of Normal Puberty and the Age Limits of Sexual Precocity: Variations Around the World, Secular Trends, and Changes After Migration,” *Endocrine Reviews* 24: 668-693, 2003.

150. HM Blanck et al, “Age at Menarche and Tanner Stage in Girls Exposed *In-Utero* and Postnatally to Polybrominated Biphenyl,” *Epidemiology* 11: 641-647, 2000.

151. See Note 20.

152. S Honma et al, “Low Dose Effect of in utero Exposure to Bisphenol-A and Diethylstilbestrol on Female Mouse Reproduction,” *Reproductive Toxicology* 16: 117-122, 2002.

153. Adapted from Theo Colborn, Dianne Dumanoski, and John Peterson Meyers, *Our Stolen Future: New Science: Contaminants Affecting Puberty Rate in Animals*, downloaded from

www.ourstolenfuture.org on 5 April 2003; PBDE Flame Retardants: Sergio Kuriyama, Ibrahim Chahoud, "Maternal Exposure to Low Dose 2,2', 4,4', 5-Pentabromo Diphenyl Ether (PBDE 99) Impairs Male Reproductive Performance in Adult Rat Offspring," *Organohalogen Compounds* 61(92-95), 2003.

154. See Note 29.

155. P Bundred, D Kitchiner, and I Buchan, "2001.

156. See Note 12.

157. Ibid.

158. AP Rocchini, "Childhood Obesity and a Diabetes Epidemic," *New England Journal of Medicine* 346: 854-855, 2002; American Academy of Pediatrics, "Prevention of Pediatric Overweight and Obesity," *Pediatrics* 112:424-430, 2003.

159. U.S. Centers for Disease Control and Prevention, *Behavioral Risk Factor Surveillance System: Trend Data, California, Obesity by Body Mass Index, 1990-2002*, 5 November 2003.

160. K Clement and P Ferre, "Genetics and the Pathophysiology of Obesity," *Pediatric Research* 53: 721-725, 2003.

161. H Masuno et al, "Bisphenol A in Combination with Insulin Can Accelerate the Conversion of 3T3-L1 Fibroblasts to Adipocytes," *Journal of Lipid Research* 43: 676-684, May 2002.

162. K Sakurai et al, "Bisphenol A Affects Glucose Transport in Mouse 3T3-F442A Adipocytes," *British Journal of Pharmacology* 141: 209-214, 2004.

163. BS Rubin et al, "Perinatal Exposure to Low Doses of Bisphenol A Affects Body Weight, Patterns of Estrous Cyclicity, and Plasma LH Levels," *Environmental Health Perspectives* 109: 675-680, 2001; K Howdeshell et al, "Exposure to Bisphenol-A Advances Puberty," *Nature* 401, 763-764, 1999.

164. Shanna H. Swan, EP Elkin, and L Fenster, "The Question of Declining Sperm Density Revisited: An Analysis of 101 Studies Published 1934-1996," *Environmental Health Perspectives* 108: 961-966, 2000.

165. Figure represents the results of an interactive regression model for mean sperm density by year and geographic region, after controlling for proven fertility, abstinence time, age, specimen collection method, method of counting sperm, whether the study was included in (E. Carlsen et al, "Evidence for Decreasing Quality of Semen During Past 50 Years," *British Medical Journal* 305:609-613, 1992), and interaction of region and study year; Adapted from Shanna H. Swan, EP Elkin, and L Fenster, "The Question of Declining Sperm Density Revisited: An Analysis of 101 Studies Published 1934-1996," *Environmental Health Perspectives* 108: 961-966, 2000.

166. JPE Bonde et al, "Relation Between Semen Quality and Fertility: A Population-Based Study of 430 First-Pregnancy Planners," *Lancet* 352: 1172-1177, 1998.

167. S Irvine et al, "Evidence of Deteriorating Semen Quality in the United Kingdom: Birth Cohort Study in 577 Men in Scotland Over 11 Years," *British Medical Journal* 312: 467-471, 1996.

168. Shanna H Swan et al, "Geographic Differences in Semen Quality of Fertile U.S. Males," *Environmental Health Perspectives* 111: 414-420, April 2003.

169. Shanna H Swan et al, "Semen Quality in Relation to Biomarkers of Pesticide Exposure," *Environmental Health Perspectives* 111, 1478-1484, June 2003.

170. See Note 59.

171. See Note 26.

172. Frederick vom Saal et al, "A Physiologically Based Approach to the Study of Bisphenol-A and Other Estrogenic Chemicals on the Size of Reproductive Organs, Daily Sperm Production, and Behavior," *Toxicology & Industrial Health* 14:239-60, 1998.

173. Motoharu Sakaue et al, "Bisphenol-A Affects Spermatogenesis in the Adult Rat Even at a Low Dose," *Journal of Occupational Health* 43:185-190, 2001.

174. Keisuke Kawai et al, "Aggressive Behavior and Serum Testosterone Concentration during the Maturation Process of Male Mice: The Effects of Fetal Exposure to Bisphenol A," *Environmental Health Perspectives* 111: 175-178, 2003.

175. JM McKiernan et al, "Rising Risk of Developing Testicular Cancer by Birth Cohort in the United States from 1973 to 1995," *Journal of Urology* 162, 361-363, 1999.

176. R Bergstrom et al, "Increase in Testicular Cancer Incidence in Six European Countries: A Birth Cohort Phenomenon," *Journal of the National Cancer Institute* 88: 727-733, 1996.

