

FAQs IV --- TESTING

(June 14, 2010)

Is the blood of children who have cancer being tested for elevated toxins that could be cancer causing? Or is the blood being tested for elevated levels of heavy metals or other chemical compounds?

No. The CDC has advised the Department of Health (DOH) that there are no tests in blood or urine for environmental contaminants that would provide results that could be linked to increased risk of pediatric brain cancers. Although it is possible to test blood and urine for hundreds of chemicals, CDC did not feel that this course of action would provide meaningful results given that the risk factors for pediatric brain cancers are not clear.

What is the most likely pathway into the body for a contaminant that could cause cancer?

Drinking water is one of the most common ways a contaminant could theoretically enter the body. Drinking water can provide one of the strongest and most direct biological pathways. Given that the quality of drinking water is a common concern when an area is assessed for contamination, the Department of Environmental Protection (DEP) has tested over 50 samples from wells in the Acreage community. Conclusions from the testing showed no indication of agricultural or industrial contamination in the water and water quality is considered to be good. Results may be found at: http://www.pbchd.com/pdfs/acreage/acreage_water_results_FINAL.pdf.

Additional downloadable booklets and documents regarding drinking water, well filtration, maintenance and other pertinent information from the EPA, DEP and PBCHD can be found on the Palm Beach County Health Department website at: http://www.pbchd.com/spotlight/acreage/cancer_cluster_acreage_downloadable_booklets.html

Do telecommunications towers cause brain cancer?

Radio, television, and cell phone transmitters are all regulated by the Federal Communications Commission. The FCC is required by the National Environmental Policy Act of 1969 to evaluate the effects of radiofrequency and other electromagnetic emissions (usually referred to as "RF" for short) from these transmitters on the quality of the human environment. The FCC's rules protect public health by limiting the maximum amount of RF to which a licensee's transmitters, in combination with other sources of RF, may expose communications workers and the public. These rules were coordinated with, and are supported by, federal agencies with health and safety responsibilities, including the Environmental Protection Agency (EPA), the Food and Drug Administration, the National Institute for Occupational Safety and Health, and the Occupational Safety and Health Administration.

The FCC emission limits are based on safety standards recommended by the National Council on Radiation Protection and Measurements (NCRP, Report 86), and by the Institute of Electrical and Electronic Engineers, Inc. (IEEE, C95.1 standard). To develop these safety standards, these organizations of scientists and engineers first examined hundreds of studies published over several decades in the peer-reviewed scientific literature to determine which adverse health effects are possible from RF exposure, and at what specific levels the effects occur. After deriving these levels, the organizations set the maximum permissible exposure limit for occupational workers at a level 10 times below the level where the health effects begin to occur. As an extra margin of safety, the limits

for the public were set at a level 5 times below the occupational limit (and thus, 50 times below the effects level). Measurements conducted by the FCC, EPA and others have shown that normal emissions levels in inhabited areas near transmitters are often far below the levels allowed by the FCC limits.

The overall weight of the scientific evidence shows that cancer, including brain cancer, is not caused by exposure to the levels of RF emitted by the towers. To learn more about a particular licensee or about RF safety in general, please visit this FCC web site: www.fcc.gov/oet/rfsafety.

The following beta particles/emitters were not analyzed in the first sampling event. Why were they added in the next sampling event?

Beta -- Manmade Beta Emitter

- Tritium
- Cobalt-60
- Strontium-90
- Technetium-99
- Iodine-129 and -131
- Cesium-137

DEP did not test for the above listed **manmade** beta emitters during its first round of sampling because there are no community water systems within Palm Beach County that are categorized as vulnerable to contamination from these manmade beta emitters. Community water systems are only required to sample for listed manmade beta emitters if the state determines that they are vulnerable to that type of contamination, i.e., from nearby nuclear power plants.

None of the surface or groundwater systems in Palm Beach County are near a nuclear power plant which is the normal source of manmade beta emitters. The DEP did its most recent Source Water Assessment Program (SWAP) in 2009 and Palm Beach County has not been notified of any community water systems that fall into the vulnerable category.

Radium-228, is principally a natural beta emitter and was included in DEP's first round of environmental sampling in the Acreage Community. However, during the recent testing events, DEP decided to include the manmade emitters to conduct a more comprehensive evaluation of the affected home sites. These analytes were also added to better address community concerns raised relative to the Pratt Whitney Plant.

