

PERSPECTIVES ABOUT ACCEPTABLE RISK:

Who are we protecting and did we mean to?

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Themes Today

- Introduction and background
- Why focus on target risk
- Origin of 1×10^{-6}
- Some allowable risk levels: is 1×10^{-6} magical?
- Perspectives about target risk: various causes of death
- How protective is 1×10^{-6} when used to derive HHWQC?
- Improving public health decision making

Introduction and Background

- Journey of several decades in assisting states develop human health water quality criteria (HHWQC)
- Catalyzed by the results of probabilistic risk assessments (PRA) that we and others have conducted in the past couple of years
 - To whom (which percentile(s) of the population) should different allowable risk levels apply?
 - Little guidance exists on how to interpret the range of risks estimated PRA
- The questions raised about target risk apply to all risk assessments, not just PRA
- How protective are commonly used target risks? Over-protective? Under-protective? Just right?
- This is a recap of some of the highlights of that journey to date

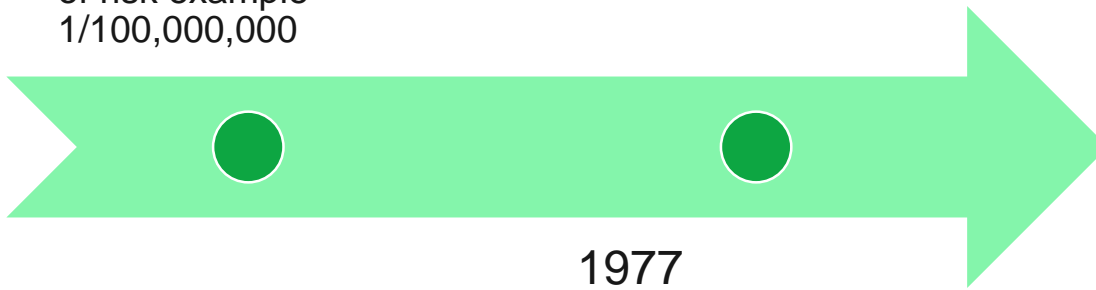
Why Focus on Target Risk?

- $$\text{HHWQC} = \frac{\text{TR} \times \text{BW}}{(\text{DI} + (\text{FCR} \times \text{BAF})) \times \text{CSF}}$$
- We have spent substantial resources refining several of these inputs
- Their effect on HHWQC is often limited
 - Typical changes are in the percents or a few-fold
 - Translate to “only” similar change in HHWQC
- Target risk is different
 - Can result in a 10-fold change in HHWQC
 - Not necessarily true for PRA-based HHWQC

Origin of 1×10^{-6}

1973

- FDA: minimal probability of risk example $1/100,000,000$



1977

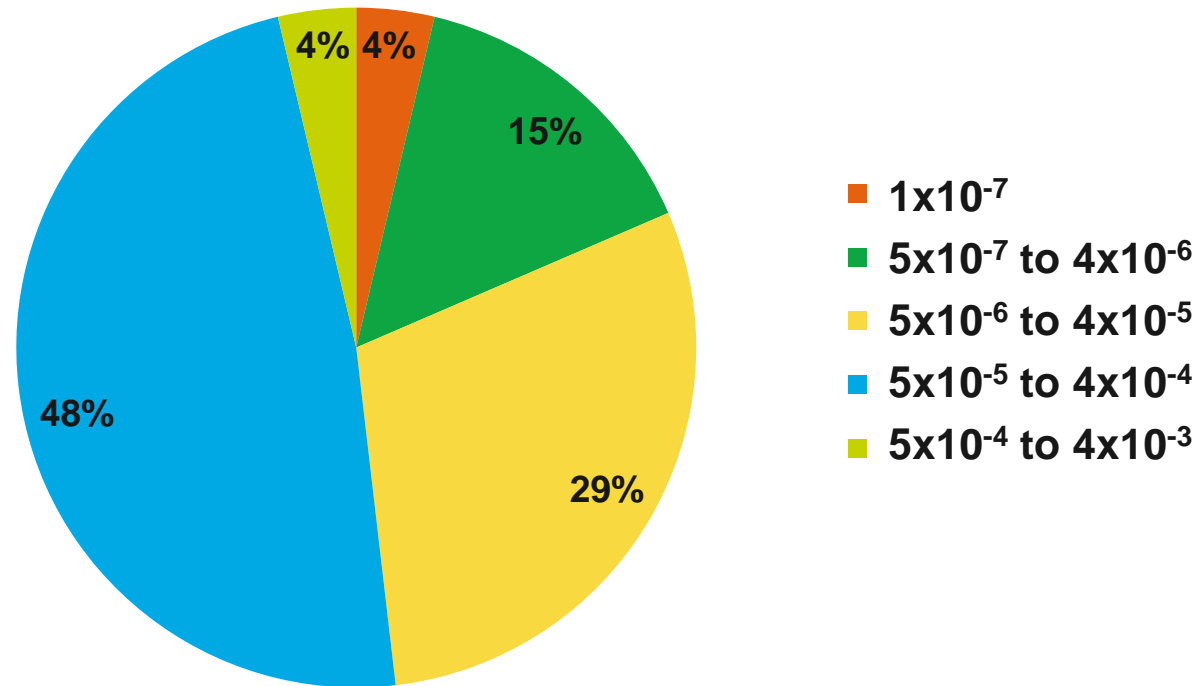
- FDA: benchmark for experimental risk $1/1,000,000$

