

Center for
Human
Health and the
Environment



PFAS as emerging unregulated contaminants



Jane Hoppin, ScD NC State University

Per- and Polyfluoroalkyl Substances (PFAS)

Resistant to:

Water

Stains

UV radiation

Used in consumer products since the 1950s:

Surfactants, lubricants, adhesives

Carpet, upholstery, clothing

Car interiors

Food packaging

Nonstick cookware

Cleaning products

Personal care products

Fire-fighting foam

Chemical Properties Lead to:

Persistence and bioaccumulation

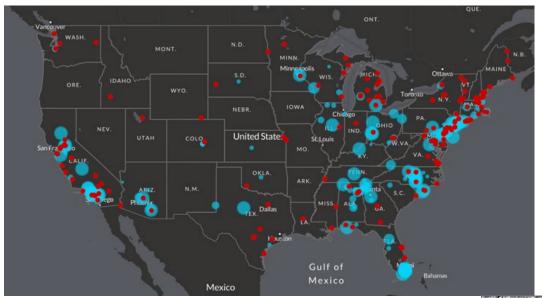
Water solubility and water contamination

Ubiquitous in indoor environment and blood

Transport around globe in ocean currents and atmosphere



A Global Problem



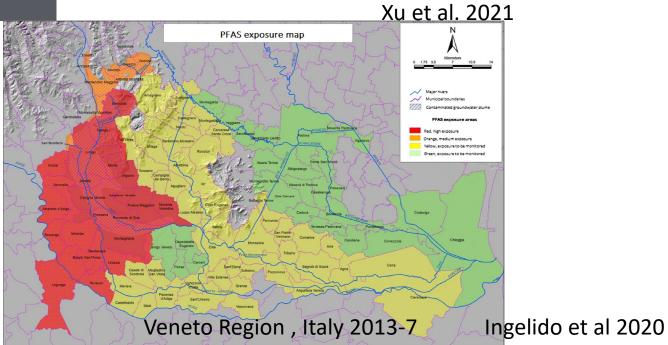
Ronneby, Sweden 2013

>10,000 ng/L PFAS in

drinking water

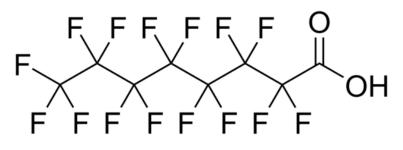
Contamination Sites EPA Tap Water Detection

Source: https://www.ewg.org/interactive-maps/2017 pfa/



Two PFAS have been widely studied \rightarrow "Legacy Compounds"

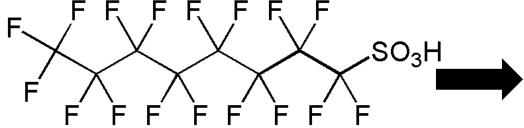
Perfluorooctanoic acid (PFOA / C8)



Goretex, Teflon



Perfluorooctane sulfonate (PFOS)



Common uses:

Common uses:

Firefighting, stain repellent





NATIONAL Sciences

ACADEMIES Medicine

Medicine

Guidance on PFAS Exposure, Testing, and Clinical Follow-Up

https://www.nationalacademies.org/our-work/guidance-on-pfas-testing-and-health-outcomes



Health Effects of PFAS: Conclusions

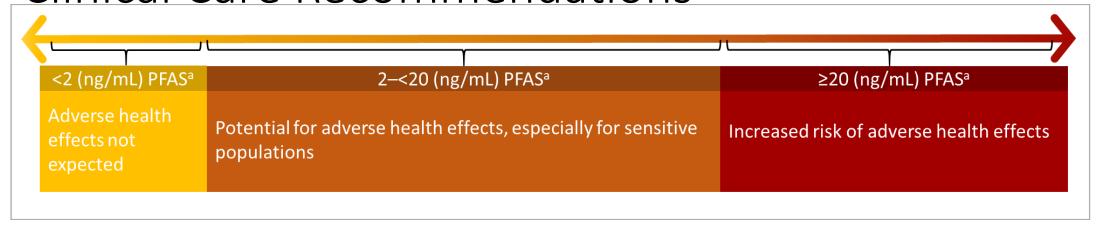
Sufficient evidence of an association

- Decreased antibody response (in adults and children)
- Dyslipidemia (in adults and children)
- Decreased infant and fetal growth
- Increased risk of kidney cancer (in adults)

