

Health impacts: real or perceived?

By Ward Peck
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Biddeford Mayor Wallace Nutting has said the primary concern regarding the Maine Energy Recovery Company is its effect on public health in the community.

Currently, Biddeford and Saco are conducting confidential negotiations with the incinerator owners. How any agreement, would resolve questions about public health are currently unknown.

Yet throughout the facilities existence, questions have lingered about its effect on the environment and the health of people in the community.

In the past 10 years, there have been two significant attempts to answer that question: A Health Risk Assessment, funded by MERC and a comprehensive health study, which never quite got off the ground.

The two studies offer different approaches to answering the questions: Is MERC bad for our health, how, and in what ways?

According to Jeffrey Meyers, a private attorney hired by Biddeford for the negotiations, a 1991 consent agreement between MERC and Maine Department of Environmental Protection, required the company to conduct a health risk assessment.

Conducted by Cambridge Environmental, Inc. of Cambridge, Mass., and released in 1996, the HRA, "identifies, describes, and quantifies potential risks to human health posed by the Maine Energy Recovery Company," according to the document.

The assessment sought to achieve this goal by applying smokestack emissions to air dispersion computer models to determine the level of contamination the plant contributes to people, air, soil, water and the food chain.

Cambridge Environmental's findings concluded that the plant's effect on health and environmental degradation is well below commonly accepted thresholds.

To many, this conclusion was not surprising, given that the study's authors were selected and paid for by MERC.

"The word on the street was we did the HRA and that's why it came out well," Ken Robbins, MERC's general manager said.

Last year, in an effort to allay such concerns, MERC volunteered to update the HRA, this time allowing the cities to select an independent party to review the assessment's protocol, methodology and conclusions. This so-called "peer review" process is intended to give the study more legitimacy.

MERC hoped to begin the update in November and have it complete by March, said Robbins, but is still waiting for the cities to select a firm to conduct the review. Robbins said the company believes a decision is imminent.

Officials from Biddeford, which is heading the reviewer selection, seemed to be acting on incorrect information in the selection process.

Both Meyers and Biddeford's environmental code officer, Brian Phinney, maintained the HRA was required as part of its Clean Air Act license renewal.

In response to a question, Meyers wrote, "This update is required by Maine DEP and is expected to be submitted about July 1, 2005, when MERC is required to submit its application for the license renewal. The update is not a time intensive task; any peer review will be able to be completed well before MERC is required to submit the risk assessment to DEP"

When asked for clarification due to MERC's insistence that the HRA update was a voluntary initiative unrelated to the license, Meyers retracted the statement, calling it a "mistake." Yet, as his previous statement reads, the city was using the licensing process to dictate the peer review schedule.

Saco Mayor Mark Johnston was also under the impression the HRA update was a mandated requirement and only the peer-review portion was voluntary. Johnston has said the company was risking its license by submitting to the peer-review.

"If the peer-group finds the study flawed, they could lose their license," Johnston said. That conclusion now seems suspect given the assessment and license are not related.

The timing and rationale for the study aside, there is widespread disagreement over what the assessment update will find and what it will mean.

"It is all of our collective interest to find a quality peer-reviewer," Robbins said. When asked whether the conclusions will allay public concern about the plant's health effects, Robbins declined to speculate, saying he wouldn't speculate on conclusions of a study that is yet to be done.

Speaking of the 1996 assessment, Robbins said he is unaware of any specific rebuttals to the assessment's assumptions, methodology or conclusions.

"It was done according to scientific principles and executed consistent with scientific methods," Robbins said.

Some critics of health risk assessment believe they are flawed in general because they don't give a complete picture of a facility's effects on public health.

Ronald Deprez, president of Portland-based Public Health Resource Group, said HRAs are flawed because they only look at the pollutants in isolation and not in context with other factors.

"As an epidemiologist, I feel it falls far short of a clear picture," Deprez said. [The emissions] by itself may not pose a hazard, but represent additional burdens on a persons health."

As a contributing factor, the pollution may help tip the balance toward higher incidences of disease, Deprez said.

To resolve such questions, Deprez recommends the communities conduct a comprehensive health study, to get a complete picture of the state of public health and potential concerns.

Deprez admits he is biased toward such health studies since his company is in the business of conducting them.

In fact, he was approached a number of years ago to do one in Biddeford and Saco.

In April of 2000, the mayors of Saco and Biddeford approached Edward McGeachey, president of Southern Maine Medical Center, to design a comprehensive health study. The focus of the study would be to resolve, "persistent concerns of citizens about air emissions from the Maine Energy Recovery Company in Biddeford," according to McGeachey.

By early 2001, the hospital, in partnership with the University of New England Public Health Resource Group, submitted a design study to the two cities.

The study, known as the Biddeford-Saco health Assessment and Surveillance Project, would take a comprehensive survey of the communities' state of health. Mortality rates, socio-economic factors, ambient air quality health care intake and discharge records and a sample population's health issues would be gathered and analyzed. The study also called for a monitoring plan to keep collecting data on a periodic basis.

The cities choose not to pursue the study, largely based on the associated cost, estimated at about \$800,000 for the initial study and \$250,000 per year for the monitoring.

In our next installment, we will explore the idea of a comprehensive health study, what it would entail, and what conclusions it could or could not draw about MERC's effect on public health.