No detailed publically available analysis is available that documents 1×10^{-6} as the more appropriate acceptable risk level to use when setting criteria, clean-up levels and other human health risk-based benchmarks (rather than 1×10^{-5} , 1×10^{-7} , 1×10^{-4} , etc.).

1x10⁻⁶ is Not Magical: Benchmarks for “Acceptable” Risk

U.S. Law / Regulation	Focus	Risk Standard	Criterion for Carcinogens
Clean Water Act	Surface water	Adverse health impacts	1x10 ⁻⁵ to 1x10 ⁻⁷
Safe Drinking Water Act	Public drinking water	Any adverse effect	Goal: 0 Enforceable standard: 1x10 ⁻⁴ to 1x10 ⁻⁷
Toxic Substances Control Act	Chemicals manufactured or imported into the United States	Unreasonable risk	1x10 ⁻⁴ (inferred, absent clear policy)
Occupational Safety and Health Act	Worker protection	Significant risk over 45-year working life	1x10 ⁻³
Comprehensive Environmental Response, Compensation, and Liability Act, or Superfund	Uncontrolled hazardous waste sites	No significant risk	1x10 ⁻⁴ to 1x10 ⁻⁶

Approximate Risk Levels Associated with MCLs for Drinking Water



Estimating Cancer Incidence in a Population

To estimate the number of cancers from chemicals in the environment one can't use the exposures (and risks) estimated in a typical EPA risk assessment.

Unless one determines the arithmetic average exposure and risk, the calculation will overestimate population exposure and risk.

Example 1: Drinking Water Intake

Range Percentiles	Midpoint Percentile	Midpoint DI (L/day)	N	Total Intake (DI x N) (L/day)	Excess Lifetime Cancer Risk	Annual Cancer Incidence
0% - 2.5%	1%	0.0189	2500	4.7E+01	2.4E-07	8.4E-06
2.5% - 7.5%	5%	0.0931	5000	4.7E+02	2.3E-06	1.7E-04
7.5% - 12.5%	10%	0.184	5000	9.2E+02	4.6E-06	3.3E-04
12.5% - 17.5%	15%	0.275	5000	1.4E+03	6.9E-06	4.9E-04
17.5% - 22.5%	20%	0.367	5000	1.8E+03	9.2E-06	6.6E-04
22.5% - 27.5%	25%	0.46	5000	2.3E+03	1.2E-05	8.2E-04
27.5% - 32.5%	30%	0.555	5000	2.8E+03	1.4E-05	9.9E-04
32.5% - 37.5%	35%	0.654	5000	3.3E+03	1.6E-05	1.2E-03
37.5% - 42.5%	40%	0.757	5000	3.8E+03	1.9E-05	1.4E-03
42.5% - 47.5%	45%	0.865	5000	4.3E+03	2.2E-05	1.5E-03
47.5% - 52.5%	50%	0.98	5000	4.9E+03	2.5E-05	1.8E-03
52.5% - 57.5%	55%	1.1	5000	5.5E+03	2.8E-05	2.0E-03
57.5% - 62.5%	60%	1.23	5000	6.2E+03	3.1E-05	2.2E-03
62.5% - 67.5%	65%	1.38	5000	6.9E+03	3.5E-05	2.5E-03
67.5% - 72.5%	70%	1.54	5000	7.7E+03	3.9E-05	2.8E-03
72.5% - 77.5%	75%	1.72	5000	8.6E+03	4.3E-05	3.1E-03
77.5% - 82.5%	80%	1.94	5000	9.7E+03	4.9E-05	3.5E-03
82.5% - 87.5%	85%	2.21	5000	1.1E+04	5.5E-05	3.9E-03
87.5% - 92.5%	90%	2.56	5000	1.3E+04	6.4E-05	4.6E-03
92.5% - 97.5%	95%	3.11	5000	1.6E+04	7.8E-05	5.6E-03
97.5% - 100%	99%	4.19	2500	1.0E+04	5.2E-05	1.9E-03
Sum:			100000	1.2E+05	--	0.041