It was reported that test results indicated gamma radiation is not an issue. Was beta radiation also tested?

No. External beta radiation levels were not tested. Beta radiation is stopped by the skin or a few feet of air and is not considered an external risk. However, almost all natural sources of beta radiation also have a gamma radiation component to them. Because the gamma radiation test results were negative, there could not be beta radiation in these samples.

When will the soil testing results be released?

The Acreage soil testing, as conducted by DEP, will be released to the public in mid-to-late July. The data is currently being reviewed and tabulated and the results are scheduled to be certified by mid-June. After DEP and DOH have contacted and discussed the results with all residents who had testing conducted on their property, this information will be released to the public. Watch the PBCHD website for updates.

**FLORIDA DEPARTMENT OF HEALTH &
FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION**
The Acreage Frequently Asked Questions
FAQ III - FINAL 5-17-10

CANCER DATA

How many people have cancer in the Acreage?

In the Department of Health (DOH) *Acreage Cancer Review Palm Beach County* dated August 2009, we identified 1,369 cancers in the Acreage over a thirteen year period between 1995 -2007. This was among all age groups and for all cancer types reported to the [Florida Cancer Data System](#) (FCDS) during this time period.

How do you determine what is an expected community level of cancer?

First we determine the cancer rates (number of cases in a period of time divided by the population) for the county and for the state. Next, we multiply those rates with the area of concern population to find the "expected" number of cases for that area. We compare the expected with the actual rates and determine if the difference could be due to chance alone.

If the population total of the Acreage was 45,000 would the cancer cluster designation still be attached to the community?

The increased rate of brain cancers were found among children ages 0-19 in the Acreage. Therefore, it is not so much the total population number that matters in this calculation, but the number of children in the Acreage which is important since the increase was noted among children. You would expect less than one case per year in a population of children the size of the Acreage. We did not do theoretical estimates of how big the population of children would need to be so that four in one year or 4-5 in a three year period is not considered more than expected.

Should we see a greater significance to the increases shown in our local results if we used local comparisons relative to statewide data particularly if Palm Beach rates were higher than the state rates?

The DOH study compared rates in the Acreage to both Palm Beach County rates and to state rates. The differences we found in the "Standardized Incidence Ratio" SIR's (ratio of observed versus expected) showed little change whether the county or the state was used as a comparison. Comparison to either rate indicated an elevation in pediatric brain cancers in the Acreage.

Also, as part of the initial analysis, an area larger than the Acreage was explored. This is the area that includes and surrounds the neighboring communities that are included in the three zip codes used in the Acreage (and therefore reflects populations just outside of the Acreage). Pediatric brain cancers were marginally elevated in the larger zip code analysis for the later years of 2005-2007 but the elevation was not as pronounced as in the Acreage-only analyses. Removal of the Acreage

population from the zip code analyses produced similar results in that pediatric brain cancers were marginally elevated in the period 2005-2007 but the increase was no longer statistically significant.

Is there a survey on adult tumors found in the Acreage comparable to the report on pediatric brain cancers, showing the type of tumor reported, and specifically, the incidence of glioblastoma multiform among adults?

No, a separate report or analysis on adults only was not done. In our August 2009 report, [Acreage Cancer Review Palm Beach County](#), we did report on the burden of brain cancers and central nervous system tumors (CNS) in the Acreage for the total population and for the pediatric population. A breakdown of malignant brain and CNS tumors for adults and for children is presented on Table 8, page 29 of this report. Analyses for adult brain cancers and CNS tumors for the period 2000-2007 (analyses similar to Table 4 of the August report but for adults) did not show an elevation among adults.

Based on the August 2009 report, we have verified six cases of glioblastoma among adults for the period 1997-2007 (malignant primary cancers) as listed in Table 8, page 29. We continue to use the Florida Cancer Data System to verify diagnosis, date of diagnosis, address, attending physician and other information related to reported cancer cases. DOH is aware of rumors that there may be additional cases of glioblastoma multiforme (listed as glioblastoma, NOS in our reports) among adults in the Acreage. We welcome reports of possible additional cancers and the Acreage Neighborhood Information Center is able to check individuals' names and diagnoses against the FCDS data base to assure that all cases have been counted. We encourage residents to visit the Acreage Neighborhood Information Center for this service and for other resources. In addition, statistics can be found at this link for the [FloridaCHARTS](#) showing the numbers and rates for brain and central nervous system cancers for three year rolling rates from 2004-2006.