Limited suggestive evidence of an association

- Increased risk of breast cancer (in adults)
- Increased risk of testicular cancer (in adults)
- Liver enzyme alterations (in adults and children)
- Increased risk of pregnancy-induced hypertension (gestational hypertension and preeclampsia)
- Thyroid disease and dysfunction (in adults)
- Increased risk of ulcerative colitis (in adults)

PFAS Testing and Concentrations that Can Inform Clinical Care Recommendations



Recommendation 5-3: Clinicians should use serum or plasma concentrations of the sum of PFAS* to inform clinical care of exposed patients, using the following guidelines for interpretation:

- Adverse health effects related to PFAS exposure are not expected at less than 2 nanograms per milliliter (ng/mL).
- There is a potential for adverse effects, especially in sensitive populations, between 2 and 20 ng/mL.
- There is an increased risk of adverse effects above 20 ng/mL.

^{*}Simple additive sum of MeFOSAA, PFHxS, PFOA (linear and branched isomers), PFDA, PFUnDA, PFOS (linear and branched isomers), and PFNA in serum or plasma. Caution is warranted when using capillary blood measurements as levels may differ from serum or plasma levels.





Started in response to community concerns

Designed to answer the community questions:

What is GenX?

Is it in me?

Does it have health effects?

Partners

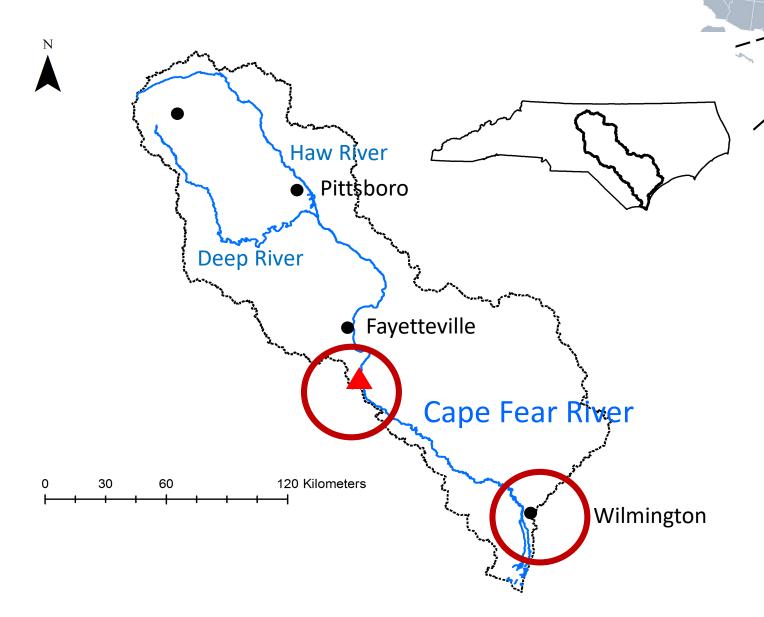
CHHE (NC State, ECU)

Cape Fear River Watch

New Hanover County Health Department



Cape Fear River Basin, North Carolina



Largest watershed in NC

Supplies ~1.5M people with drinking water







Detlef Knappe, NCSU Mark Strynar, USEPA Andy Lindstrom, USEPA



Letter

pubs.acs.org/journal/estlcu

Legacy and Emerging Perfluoroalkyl Substances Are Important Drinking Water Contaminants in the Cape Fear River Watershed of North Carolina

Mei Sun,**,†** Elisa Arevalo, Mark Strynar, Andrew Lindstrom, Michael Richardson, Ben Kearns, Adam Pickett, Chris Smith, and Detlef R. U. Knappe[‡]

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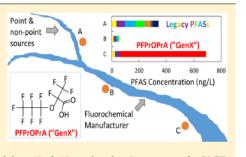
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National Exposure Research Laboratory, U.S. Environmental Protection Agency Research, Triangle Park, North Carolina 27711,

