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(CERTIFIED TRANSCRIPT)

MACRO INTERNATIONAL, INC.

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FOOD AND DRUG ADMINISTRATION

HEALTH AND NUTRITION: METHYL MERCURY

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Tuesday, November 14, 2000

6:00 p.m.

Moderator: Lynn Halverson

1 P-R-O-C-E-E-D-I-N-G-S

2 MODERATOR: Wow, and you guys all know
3 what's going on, huh?

4 CHORUS: Yeah.

5 MODERATOR: Okay. What we're going to
6 be talking about today is, basically, how
7 consumers should be informed about health risks.
8 I'm sure that as you are going through pregnancy
9 your doctor has given you all kinds of
10 information about health risks and potential
11 health risks. What kinds of information do they
12 give you in terms of what you should do, not do,
13 eat, and not eat, those kinds of things?

14 PARTICIPANT: No smoking.

15 MODERATOR: No smoking. Okay.

16 PARTICIPANT: Not too much caffeine.

17 MODERATOR: Okay. That's why you guys
18 left all the diet coke for me.

19 PARTICIPANT: Just about all of it.

20 MODERATOR: Oh.

21 PARTICIPANT: Take your vitamins and
22 all.

1 MODERATOR: Okay.

2 PARTICIPANT: What cheeses you can't
3 eat.

4 MODERATOR: Hmm. Why is that?

5 PARTICIPANT: I'm not sure why, but you
6 can't have certain types of cheese, like, I think
7 it's a Brie cheese that you can't eat. You can't
8 have Caesar salad dressing.

9 MODERATOR: Because?

10 PARTICIPANT: It's got raw egg in it.
11 Can't have any raw eggs.

12 PARTICIPANT: Really?

13 PARTICIPANT: Yeah. Well, that's what
14 mine says

15 MODERATOR: All right. What other
16 advice do you get?

17 PARTICIPANT: My doctor's all quick.
18 Any advice I get, I read on my own. But I'll
19 think on it while they're answering.

20 PARTICIPANT: I read -- I was telling
21 them earlier, I read a study -- I don't know what
22 it was, who put it out -- but they were saying

1 that if you go to a restaurant it's best not to
2 drink their ice tea because they don't -- you
3 don't know how long it has been steeping and
4 bacteria could form in there.

5 MODERATOR: Oh.

6 PARTICIPANT: So, it's best not to
7 drink tea from an unknown source, basically,
8 unless you make it yourself.

9 PARTICIPANT: Water is always best.

10 MODERATOR: Okay.

11 PARTICIPANT: No MSG.

12 MODERATOR: No MSG? Okay.

13 PARTICIPANT: He's been talking to me a
14 lot about water and cranberry juice and stuff
15 like that.

16 MODERATOR: Okay. What kinds of foods
17 do they tell you you should be eating? Do they
18 say anything?

19 PARTICIPANT: Fruits and vegetables.

20 MODERATOR: Fruits and vegetables.

21 PARTICIPANT: No empty calories.

22 MODERATOR: Okay.

1 PARTICIPANT: It's just a balance.

2 MODERATOR: Okay.

3 PARTICIPANT: Balanced, you know,
4 pyramid. You should follow the pyramid.

5 MODERATOR: All right.

6 PARTICIPANT: So many of your wheats
7 and cereals and grains.

8 MODERATOR: Um-hmm. Shawna, you
9 mentioned protein I think?

10 PARTICIPANT: Yeah, because we take
11 vitamins. So, I guess, from the iron. We need
12 more iron.

13 MODERATOR: Okay. How about things
14 like meats and fishes, do you tend to eat -- what
15 kinds of things do you tend to eat there?

16 PARTICIPANT: Lots of chicken.

17 MODERATOR: Chicken.

18 PARTICIPANT: Yeah. Lots of chicken.

19 MODERATOR: Why is that?

20 PARTICIPANT: Because it's good. Like,
21 I don't eat meat or fish. I only eat poultry,
22 but I know you know you need so much iron and

1 because I don't eat red meat, I like -- I try to
2 compensate with broccoli and other things that
3 are iron fortified.

4 PARTICIPANT: I hear fish is good.

5 MODERATOR: Okay. Why would you eat
6 fish?

7 PARTICIPANT: I forget why it is.

8 PARTICIPANT: Brain food.

9 PARTICIPANT: Huh?

10 PARTICIPANT: Brain food.

11 (Laughter.)

12 PARTICIPANT: You'll make a three in
13 it.

14 PARTICIPANT: It's just the vitamins in
15 it, I've heard whatever.

16 MODERATOR: Okay. So, are you eating
17 more fish while you're pregnant or less or --?

18 PARTICIPANT: Probably about the same.

19 MODERATOR: Okay. Anyone else?
20 Monica?

21 PARTICIPANT: I --

22 MODERATOR: So, red meat, white meat,

1 poultry, fish.

2 PARTICIPANT: As long as it's cooked
3 and not raw.

4 MODERATOR: Okay. And, Edy, you don't
5 eat --

6 PARTICIPANT: I don't eat fish or beef.

7 MODERATOR: Why is that?

8 PARTICIPANT: Just have no taste for
9 them.

10 MODERATOR: Rose, how about you?

11 PARTICIPANT: Mostly, the red meats.

12 As for the fish, he had mentioned to me not to
13 eat anything like swordfish or anything from that
14 group.

15 MODERATOR: Why was that?

16 PARTICIPANT: He said there's a higher
17 chance of bacteria in it, even if it's cooked
18 fully.

19 MODERATOR: Hmm, okay. Kathy?

20 PARTICIPANT: Kathy just eats.

21 (Laughter.)

22 PARTICIPANT: I do. When I'm not

1 pregnant I eat really good, but I don't eat red
2 meat when I'm not pregnant. But for the protein
3 and all of that, I don't have -- there's no
4 reason like because I don't want you to kill an
5 animal that I won't eat it. I'll eat it while
6 I'm pregnant.

7 MODERATOR: Poultry you eat, fish?

8 PARTICIPANT: Um-hmm. Baked, yeah.
9 Oh, yeah. I love fish. I eat a lot of fish. I
10 like that.

11 MODERATOR: About how much fish do you
12 eat, then?

13 PARTICIPANT: I don't know, once -- at
14 least once or twice a month.

15 MODERATOR: Okay. Shawna?

16 PARTICIPANT: I eat. The only thing I
17 will not eat is liver.

18 (Laughter.)

19 PARTICIPANT: Anything else, I will eat
20 it.

21 MODERATOR: Okay. So, you like red
22 meat, white meat, fish?

1 PARTICIPANT: Yeah, pork.

2 MODERATOR: Okay. All right. How
3 about other kinds of environmental contaminants
4 that could get into the air that you breath or
5 water you drink?

6 PARTICIPANT: Lead.

7 MODERATOR: Okay.

8 PARTICIPANT: To make sure your paint
9 is okay, your house isn't too old, and if it is,
10 get it fixed.

11 MODERATOR: Okay. Are there any
12 environmental contaminants in air, water or food
13 that you've been particularly warned about or
14 that you're --

15 CHORUS: Secondhand smoke.

16 MODERATOR: Secondhand smoke, okay.

17 PARTICIPANT: Just being around it.

18 MODERATOR: All right. How about
19 things like pesticides? Have you heard anything
20 about -- concerns about pesticides?

21 PARTICIPANT: Well, we had -- when our
22 dogs had fleas, we had to have the Terminex come.

1 That was a pain because I had to clear it with
2 the doctor to make sure I could be around
3 whatever they were using, and then I had to wait
4 on the Terminex man to clear it with them and
5 make sure they knew I was pregnant. So, you
6 should take care of that, because anything you
7 touch, that stuff can get -- I guess it would get
8 in your pores or -- you know, you don't want to
9 touch that and go to wipe your child's nose or
10 something. So, you have to pay attention.

11 MODERATOR: Okay. You had mentioned
12 lead as a possibility, and water, you said?

13 PARTICIPANT: Just in the paint, and
14 then it's probably in the water too.

15 MODERATOR: How about mercury? Have
16 you ever heard of that as a contaminant?

17 PARTICIPANT: No.

18 PARTICIPANT: I think that's one of the
19 things that they talk about in fish, they
20 could -- some fish have the mercury.

21 MODERATOR: Okay. Any other places you
22 would hear mercury?

1 PARTICIPANT: I thought you would find
2 it in water.

3 MODERATOR: In water? All right. What
4 kinds of precautions do you think that the
5 government or industry should be taking to
6 prevent people, in general, or pregnant woman in
7 particular, from these sorts of environmental
8 contaminants?

9 PARTICIPANT: Much of it, you can get
10 out of the magazines that -- I don't know about
11 everybody, but even though this is my second
12 pregnancy, I'm big on reading the Parenting
13 magazine, American baby and you get a lot of good
14 information out of there. At my doctor's office
15 they have their shelves that have the pamphlets.
16 Nobody's going to sit down and just give you
17 every bit of information that you need. You're
18 going to have to look some. So, I -- personally,
19 I think it's sufficient. It's out there in
20 pamphlets. They print it out in the magazines
21 and stuff. That's what your doctor's for.

22 MODERATOR: Okay. Edy, you were --

1 PARTICIPANT: Yeah, I agree. You know,
2 it's in all the books, and in the parenting books
3 and magazines and so forth. Even U.S. News and
4 World Report, there's always something in there.
5 You just have to read what's out there. And I
6 agree no doctor is going to sit and tell you.
7 It's up to you to, you know, inform yourself.

8 MODERATOR: So, what kind of
9 information do you get from your doctor, then?

10 PARTICIPANT: Basically, on your
11 vitamins, what to eat, what to cut out, your
12 salts, what you -- that you get enough rest. The
13 things that you need to do to allow your body to
14 go through the changes it needs and to properly
15 pass on that nutrition that you get.

16 PARTICIPANT: And he needs to make sure
17 you're healthy each time you go there.

18 MODERATOR: Okay. In terms of general
19 information about maybe I want to eat more of
20 this, less of that, you say you're getting that
21 more from other sources than your doctor?

