I am writing to you in support of S.37, a bill to allow citizens access to medical monitoring when exposure to a toxic chemical, such as PFAS, has been established from a corporate polluter.

I am a New Hampshire resident and mother living in a community impacted by PFAS contamination. Due to the contamination in our community, I have become a citizen advocate and cofounder of Merrimack Citizens for Clean Water. PFAS chemicals, used in a wide range of industrial applications, firefighting foam and consumer products have definitively linked to kidney and testicular cancer, liver and thyroid damage, high cholesterol and obesity, immune suppression, developmental disruptions for fetuses and infants, and other serious health conditions. In June of 2018, the Agency for Toxic Substances and Disease Registry under the CDC released a report on PFAS toxicity stating that the safe level of PFAS chemicals in drinking should be at least 7-10 times lower than the threshold currently recognized by the EPA.

Here in Merrimack, NH we learned in March of 2016 that we had been exposed to drinking water that exceeded the EPA health advisory for PFOA and PFOS for at least 2 decades. On-site at Saint Gobain, our identified polluter, groundwater tests show the presence of at least 34 PFAS compounds including test results for PFOA alone of up to 58,000 ppt. For reference, the groundwater standard for PFOA in VT is 20 ppt. Saint Gobain has an EPA-issued discharge permit which allows them to send PFAS into the Merrimack River. They have a valid wastewater permit which allows PFAS to enter the sanitary sewer system where it goes to our wastewater treatment facility which produces class A compost. Saint Gobain additionally has an EPA issued air permit allowing them to emit toxic and bio accumulative PFAS round the clock from 13 unfiltered air stacks. All of this is self-regulated and has perpetuated into a minimum of a 65 square mile PFAS contamination area from both past and ongoing use, and yet the users of these chemicals bear no responsibility for human harm?

In a PFAS contamination area there are multiple pathways of community exposure including ingestion, inhalation and dermal adsorption. Our environment is forever altered, including our food chain. Despite an extensive and growing library of health science linking every PFAS compound studied to health disruptive outcomes at much lower levels than acknowledged, community members who know they have been exposed to these toxins do not have access to blood testing, physician guidance or health monitoring and feel abandoned and voiceless as unacknowledged victims. In Merrimack we have fought for access to the lab that only a state or our polluter can use for blood test analysis for PFAS. We have gathered our own health data to present to the state to advocate for access to biomonitoring and physician guidance, we have reached out to the ATSDR for the environmental health guidance that would be expected with documented exposure to toxins and as an EPA designated contamination area. What we have continually been told is that there hasn’t been enough study to connect exposure to outcome.
As we fight for our families to be safe, our polluter’s profits soar and our contamination continues. We have learned that it is up to our states to hold polluters accountable for harm and this we must do where we can. The only way to stop the harm is to create a pathway for medical monitoring where there is known exposure to a chemical class shown to be harmful to human health. Residents identified as having chronic exposure to chemicals such as PFAS - which do not break down in the environment and persist in the human body - should not be left on their own as the resources, guidance and support needed are not accessible. Where does the responsibility lie for support for the fear a family feels when they are told they have been drinking contaminated water for years? Do we simply wait and see who develops sickness and leave them on their own to prove the causality? Or should we set the expectation that those known by a state to have had exposure to a toxin from a large polluter, at a level of exposure that poses an increased risk of harm, be allowed a pathway to health monitoring?

My experiences here in Merrimack, NH are incredibly frustrating as I watch children grow and develop health conditions that we know are linked with the PFAS chemical class, and listen to adults ask each other why blood and medical tests are not accessible to them. I note the lack of awareness in both residents and their physicians of health conditions that PFAS-exposed residents should be monitored for, as many conditions would not be expected and are not detected until they have progressed to a point that treatment is more complex. I strongly believe that medical monitoring would not only be beneficial for early detection, but support for a medical monitoring protocol would give a tremendous boost to physician awareness and help spur the necessary education of environmental impacts on human health and development. I feel that in addition to sending the much-needed message that we expect polluters to be held responsible for the harm they may cause, states that enact legislation like S.37 that allows for a pathway for medical monitoring where there is known exposure to identified chemicals of concern, will also begin to shape the future of chemical use, with increased consideration of their impacts on human health.

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