Cape Fear Public Utility Authority, Wilmington, North Carolina 28403, United States

Supporting Information

ABSTRACT: Long-chain per- and polyfluoroalkyl substances (PFASs) are being replaced by short-chain PFASs and fluorinated alternatives. For ten legacy PFASs and seven sources recently discovered perfluoroalkyl ether carboxylic acids (PFECAs), we report (1) their occurrence in the Cape Fear River (CFR) watershed, (2) their fate in water treatment processes, and (3) their adsorbability on powdered activated carbon (PAC). In the headwater region of the CFR basin PFECAs were not detected in raw water of a drinking water treatment plant (DWTP), but concentrations of legacy PFASs were high. The U.S. Environmental Protection Agency's lifetime health advisory level (70 ng/L) for perfluorooctane-



¹Town of Pittsboro, Pittsboro, North Carolina 27312, United States

[&]quot;Fayetteville Public Works Commission, Fayetteville, North Carolina 28301, United States

June 15, 2017



Chemours: GenX polluting the Cape Fear since 1980

By Adam Wagner and Tim Buckland GateHouse Media

Posted Jun 15, 2017 at 2:00 PM Updated Jun 16, 2017 at 12:06 AM

Wilmington-area officials demand answers, action during invitation-only meeting with company

WILMINGTON -- A former DuPont plant has been discharging an unregulated toxic chemical into the Cape Fear River since 1980, company officials revealed Thursday at a meeting with local and state officials.

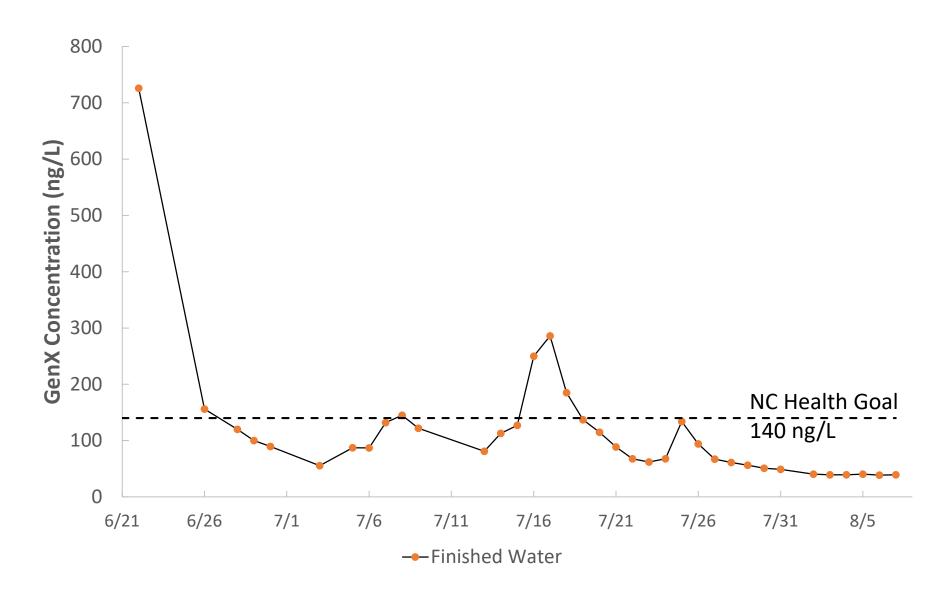
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Public meeting Wilmington, North Carolina, June 2017



GenX concentrations after fluorochemical manufacturer announced on 6/21/2017 that it stopped discharging GenX



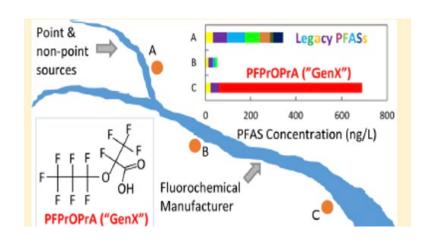
Responding to Community Concerns

People want to know:

Am I exposed?

Is the chemical in my body?

What are the health effects?