22 PARTICIPANT: Yeah.

1 PARTICIPANT: Well, if it's something
2 that makes you feel -- sorry. If it's something,
3 like if I go and I complain that I'm tired, he'll
4 run down quickly, what are you doing and try to
5 tell me to eat more of the raw vegetables, or
6 more of the red meats for iron or something like
7 that. He'll help me to adjust that way, but
8 he'll quickly tell me that -- he was quick to
9 tell me to cut out -- I was allowed one soda
10 every day. But, I guess it depends on how open
11 you are how comfortable you are with your doctor.

12 MODERATOR: How about the rest of you,
13 where do you get information?

14 PARTICIPANT: Well, I think some comes
15 from the doctor, but only if it strikes a
16 concern. Like, not -- I went to the doctor this
17 past Monday, but four weeks before that when I
18 had gone, I had lost weight. He was quick to
19 jump at -- what are you eating, what's -- you
20 know, and everything. To, you know, to jump into
21 the food issue and stuff. But, like this past
22 time, I had gained a couple of pounds and there

1 was no mention of any kind of food. I think it
2 depends, also, if it's your first pregnancy, your
3 doctor would probably -- I can remember back, and
4 I think my doctor discussed more with me at my
5 first pregnancy than I've heard in the pregnancy
6 since then.

7 PARTICIPANT: Usually when you're
8 pregnant, people will -- and when people find out
9 that you're pregnant, they give you information.

10 (Laughter.)

11 PARTICIPANT: Oh, do this and do that,
12 from the waitress at the restaurants. You weigh
13 it, you know, see which one you think is
14 whatever. But, take your doctor's information
15 and like she says, stuff in the magazines and on
16 television. If you've had a baby before, then
17 you kind of know, you know.

18 MODERATOR: Okay.

19 PARTICIPANT: I get a lot of
20 information from What to Expect When You're
21 Expecting, that book.

22 MODERATOR: Okay.

1 PARTICIPANT: It's helpful.

2 MODERATOR: Okay. What I'd like to do
3 is pass out some information that they're
4 considering providing. If we could just kind of
5 go through this together. Basically the first
6 page says, this is a message for women who are
7 pregnant, planning to become pregnant within the
8 next six months, nursing mothers about the need
9 to limit eating certain seafood.

10 I would like to just read it kind of
11 section by section and do some discussion. The
12 first part says that seafood can be an important
13 part of a balanced diet for pregnant women and
14 nursing mothers. It is a good source of high
15 quality protein, is low in fat and contains Omega
16 III fatty acids that help your baby develop it's
17 immune and nervous systems. Some seafood,
18 however, may contain high levels of a form of
19 mercury, called methyl mercury, which can harm
20 the fetuses of pregnant women. By being informed
21 about methyl mercury and knowing the kinds of
22 fish that are safe to eat, you can prevent any

1 harm to your baby and still enjoy the important
2 health benefits of eating seafood.

3 In our earlier discussion I think Rose
4 and Edy had mentioned that their doctors or
5 someone had said something about concerns about
6 eating seafood at some point or another. For the
7 rest of you, is this new information?

8 PARTICIPANT: This is new to me,
9 because in the beginning of my pregnancy it was
10 still summer and we live at the beach, and my
11 husband was fishing every night so we were having
12 fresh fish every night for dinner. You know, for
13 a good month during the first part of my
14 pregnancy, you know, we've had, you know, as a
15 side dish we'd have fish or as a main course we
16 would have fish because there was tons of fish.
17 I didn't know about this.

18 MODERATOR: How about anymore?

19 PARTICIPANT: I wasn't aware of this
20 either?

21 MODERATOR: Rose, you said your doctor
22 mentioned something about swordfish?

1 PARTICIPANT: Swordfish was the only
2 one I recalled him saying. He mentioned others,
3 but that's the only one I can recall.

4 MODERATOR: Okay. But you said it had
5 something to do with bacteria?

6 PARTICIPANT: Bacteria, I think.

7 PARTICIPANT: I just remember reading
8 an article about mercury in certain fish.

9 MODERATOR: All right. So, here you
10 are six intelligent, pregnant, women. You're
11 reading these first couple of paragraphs. What
12 kinds of things are you thinking reading that?

13 PARTICIPANT: Oh, my God. I hope I
14 didn't eat this.

15 PARTICIPANT: I know, that's what I'm
16 thinking. I'm my thinking, oh, my goodness. Did
17 I do something wrong and how come I, you know --
18 I mean, I read a lot. My doctor has even told
19 me, and when he tells me something new, you know
20 I don't jump right on him. I go home. I find
21 out everything. I do my research and everything.
22 You know, and then I come back with my questions.

1 I have not -- you know.

2 PARTICIPANT: I read it and I say, boy,
3 I'm glad I'm eating seafood. And then, as far --
4 in the positive side with the Omega III, gee, I
5 maybe really maybe should try to eat some
6 seafood. So, it's both negative and positive for
7 me.

8 MODERATOR: Any other reactions to
9 those first couple paragraphs? Kathy?

10 PARTICIPANT: Just that -- I know about
11 the Omega III fatty acid helping with the nervous
12 system. I didn't know about the immune system
13 part, but I knew about the nervous system.
14 That's why I tried to eat more, but now I look at
15 it and say, oh God, I hope that, you know, I
16 haven't eaten the wrong fish or anything.

17 PARTICIPANT: Well, there's good and
18 bad in everything.

19 PARTICIPANT: Right.

20 PARTICIPANT: It seems like, you know,
21 you want to be knowledgeable and read about
22 everything and then I've heard on the flip side,

1 don't read anything because you're going to worry
2 yourself to death. There are people from way
3 back when have had babies, healthy babies, and
4 they didn't have any information. So, it just
5 makes you wonder.

6 MODERATOR: Okay. Let's go onto the
7 next section. How does methyl mercury get into
8 fish? Mercury occurs naturally in the
9 environment and is released also into the
10 atmosphere primarily from coal burning power
11 plants and waste incinerators. Traces of mercury
12 get into ground water accumulating in streams and
13 oceans. Nearly all fish contain trace amounts of
14 methyl mercury, which are not harmful to humans.
15 Fish absorb methyl mercury from water as it
16 passes over their gills and as they feed on
17 aquatic organisms. Long lived, larger fish that
18 feed on other fish accumulate the highest levels
19 of mercury and pose the greatest risk to people
20 who eat them.

21 All right. So, you've read that
22 information. What does that say to you?

1 PARTICIPANT: I'm thinking the
2 environment and power plants and why are they
3 dumping all these wastes in our oceans. That's
4 where I am.

5 MODERATOR: Okay.

6 PARTICIPANT: I'm just thinking -- I'm
7 hoping there's a list, you know, down here that
8 will tell me that the fish that I'm eating
9 (indiscernible). I mean, because, you know, it's
10 saying -- I'm trying not to, you know, really
11 look forward, because I know you're wanting, you
12 know, prime information here. I'm thinking, you
13 know, I'm getting -- I'm nervous. Thinking, you
14 know -- and why isn't this information provided
15 and where would you find this information?

16 PARTICIPANT: How come this isn't in
17 the magazines or in the doctors' offices.

18 PARTICIPANT: How do we know that they
19 just didn't make this up for us to read, also?
20 For tonight, to get our reaction to the new
21 information that's put out, too. So, don't worry
22 yet.

1 (Laughter.)

2 MODERATOR: That's my job, scare
3 pregnant women.

4 (Laughter.)

5 PARTICIPANT: I don't think they're
6 going to stick six pregnant women in a room and
7 do that.

8 MODERATOR: Okay. Any other reactions
9 to what we've read so far there?

10 PARTICIPANT: Just makes you want to
11 get more information on it, like she said, what
12 fish, in particular.

13 MODERATOR: Okay. Let's read the very
14 next section then. What are the risks for methyl
15 mercury to my baby? Methyl mercury can be
16 dangerous to the fetus because it effects the
17 body's developing nervous system, which can
18 result in learning disabilities later in life.
19 It takes about six months for methyl mercury to
20 be eliminated from the body. That's why safe
21 seafood eating is especially important
22 immediately before becoming pregnant, as well as

1 during pregnancy. The first trimester of
2 pregnancy is a particularly critical period in a
3 baby's development.

4 PARTICIPANT: My goodness. I know.

5 MODERATOR: What do you say?

6 PARTICIPANT: What do you say?

7 MODERATOR: Um-hmm. You've read this
8 now.

9 PARTICIPANT: I'm still just really
10 nervous, you know.

11 MODERATOR: Okay.

12 PARTICIPANT: With my last pregnancy, I
13 craved shrimp. So, I started on my research, you
14 know, to find out how harmful this is, because,
15 you know, I thought -- it was three years ago.
16 It's when all the dead fish were popping up on
17 the Potomac, you know. I wanted to know what was
18 happening then and if that could effect these
19 shrimp that I was eating and stuff. Like I said,
20 I did my research and everything seemed to be
21 fine. Okay. It's fine. Go ahead and eat your
22 shrimp. So, this wasn't available -- if shrimp's

1 effected by this, I wonder why it wasn't effected
2 all those years ago to me.

3 MODERATOR: Okay. What else? What are
4 the other reactions to this section?

5 PARTICIPANT: Well, it's -- that's a
6 long time, six months for it to be eliminated
7 from your body. That's a concern.

8 PARTICIPANT: I'm just wondering, what
9 is safe seafood eating? I'm curious to know what
10 they're --

11 PARTICIPANT: No seafood eating.

12 PARTICIPANT: What is -- yeah, because
13 we -- salmon is high on my list. I love salmon
14 and flounder with shrimp, tuna. So, I'm
15 beginning, now, I'm kind of with you wondering;
16 you know, now I'm trying to think, what have I
17 eaten, or you know, or what do I need to at.
18 Where am I going to find the information on fish?
19 I mean, because other stuff you can look on
20 your -- but you can't --

21 (Indiscernible, multiple speakers.)

22 PARTICIPANT: If you're eating fresh

1 seafood or fresh food, and it's good for you
2 and --

3 PARTICIPANT: Right. I thought I was
4 eating real healthy the other night, eating
5 salmon. I had some Friday night, a big piece
6 too.