ABOUT THE AGENCIES

What does the Florida Department of Health do?

- The Florida Department of Health (DOH) is the lead agency in Florida for public health services. DOH's mission is to promote, protect and improve the health of all people in Florida. Each Florida county has a public health unit that works in conjunction with the Tallahassee DOH Headquarters.

What is DOH's role?

- DOH provides scientific expertise to determine if a cluster, or an unexpected increase or grouping of cancers is present in a community. Collaborating with our state and federal partners, DOH seeks sources or causes for these increases.

What does the Florida Department of Environmental Protection do?

- The Florida Department of Environmental Protection (DEP) is the lead agency in Florida for environmental management. DEP's mission is to protect, conserve and manage Florida's environment and natural resources. There are six DEP regulatory district offices throughout the state. DEP's Southeast District Office is located in West Palm Beach, and serves Okeechobee, St. Lucie, Martin, Palm Beach, Broward and Miami-Dade counties.

What is DEP's role?

- While DOH is the lead in public health issues, DEP is responsible for environmental issues. DEP has conducted environmental assessments to determine if contamination is present in groundwater or soil in The Acreage. DEP has sampled private drinking water wells, tap water, the Seminole Improvement District's supply wells and collected soil samples.

ABOUT ENVIRONMENTAL SAMPLING

Where and when did DEP's initial water sampling take place?

- During the week of August 4-8, 2009, DEP collected samples from about 50 residential drinking water wells, a child care facility and the Seminole Improvement District water treatment plant in a 36 square mile area.
- The well testing divided the [36 square mile area](#) into [six zones](#). Samples were collected at five to 10 separate locations within each zone to achieve wide coverage that is proportional to population density.
- On August 26 and 27, after reviewing the preliminary findings of the sampling, DEP conducted additional water quality sampling. The additional samples included all five water supply wells and two treated water locations at the Seminole Improvement District water treatment plant (only one of the five water supply wells was sampled in the preliminary round), 10 private residential drinking water wells and nearby canals in the area. With this additional sampling, DEP had tested all wells providing raw (pre-treated) water to the Seminole Improvement District water treatment plant as well as the finished treated water that is distributed to customers. The water treatment plant is in compliance with DEP's regulatory requirements.
- The additional August 26 and 27, testing focused on radionuclides, specifically radium 226/228, due to a minor exceedance found in a sample of pre-treated water from the first supply well at the Seminole Improvement District water treatment plant.
- On October 1, 2009, results for the sampling were released and can be viewed in The [Acreage Sampling Report](#).

What is radium?

- Radium is a naturally occurring radioactive metal found at low levels in virtually all rock, soil, water, plants, and animals.
- Radionuclides that occur in groundwater above federal and state standards can be easily treated to meet these standards.

Where and when did DEP's second round of water sampling take place?

- February 12-14, 2010, DEP collected samples from 23 homes of untreated ground water from drinking water wells and samples from water that passed through a water treatment system or water softener, if the resident owns a treatment system. The homes included residences where cases of pediatric brain cancer have been identified as well as a number of other nearby homes to serve as a control group.
- DEP also collected treated water from the Seminole Improvement District water treatment plant and four homes as a follow-up to the first round of sampling.

What will DEP test for during the second round of water sampling?

- As before, the laboratories will analyze the water for a wide array of contaminants that are associated with industrial (metals and organic solvents) and agricultural (herbicides and pesticides) chemicals used now and in the past.
- While the tests will look for more than 200 individual chemicals, most fall into one of the following groups: petroleum, solvents, pesticides, herbicides, wood treating chemicals, metals, nutrients, polychlorinated biphenyls (PCBs) and radionuclides.

How does the laboratory process work and who will analyze these samples?

- Except for radionuclide samples, all samples taken will be transported to the DEP Central Laboratory in Tallahassee and analyzed for the industrial and agricultural chemicals mentioned above. Some samples will be sent to a contract laboratory, for radionuclide testing – gross alpha, gross beta and radium 226/228.
- At the laboratory, each sample will be logged-in and the chain-of-custody paperwork checked again. Laboratory technicians will prepare the samples for analysis, depending on the chemical group to be analyzed. For some groups of chemicals, the water can be injected directly into laboratory instruments for testing after minimal preparation. For other groups of chemicals, several hours of preparation may be necessary before the testing can begin. Also, the time to complete an analysis is different for each chemical group.
- As the testing instruments produce results for each sample, technicians and chemists will review the data and compare it to quality control tests to be sure that the instruments are producing results that are accurate and complete for each sample.