Challenges at the time:

What chemicals to look for?
No analytical standards
No half life information
Little or no toxicology data
No comparison populations



Study Design

Wilmington residents on Cape Fear Public Utility Authority water, ages 6 and older

344 total
44 provided samples 6 months apart
(Nov 2017, May 2018)

Collect blood and drinking water
Analyze for GenX and other PFAS
Analyzed for lipids, thyroid hormones, and comprehensive metabolic panel
Measured BMI

Report back results to community, individuals



PFAS Serum Results

We detected 7 PFAS in the blood of almost everyone in Wilmington

Three brand new PFAS

Nafion byproduct 2

PFO4DA

PFO5DoA

Also: PFO3DoA, NVHOS, Hydro-Eve

Legacy PFAS

PFOA

PFOS

PFNA

PFHxS

We did not detect GenX in anyone.



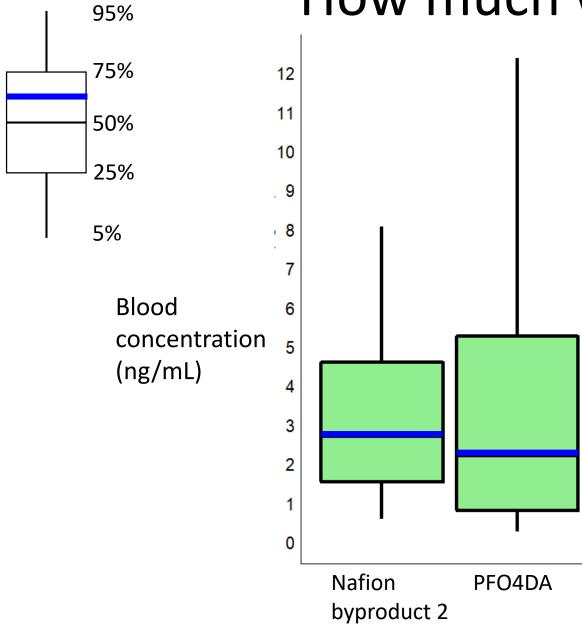
Three long chain fluoroethers in Wilmington blood

1. Nafion byproduct 2 (99%)

2. PFO4DA (98%)

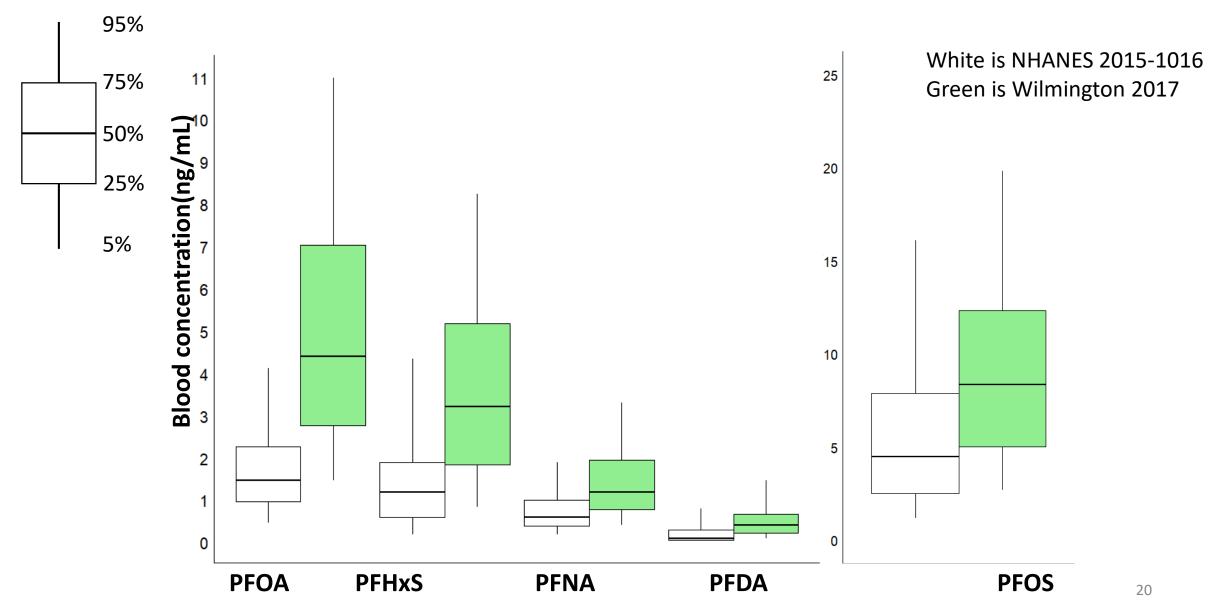
GenX Exposure Study

How much was found?

