



June 24, 2009

Ms. Barbara Taylor, Director
Office of Environmental Health Services, Bureau of Public Health
West Virginia Department of Health and Human Resources
One Davis Square, Suite 200
Capitol and Washington Streets
Charleston, WV 25301

Dear Ms. Taylor:

This letter is in response to your request on March 13, 2009, for ATSDR's perspective on advice regarding breastfeeding for women in the area affected by perfluorinated octanoic acid (PFOA) contamination near the DuPont Washington Works facility in Lubeck, West Virginia.

PFOA has been found in samples of human blood and milk. Breastfeeding represents a potential exposure pathway for infants. Relatively little is known regarding the effects of PFOA on humans. There are no data describing the effects in infants exposed to PFOA through breast milk. Large scale human studies performed to date have documented few if any adverse clinical effects in adults. However, some studies on laboratory animals have found adverse developmental effects. There remain many notable uncertainties and large data gaps when considering health effects associated with PFOA exposures in humans.

There are data indicating human breast milk PFOA levels are approximately 100 times lower than maternal serum levels. Properly maintained treatment systems, in municipal water systems or in-home systems for private wells, are effective at removing perfluorochemicals from drinking water. Because public and private water supplies in the area of the Washington Works Facility are now filtered to remove PFOA to levels below the EPA site-specific action level, the water currently consumed by women in the area likely contributes very little PFOA to breast milk.

However, women who have lived in the area and may have been drinking contaminated water for years could have serum PFOA levels above the national average. These women might have elevated PFOA levels in their breast milk. ATSDR supports a woman's choice to breastfeed or not, however it is ATSDR's opinion that the clear health and nutritional benefits of breast feeding far outweigh the uncertain risks associated with the PFOA contained in the milk. As an individual choice, a woman may choose to reduce or eliminate the breast milk they feed to their infants. Women who are considering making such a choice may wish to consult their pediatrician.

For women and infants in the area of the Washington Works Facility, the very well established benefits of breastfeeding outweigh the unlikely potential of health effects related to PFOA exposures. It is ATSDR's recommendation that the area mothers should continue breastfeeding their infants.

A similar position, when considering various environmental contaminants, is supported by recommendations from the World Health Organization, the U.S. Surgeon General, and the American Academy of Pediatrics. All of those organizations provide guidance that recommend breastfeeding. Further information and support for the beneficial effects of breastfeeding can be found at www.womenshealth.gov/breastfeeding/.

We look forward to continuing to work with your office to provide technical and health education assistance in this area.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Lora Siegmann Werner', with a long horizontal flourish extending to the right.

Lora Siegmann Werner, MPH
Senior Regional Representative
Division of Regional Operations
Agency for Toxic Substances and Disease Registry (ATSDR), Region 3

Cc: Dr. Tina Forrester, ATSDR Division of Regional Operations
Dr. Clement Welsh, ATSDR Division of Regional Operations
LaFreta Dalton, ATSDR Division of Health Assessment and Consultation
Alan Parham, ATSDR Division of Health Assessment and Consultation
Tony Turner, WV BPH
Bin Schmitz, WV BPH
Dr. Don Thimson, WV BPH
Dr. Alan Ducatman, West Virginia University
Dr. Edward Emmett, University of Pennsylvania

Examples of References Related to Breastmilk and Perfluorinated Compounds:

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