When will results be available?

- Because the preparation and analytical time for the chemical groups are different, it will take about four weeks, early April, for DEP to have the final test results for all residences.
- When the results are ready, all homeowners will be contacted to set up a time when DEP and someone from DOH can come to their residence to deliver the results, explain what the results mean and answer any questions.

When will soil sampling begin?

- On March 2, 2010, DEP sampling teams will begin sampling soils at most of the homes where water samples were collected during the February 12-14, 2010 sampling event. Having both water and soil samples will allow DEP to evaluate environmental data from homes where cases of pediatric brain cancer exist as well as additional nearby homes which are serving as a control group.

Will DEP be coordinating with DOH on the sampling?

- Yes, the agencies are working together. However, DEP's investigation is focused on an environmental assessment, including the presence of contaminants in water or soil in The Acreage. These are slightly different criteria from the specific areas of concern that are under review by DOH for its epidemiological study.

Why is the state testing water and soil if risk factors for pediatric brain cancer are unclear?

- DOH is casting a wide net for sources and causes to ensure its investigation is as complete as possible. Both agencies have had discussions with federal partners including the Centers for Disease Control (CDC), National Cancer Institute and the United States Environmental Protection Agency regarding environmental testing strategies. Broad testing of well water and soil will allow the state to assess if there are contaminants present in the environment in The Acreage.

How can I get my water tested?

- There are several qualified commercial testing services available in the area. DOH has a list of qualified laboratories available online at www.pbchd.com. Residents who are interested in having their water tested should consult with these commercial testing services for their pricing.
- If the water is commercially tested, DOH recommends that samples be taken from the kitchen tap to represent the water actually consumed. It is also recommended that residents request analyses for gross alpha (as a measure of radionuclides) and semi-volatiles (525 EPA method – to scan for organic chemicals including some pesticides) and heavy metals including arsenic and lead. DOH is available to go over the commercial lab results, explain any findings, and answer questions residents may have about their water testing reports.

ABOUT THE INTERVIEWS CONDUCTED

Who did the Palm Beach County Health Department interview?

- The Palm Beach County Health Department (PBCHD) interviewed 13 families that have had a child diagnosed with a pediatric brain cancer while living in The Acreage. These interviews were designed in consultation with the CDC and other federal experts.
- The interview included questions related to how long the families have lived at various addresses, schools attended, health of the child, and the parent's occupations and hobbies. The interview also included questions related to diet and life style, family history of illness, immunizations, and many other questions related to potential exposures. Interviews with all 13 families have been completed.

What happens now that those interviews have been completed?

- The PBCHD is now contacting neighboring families to serve as comparison controls and that would be willing to provide answers to the same interview questions. Identification of these control families and completion of control interviews may take a number of weeks.
- After all interviews are complete, the response will be analyzed and commonalities among case families will be assessed as well as differences between case and control families. DOH will use these interviews to better understand behaviors, exposures and risk factors in The Acreage community.

ABOUT PEDIATRIC BRAIN CANCER

Is it possible to find a cause for the increase in pediatric brain cancers in The Acreage?

- DOH cannot guarantee finding a specific cause but is using its available resources to continue the investigation. In addition, DOH has asked for help from the CDC and several national research centers that specialize in brain cancer.

Does DOH plan to do additional analysis such as on other types of childhood cancers or on adult cancers?

- After conducting its initial investigation, DOH determined that there is no elevation of total cancers among children or in adult brain cancer rates in The Acreage.
- The DOH study was in response to a citizen concern involving pediatric brain cancers. As part of the initial analysis, total or all pediatric cancer rates as a group were calculated. DOH noted 15 cases of any type of cancer in a child (0-19 years of age) during 2000-2007 diagnosed in the Acreage. This number is similar and what would be expected when compared to county and state rates.

- The initial analysis also looked at adult rates of brain cancer in The Acreage residents. DOH noted 12 cases of brain and other central nervous system tumors in Acreage adults (20 years of age or older) during the period 2000-2007 which again is similar to county or state rates.
- Based on the findings, DOH is focusing its study efforts on pediatric brain cancers.

How many cases of pediatric brain cancer have been identified?