Mean:	1.21	100000	1.2E+05	2.9E-05	0.041
95th Percentile:	3.11	100000	3.1E+05	7.8E-05	0.11

Compare: **Annual cancer incidence of 0.041 vs. 0.11**

Example 2: Fish Consumption Rate

Range Percentiles	Midpoint Percentile	Midpoint FCR (g/day)	N	Total Intake (FCR x N) (g/day)	Excess Lifetime Cancer Risk	Annual Cancer Incidence
0% - 2.5%	1%	0.283	2500	7.1E+02	3.5E-07	1.3E-05
2.5% - 7.5%	5%	1.01	5000	5.1E+03	2.5E-06	1.8E-04
7.5% - 12.5%	10%	1.72	5000	8.6E+03	4.3E-06	3.1E-04
12.5% - 17.5%	15%	2.4	5000	1.2E+04	6.0E-06	4.3E-04
17.5% - 22.5%	20%	3.09	5000	1.5E+04	7.7E-06	5.5E-04
22.5% - 27.5%	25%	3.82	5000	1.9E+04	9.6E-06	6.8E-04
27.5% - 32.5%	30%	4.61	5000	2.3E+04	1.2E-05	8.2E-04
32.5% - 37.5%	35%	5.47	5000	2.7E+04	1.4E-05	9.8E-04
37.5% - 42.5%	40%	6.44	5000	3.2E+04	1.6E-05	1.2E-03
42.5% - 47.5%	45%	7.53	5000	3.8E+04	1.9E-05	1.3E-03
47.5% - 52.5%	50%	8.78	5000	4.4E+04	2.2E-05	1.6E-03
52.5% - 57.5%	55%	10.2	5000	5.1E+04	2.6E-05	1.8E-03
57.5% - 62.5%	60%	12	5000	6.0E+04	3.0E-05	2.1E-03
62.5% - 67.5%	65%	14	5000	7.0E+04	3.5E-05	2.5E-03
67.5% - 72.5%	70%	16.6	5000	8.3E+04	4.2E-05	3.0E-03
72.5% - 77.5%	75%	19.8	5000	9.9E+04	5.0E-05	3.5E-03
77.5% - 82.5%	80%	24.2	5000	1.2E+05	6.1E-05	4.3E-03
82.5% - 87.5%	85%	30.3	5000	1.5E+05	7.6E-05	5.4E-03
87.5% - 92.5%	90%	39.9	5000	2.0E+05	1.0E-04	7.1E-03
92.5% - 97.5%	95%	58.7	5000	2.9E+05	1.5E-04	1.0E-02
97.5% - 100%	99%	112	2500	2.8E+05	1.4E-04	5.0E-03
Sum:			100000	1.6E+06	--	0.056

Mean:	16.1	100000	1.6E+06	3.9E-05	0.056
95th Percentile:	58.7	100000	5.9E+06	1.5E-04	0.21

Compare: **Annual cancer incidence of 0.056 vs. 0.21**

Perspectives on target risk: Number of cancers

- Each incidence of cancer is tragic
- Cancer is common
- The increased incidence associated with typically used target risks is immeasurable when compared to background occurrence
- This is even true for the “less stringent” target risks