7 PARTICIPANT: My mother-in-law made it
8 for dinner tonight. I didn't eat it. She made
9 me some chicken. But, now, I read this and, you
10 know, I felt safe that I haven't eaten any of
11 this, particularly because it takes so long to be
12 eliminated from the body. You know, like she was
13 talking about, I didn't know I was pregnant and
14 in the summer we had a really bad time for
15 allergies, and all of a sudden I developed
16 allergies over the summer because of this
17 terrible weather we had. If it's raining and I
18 would get these horrible headaches, and I was
19 taking allergy medicine and Tylenol 3 with
20 codeine like several times a week. It was when I
21 was pregnant and didn't know it, but I mean,
22 that's really short-term effects, not long term

1 like this.

2 PARTICIPANT: Yeah. You couldn't --
3 you could have not even been planning to have
4 your baby and had the fish, and then it's still
5 in your body three months later after you're
6 pregnant.

7 MODERATOR: Okay. What do you think
8 about this first sentence where they say, methyl
9 mercury can be dangerous to the fetus because it
10 effects the baby's developing nervous system
11 which can result in learning disabilities later
12 in life?

13 PARTICIPANT: See, I have a concern
14 about that because, you know, how can they tell
15 when a child is six that its learning disability
16 is associated to the fact that its mother ate
17 fish six months before she conceived the child?
18 I mean, how is that possible to determine that?

19 PARTICIPANT: Or that you ate it, not
20 knowing that you were pregnant, you ate the fish
21 that your husband just caught and it's in your
22 system for six months while this fetus is

1 developing, and that's the most critical time is
2 right there for the first trimester?

3 PARTICIPANT: I don't want to be
4 paranoid about this thing.

5 PARTICIPANT: Like your controlling
6 something, and like you said, back in the day
7 they didn't have all this junk floating back out
8 into our water everything was very natural. When
9 they said fresh fish, it was fresh. You know, it
10 wasn't a coal plant -- wasn't even a coal plant
11 there that was putting a return flow back out
12 into our water.

13 MODERATOR: Okay. Let's move onto to
14 the next section, then. It says, how can I
15 protect my baby? You can protect your baby by
16 limiting the kinds of fish you eat. The Food and
17 Drug Administration and the Environmental
18 Protection Agency recommend that you limit the
19 amount of fish that you eat with high levels of
20 mercury and only eat fish that have low levels of
21 mercury or no mercury in them.

22 So, when you read that paragraph --

1 PARTICIPANT: It makes you want to see
2 the list at the bottom of the page.

3 MODERATOR: Okay. (Laughter.) The
4 what where? We haven't gotten there yet.

5 PARTICIPANT: Well, when she mentioned
6 it. No, I haven't read the last page; you can
7 see columns down it.

8 MODERATOR: You want to read -- you
9 want to see what --

10 PARTICIPANT: You want to find out more
11 information, what fish contain it, what has low
12 levels and none in them.

13 MODERATOR: Okay.

14 PARTICIPANT: Right now, it's like,
15 where are you going to find that? You know,
16 other than going home and pulling up the
17 Internet.

18 PARTICIPANT: How do you know -- I
19 mean, not know -- but how come certain fish would
20 have lower levels than other fish? I mean, if
21 one fish has a high level, why wouldn't they all?
22 Especially if they're all in the same, you know,

1 pond of water or body of water.

2 PARTICIPANT: Supposedly, it was
3 talking about larger fish and eating a type of
4 fish.

5 PARTICIPANT: A longer life fish.

6 PARTICIPANT: Right.

7 PARTICIPANT: So, they're eating fish
8 that have already contained the mercury maybe.

9 PARTICIPANT: Also, it could -- how do
10 you know where they all come from? Like this
11 batch of fish comes out of this body of water.
12 This batch comes out of this body of water. If
13 there's no coal plant or anything returning junk
14 into this water, then these fish probably --

15 PARTICIPANT: Yeah, but I can't catch
16 the fish for myself. I go to Giant and get them.

17 PARTICIPANT: But that's what I'm
18 saying, for somebody that doesn't, you know -- I
19 go to Giant and get mine or Costco and get the
20 big thing of salmon.

21 PARTICIPANT: It seems like smaller
22 fish eat off plants and things in the water. I

1 would seem like the mercury would hook onto those
2 and, like; the smaller fish would get it quicker
3 than the bigger.

4 MODERATOR: Monica?

5 PARTICIPANT: I mean, I'm listening to
6 everything you're saying, but the only thing
7 that's concentrating in my mind, or thinking
8 about, is, you know, when I'm going to the next
9 doctor visit to ask him, you know, is there a way
10 to check the level in your body or even see if
11 there is a way to speed the process of getting it
12 out.

13 PARTICIPANT: I wouldn't want to try
14 to --

15 PARTICIPANT: I'm not going to --

16 PARTICIPANT: I wouldn't want to know
17 at this --

18 PARTICIPANT: I'm not even going to,
19 not now.

20 (Indiscernible, multiple speakers.)

21 MODERATOR: One at a time. One at a
22 time. I'm sorry, Kathy and then Laura and

1 then --

2 PARTICIPANT: I'll watch it from here
3 on out, but I can't turn back time. I mean,
4 it -- especially if it's something that's going
5 to cause learning disabilities later, six years
6 from now. I mean, it's not going to show up now,
7 so --

8 PARTICIPANT: And you can do other
9 things to help your child before then.

10 PARTICIPANT: Yeah. Just start paying
11 attention.

12 PARTICIPANT: Breastfeeding alone helps
13 that. But, I was going to say, anything in
14 moderation, too. But, Ms. Monica -- seemed a
15 daily bite of the day.

16 PARTICIPANT: Just saying, the blood
17 test, you know.

18 PARTICIPANT: Don't worry about it.

19 PARTICIPANT: I wouldn't want to know
20 at this point, because if my child didn't crawl
21 at six months I'd panic. Oh, my goodness, it's
22 the mercury; it's the fish.

1 PARTICIPANT: It's the fish.

2 PARTICIPANT: You're going to panic
3 now, anyway.

4 PARTICIPANT: This child's doomed.

5 PARTICIPANT: I have to agree there. I
6 don't want to know at this point because I can't
7 turn around. It's already in there. So, I hope
8 she liked it as much as I did when I ate it, but
9 I mean there's nothing I can do.

10 PARTICIPANT: It's too late at this
11 point, you know. It's like, I'm old, and they
12 want me to have amniocentesis. I'm not going to
13 do it.

14 PARTICIPANT: Right. That's what I was
15 going to say. It's the same type of thing.

16 PARTICIPANT: It's the same thing. You
17 know, I turned it down. The only factor is, I'm
18 old. So, it's just not worth it to risk -- isn't
19 worth it to me. You know, I'll just live with
20 the way things are and hope for the best. So,
21 you just can't -- you can't focus on it. You
22 just can't.

1 PARTICIPANT: I agree with you.

2 MODERATOR: Okay. Let's move on then
3 and we'll go to the section that says, what fish
4 have higher levels of mercury and shouldn't be
5 eaten? King mackerel, shark and swordfish have
6 higher levels of mercury in them and should not
7 be eaten more than once a month. If you eat
8 other fish, you should not eat king mackerel,
9 shark or swordfish at all. Tuna steaks have
10 moderate levels of mercury. Tuna steaks can be
11 eaten three times a month. Canned tuna, which is
12 made from smaller fish, has less mercury than
13 tuna steaks. You can eat one and a half
14 six-ounce cans of tuna every week with no
15 problems.

16 Basically, we were talking before the
17 group -- the heading, what fish have higher
18 levels of mercury and shouldn't be eaten, should
19 just be over the king mackerel, shark and
20 swordfish. Then tuna steaks have moderate
21 levels, so it's slightly less. And then tuna
22 fish in a can is in a different category itself.

1 So, when you read all of this -- Monica?

2 PARTICIPANT: I'm thinking, you can't
3 catch these fish in the Bay. I am home free.

4 (Laughter.)

5 PARTICIPANT: I don't even know what
6 some of these are.

7 PARTICIPANT: I'm -- you know. I'm
8 just glad that these are fish that I don't eat,
9 you know.

10 MODERATOR: Okay.

11 PARTICIPANT: It's like, schew.

12 PARTICIPANT: Like, tuna fish still,
13 that canned tuna, yeah. I don't like that
14 statement that it has some in it, because you
15 think you're eating tuna fish, you think I'm
16 having a healthy lunch today.

17 PARTICIPANT: But it says --

18 PARTICIPANT: I know. You can have it
19 once a week with no problem.

20 PARTICIPANT: I'm sure that you don't
21 eat one and half six-ounce cans by yourself.

22 PARTICIPANT: Right. Right.

1 PARTICIPANT: You know, you can make a
2 can --

3 PARTICIPANT: But see, when I had my
4 first son I had gestational diabetes and I was
5 put on a very strict diet. One of the things
6 that I could eat was a can of tuna, and I think
7 two tablespoons of mayonnaise, was my lunch every
8 day for I think -- well, while I was -- five days
9 a week. Okay, so every day, five days a week for
10 lunch for, I think, when do you have the test?
11 At twenty-eight weeks you have the test, you
12 know. So, for seven weeks of my pregnancy,
13 because I delivered him early. You know, so for
14 seven weeks I'm eating more than they recommend,
15 right there.

16 PARTICIPANT: Well, can I ask you --
17 is he --

18 PARTICIPANT: He's dead.

19 PARTICIPANT: No, he's not.

20 PARTICIPANT: Oh, yes he is.

21 PARTICIPANT: Is he really?

22 PARTICIPANT: Yeah. He died, but I

1 can't blame that on mercury. I mean, but yeah.
2 He died of SIDS.

3 PARTICIPANT: Aww.

4 PARTICIPANT: That's what they're
5 saying. But, you know, they don't know what
6 causes that, which it could be, mercury, you
7 know? It could have been high levels of that in
8 his system. I mean, if you think about that.
9 But, for seven weeks I had a can a day. So --

10 PARTICIPANT: But I don't know if
11 they've had any research on mercury, have they?
12 I mean, about fish or anything?

13 PARTICIPANT: Right. So, I mean, you
14 don't know.

15 PARTICIPANT: Does it make you wonder
16 now?

17 PARTICIPANT: I'm starting to, yeah. I
18 probably will -- I will probably mention it to
19 one of the ladies at the Falfidation (ph.) about
20 that.