177. Adapted from JM McKiernan et al, "Rising Risk of Developing Testicular Cancer by Birth Cohort in the United States from 1973 to 1995," *Journal of Urology* 162, 361-363, 1999.

178. As cited in: CG Ohlson and L Hardell, "Testicular Cancer and Occupational Exposures with a Focus on Xenoestrogens in Polyvinyl Chloride Plastics," *Chemosphere* 40: 1277-1282, May-June 2000.

179. Ibid.

180. Lennart Hardell et al, "Increased Concentrations of Polychlorinated Biphenyls, Hexachlorobenzene, and Chlordanes in Mothers of Men with Testicular Cancer," *Environmental Health Perspectives* 111: 930-934, 2003.

181. R.M. Whyatt et al, "Prenatal Insecticide Exposures, Birth Weight and Length Among an Urban Minority Cohort," *Environmental Health Perspectives*, doi:10.1289/ehp.6641 (available at <http://dx.doi.org/>), Online 22 March 2004.
182. Richard Perez-Pena, "Babies are Larger After Ban on Two Pesticides, Study Finds," *New York Times*, 22 March 2004.
183. Ibid.
184. Ibid.
185. U.S. Centers for Disease Control and Prevention, "Blood Lead Levels Keep Dropping; New Guidelines Proposed for Those Most Vulnerable," (*Press Release*), 20 February 1997.
186. U.S. Centers for Disease Control and Prevention, "Blood Lead Levels Keep Dropping; New Guidelines Proposed for Those Most Vulnerable," (*Press Release*), 20 February 1997.
187. Jamie Lincoln Kitman, "The Secret History of Lead," *The Nation*, 20 March 2000.
188. D Meironyte, K Noren and A Bergman, "Analysis of Polybrominated Diphenyl Ethers in Swedish Human Milk. A Time-Related Trend Study, 1972-1997," *Journal of Toxicology and Environmental Health*, 58(6), 329-41, 26 November 1999; K Noren and D Meironyte, "Certain Organochlorine and Organobromine Contaminants in Swedish Human Milk in Perspective of Past 20-30 Years" *Chemosphere* 40, 1111-1123, 2000.
189. Noren K., Meironyte D., *Certain Organochlorine and Organobromine Contaminants in Swedish Human Milk in Perspective of Past 20-30 Years*. *Chemosphere* 40, 1111-1123, 2000.
190. Reviewed in Y Kucher and M Purvis, Environment California and the State Public Interest Research Groups, *Body of Evidence: New Science in the Debate over Toxic Flame Retardants and Our Health*, 18 February 2004.
191. See Note 1.
192. DC Rice et al, "Lessons for Neurotoxicology from Selected Model Compounds: SGOMSEC Joint Report," *Environmental Health Perspectives* 104, Supplement 2:205-15, 1996; MM Mumtaz, et al, Agency for Toxic Substances and Disease Registry, "Gene Induction Studies and Toxicity of Chemical Mixtures," *Environmental Health Perspectives* 110, Supplement 6: 947-956, 2002; Janna Koppe and Jane Keys, European Environment Agency, *Late Lessons From Early Warnings: The Precautionary Principle 1896-2000*, Environmental Issue Report 22, 10 January 2002.
193. Elizabeth Becker, "White House Undermined Chemical Tests, Report Says," *New York Times*, 2 April 2004.
194. Ibid.
195. Energy Information Administration, U.S. Department of Energy, *Chemicals Industry Analysis Brief*, 2 February 2004.
196. As cited in Anne Platt McGinn, Worldwatch Institute, *Why Poison Ourselves? A Precautionary Approach to Synthetic Chemicals*, Worldwatch Paper 153, ISBN: 1-878071-55-6, November 2000: Global use from Pimentel, op. cit. note 44; and from D. Pimentel and D. Kahn, "Environmental Aspects of Cosmetic Standards of Foods and Pesticides," in David Pimentel, ed., *Techniques for Reducing Pesticide Use: Economic and Environmental Benefits* (New York: John Wiley & Sons, 1997). Value from FAO, *FAOSTAT Statistics Database* <apps.fao.org>, viewed 17 December 1999. 2.5 million tons from David Pimentel, "Protecting Crops," in Wallace C. Olsen, ed., *The Literature of Crop Science* (Ithaca, NY: Cornell University Press, 1995).
197. Michael Heylin and George Peaff, "Facts and Figures for the Chemical Enterprise: 75 Years of Facts and Figures," *Chemical and Engineering News*, 75th Anniversary Issue, 12 January 1998; Michael McCoy et al, "Facts and Figures for the Chemical Industry," *Chemical and Engineering News* 81, 7 July 2003; Includes polyethylene, polypropylene, styrene polymers, polyamide, polyvinyl chloride and copolymers, and polyester.
198. WV Welshons, KA Thayer, BM Judy, JA Taylor, EM Curran and FS vom Saal. "Large Effects from Small Exposures. I. Mechanisms for Endocrine Disrupting Chemicals with Estrogenic Activity," *Environmental Health Perspectives* 111:994-1006, June 2003.
199. WV Welshons, KA Thayer, BM Judy, JA Taylor, EM Curran and FS vom Saal. "Large Effects from Small Exposures. I. Mechanisms for Endocrine Disrupting Chemicals with Estrogenic Activity," *Environmental Health Perspectives* 111:994-1006, June 2003; Figure adapted from www.ourstolenfuture.org/NewScience/lowdose/2003/2003-0220welshonsetal.htm.
200. Ibid.