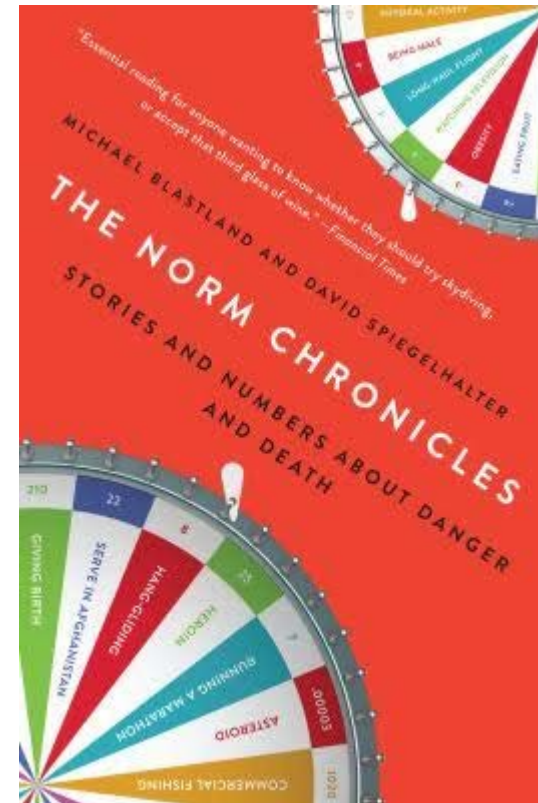
Background Cancer Incidence Compared to Hypothetical Cancer Incidence Associated With a Range of Target Risks

Region	2014 Population (millions)	2014 Background Cancer Incidence	Hypothetical Increased Cancer Incidence per Year			
			1×10^{-7}	1×10^{-6}	1×10^{-5}	1×10^{-4}
United States	318.9	1,665,540	0.5	5	46	456
Florida	19.89	114,560	0.03	0.3	3	28
Washington	7.06	38,230	0.01	0.1	1	10
Idaho	1.63	7,990	0.002	0.02	0.2	2

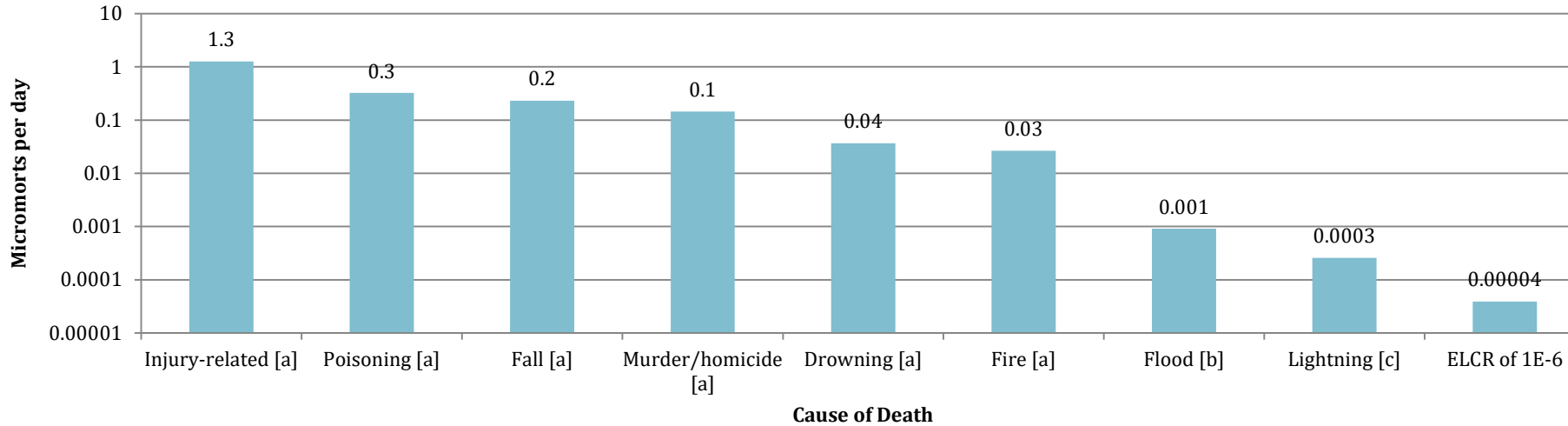
American Cancer Society. 2016. Cancer Facts & Figures 2014. Retrieved June 03, 2016, from <http://www.cancer.org/research/cancerfactsstatistics/cancerfactsfigures2014/>