21 PARTICIPANT: Right.

22 PARTICIPANT: You know?

1 MODERATOR: What do the rest of you
2 think? Rose?

3 PARTICIPANT: I didn't think about tuna
4 fish. I mean, I thought it was something that
5 was very healthy and something that should be
6 eaten at least once a week for the protein and
7 other sources. But reading this now, even though
8 it says one can a week is fine, it still -- I
9 thought of, what's going to happen? What are the
10 possibilities? See, my son takes Ritalin, and it
11 makes you wonder, you know, is that part of the
12 reason he's hyperactive, because I did eat a lot
13 of seafood back then, but then again, that was
14 seven years ago. So, to think about with this
15 one, I mean, my pregnancy's been very hard. So,
16 you know, it makes you wonder, what are you doing
17 wrong or what can you do at this point to correct
18 any mistakes that you've made.

19 PARTICIPANT: Then, with her tuna fish
20 diet I wonder, because with my last one I was
21 borderline gestational diabetes, and so they
22 didn't put me on the diet. I was just humongous,

1 but my blood pressure was fine. But if there
2 were to put me on tuna fish, I don't even eat the
3 stuff, so I would hope they would come up with an
4 alternative for me.

5 PARTICIPANT: Did they give you other
6 choices besides tuna fish and you just chose to
7 eat that?

8 PARTICIPANT: I chose, yeah. It was
9 different. It was a menu of different items, and
10 it's like, you know, for me it was what was most
11 convenient. What was most convenient was taking
12 a can of tuna fish, my two things of mayonnaise
13 and my half an apple to work every day for lunch.
14 That was what was convenient for me. So -- and,
15 you know, now you take that and you put it with
16 the nervous system and having a hyperactive child
17 or an ABA for the Ritalin, yeah. And it's like,
18 what did it do to the child? I mean, if you ate
19 high quantities, you know. So, if that's what
20 it's doing, why aren't our doctors, you know,
21 especially here where you're saying that the Food
22 and Drug Administration, I mean, they're aware of

1 this. Why haven't all doctors, OB's --

2 PARTICIPANT: Like, why does he know
3 something --

4 PARTICIPANT: Why don't they tell us?

5 PARTICIPANT: Yeah. Because my first
6 son, you know, he would have been nine years
7 old -- wait a minute, yeah, nine years old this
8 past July. He would have been nine years old.
9 You know, now here's -- you know, this is my
10 fifth pregnancy and I haven't heard -- never,
11 ever, you know, in nine years heard anything
12 about this, you know. So, why aren't we being
13 informed? It raises concern.

14 MODERATOR: Okay. Now, when you read
15 this, and we'll look at the -- let's go ahead and
16 look at that bottom chart, which is what fish
17 have low levels of mercury or no mercury in them
18 and it lists a bunch of fish here. When you read
19 all of this information together about the
20 different fish and what has it and what doesn't,
21 what kinds of decisions do you, as an expectant
22 mother, then make? I mean, how do you use that

1 information?

2 PARTICIPANT: Most of the fish I eat
3 are in this category. I'm grateful that I don't
4 eat mackerel, shark or swordfish, but I think I'm
5 going to keep this fish on a low level. I'm not
6 going to eat as much fish while I'm pregnant.
7 But, then I'm thinking, then it'll be something
8 else. You know, it's --

9 PARTICIPANT: I told you in the
10 beginning, I heard good things about eating fish.
11 That's what the books that I've read recently --

12 PARTICIPANT: Like the Omega IIIs.

13 PARTICIPANT: Huh?

14 PARTICIPANT: Like the Omega III acids
15 that you get from them.

16 PARTICIPANT: Oh, yeah. Right. I hear
17 it's good to eat fish. So, I started to think
18 when I read this the other day that I'm going to
19 start eating some fish, then you hear this today.
20 So, like I said, you're going to hear good and
21 bad in everything.

22 PARTICIPANT: It's always something.

1 PARTICIPANT: There's always something.
2 When my oldest son, he's seventeen, when he was a
3 baby it was put them on their stomachs. If you
4 put them on their back, they'll choke to death.
5 and they'll die. So, everyone put them on their
6 stomach. Well, guess what? Now that my other son
7 was born, put them on the back. He would not
8 sleep on his back. So, I'm like wait a minute.
9 This is ridiculous. I put him on his stomach, he
10 went to sleep. I was like, you know what, my
11 other one was fine. Next thing they'll do is
12 tell us to stand them on their heads. So, you
13 know, it's always something. They -- it just
14 makes a cycle, I think.

15 PARTICIPANT: But me, reading this,
16 even though these have low levels and no mercury
17 in them at all, knowing that, you know, if you
18 can eat enough of the low to make it medium or
19 high. I probably won't eat any type of seafood
20 for the rest of my pregnancy. You know, maybe a
21 shrimp here or there because it's kind of hard to
22 go -- to turn down.

1 PARTICIPANT: But that's in moderation.

2 PARTICIPANT: Yeah. You know, I mean,
3 I probably will just avoid it, you know, and I
4 will be an advocate out there telling all
5 pregnant women, stay away from fish.

6 PARTICIPANT: Let's just hope no one
7 starts to crave for fish.

8 PARTICIPANT: I will probably stay
9 within -- they're saying the amount that I eat
10 now, but I ate during the summer a lot more tuna
11 because I would just throw it on some lettuce and
12 call it a salad. It was light. It was quick for
13 work. It was done. So, now that I think about
14 that, I did eat probably more than a can and a
15 half in one week during the summer.

16 MODERATOR: Don't be nervous.

17 PARTICIPANT: But, I mean, no, because
18 I have -- like I said, I had my daughter four
19 years ago and I don't believe my eating habits
20 changed much. I'm more lax this time, whereas I
21 didn't do sodas or anything with her. Now, this
22 time I'll drink sodas. So, you know, next thing

1 I know I turn the page and it's going to be
2 something about the read meat that I've eaten
3 and --

4 PARTICIPANT: Yeah. I'm wondering
5 about the asterisk here.

6 PARTICIPANT: Yeah, what's that?

7 PARTICIPANT: I don't see any asterisk
8 down there.

9 MODERATOR: The asterisk is the next
10 page. It says, breaded fish sticks, fish
11 sandwiches and imitation crabmeat are generally
12 made from these fish and have low levels of
13 mercury. It wasn't a trick there.

14 PARTICIPANT: No, no. I know. I was
15 wondering for the next page.

16 MODERATOR: All right. So, some of you
17 are saying -- I heard Monica say, I'm not eating
18 fish. Shawna, where are you?

19 PARTICIPANT: It says, you know, I'm
20 glad that I didn't eat mackerel or shark or
21 swordfish, but I'm going to stay away from fish.

22 MODERATOR: Even the ones that have low

1 levels or no mercury in them?

2 PARTICIPANT: Yeah. Just because I
3 don't, you know -- I'm not a big craver for fish
4 anyway. So, it's not like I have to have to have
5 it. So, I'll just wait until I'm --

6 PARTICIPANT: I have a question. What
7 about the fish that are not even listed on here,
8 because see, I was eating bluefish. They're not
9 even on here.

10 MODERATOR: Okay. What would you
11 assume about fish that aren't on this list?

12 PARTICIPANT: They don't have any.

13 PARTICIPANT: They're not a problem.

14 PARTICIPANT: I'm assuming.

15 PARTICIPANT: Or they would've
16 mentioned it if it was really high.

17 PARTICIPANT: Or they would've
18 mentioned it.

19 PARTICIPANT: Right.

20 PARTICIPANT: It was just, maybe just a
21 trace and not important enough to actually list.

22 MODERATOR: Well, how about the

1 difference between fish that aren't mentioned at
2 all and the ones that are listed as -- have low
3 or no mercury in them. Is there any difference
4 between them?

5 PARTICIPANT: I'd be looking them up.

6 PARTICIPANT: I'd have to, when I left
7 here, if it were blues that I have been eating
8 and it's not on here, I would look that up just
9 to satisfy my own curiosity, because you can't
10 change what you did in the summertime. It's not
11 going to go away, but I guess just to satisfy
12 the -- just to know.

13 PARTICIPANT: Some of the fish are
14 listed that I had this summer, you know, but
15 bluefish were one of the fish and it's not
16 listed.

17 PARTICIPANT: I'd like to no which ones
18 have no mercury out of these.

19 PARTICIPANT: Yeah, because then it
20 would make you -- then you could get your good
21 stuff with knowing that it's good.

22 PARTICIPANT: I'm glad we're talking

1 about this now. So, now that we know about it
2 we can be more aware of it.

3 PARTICIPANT: Now we can become one of
4 those women when somebody tells you that they're
5 pregnant, well, let me tell you what not to do.

6 (Laughter.)

7 PARTICIPANT: Watch the fish.

8 PARTICIPANT: This isn't posted
9 anywhere. Stay away from mackerels.

10 MODERATOR: You've asked, how about the
11 difference between the ones with the low levels
12 of mercury or no mercury in them, dividing the
13 list up somehow. Why is that important to you?

14 PARTICIPANT: Because we want to stay
15 away from mercury totally, unless -- although
16 there are some things on there -- it wasn't
17 mercury part of the fish that was good for you,
18 right?

19 PARTICIPANT: Um-umm.

20 PARTICIPANT: I mean, I don't remember
21 reading anything about that.

22 MODERATOR: About mercury being good

1 for you?

2 PARTICIPANT: Right.

3 MODERATOR: Okay.

4 PARTICIPANT: The fish is good for you,
5 or some seafood. So, why would we want even a
6 low level? What if we eat like a lot of it,
7 how --

8 MODERATOR: Is there a problem, do you
9 think, eating fish with low levels of mercury?

10 PARTICIPANT: Yeah.

11 PARTICIPANT: Is it just the methyl
12 mercury? Because it says it's a form of mercury
13 called methyl mercury. So, these fish that have
14 mercury, does that necessarily mean that it's the
15 methyl mercury or is it just mercury? Does it
16 make a difference?