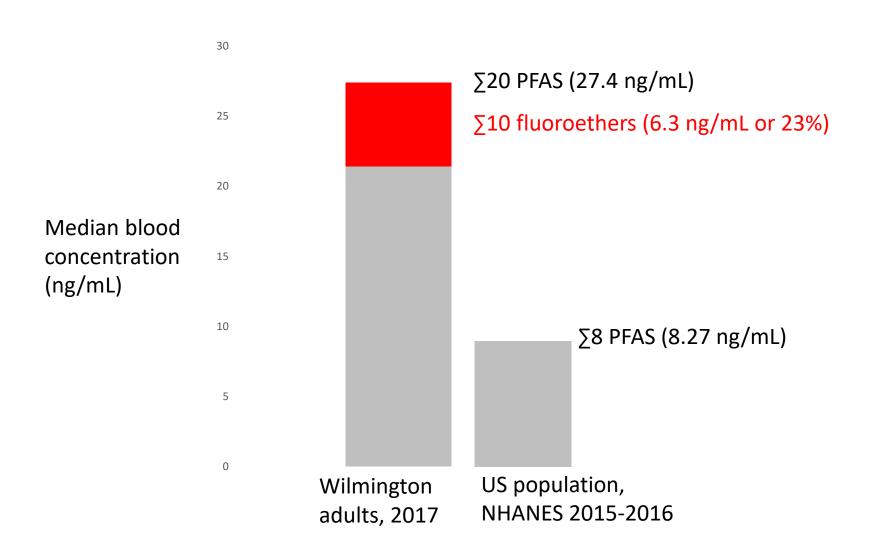




Elevated legacy PFAS in Wilmington



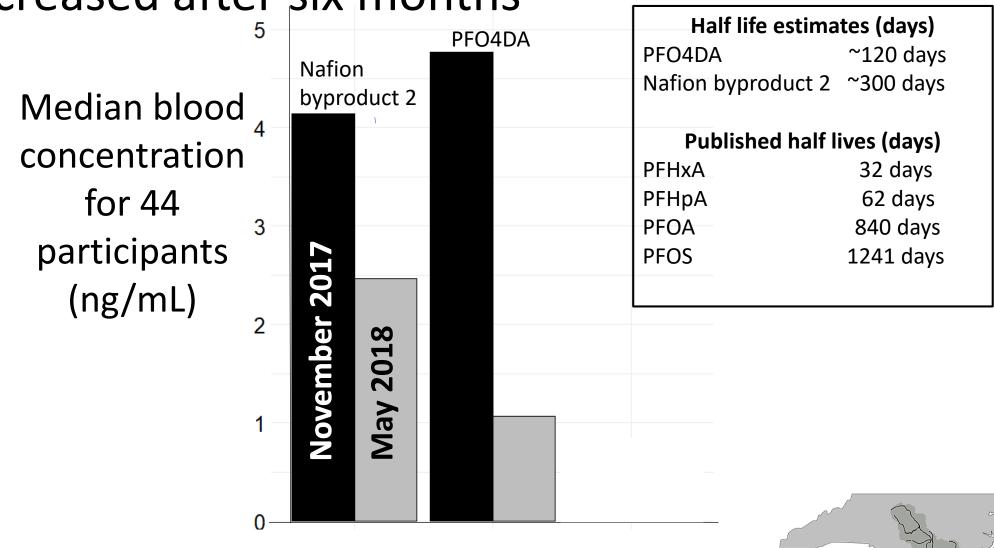
Elevated body burden in Wilmington relative to US population





Blood concentrations of fluoroethers

decreased after six months



GenX Exposure Study

If GenX is not in your blood, what does it mean?

GenX has a very short biological half-life (~3 days)

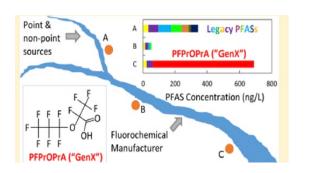
What we measure in the body represents recent exposure

It does not mean that there's no risk from past exposures.