Perspectives on target risk: Micromorts

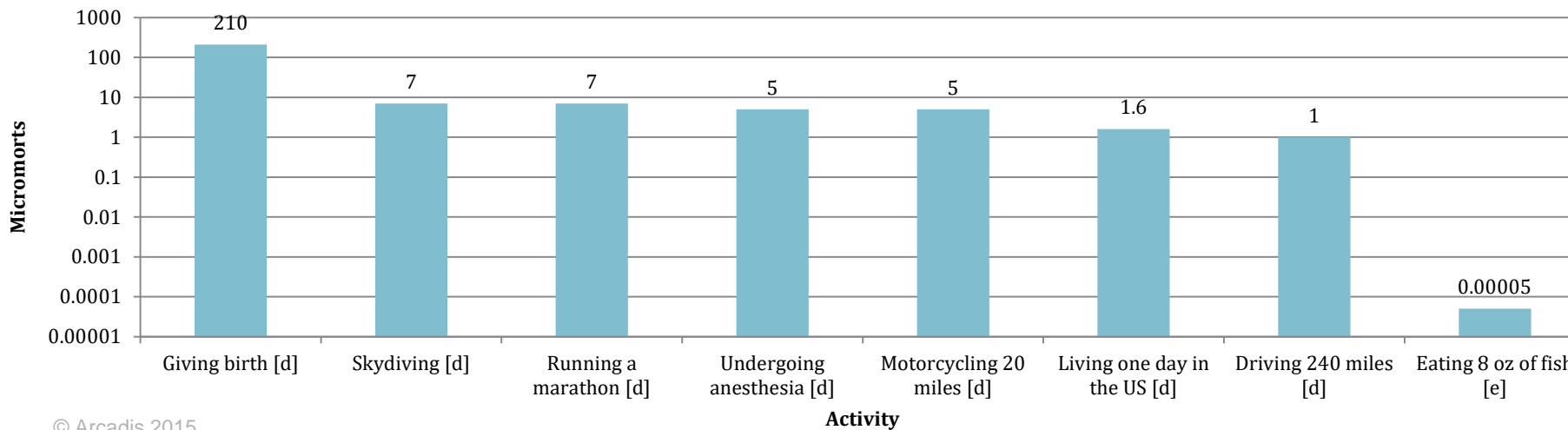
- A one in one million probability of death
- Developed by Prof. Ron Howard of Stanford
- Described wonderfully by David Speigelhalter and Michael Blastland in “The Norm Chronicles: Stories and Numbers about Danger and Death”
- Our daily lives are filled with micromorts, why are higher target risks not acceptable?



