

**Comments of the American Thoracic Society
before the
Chartered Clean Air Scientific Advisory Committee (CASAC) Public Teleconference on
Particulate Matter (PM)
March 28, 2019
Presented by Kevin R. Cromar PhD**

My name is Kevin Cromar and I am speaking on behalf of the American Thoracic Society. We wish to express our genuine thanks to the individual members of CASAC for their hard work preparing comments on the draft ISA. It can sometimes be forgotten, as we proceed deeper in the policy process, that what we are really working on is evaluating how to best protect the health of individuals from the adverse effects of outdoor air pollution. Our members treat patients every day that know what it is like to struggle breathing, feel discomfort, or experience an exacerbation of their illness when air quality is poor. It is the professional opinion of our society that the scientific studies contained in the ISA are a good representation of these experiences at the population-level, effectively characterize the mechanisms by which they occur, and provide a strong foundation to determine concentration-response relationships.

We are, therefore, greatly concerned with much of the content in CASAC's letter and question whether it truly represents the views of all charter members. In the past, CASAC letters have carefully indicated if specific statements in their consensus responses did not have unanimous support from all individuals. This practice was not followed in the current draft and we strongly encourage CASAC to remedy this lack of transparency in the final version of their letter by identifying each instance where there is not unanimous support. This can be done following examples in previous CASAC letters in which the number of individuals that are not in agreement with specific statements is specified.

In particular it would be important to know if there is agreement among CASAC members on some of the more extreme viewpoints in the letter, including:

The stated opinion that the studies included in the draft ISA are unable to provide a factual basis for making causal determinations relevant to policymaking;

The stated belief that causal determinations cannot be done objectively but is merely the reflection of "personal opinion;" and;



Multiple suggestions that scientific judgments made from the collective expertise of a wide-range of qualified individuals are unreliable.

ATS strongly disagrees with these fringe viewpoints as contained in the consensus response. We also strongly reject the scattershot of criticisms regarding potential limitations of individual studies to inform causal determinations within the ISA.

Genuine concerns regarding potential threats to valid causal determinations should be explicitly demonstrated, and not just hypothetically proposed as has been done in the CASAC letter, before claiming that study results are too ambiguous to contribute towards making causal determinations and estimating concentration-response relationships.

Finally, the lack of sufficient depth and breadth of applicable expertise among the members of chartered CASAC was not only explicitly acknowledged by a majority of CASAC members but is also clearly obvious from some of the basic misunderstandings raised in their draft letter. This structural flaw in CASAC composition is particularly glaring in regards to the review of epidemiology evidence in the ISA. The strong personal opinions of individual CASAC members as included in the draft letter is no substitute for subject-matter expertise or unbiased consideration of all available evidence. At least three of the seven CASAC members not only request additional expertise but more specifically request the reconstitution of the PM panel of experts. We agree with this request and strongly urge EPA to reconvene the disbanded PM review panel if another draft of the ISA is to be prepared. Thank you.