17 MODERATOR: Okay. That's a good
18 question. So, on the line where it says, what
19 fish have low levels of mercury or no mercury in
20 them, you would like to know is it a specific --

21 PARTICIPANT: Is it this bad mercury.
22 Is it the one that can harm the fetus of the

1 pregnant woman? Is it all the same? Is it just
2 mercury? And, if it's just mercury, why did they
3 pull out methyl mercury?

4 MODERATOR: Okay.

5 PARTICIPANT: My reasoning for wanting
6 to know which have low and which have none would
7 be the fact that tuna, they're saying, you know,
8 tuna has a smaller amount of mercury in it than
9 in the other three that were listed. They
10 recommend that you only eat one and a half six
11 ounce cans a week. So, if it has a low level
12 and, okay, a portion is like this big
13 (indicating) and you're eating a piece of fish
14 like this, and you want to have it twice a week,
15 are you then eating enough to be the same as
16 eating the piece of the shark or the swordfish or
17 the mackerel? You know, so that to me would be
18 why I would want to know which ones have a low
19 level so that I could just eliminate them from my
20 diet and not eat a big enough portion to be
21 adequate to one of the others.

22 PARTICIPANT: Right. That's why I

1 said; I just wouldn't eat any fish at all,
2 period. You never know how much of the low that
3 you eat could be high.

4 PARTICIPANT: Does two lows make a
5 high?

6 PARTICIPANT: Yeah, right. See what
7 I'm saying.

8 PARTICIPANT: Exactly.

9 MODERATOR: Okay. Let's go onto the
10 next page. We've already read that part about
11 the breaded fish sticks; fish sandwiches and
12 imitation crabmeat are generally made from these
13 fish and have low levels of mercury. How would
14 you respond to them? Like that imitation
15 crabmeat?

16 PARTICIPANT: That stuff tastes pretty
17 good, doesn't it guys? What do you think?

18 PARTICIPANT: I eat a lot of fish
19 sticks. I like them.

20 MODERATOR: You do eat a lot of fish
21 sticks?

22 PARTICIPANT: Um-hmm.

1 MODERATOR: Okay. So, how would you
2 respond to that then, Shawna?

3 PARTICIPANT: I would respond by not
4 buying any more fish sticks and substituting fish
5 sticks for something else on the menu.

6 PARTICIPANT: Another question I have
7 also, when I see this breaded fish sticks, you
8 know, I'll sometimes buy breaded fish sticks to
9 have on a weekend or a non-school day, you know,
10 with some macaroni and cheese, because those are
11 things that my husband will not let me fix for
12 dinner for my children. Now, if this is harmful
13 to my baby's nervous system it stays in, at what
14 age should a child -- you know, should I feed it
15 to my eighteen month old who is still developing?
16 Or to my three year old, or is it -- you know, at
17 what age is it then safe to give to your child?

18 PARTICIPANT: Right.

19 PARTICIPANT: Right, and for yourself.

20 PARTICIPANT: In the beginning, you
21 mentioned nursing mothers. Well, I nurse my
22 children. So, then should I stay away from these

1 fish, you know, the entire time that I'm nursing
2 my child? Does it pass through mother's milk?

3 PARTICIPANT: See, that opens a whole
4 new door.

5 PARTICIPANT: Yeah.

6 PARTICIPANT: Do the children at home
7 stop eating -- like she said -- do the children
8 at home stop eating it?

9 PARTICIPANT: Why do they serve it in
10 school?

11 PARTICIPANT: Does it mess up their
12 development?

13 PARTICIPANT: They get them fish
14 thingy?

15 (Laughter,)

16 PARTICIPANT: I mean, because our
17 children's brains are still developing. I mean,
18 they tell you to give them whole milk, you know,
19 until the age of two because they need the fat to
20 develop their brain. You know, that's what
21 they're -- you know, and so they're still
22 developing. So, is this stuff getting into their

1 nervous system while it's still developing,
2 because those things develop -- you know, for --
3 it's concerning to me.

4 MODERATOR: Let's read the next
5 section, which says, if methyl mercury can be
6 harmful to my baby, why isn't it harmful for me
7 or the rest of my family?

8 PARTICIPANT: Oh.

9 MODERATOR: If you and the other adult
10 members of your family consume an average amount
11 of seafood, tuna sandwiches and salads, the
12 occasional fish steak, the level of mercury in
13 the seafood supply is not a risk. To be
14 perfectly safe, fish with high levels of mercury
15 should be eaten only once a month.

16 Does that section answer your
17 questions?

18 PARTICIPANT: No. I want to know what
19 it will do to me --

20 PARTICIPANT: Or to them.

21 PARTICIPANT: -- or what it's doing to
22 my body, you know. What it's doing to my

1 children's body if they go over the recommended
2 amount, you know? My husband, you know, he went
3 through a time where, I don't know, sometimes I
4 think he's pregnant because he'll go through a
5 time when he takes that premixed salad stuff and
6 he'll throw it in a bowl and he puts his tuna on
7 top of it, and he seals it up and he takes it to
8 work. Then he dumps his salad dressing on it and
9 he eats it. He'll do that everyday. But he
10 doesn't eat just a can of tuna; he eats two cans
11 of tuna a day when he does that. He went through
12 a time when he would do that, you know, a couple
13 of times a week.

14 PARTICIPANT: I was doing it before I
15 got pregnant because I was planning to get
16 pregnant. As part of doing the Adkins Diet, you
17 can have stuff like that with fish or your
18 chicken, as much of that as you want to consume.
19 So, I ate a lot of that bag of salad, can of
20 tuna, hard-boiled egg, that was my lunch, or
21 salmon or whatever, but at the same time I would
22 make tuna fish salad and I was feeding it to him.

1 So, does it have anything to do with him by his
2 eating so much? He's a big man. He'll eat two
3 to three tuna sandwiches, which is well over a
4 can and a half in one serving. In one serving,
5 you know. Does that have anything to do with --
6 if that stays in my system for six months, does
7 it stay in his system? Does it effect the
8 conception time? Does -- what does it do?

9 MODERATOR: What does it do?

10 PARTICIPANT: I don't know. And we
11 have little ones at home and it's easy to throw
12 fish sticks and macaroni and cheese. You're
13 tired. You're pregnant, you're tired, you want
14 to go home and lay down. You don't -- we're not
15 going home and making like a baked chicken and
16 roast potatoes. But now you've got to wonder if
17 you're damaging -- if your baby's going to have
18 to take Ritalin or something else could happen.
19 If you're wondering why your daughter's bouncing
20 off the walls, does it have something to do with
21 that? Does that have anything to do with how
22 they get sick a lot? Their immune system doesn't

1 get to be strong enough? There's more
2 information on this mercury out there.

3 MODERATOR: Any other comments on that
4 section?

5 PARTICIPANT: It's all been said.

6 (Laughter.)

7 MODERATOR: Okay. What about the fish
8 caught by sport fishers, are they safe to eat?
9 There can be a risk of contamination from methyl
10 mercury in fresh waters from natural and
11 industrial causes. Check with your state or
12 local public health department for any advisory
13 warning of mercury in waters in your local area.
14 And then it says, remember, to protect your baby,
15 avoid eating fish with high levels of mercury and
16 only eat fish with the low levels of mercury or
17 no mercury in them. Check with your local public
18 health department to see if there are any
19 advisories on methyl mercury before you eat fish
20 caught in local waters. For further information
21 contact EPA or the Food and Drug Administration.

22 PARTICIPANT: And it doesn't mean that

1 all fish are going to contain this mercury. You
2 know, someone, even one of those high -- one of
3 those mackerels or --

4 PARTICIPANT: King fish.

5 PARTICIPANT: Yeah. Or shark, I mean,
6 it doesn't necessarily mean that they're going to
7 have the mercury in them.

8 PARTICIPANT: Because it has to do with
9 where it came from, right?

10 PARTICIPANT: Right.

11 PARTICIPANT: So, that has a lot to do
12 with it too. So like, me -- I go to Giant or
13 Costco and get mine. There's not going to be a
14 sign there that says this fish was caught in the
15 waters that contained mercury. So, I guess --

16 PARTICIPANT: I guess. Yeah, I guess.

17 PARTICIPANT: Maybe if they put that on
18 there.

19 PARTICIPANT: I'm sure that -- right.
20 I'm sure now that maybe this will get noticed,
21 because they're obviously doing studies on it,
22 which is good because, being that I've been

1 pregnant before and I've eaten the tuna before
2 and, you know, things are just going to happen.
3 You can't hide from everything, you can't just
4 live off of water, which better come out of a
5 bottle, but you don't even know who put in the
6 bottle.

7 PARTICIPANT: Right.

8 PARTICIPANT: You'd make yourself
9 insane.

10 PARTICIPANT: We were drinking the
11 bottled water from Price Club, and it has arsenic
12 in it. So -- Crystal Geyser Water, they have --
13 sell --

14 PARTICIPANT: I mean, it's everything.
15 You think you're drinking bottled water. I
16 really don't know what's in this water that I'm
17 drinking. I mean, they haven't put this in that
18 study. It's not going to say arsenic on here.

19 PARTICIPANT: On one hand it's good to
20 know. I'll stay away from, and I'm glad that I
21 don't eat and haven't eaten the three, but I'm
22 not going to quit eating fish. I enjoy it and I

1 don't eat it everyday like I was, now. I,
2 personally, will probably still.

3 MODERATOR: Okay. So, if you were
4 developing a basic rule of thumb for pregnant
5 woman in terms of using this information to give
6 advice, what would that be?

7 PARTICIPANT: I would tell my friend;
8 my doctors said don't eat swordfish, shark and
9 mackerel.

10 PARTICIPANT: And why?

11 MODERATOR: And you would tell them
12 why?

13 PARTICIPANT: Yes.

14 PARTICIPANT: I would too.

15 PARTICIPANT: I wouldn't go into the
16 low levels; I would just state the facts.

17 MODERATOR: Okay.

18 PARTICIPANT: I would have liked to
19 have this, which says exactly that, but it lists
20 what you're safe with and what has little or no
21 mercury in it, which would ease the mind of a lot
22 of people. I think somebody -- I think it was

1 you, said everything in moderation would be safe,
2 but it's nice to know that if king mackerel was
3 your favorite fish, that's one thing you should
4 eliminate for the time being, or until you know
5 that you're not going to be pregnant, enjoy it at
6 that time. Other than that, I have to agree with
7 everything in moderation.