Perspectives on target risk: Micromorts

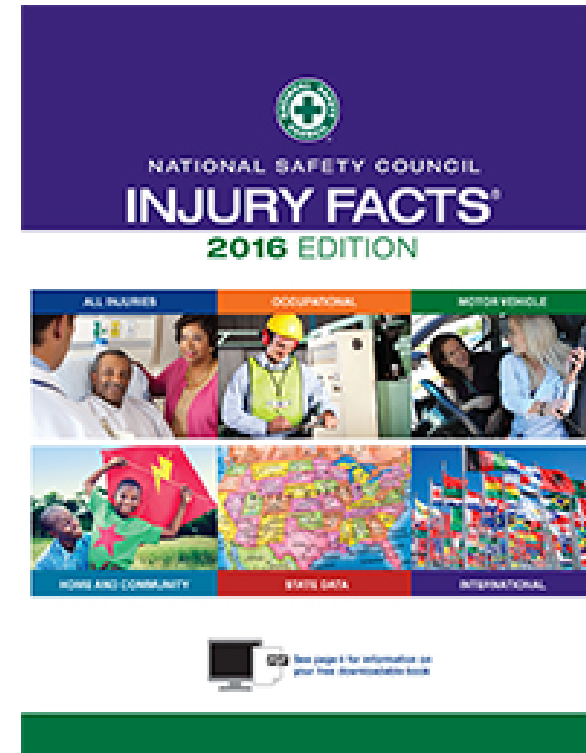


- a. Murphy, S.L., J. Xu, and K.D. Kochanek. 2013. Deaths: final data for 2010. National Vital Statistics Reports 61(4):1-118.
- b. National Oceanic and Atmospheric Administrator (NOAA). 2015a. Flood Fatality Data. Accessible via: http://www.nws.noaa.gov/hic/flood_stats/recent_individual_deaths.shtml (January).
- c. NOAA. 2015b. Lightning Fatalities. Accessible via: <http://www.lightningsafety.noaa.gov/fatalities.htm> (January).
- d. Blastland, M. and D. Spiegelhalter. 2014. The Norm Chronicles: Stories and Numbers about Danger and Death. Basic Books.
- e. Assuming organism-only AWQC are based on a fish consumption rate of 175 grams per day and risk level of 1×10^{-6} .



Perspectives on target risk: Deaths from Injuries

- People don't choose to die from injuries and accidents
- National Safety Council tracks deaths from injuries
- Publishes "Injury Facts" every year
<http://www.nsc.org/learn/safety-knowledge/Pages/injury-facts.aspx>
- Cancer incidence associated with typically used target risks similar to or lower than least likely causes tracked by NSC



Odds of dying

Cause of Death	Odds of Dying	Lifetime Risk
Living	1 in 1	1
Heart Disease and Cancer	1 in 7	1.4x10 ⁻¹
Chronic Lower Respiratory Disease	1 in 27	3.7x10 ⁻²
Intentional Self-harm	1 in 97	1.0x10 ⁻²
Unintentional Poisoning By and Exposure to Noxious Substances	1 in 103	9.7x10 ⁻³
Motor Vehicle Crash	1 in 113	8.8x10 ⁻³
Fall	1 in 133	7.5x10 ⁻³
Assault by Firearm	1 in 358	2.8x10 ⁻³
Pedestrian Incident	1 in 672	1.5x10 ⁻³
Unintentional Drowning and Submersion	1 in 1,183	8.5x10 ⁻⁴
Exposure to Fire, Flames or Smoke	1 in 1,454	6.9x10 ⁻⁴
Choking from Inhalation and Ingestion of Food	1 in 3,408	2.9x10 ⁻⁴
Pedacyclist Incident	1 in 4,337	2.3x10 ⁻⁴
Exposure to Excessive Natural Heat	1 in 10,784	9.3x10 ⁻⁵
Exposure to Electric Current, Radiation, Temperature and Pressure	1 in 14,695	6.8x10 ⁻⁵
Cataclysmic Storm	1 in 63,679	1.6x10 ⁻⁵
Contact with Hornets, Wasps and Bees	1 in 64,706	1.5x10 ⁻⁵
Being Bitten or Struck by a Dog	1 in 114,622	8.7x10 ⁻⁶
Lightning Strike	1 in 174,426	5.7x10 ⁻⁶