- There are 13 cases of pediatric brain cancers diagnosed among children living in the Acreage during the years 1994-2008. Cases occurring in 2009-2010 have not yet been verified in the state cancer registry. DOH will continue to review the registry for cases as well as verify any cases that are reported directly to the PBCHD.
- Although some facilities do take longer, hospitals, physicians and laboratories have six months from diagnoses to report to the Florida Cancer Data System (FCDS). Once reported, the registry must verify the information which may take months. For this reason, cases reported in mid to late 2009 may not yet appear in FCDS records.

What if I know of a case of pediatric brain cancer that is not in the registry?

- The analyses and study includes cases of pediatric brain cancer that were diagnosed between 1994 and 2008 among children living in the Acreage. Children who were diagnosed before they moved in or after they left The Acreage were not included. Children who live outside of The Acreage are also not part of the study.
- Please contact the Palm Beach County Health Department if there are any families with children who have pediatric brain cancer that meets these criteria and that have not been contacted by the Department.

There have been reports of at least 50 or as many as 80 adult brain cancers in the community. Why are DOH numbers for adult brain cancer lower?

- DOH numbers are based on verified diagnosis of primary adult brain cancers that occurred in residents living in The Acreage. Considering benign, borderline and malignant brain cancers between 2004 and 2007, 18 cases have been verified.
- Several factors can lead to differences between state counts and community counts. For example, the community counts may include:
 - cases diagnosed within a different time frame,
 - individuals who were not diagnosed while living in The Acreage (former residents or new residents who moved in with the diagnosis),
 - brain cancers that are a result of metastasis from other cancers,
 - diagnoses of other brain conditions that are not considered cancer, or
 - benign and borderline brain cancers diagnosed before 2004 (the year the state began collecting data on these types).

What are the causes of pediatric brain cancer and why can't the state begin testing for specific causes?

Current medical science does not provide clear environmental causes for most types of pediatric brain cancers. A few factors are known to be related and these include the presence of an inherited syndrome and therapeutic radiation of the head. Experimental evidence exists to suggest a relation between pediatric brain cancers and ingestion of cured meats (N-nitroso compounds) and exposure to polyoma viruses although these have not been fully supported by epidemiologic studies.

- Living on a farm or having a parent that does farm work has also been shown to be associated with

an increase in pediatric brain cancers but the set of factors that contributes to this is not known.

- Factors such as epilepsy, brain injury, electromagnetic fields, maternal factors, immunizations, childhood illnesses and other potential risk factors have been mentioned in research papers but have not consistently shown an association.

PRATT & WHITNEY

Why isn't DEP more closely scrutinizing the nearby Pratt & Whitney facility?

- The Pratt & Whitney facility is currently in compliance with all DEP hazardous waste regulations. The facility has a hazardous waste permit that includes operational requirements for a hazardous waste storage area and requirements for the continuation of corrective actions regarding past contamination. As part of the oversight there are more than 400 groundwater monitoring wells at this facility to demonstrate compliance with current permits and to detect whether contamination has the potential to spread beyond its current location.

Has contamination spread beyond the Pratt & Whitney property boundary?

- There are a number of wells along the southern boundary of the Pratt & Whitney property that are monitored semi-annually to demonstrate that no contamination has migrated from the property.
- Those monitoring wells have shown the migration of a chemical called 1,4-dioxane in the groundwater beyond the property boundaries onto the J.W. Corbett Wildlife Management Area (WMA). All other chemicals being monitored in the groundwater are confined within the property boundaries of Pratt & Whitney. Monitoring wells installed on the WMA indicate the 1,4-dioxane had migrated approximately 1,000 feet south of the Pratt & Whitney property line. The facility is actively working to demonstrate to DEP that this is the extent of contamination migration and to ensure that there is no risk to human health or the environment.

WHAT YOU CAN DO TO PROTECT YOUR FAMILY'S HEALTH

What can I do to protect my family during this testing period?

- Since everyone has a unique health profile, it is important that specific health questions about family members be discussed with the primary health care provider. This includes reporting any unusual signs or symptoms such as severe headaches, changes in vision, lack of balance, changes in speech patterns, or any other symptoms of concern.
- Pediatricians and family practice physicians have been advised that DOH is looking into an increase in pediatric brain cancers. DOH will continue to update area physicians on the progress of the investigation.

FLORIDA CANCER DATA SYSTEM (FCDS) April 30, 2010 (Posted May 3, 2010)

Can cancer clusters be identified through the FCDS registry?