8 PARTICIPANT: For a pregnant woman.

9 PARTICIPANT: I think your doctor will
10 even tell you that.

11 PARTICIPANT: A pregnant woman, when
12 you crave something, you're not going to eat it
13 in moderation.

14 (Laughter.)

15 PARTICIPANT: I know.

16 PARTICIPANT: But when I say
17 moderation, I just mean that choices three times
18 a week don't eat king mackerel. You have to --
19 go do something -- that's just like somebody who
20 smokes. You might crave that cigarette the whole
21 time you're pregnant but know what that's going
22 to do to your baby, so you're not going to touch

1 it. So, with the king mackerel, you'll crave it,
2 but since -- salmon's on the menu, I'll settle
3 for it.

4 You know, that's -- well, that would be
5 me and that would be what I would say to
6 somebody.

7 MODERATOR: How about the rest of you?
8 What would your advice be?

9 PARTICIPANT: My advice would be not to
10 eat the mackerel, the shark and the swordfish.
11 But, I would also put in a note; you should limit
12 your intake of the tuna and then, you know, eat
13 the rest of the fish in moderation. Don't
14 consume large quantities of fish. Don't assume
15 that you can.

16 PARTICIPANT: And if you want more
17 information, check out these websites.

18 MODERATOR: Okay.

19 PARTICIPANT: I mean, but I would put
20 wording on the whole entire line, you know. Eat
21 the rest of it in moderation. This is your
22 possibility. Then leave it up to each individual

1 person. But I'm not one to withhold information,
2 you know.

3 PARTICIPANT: Put it out there, you
4 have to make up your own mind as to what you're
5 going to do, but it should be out there. And
6 this was -- to my knowledge; this was not out
7 there.

8 PARTICIPANT: This was not out there.
9 Like I said, I mean, this -- pregnancy is not new
10 to me. I got pregnant with my first one in 1990.
11 That was ten years ago, you know, and I have
12 never heard anything like this before. Fish was
13 good for you.

14 PARTICIPANT: Right. That's what I'd
15 always heard.

16 PARTICIPANT: I just read that too.
17 So --

18 PARTICIPANT: They're not saying that
19 fish isn't good for you. It depends on what kind
20 and how much.

21 PARTICIPANT: They're saying the methyl
22 mercury is bad for you.

1 PARTICIPANT: But fish. They didn't
2 say. That's what I'm saying. Get the warning,
3 but this is not good, you know.

4 MODERATOR: Willis (ph.) what would you
5 say? How would you summarize this information?

6 PARTICIPANT: I know looking at the
7 list and everything in it; you've got to weigh
8 the bad to the good. Because the Omega fatty is
9 very important, then as a pregnant person or even
10 non-pregnant person, you need to research that a
11 little bit further and make sure that you're
12 eating what's correct and try to avoid those that
13 aren't. You want to eat it like everyone else
14 has said, in moderation, and I would suggest
15 maybe once a month, maybe twice a month, but to
16 also find out which foods or which fish are low
17 moderate versus the no mercury.

18 PARTICIPANT: I don't believe that
19 fish -- that all the research should be left up
20 to me though. Because if I have to -- okay, I'm
21 going to have fish. Well, let me research this.
22 Well, you know, I also eat peanut butter and

1 jelly, so let me research peanut butter, and
2 jelly and there's bread there that I've got to
3 research. Okay, well, there's a glass of milk.
4 Let me research this milk. For dinner we're
5 going to have beef, so let me research beef. You
6 know, there's some vegetables thrown in here, so
7 I've got to research -- I could be spending my
8 entire pregnancy researching the foods that I'm
9 doing. I think when there's a problem with a
10 food, it should be made known to all OBs so that
11 it can be given out to the patients, so that I
12 don't have to spend my entire pregnancy
13 researching --

14 PARTICIPANT: And not just OBs. Making
15 it known -- everyone should know, because
16 (indiscernible).

17 PARTICIPANT: And especially if it's
18 affecting our young children, which on this last
19 page, you know, it leads me to believe that it is
20 affecting them. I mean, it says, you know, right
21 there. You know, the roads to the family and
22 that they should consume it in average amounts.

1 What is it doing if they're consuming it in more
2 than an average amount? I mean, I come from a
3 family where a lot of people eat a lot of crabs
4 during the summer, you know what I mean?

5 MODERATOR: Edy, did you have
6 something?

7 PARTICIPANT: What's it doing to us,
8 I'm wondering.

9 PARTICIPANT: My question is, does the
10 FDA plan on putting out a leaflet to pass out to
11 all docs to make the public aware of this? I
12 mean, it's obviously new information that they've
13 done research on.

14 MODERATOR: How do you think this
15 information should be gotten out to people?

16 PARTICIPANT: I think it should be out
17 in pamphlets in doctors' offices, OB/GYNs.

18 MODERATOR: Okay.

19 PARTICIPANT: I don't think it's
20 necessary to broadcast it on national television,
21 but leaflets to pediatricians and OBs should be
22 started first.

1 PARTICIPANT: Right, and then the
2 magazines.

3 PARTICIPANT: And magazines and stuff.

4 PARTICIPANT: Word of mouth from
5 doctors.

6 PARTICIPANT: I don't see that it
7 shouldn't be in the papers or on the news. Why
8 not?

9 PARTICIPANT: I mean, they put
10 everything else on there. I mean, you hear about
11 how nail polish is bad for you.

12 MODERATOR: All right. You bring up an
13 interesting issue and kind of a quandary. That
14 is, how do you weigh this information compared
15 with all kinds of other warnings and health
16 concerns and everything else? Where does this
17 balance out for you?

18 PARTICIPANT: It's the same as I just
19 found out over the summer that Off is -- you
20 shouldn't use on kids under three because it
21 gives them brain damage. I didn't know that. I
22 never used it, I used Skin So Soft. I mean, I

1 didn't use it for myself. I would offer that to
2 someone else who might have been over, which I
3 found out was safe. Other -- I found out just by
4 word of mouth when I was looking for some Skin So
5 Soft in the store.

6 That's just like anything else. It's
7 just as important.

8 PARTICIPANT: I'm sure that a lot of
9 people, you know, still don't reach things. I
10 was talking to my sister and she was -- she feeds
11 her son hotdogs all the time. It just really
12 irritates me because my husband read where, you
13 know, more than twelve hotdogs a month can cause
14 cancer, you know.

15 PARTICIPANT: He did?

16 PARTICIPANT: Yes.

17 PARTICIPANT: Oh, great, because I just
18 started liking hotdogs. It's one of my
19 favorites.

20 PARTICIPANT: It's like -- it's that
21 kind of thing too. So, not everyone has read
22 that or heard that.

1 PARTICIPANT: I've heard other things
2 about hotdogs and --

3 PARTICIPANT: High triglycerides or
4 whatever in the salads.

5 PARTICIPANT: -- sun block and bug
6 repellant on children under three. That stuff I
7 did, but I researched that. I mean, I did. I
8 took that on my own, because reading the back of
9 it, you have a hard time when you're child is
10 under two and you're trying to put bug repellant
11 on her and you have to go somewhere or ask your
12 doctor, which is pretty much what I did. I just
13 threw the book away and said whatever. I asked a
14 pediatrician, because if anybody's going to know,
15 you put everything that you have -- you put your
16 child in their hands and depend on them to know
17 the answers.

18 MODERATOR: Okay. Let's said that you
19 read an article that contained this kind of
20 information in it in Redbook Magazine or Ladies
21 Home Journal, or something like that. How do you
22 think the general public would respond to that

1 kind of information?

2 PARTICIPANT: It depends on how it was
3 worded.

4 MODERATOR: Okay.

5 PARTICIPANT: A lot of calls, I think.
6 A lot of (indiscernible).

7 MODERATOR: By how it was worded, what
8 do you mean by that, Monica?

9 PARTICIPANT: Well, I don't think this
10 has enough information. It doesn't answer my
11 questions.

12 MODERATOR: What are those questions
13 that aren't answered yet?

14 PARTICIPANT: My questions are, if it
15 can cause learning disability due to the nervous
16 system and all this kind of thing, in a
17 developing child, what is it doing -- you know,
18 okay -- this here, pregnancy here, was a complete
19 surprise to me. So, will probably most
20 definitely, God willing be my last pregnancy.
21 Okay? So, that's fine. So, then am I going to
22 be safe eating fish in my house? Do I not have

1 to worry about this article ever again?

2 So, my question would be, do I never
3 eat fish again because I'm left not knowing how
4 harmful it is to me, my family, my children, my
5 husband. I want to know what it is doing after
6 the fact. After this child is born, how will it
7 affect this child if it decides to eat fish at
8 the age of eighteen months or two years?

9 PARTICIPANT: And did we touch on
10 nursing mothers inside of that?

11 PARTICIPANT: No, we were going to.

12 MODERATOR: Okay. Did you see anything
13 about nursing mothers in here?

14 CHORUS: No.

15 MODERATOR: Okay.

16 PARTICIPANT: I'm curious because I'm
17 just now weaning my child.

18 MODERATOR: Okay. Any other unanswered
19 questions from the information that's been
20 provided here?

21 PARTICIPANT: I wouldn't say
22 unanswered, but I will go and look and read some

1 more. I think it gave me enough to know what I
2 should and shouldn't eat.

3 MODERATOR: This is an excellent time.
4 This is Dr. Alan Levy with the Food and Drug
5 Administration, the Center for Food Safety and
6 Nutrition and we asked him --

7 (Indiscernible, multiple speakers.)

8 MODERATOR: He's been back there
9 listening to your discussion. He has a few
10 things he'd like to add.

11 DR. LEVY: Well, first, I'd like to
12 answer any questions that people have. I'll tell
13 you a little bit about this and how we think --
14 let me give you some of the background, the
15 context here.

16 Mercury is for, a long time, is known
17 to be an environmental poison. It is not
18 terribly common in the environment. It's a
19 well-known environmental toxin. Both EPA and FDA
20 have essentially on the books that they're doing
21 to minimize the exposure of humans to mercury.