Perspectives About Causes of Death

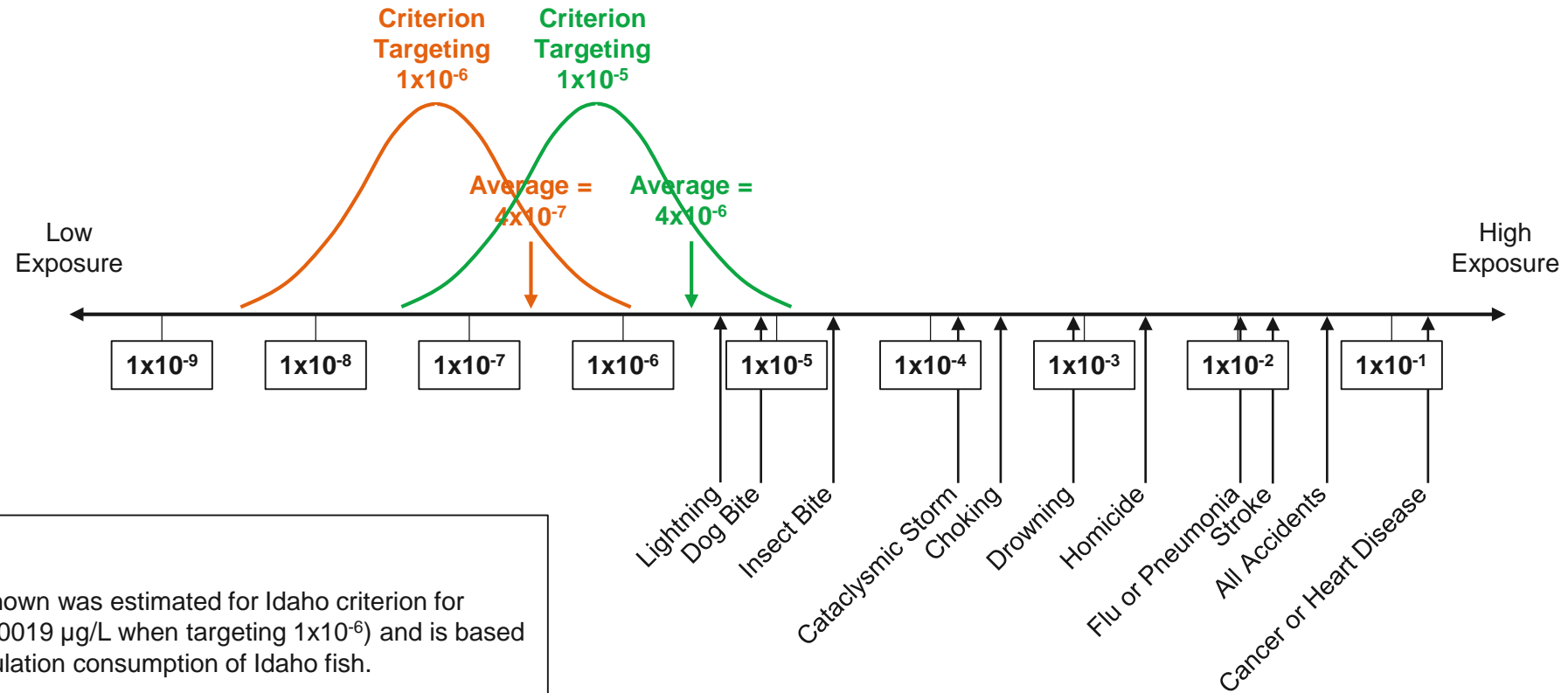


a. As reported by the Detailed Tables for the National Vital Statistics Report (NVSr) "Deaths: Final Data for 2013." Accessible via http://www.cdc.gov/nchs/data/nvsr/nvsr64/nvsr64_02.pdf.

b. Range of expected fatalities is 10-100x times lower than allowable risk level to account for overestimate of risk to the average member of the population.

c. 4% of the population lives within a mile of a CERCLA site. "Population Surrounding 1388 Superfund Remedial Sites. OSWER/Office of Communications, Partnerships, and Analysis September 2015."

Protectiveness of HHWQC



Notes:

Risk distribution shown was estimated for Idaho criterion for PCBs (WQC = 0.00019 $\mu\text{g/L}$ when targeting 1×10^{-6}) and is based on state-wide population consumption of Idaho fish.

Risk distributions associated with WQC represent cancer incidence, not mortality. Therefore, the risk distributions overstate the risk of death from cancer associated with WQC.

Lifetime Risk

Improving Public Health Decision-Making

- Realization and acknowledgment of the existence of a range of risk from chemicals in the environment – *we are not the same*.
- Understanding the magnitude of various causes of death.
- Appreciating the balance between limited resources and the benefits derived from decisions that affect public health.
- Open and transparent dialogue about who we are protecting, at what allowable risk level(s), and why.
- The dialogue and decisions are difficult.

Societal norms: Acceptance of causes of cancer

- In 2009 562,340 people in the US died of cancer.^a
- Approximately 3.5% of these deaths, about 19,500 people, were attributed to a specific cause.^b
- The US population in 2009 was about 310,000,000 people. That leads to a per capita cancer risk of about 6.3×10^{-5} from this cause.
- Per capita consumption of this cause was about 8.7 kg/year in 2009 (about 24 grams a day, or about 0.8 ounces per day).
- What is this cause?
- Insight into what we (society) consider acceptable.

^a Cancer Facts and Figures 2009, American Cancer Society

^b National Cancer Institute, Fact Sheet about this cause of cancer (reviewed June 24, 2013)

QUESTIONS / DISCUSSION