- Yes, the FCDS data are sufficient to identify a cancer 'cluster.' However, disease clusters are very difficult to detect and often times, once investigated, what appeared to be a 'cluster' of cancer is not. There are many reasons for this such as miss-classification of the cancer and the population at risk

(as discussed below), the length of residence in the area and possibly the most difficult of all, the cause and effect of cancer. Most cancers do not have a clear cause (etiology). The DOH relies on a variety of sources to report clusters of disease. People often detect outbreaks more quickly than the data can. For example, for the majority of our communicable diseases we rely on the public or health care providers to report outbreaks, and we estimate about 75% of our food borne outbreaks are detected that way.

- Cancer data collected by the FCDS are used by the Florida Department of Health (DOH), other state agencies, federal agencies, non-governmental agencies, local coalitions, health care providers, and researchers to learn more as to the causes of cancer and the pattern of its occurrence.

Why didn't the Department of Health (DOH) surveillance systems pick up the cancer cluster, why did it take a private citizen to report the cluster?

- Several factors make it difficult for the DOH to "pick up" cancer clusters. Cancer occurrence fluctuates from year to year in small areas. The number of reported cases might be higher than expected in one year or in several years, but the rates would go back to "normal" in the following years. To determine if there is a cluster, epidemiologists need to compare the cancer rates, instead of numbers, in the area of concern to either overall county rates or state rates. However, except in Census years, there is no available source for good population data in small areas for calculating cancer rates. More importantly, the Department does not have data on how long people have lived in the area of concern in order to assess if the increased cancer rates are linked to local residential history. (NOTE: The Acreage DOH in-depth study interviews will provide that specific residence information).

- There are many factors affecting the data collection, analysis and reporting of 'Cancer Clusters.'
- It is imperative to define and classify the cancer correctly. A primary brain cancer is very different from a brain cancer that has spread to the brain from a different site of origin (metastatic disease).
 - The primary brain cancer is counted, the metastatic cancer is not. A primary breast cancer is very different from a primary colon cancer, and so on.
- Secondly, you must have all the cancers reported among residents in that area (completeness).
 - You cannot use a subset or a sample of these cases.
- Thirdly, you must have accurate population counts for the area and time period in question.
 - The population data must be accurate at the Census 'block group' and 'census tract' level. Using zip codes for cluster research is very difficult and can be problematic because zip code boundaries change based on the needs of the Postmaster. It is very difficult to accurately connect a cancer case to a zip code area over time.

Incomplete or inaccurate data at any one of the steps above may lead to inaccurate conclusions.

- The FCDS does make data available for cancer researchers who study the epidemiology and causes of cancer for more in depth investigations. In short, zip codes and counties are too large to detect clusters. Reporting of clusters based on this level of geography is not accurate and misleading.

- Cancer is very serious and frightening, and unfortunately a common disease. Current information shows that approximately one out of three Americans will develop cancer in their lifetime, and cancer will affect three out of four families. Also, the risk of developing cancer increases with age, so as the population ages, more cases of cancer in our communities are expected.

Was there a change in the law in 2004 or at any time that modified classifying a "cancer cluster" to include both benign tumors and actual cancer, when previously it was only actual number of cancer cases? How did this affect the analysis done in the Acreage?

- Prior to 2004, the FCDS, by law collected information on **all malignant tumors, regardless of anatomical sites**, diagnosed among residents of the state of Florida. FCDS was not allowed to collect information on other diagnoses such as benign tumors. Please remember that the term "cancer" is defined as a **malignant tumor only**.

- In 2004, the law changed, and the Florida Cancer Data System (FCDS) started collecting benign and borderline brain and central nervous system tumors as required by new federal law, the Benign Brain Tumor Cancer Registries Amendment Act, Public Law 107-260 signed by President Bush in October 2002.

- In addressing the questions raised by Acreage residents, in the years 1981 through 2003, before the law changed and the Registry was only collecting information on malignant tumors, the FCDS can only calculate the expected and observed number of cases based on data reported to the registry -- malignant tumors.

- Since the new federal requirements in 2004, the FCDS collects information on malignant, borderline, and benign brain and central nervous system tumors. Because of this additional data the FCDS can now calculate rates from 2004 going forward for malignant as well as for benign/borderline tumors of the brain and central nervous system combined or separately.

