Pompton Lakes Health CAG Meeting Summary August 9, 2011

The following is a summary of the August 9, 2011 meeting of the Community Advisory Group for Health (Health CAG). The summary is organized by topic area, and should not be considered as chronological minutes from the meeting. The main issues raised during the meeting are as follows:

<u>Update on Community Health Profile</u>: Jerry Fagliano reminded the Health CAG of the goal of the Community Health Profile, which is to evaluate whether certain health outcomes observed in Pompton Lakes differ from surrounding towns and from the State of New Jersey. Pam Agovino then presented the "Preliminary Analyses of Cancer Incidence" report which compared cancer incidence data from 1990-2008 for Pompton Lakes, the groundwater plume area of Pompton lakes, and surrounding municipalities, in comparison to cancer incidence in the State of New Jersey. The analysis updates previous cancer incidence reports done by the DHSS for the plume area and the entire town, by adding the most recent years of cancer incidence data. The preliminary analysis also included pie charts comparing the relative frequencies of the most prevalent cancer types in Pompton Lakes, the surrounding towns and the State. The overall pattern of cancer frequencies was similar in the three areas.

In Pompton Lakes as a whole, the incidence of all cancers combined from 1990-2008 was statistically significantly elevated among females, but not males, compared to the State. However, none of the 13 specific cancer types examined showed statistically significant excesses. In the groundwater plume area of Pompton Lakes, there were no statistically significant elevations of any cancer type or for all cancers combined in the period 1990-2008. Though not statistically significant in this time period, non-Hodgkin lymphoma among males and kidney cancer among females were elevated to a similar degree as reported in the previous analysis. In the six surrounding towns, the incidence of all cancers combined from 1990-2008 was statistically significantly elevated among females, but not males, as was seen for Pompton Lakes; melanoma in females and thyroid cancer in males were statistically significantly elevated, while lung cancer in males was statistically significantly low.

<u>Questions/Comments from the Health CAG</u>: Lisa Riggiola stated that she had heard that New Jersey has the highest cancer rates in the country. Jerry and Pam explained that it depends on the specific cancer. Jerry stated that New Jersey does not have the highest rates overall, although cancer rates tend to be generally higher in the northeastern states versus other parts of the country.

(An excellent on-line data resource is the micromaps presentation in State Cancer Profiles:

http://statecancerprofiles.cancer.gov/micromaps/

For the latest year, 2008, NJ ranked 13th among states for males and 9th among states for females for overall cancer incidence; 8th among states for breast cancer in females; 36th for lung cancer in males and 25th for lung cancer in females, for example.)

Dave Kleusner asked about statistics presented at a previous Health CAG meeting, in which DHSS reported that cancer mortality was 33% higher in Pompton Lakes than in the State of New Jersey. Jerry reviewed the findings from the preliminary mortality analysis and explained that cancer mortality among males and among females in the period 2004-2006 were both reported as 32% higher than the State, and that these elevations were not statistically significant. He also pointed out that the DHSS is planning to add an additional year of mortality data (2007) and incorporate information from the 2010 census in the analysis that will appear in the Community Health Profile. DHSS will also include data on which cancer types are contributing to the excess in mortality.

<u>Update on Community Health Survey</u>: Jerry introduced Jessie Gleason, a post-graduate fellow now working with the DHSS through a program of the Council of State and Territorial Epidemiologists (CSTE). Jessie will be taking the lead on designing and implementing the Community Health Survey. She gave a brief presentation on the survey design and explained the role of an Institutional Review Board (IRB) in reviewing and approving the survey protocol and procedures; she also discussed the difference between conducting surveys for research purposes versus for public health practice. DHSS will seek IRB approval prior to conducting the survey. The survey is planned to obtain health information from current and former residents of current households in the groundwater plume area of Pompton lakes, and will be used to compare rates of disease among this population in comparison to national statistics. DHSS expects to begin outreach for the survey some time in October 2011.

Questions/Comments from the Health CAG: There was some discussion regarding the difference between a study and a survey. Mike Serra questioned why we couldn't skip the survey and go directly to a study. Jerry explained that we need a specific focus for a study and the survey will help to narrow the broad range of health outcomes expressed by the community and determine if a more focused study is needed. This will be complementary to the information developed in the Community Health Profile. Concerns were raised about the reliability of the information provided during the survey and if medical records would be reviewed to confirm diagnoses. Helen Martens stated that the DHSS could randomly contact medical doctors to confirm certain health conditions and to have patients give their consent for DHSS to contact their physicians. DHSS will consider this option. Cas Stark asked if the survey would give good information on past conditions. Jerry explained that we could get some good information on patient history through the design of this survey, since there are many current residents who have been in the community for a long time. Lisa Riggiola stressed that she knows of many people who want to participate in the survey, that it should be expanded to include more former residents, and that she believes the survey is an important tool.

Agency Action Items:

DHSS will provide links to cancer data websites on its Pompton Lakes web page.

DHSS will expand on the previously presented mortality analysis which will include expanding the time period, incorporating 2010 census data, and evaluating mortality for specific cancers.

DHSS will continue development of the Health Survey.

List of Health CAG Meeting Attendees, August 9, 2011:

Community Members (based on sign-in sheet)

Lisa Riggiola	Barbara Doka	Jessica Doka
Cas Stark	Michael Keough	Ruth Paez
Helen Martens	Debbie Priestner	Mary Anne Orapello
Tom Kennedy		

Pompton Lakes Council Members Mike Serra Terri Reicher Bill Baig

Other Interested Parties Jacky Grindrod (Congressman Pascrell's Office)

Department of Health and Senior Services Jerry Fagliano Somia Aluwalia Christa Fontecchio Pam Agovino

EPA Representatives Dave Kleusner