To understand long term health effects, we need to estimate past exposure using information on water levels, water consumption, for the 40 years that these chemicals were discharged to the river.



We looked for GenX, but we found



New PFAS in the blood of all Wilmington residents, 5-11 months after discharge to the river stopped

Residents in this community had elevated levels of all legacy PFAS

Drinking water levels of PFOA predict this blood level.

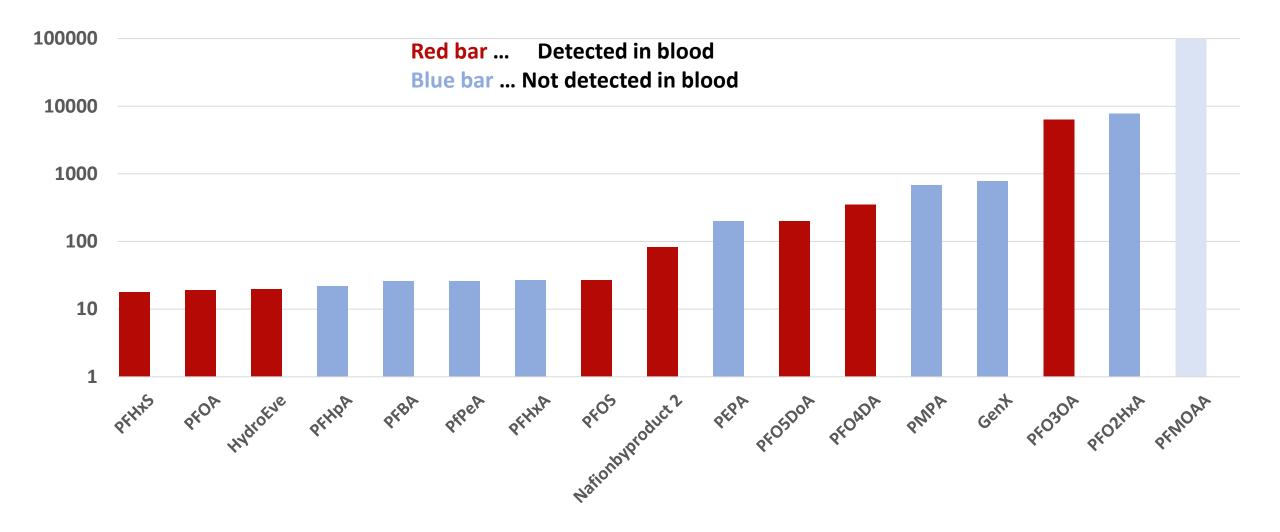
No information about what potential peak exposures levels might have been.

~25% of PFAS in blood was related to the new chemicals

We could not measure and quantify all new chemicals, so this is an underestimate.



PFAS levels in Cape Fear River water (ng/L) in 2015



Evaluating PFAS Exposure

Some PFAS are biologically persistent (legacy)

Biomarkers are good integrated measures on long term exposure Half-life ranging from 2-7 years

Fluoroethers have short half lives

3 days for GenX

~1 year for Nafion byproduct 2

Biomarkers may be poor measures of long term exposure

May need to reconstruct exposure history

All exposures happen together. Difficult to disentangle individual chemicals







GenX Study Team

Jane Hoppin, Nadine Kotlarz, Detlef Knappe, Claire Critchley, Katy May, Michael Cuffney, Julia Kaplan, Dylan Wallis, Morgan Lennon, Rob Smart, Grace Campbell, Marisa Incremona, Adrien Wilkie, Charlie Reed, Gracie Miller

David Collier, Suzanne Lea, Jamie DeWitt, Melissa Johnson Andy Lindstrom, Mark Strynar, Theresa Guillette, James McCord

Community Partners

Kemp Burdette, Dana Sargent, Deborah Maxwell, Amanda Boomershine, Veronica Carter, Jonelle Kimborough, Phillip Tarte

Funders

NIEHS, UNC Policy Collaboratory

Study participants, community volunteers, and everyone who has helped us along the way