

MEMORANDUM

DATE: August 12, 2013

TO: Delegate Stephen Lafferty
Senator Roger Manno
Members of the Maryland Pesticide Reporting and Information Work Group

FROM: Lynn R. Goldman, M.D., M.P.H.
Dean, School of Public Health and Health Services

RE: Pesticide Data and Public Health

Pesticides can have a negative impact on public health, especially in children. Generally, children are more at risk than adults are from pesticide use. Many children live in close juxtaposition to agricultural areas with significant pesticide use. Furthermore there is significant urban pesticide use, in household, landscaping, gardens, golf courses and parks, which can directly impact children and other vulnerable populations. Pesticides can also pose a threat to natural ecological areas. Maryland's economy is strongly dependent on the health of the Chesapeake Bay and Watershed which is in turn impacted by pesticide uses and releases, in agriculture, forestry and in urban pest control.

To understand and manage the potential cumulative impacts on health and the environment, there is no better information than high quality data on usage, information that today is completely lacking in Maryland. Having a centralized reporting system for data regarding pesticide usage would enable policymakers and researchers to link human and environmental pesticide exposures to uses. Other states in the US have for many years supported such pesticide reporting systems, for example, New York, Arizona, Washington and California. These systems have been useful for epidemiology studies of childhood cancer and autism (California), for providing information to local government and physicians about potential pesticide hazards that are present in communities (all states), and for assessment of urban pesticide usage and risks (New York). Pesticide use reporting not only provides useful information for scientists but also provides citizens the right to know about pesticide use in their communities. There is no evidence that pesticide use reporting is burdensome or disruptive for agriculture nor for the pesticide application industry and despite these reporting systems have not spawned litigation in other states. In short, pesticide use reporting is an environmental

management tool that provides tracking information that is valuable to communities, to public health, environmental management and to researchers. To address your questions:

1. What data exists and who uses it in the public health sector? In Maryland, information about use and sales of pesticides is in the hands of pesticide distributors and salespeople, but it not available to the government, the general public or researchers. The USDA has a program to estimate pesticide sales nationally but that program does not provide information about pesticide use in any one state or region.

2. What gaps have been identified and by who? We don't know what the pesticide usage patterns are in Maryland, either in urban or in rural environments. We don't know whether or where pesticide usage is occurring in proximity to residential areas nor do we know the volume of pesticides that are applied in the Chesapeake Bay watershed in Maryland.

3. If you had more information, how valuable could it be and is there other information that would be more useful? Such information would be extremely valuable.

4. What is not being done now because the data are not available? A pesticide use reporting system would be a keystone to the design of efforts to collect even more valuable information. For example, in California and in Washington researchers have used the pesticide usage reports to design studies that measure pesticide levels in nearby residential areas, in air and in water. Minus the pesticide usage reporting data it would not have been possible to efficiently design those studies.

Thank you for your attention to this important issue. If you have any questions please feel free to call me at 202-994-5179.

Truly yours,

A handwritten signature in black ink, appearing to read "Lynn R. Goldman". The signature is fluid and cursive, with a long horizontal stroke at the end.

Lynn R. Goldman, M.D., M.P.H.

Dean, School of Public Health and Health Services