- Some individuals have inquired if this means that the "old data changed." The answer is "No." The "old data" cannot be changed or updated to include data that were never collected by the FCDS. Borderline and benign brain and central nervous system tumors diagnosed before 2004 were not added to the registry after the fact. During the years from 1981 to 2003 there was no surveillance done by the FCDS or any other health agency on the occurrence of benign and borderline tumors. Before 2004, the FCDS collected and reported on **malignant tumors only**.

- The diagnosis for a malignant tumor does not change. Also, tumors considered benign or borderline before 2004 did not change to become classified as malignant. In other words, **the law simply allowed for the collection of various types of brain tumors and there were no changes in the actual classification of these brain tumors**.

- The addition of benign and borderline brain and CNS tumor cases to the registry in 2004 does not alter the finding of increased rates of pediatric brain cancers in the Acreage.

- In the Tables 7 or 10 of the [Acreage Cancer Review Report of August 2009](#), pages 27 & 30, –the ratio of what we expected to see and what actually occurred was increased.

When will the data for 2009 be available for inclusion in analysis?

- The reporting deadline for 2009 cases is in June 2010. There is an additional period of time for the Florida Cancer data System (FCDS) to compare reported records with multiple other sources of data for case findings and to follow back with medical facilities for record verification. The 2009 data will be provisionally available sometime in December of 2010, and will be considered a final data set later in 2012.

Are all medical facilities being asked to report new cases at time of diagnosis as we are in the middle of a vital study to save lives and make important decisions for people residing in the Acreage community?

- We want to have the most current and accurate information available as we continue our investigation. We are working closely with the Florida Cancer Data Registry to speed the process of evaluation and confirmation of reported cases. We have also reached out to area physicians to remind them that it is very important that all cases are reported to the registry as quickly as possible. We have developed a secure communication link from the Neighborhood Information Center so we will be able to check and see if individual cancers have been reported to the registry. Acreage residents are able to check whether their case or a family members' case (with appropriate documentation) have been reported to the registry. If no record exists, the registry will be able to explore why this may not have occurred if the cancer is of a type that should be reported and if enough time has passed that it is likely to have been reported. If you wish to use this service, please be sure to bring a photo id and legal documentation if you are requesting this on behalf of a family member. Please call the Acreage Neighborhood Information Center at (561) 798-7082 to determine what documents are needed and if you have questions about the process. We are hoping that this will be a valuable resource to the Acreage residents concerned about the registry.

Have you used the Department of Veterans Affairs Central Cancer Registry in conjunction with our state cancer registries in order to obtain incident rates?

- Presently, the rate of occurrence for new cancers diagnosed in the state of Florida does not include data from the Veterans Affairs (VA) hospitals located throughout the state.

- In the past, VA hospitals were not required to report to the state cancer registries as VA medical facilities are subject to federal jurisdictions, not state. In October 2009, the Department of Veterans Affairs issued Veterans Health Administration (VHA) Directive 2009-046 providing policy on releasing VA central cancer registry data to state cancer registries to ensure a complete understanding of the national cancer burden and mortality. The FCDS is working with the Chief Medical Officer over the VA hospitals located in Florida to ensure these hospitals will report to the FCDS starting with cancers diagnosed in 2010.

FCDS web site: www.fcds.med.miami.edu

CONTACTS & MORE INFORMATION

Whom can residents contact at DOH for more information?

- For additional questions, residents can contact the Palm Beach County Health Department at 800 Clematis Street, West Palm Beach, FL 33401. Visit the website www.pbchd.com, or call the main telephone number for information (561)840-4500.

Whom can residents contact at DEP for more information?

- For additional questions about environmental issues, residents can contact DEP's Southeast District Office Outreach Coordinator, Cristina Llorens, at (561) 681-6605 or Cristina.Llorens@dep.state.fl.us.

How can I keep up-to-date on The Acreage investigation?

- DOH is opening a resident's resource office in The Acreage and will be sending regular updates to you by email. In addition, DOH is updating The Acreage webpage at www.pbchd.com as new information becomes available.

- DOH is adding a function to the Palm Beach County Health Department so you can sign up for email alerts that will alert you when new information is posted.

What has been DEP's public outreach effort to inform the public?

- DEP has developed a web site, www.dep.state.fl.us, dedicated to The Acreage that houses relevant information to keep the public apprised.
 - Staff members are also available to answer questions about The Acreage and DEP's environmental assessment projects.
- www.cdc.gov - Q & A