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NATIONAL CENTER FOR POLICY RESEARCH
FOR WOMEN & FAMILIES

— C P R —

November 16, 2000

Joseph A. Levitt
Director
Center for Food Safety and Applied Nutrition
Food and Drug Administration
200 C Street, SW
Washington, DC 20204

Dear Mr. Levitt:

The National Center for Policy Research for Women and Families appreciated the opportunity to participate in the meeting regarding consumer guidance about methylmercury exposure. We believe that this is an issue that deserves immediate attention and would like to reiterate some of the comments we made at the meeting.

Based on the National Academy of Sciences (NAS) report on the potential adverse effects of chronic methylmercury exposure, we are convinced that the FDA must do more to protect vulnerable populations (pregnant women, women who might become pregnant, nursing mothers, and young children) from the risk of that exposure. In our experience, NAS is very cautious, so when they suggest that 60,000 newborns each year may be at risk for neurological problems due to methylmercury, we take that estimate very seriously.

In the absence of complete information about the levels of methylmercury contamination of fish, we believe that the FDA should warn vulnerable populations not to eat swordfish, shark, and fresh tuna, since they have been previously shown to contain unsafe levels of methylmercury. We believe that the risks outweigh the potential benefits since at-risk consumers can simply switch from eating swordfish, shark, and fresh tuna, to other fish and seafood that have equal nutritional benefits but are not contaminated with methylmercury. When consumers purchase swordfish, shark, and fresh tuna that is either prepackaged or packaged at a fish counter, the package should bear a label that tells pregnant women, women who might become pregnant, nursing mothers, and young children not to eat it. At restaurants, a similar warning should be on menus if those items are served.

We believe that more information is needed about the possible health risks of canned tuna, which, for most Americans, is consumed much more frequently than swordfish, shark, or fresh tuna. Unless the FDA has compelling evidence that canned tuna is not contaminated with methylmercury, we urge that the FDA advise vulnerable populations to consume canned tuna infrequently (less than one can per week) until a more comprehensive analysis of the methylmercury content of canned tuna can be performed. We also urge that analyses be conducted as soon as possible, given the popularity of canned tuna in this country among women

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and young children. It is possible that more data about the methylmercury content of different kinds of canned tuna will lead us to a better understanding of the risk. New information should be used to revise the advisory as soon as it becomes available. The FDA should require that an advisory be printed clearly on the label of all tuna cans warning pregnant women, women who might become pregnant, nursing mothers, and small children to eat canned tuna infrequently.

We believe our recommendations are consistent with the precedents that have been set to provide clear warnings for pregnant women and children, even in the absence of data establishing specific risks. For example, warning labels are used to caution pregnant women not to consume any alcoholic beverages, even though research has not established that occasional consumption is dangerous.

Finally, we urge the FDA to set a regulatory limit for methylmercury of 0.1 $\mu\text{g}/\text{kg}/\text{day}$, which is the EPA standard, and has been determined to be "scientifically justifiable for the protection of public health" according to the NAS. The FDA should monitor the levels of methylmercury in shark, swordfish, and fresh and canned tuna, and remove them from the market if those levels are violated.

We want to express our thanks to you for holding this important meeting. It provided an excellent forum to discuss the perspectives of several consumer and public health organizations.

Sincerely,



Patricia Lieberman, Ph.D.
Staff Scientist



Diana Zuckerman, Ph.D.
Executive Director

Cc: Dr. Jane Henney