22 One of the things that EPA is doing,

1 and has done, is they limit the emission levels
2 of mercury in smoke stack emissions, that's
3 regulated. That's actually the major source of
4 mercury into the environment is these smoke stack
5 emissions. EPA has been setting standards on how
6 much is allowed to be.

7 The way that mercury gets into people
8 is primarily through fish. FDA has action levels
9 of allowable levels of mercury that can -- that
10 are allowed to be in the fish. What has happened
11 in the past few years is that for the first time
12 people have done some large studies that have
13 looked specifically at the effects of mercury on
14 unborn babies and sort of the cognitive
15 developmental effects of mercury. These are very
16 difficult studies to do because you have to do --
17 you have to have large populations that consume a
18 lot of fish. They're not done, actually, in this
19 country. The two primary studies, one is done in
20 the --

21 (Whereupon Tape Side A ended. Begin
22 Side B.)

1 DR. LEVY: -- which is in the Indian
2 Ocean, another one has been done in the Faroe
3 Island which is off of Iceland. Anyway, these
4 studies have shown that the effects of mercury
5 are particularly important for the developing
6 fetus. So, both FDA and EPA are taking this into
7 account and we are essentially lowering the
8 action levels in the smoke stack emission
9 mercury.

10 MODERATOR: Does that make sense, the
11 term lowering the action levels? Basically, the
12 amount allowed?

13 PARTICIPANT: Um-hmm.

14 DR. LEVY: And FDA is considering some
15 kind of public education activity to make people
16 aware of this hazard and encourage people to
17 avoid the kinds of fish that have more mercury in
18 them.

19 Now, our dilemma, and the reason we're
20 doing these groups, is we're interested in
21 getting people to avoid the risk, but we would
22 just assume not totally kill their fish

1 consumption. There's lots of fish, which can be
2 eaten, with essentially no risk.

3 One of the things to reassure people
4 that it's pretty unlikely that you've done damage
5 here. These levels that we're talking about here
6 are already based on ten-fold safety factors.
7 So -- and they're also assuming chronic dietary
8 levels of consumption at that level. Really not
9 talking about, you know, where you have a week
10 where you ate two cans of tuna fish, that that in
11 itself is a risky thing.

12 MODERATOR: Or the summer when she's
13 eating the fish from the Bay and --

14 DR. LEVY: It is prudent, particularly
15 for pregnant women to avoid these high mercury
16 fish and moderate their tuna fish consumption,
17 but it's really not -- we're really talking about
18 chronic eating patterns here. We're not talking
19 about regulating if they eat on occasion, and
20 that's actually one of the things that we're
21 struggling with is how to communicate that idea
22 that what we're talking about is a sort of

1 chronic dietary pattern. You want people to be
2 aware of that and to make changes in their
3 dietary pattern if, in fact, they're at risk.
4 But, we're not really saying that if you happen
5 to eat a piece of fish that that's a big deal in
6 one-way or another.

7 MODERATOR: Go ahead.

8 (Laughter.)

9 PARTICIPANT: Well, what other side
10 effects are there, besides the learning
11 disabilities that you found in the studies that
12 you've done so far?

13 DR. LEVY: Well, mercury passes the
14 blood brain barrier and it has effects on the
15 nervous system at really high levels. There have
16 been some -- we have observed high level of
17 mercury contamination happen only under
18 industrial accidents, and there's been a few
19 cases where mercury has gotten into the food
20 supply through pesticides and things that are no
21 longer allowed. We've seen really high levels of
22 mercury poisoning. It has effects on the nervous

1 system. You know, it causes paralysis, causes
2 blindness, things of that order. But those are
3 levels that are much, much higher than anything
4 that people are likely to get unless they happen
5 to be exposed to a really high level of mercury,
6 which does not occur naturally.

7 PARTICIPANT: What's interesting is,
8 you said the studies were done in these areas
9 that are mostly Atlantic type people and their
10 diet consists mainly of seafood. In the places
11 that you've mentioned, it seems very remote and
12 it's interesting that in such places you wouldn't
13 expect that they would have the environmental
14 factors as you would in densely populated areas.

15 DR. LEVY: See, the problem of mercury
16 in fish, there's really two separate kinds of
17 problems, one is commercial, meaning ocean fish,
18 commercial is old fish that is caught in the
19 ocean. The ocean has mercury in it in fairly low
20 levels. Larger fish that live a long time and
21 eat other fish, top of the food chain fish,
22 concentrate mercury. That's why shark and

1 swordfish and king mackerel are really the very
2 problematic species because those are at the top
3 of the food chain. They're big. With any fish
4 caught in the ocean, it's going to have trace
5 amounts of mercury, but it's going to be
6 dependent on how old it is and how big it is.
7 And it's almost -- there aren't like pockets of
8 mercury contamination.

9 Freshwater fish is different.
10 Freshwater fish is very dependent waters. There
11 you do have particular waters where there can be,
12 because of contamination and pollution issues,
13 higher levels of mercury. That's why most states
14 will issue consumer advisories about mercury
15 levels in their waters and advise recreational
16 fisherman who are the primary people at risk
17 there -- (tape trouble) -- and there are some
18 populations which are subsistence fisherman that
19 eat a lot of fish and those are populations that
20 we actually worry about in respect to that. They
21 eat a lot of fish. So, freshwater fish, it
22 depends on where you catch it. You need to be

1 aware of what the status is of the waters.

2 Ocean fish are mainly a matter of size
3 and type of fish. Most commercial fish is ocean
4 fish. Farm raised fish because the water quality
5 is controlled is almost never going to be a
6 problem for mercury. Shellfish is not going to
7 be a problem for mercury. It's the freshwater
8 fish that are caught in high mercury waters, and
9 it's the ocean fish which are large and live a
10 long time. They concentrate the mercury. Those
11 are the real two problems.

12 PARTICIPANT: My question is, okay,
13 what type of damage -- you're saying here, you
14 know, okay, the mercury is effecting the nervous
15 system of the unborn child and then there's
16 disability in the child. How positive -- I mean,
17 how can you be assured that it's intrauterine
18 that these children are being effected by the
19 mercury and not at the age when they start eating
20 the food at one and a half and two and three
21 while they're still developing to get to this
22 level? What is it doing to the child after

1 they're being born?

2 PARTICIPANT: And nursing too.

3 PARTICIPANT: Yeah, and during nursing,
4 does it pass through mother's milk? I mean, how
5 sure are you that it's happening intrauterine
6 once the child's been born?

7 DR. LEVY: We're not necessarily sure
8 about it. I mean, we assume that it is a problem
9 for nursing women. Nursing women also have to --
10 are included here as people who should worry
11 about it. It honestly does pass through the
12 breast milk to the baby.

13 PARTICIPANT: So, it's still
14 continuing --

15 DR. LEVY: The risk to the baby is a
16 function of the developmental phase that he's
17 going through or that she's going through, and
18 brain development occurs a lot while still in the
19 womb, but it occurs up to a couple of years. So,
20 that's a particularly important time to limit
21 exposure to mercury.

22 PARTICIPANT: So, through those years I

1 shouldn't feed my child these high levels --

2 DR. LEVY: You certainly -- yes.

3 PARTICIPANT: Now, what as an adult,
4 you know, what can it do to -- well, okay, my
5 daughter, you know, she's eight, okay?

6 DR. LEVY: Um-hmm.

7 PARTICIPANT: Is it affecting her? How
8 is it affecting her? My husband, is it affecting
9 him? How is it affecting him? Is that the
10 reason why he can't remember I told him
11 something?

12 (Laughter.)

13 PARTICIPANT: I mean, we say it's just
14 the typical man-thing, but do you know what I'm
15 saying? Is it effecting his brain cells at the
16 age of thirty-seven, the fact that he eats fish,
17 because he is a game fisherman and a sports
18 fisherman and he eats his catch, and so does his
19 family?

20 DR. LEVY: Low levels of mercury are
21 not much of a problem for adults or children
22 above whatever age the brain stops developing.

1 PARTICIPANT: Around two.

2 DR. LEVY: Well, two is the main --
3 exactly where the cutoff is. Low levels of
4 mercury of the kind people are getting through
5 their diet are not associated with any known
6 effects in adults. It's very hard to identify
7 these effects. The way it was done in these
8 special studies, which are very difficult to do,
9 is that you actually look at and monitor the fish
10 consumption of the woman during the pregnancy and
11 you follow the child over a number of years and
12 six, seven years later you give them a battery of
13 tests and you correlate how well they do on the
14 test with how much fish their mother's ate when
15 they were pregnant. That's the effect that was
16 identified.

17 PARTICIPANT: You know that these women
18 you're doing the studies on are actually having
19 their fish with the higher concentration of the
20 methyl mercury.

21 DR. LEVY: Right. You basically
22 monitor how much mercury they were getting

1 exposed to and you see whether or not that
2 predicts how well the kids do on these tests at
3 six, seven years old.

4 PARTICIPANT: The areas that you did
5 the studies in, was it all of these children, or
6 was it a percentage -- was it a low percentage of
7 the children living in this area? Could they
8 have just been children who were going to have
9 learning disabilities to begin with? What was
10 the percentage?

11 DR. LEVY: The way these are -- these
12 are typical controlled scientific studies, so
13 it's not like we're talking about the effect
14 occurs one hundred percent of the time. What
15 we're really talking about is comparing the
16 conditions, and holding everything else constant,
17 is there a significant difference? A significant
18 difference is not necessarily a big amount, it's
19 enough that it's statistically unlikely to occur
20 by chance. It's based on that that you infer
21 that there's an effect. That's what we're able
22 to do, because we know that there's an effect.

1 It's really hard for us to, in any given case,
2 identify whether a learning disability what it
3 was due to. That's virtually impossible.

4 You have to do this kind of study where
5 you have several hundred women, in one group that
6 doesn't eat a lot of group, several hundred in
7 the other group, and then you measure on average
8 how well did the children do on the test. That's
9 what it takes to be able to make this inference
10 that there's a difference at all. But to
11 actually say how much of a difference, that's a
12 much harder thing. And I don't think -- it's
13 beyond our ability to know and even estimate.
14 But that's why we're quite prudent.

15 There are large safety levels -- safety
16 factors built into these recommendations.

17 PARTICIPANT: I don't know. I guess
18 now I'm more concerned about how the study was
19 conducted to begin with, because now I'm
20 thinking, what is the education level of these --
21 of the mothers and the fathers in these areas?
22 Could they be the reason their children aren't as

1 smart as my child, because they didn't teach
2 them, their kids didn't go to the right schools.
3 I mean, it wasn't like this study was done all in
4 Annapolis, you know, where all the schooling's
5 the same, you've got primarily the same educated
6 parents, and then you say, like you said, these
7 couple of hundred with have the fish, this couple
8 of hundred won't and we'll see the outcome in the
9 study.

10 DR. LEVY: And we try to control.
11 These studies take into account, as much as they
12 can, these obvious other factors that are going
13 to contribute there. So, they try to control for
14 the education and for a lot of things that they
15 try to control for. These particular studies,
16 you know, have been judged to be decent studies.
17 It's on that basis -- actually, these studies
18 have been reviewed by the National Academies of
19 Sciences. It's based on their recommendation
20 that we're doing this and lowering the action
21 levels in the smoke stack emissions and
22 considering the public education, because the

1 people have evaluated these studies say that
2 these are reliable studies that we need to pay
3 attention to. So, we're relatively satisfied
4 with that.

5 It's true. It's always very
6 treacherous, very difficult to make some of
7 these -- these are a chronic effect that occurs
8 during a long period of time. There are many,
9 many other factors that are contributing to the
10 cognitive effects in children. To the best of
11 our ability we are trying to control it and make
12 some kind of inference here.

13 PARTICIPANT: And you're with the FDA?

14 DR. LEVY: Um-hmm.

15 PARTICIPANT: Why haven't -- what is
16 the FDAs plan as to getting this information out
17 to the general public and why has -- you know,
18 what's been taken so far, and why haven't any of
19 us, who obviously -- six of us here. All of us
20 probably have different OBs and pediatricians,
21 why don't any of us know about this study?

22 DR. LEVY: The real answer is that this

1 data has just recently been generated, and we're
2 responding to it. This data raised issues that
3 we didn't think it was as serious of a problem as
4 it turns out to be. Previously we hadn't thought
5 it was necessary to alert the public to this
6 particular risk. And we still don't think it's a
7 particular risk for most people, except for
8 pregnant women and their babies. The evidence is
9 that it's a particular risk for them. It's not
10 so much of a risk for other groups.

11 PARTICIPANT: Did you say, do you plan
12 to notify OBs and pediatricians? I mean, because
13 I am a nursing mother. My OB doesn't notify me,
14 but it would be really nice if when I went in to
15 take my baby in for it's two week appointment my
16 pediatrician says, oh, by the way -- or some kind
17 of literature.

18 Your first OB appointment, you go in
19 and the doctor hands you all this literature, and
20 even in the new literature I've gotten I never
21 heard anything about it. What are your stops?

22 DR. LEVY: Yeah. That's an obvious

1 thing for us to do and we're trying to do that.
2 One of the important realities here is that
3 doctors are not eager to talk about all the
4 possible risks. I mean, they have a full plate
5 in many ways.

6 PARTICIPANT: A lot of things to warn
7 you about?

8 DR. LEVY: They have a lot of things to
9 warn you about, and there's competition to get on
10 their agenda. This particular threat is not high
11 on their agenda. They quite reasonably argue
12 that there's lots of other things that they need
13 to talk about in terms of more importance. So,
14 it's hard because you have to compete with a lot
15 of other risks to get on their agenda.

16 MODERATOR: I think it's important to
17 point out here though that the reason you folks
18 are here is so that they can find out what kind
19 of information makes sense to you, what is clear
20 and what isn't. So, they are developing
21 information.

22 PARTICIPANT: Right.

1 DR. LEVY: This is the developmental
2 stage to get something out, and hopefully this is
3 going to be effective and useful.

4 PARTICIPANT: I just wanted to say, I
5 don't mean to change the subject but since you
6 are here now, what about this hot dog thing?
7 Because I've been getting -- I was never a big
8 hot dog person, but just recently I get -- I
9 mean, I go to the Amish market a lot and get
10 fresh veggies and stuff, and they have these all
11 beef hotdogs and my eighteen month old likes
12 them, and I'm just wondering -- I just started to
13 give her those. What's the deal with cancer?

14 (Laughter.)

15 DR. LEVY: Hotdogs have nitrates in
16 them, it's a preservative.

17 PARTICIPANT: Even the ones that the
18 Amish do?

19 DR. LEVY: I'm not -- I don't know in
20 your particular case, but many hotdogs use as a
21 preservative nitrates. When you eat them they
22 form nitrosamines. Nitrosamines are carcinogens,

1 but the levels of nitrates in hotdogs are
2 controlled so that it's generally not considered
3 to be a significant risk to eat.

4 PARTICIPANT: It's like the mercury
5 thing, sort of?

6 DR. LEVY: In moderation to some
7 extent. So, I mean -- there's lots of things in
8 the foods we eat that are potentially toxic. You
9 need to control -- I don't know what level of
10 hotdogs would be the right amount, but hotdogs,
11 because they have these preservatives. You
12 probably wouldn't have a diet solely of hotdogs.

13 PARTICIPANT: My husband's one of eight
14 and there's a million -- I have at least three or
15 four birthday parties a month, and they always
16 seem to have hotdogs for the kids. I just --
17 just for that.

18 DR. LEVY: There is no consumer
19 advisory for hotdogs. We don't tell people that
20 they have to limit their intake of hotdogs.

21 MODERATOR: Our time is almost up,
22 so --

1 PARTICIPANT: I just have one thing.
2 Back to the fish thing here and a recommendation.
3 When I go to my pediatrician's office, if there's
4 a recall on an item they have it printed on a
5 Xerox piece of paper and they hang it in a couple
6 of different places in the office on the wall,
7 just so people who really want to know what's
8 going on in the world can look at it and read it.
9 What if you did the same with your warnings? You
10 know, stick them on your OB -- you know, more
11 doctors would probably be, okay, I'll stick it up
12 here and then if a patient reads it and asks a
13 question then I can talk about it. You know,
14 send it out like that kind of thing for ones who
15 want to know and the see it on the wall, and then
16 they can read it. I mean, I look at everything.
17 I see something hanging --

18 PARTICIPANT: A brochure on the table.

19 PARTICIPANT: If there's something
20 hanging, I read it. Because obviously it's there
21 for a reason, they just don't decorate the walls
22 with these pieces of paper.

1 DR. LEVY: And you think that would
2 help people change their diet?

3 PARTICIPANT: If I read that this and
4 this and this have high levels of mercury, you
5 know, may cause this and this, you know, this is
6 not true for all fish when eaten in moderation, I
7 would look at it and go, okay, I'm not going to
8 eat these, but I know that I can eat these as
9 long as I eat them in moderation.

10 PARTICIPANT: Right.

11 DR. LEVY: Well, good. This is the
12 kind of information that we need to have to help
13 us communicate effectively here. One of the
14 questions that we have is when we tell you
15 moderation, what do people think we mean when we
16 say moderation? So, does that mean you should
17 eat less than you're eating now, or -- what is
18 moderation?

19 PARTICIPANT: Well, here you have
20 specifically stated for the tuna fish; I would
21 specifically state that because obviously you've
22 done your research, you know what the moderate

1 amount is on that. The others --

2 PARTICIPANT: I'd like to know which
3 ones don't have any on it too instead of mixed
4 in. That's another -- you know, it's important.

5 PARTICIPANT: You mentioned shellfish
6 didn't seem to have as much, so there we would
7 know that our crabs and our shrimp and, you know,
8 things like that are going to be pretty much safe
9 to eat and the others we should consume once
10 every other week or so.

11 PARTICIPANT: I think a brochure made
12 available to doctors, you know, because when they
13 give you all this literature, you know, doctors
14 generally aren't going to have time to sit down
15 and discuss all this with you. If it's given as
16 part of -- there's tons of other pamphlets
17 available and if they put that in with it, they
18 don't have to sit and discuss it with you. Just
19 make it available for you and say, okay, and that
20 flags you to know.

21 PARTICIPANT: Then the choice is yours.

22 PARTICIPANT: Right. You can decide.

1 PARTICIPANT: If it's out there, most
2 women that are expecting are interested and will
3 read. Especially if it has to do with something
4 they eat a lot, that they are used to eating.
5 You'd say, okay, this is a message on fish.
6 Well, if you never eat fish, who cares? But if
7 you eat fish, you're going to read this to see
8 what it contains.

9 PARTICIPANT: And I wouldn't have
10 consumed as much. You're saying freshwater, you
11 know, like croaker and herring and blue fish were
12 the fish that I consumed. Blue fish aren't even
13 listed here. The others were in moderate. So,
14 it's that kind of thing. I know to just avoid
15 certain things, and what to avoid and that I
16 should reduce the amount. Okay, you guys want to
17 eat with us, that's fine. I had it last week,
18 you know.

19 MODERATOR: Okay.

20 DR. LEVY: Well, great.

21 MODERATOR: Well, thank you so much.
22 You've all been very informative. I really have

1 appreciated this. I would ask that you leave the
2 information sheets because we're still revising
3 them. Once you see information in magazines or
4 your doctor's office about methyl mercury and
5 fish, you can say, you know, I helped them design
6 this.

7 Kind of exciting actually when people
8 see that. So, if you want to check out at the
9 front desk with Julian and Crystal. And thank
10 you so much for coming.

11 PARTICIPANT: Thank you.

12 DR. LEVY: Thank you. This was really
13 very helpful.

14 MODERATOR: You can keep your name tags
15 if you'd like as a ~~souvenir~~.

16 PARTICIPANT: Actually, I will take
17 mine home.

18 MODERATOR: Thank you and good luck
19 with all your babies.

20 (Whereupon the proceeding was
21 concluded.)

22

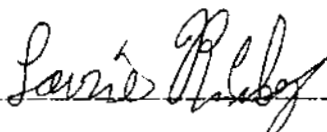
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