Q&As for the July 7, 2022, Public Meeting regarding the Northport Cancer Incidence Report

Please note:

- Answers to the questions addressed during the July 7, 2022, virtual public meeting are transcribed below based on the recording. Minor editing has been done to improve clarity. To further explain issues/points discussed during the live Question and Answer (Q&A) session, additional answers are provided with text in blue.
- Due to a technical issue, some of the questions we received were not read and thus were not addressed during the live event. Answers to these questions are provided in this document with text in blue.
- Questions are re-ordered, so that similar or related questions are placed closer to each other.
- Q, A, and R refer to questions from the audience, answers provided by NYSDOH staff, and responses (or follow-up questions) from the audience, respectively.

Q: Why wasn't this meeting held in person?

A: During COVID many of the Health Department's processes and procedures changed. Almost all meetings moved from in-person to virtual via WebEx or Zoom. We found that virtual meetings are an efficient and cost-effective means of assembling a large number of people who otherwise might not be able to attend in person.

Q: If you respond to individuals who are asking follow-up questions, will you also provide those answers to the community?

A: It depends on the question. If the question is on a very personal level, we might not. But we are recording this webinar and it will be posted on the website along with the report that is posted. People who won't be able to make tonight's meeting can hear the recording and hear the Q&As. We will look at the submitted questions. If it is a significant number, we will summarize by themes and post those Q&As on the same website. We don't want people to feel like they are not going to get the information or benefit from some of the further dialogue that might occur after this meeting.

Q: This study was requested in February 2020. The study used data from 1999-2018. Last week, I spoke with a representative at the New York State Cancer Registry. I was told that the data for 2019 is completed, as is the majority of 2020 data. Why did the data for this study stop at 2018?

A: First of all, to clarify, this study was requested in November of 2019.

At the time we did the analysis, data were official only through 2018. Data for 2019 are complete and official now. When the data were made official this past April, the analysis had already been completed. But we did look at data from later years – 2019, 2020, and afterward in the cancer registry – and we didn't see anything unusual among the children or young adults. No further cases among older teenagers and people under 24 were reported to us at the time of analysis. There were a few cancers in children under 15.

In the investigation, we started with a 20-year time frame, which we think is sufficient for assessing the pattern of leukemia occurrence in the school district.

Q: How many cases attended the Northport middle school?

A: First of all, there was a very small number of people from the class of 2016 who were in the study. To protect the identity of people, we don't give out exact numbers when they are small. With that small number as well, any generalization, any conclusions, wouldn't be very informative.

Q: Do the East Northport/ Northport Middle School numbers reflect the students that switched out of Northport Middle School to East Northport Middle School during the school year? Where would their cancer numbers fall? Were the numbers based on actual attendance to middle schools or proximity as to where you live? Some students who live in a Northport Middle School area will go to East Northport Middle School.

A: We are aware that not all students who attend or attended Northport Middle School live in the Northport Middle School attendance district; and not all students who attend or attended East Northport Middle School live in the East Northport Middle School attendance district. The two middle school sub-areas in the study were only intended as approximations of these areas, capturing the majority of students who attend or attended these schools. It would not have been feasible to identify and track every person who actually attended each school, at least not within the time it took to conduct the study.

Q: Are children attending private schools located within this district (LuDay, for example) considered with regard to these statistics? Some may not live in this district, but they attend school there daily.

A: All children who resided in the study area during the 1999-2018 period were included in the analysis. But if they didn't reside in the study area, they were not considered in this cancer incidence investigation.

Q: Were the Veterans Administration residents included? The facilities are in close proximity to Northport Middle School.

A: The Northport VA Medical Center is located in the East Northport Middle School attendance district. This VA facility does submit information on their cancer patients to the NYS Cancer Registry. People residing on the medical center campus would be included in the study if their residence address was listed as the medical center.

Q: Did DOH interview the 2016 graduates who were diagnosed with leukemia or other cancers? If not, why?

A: We did not conduct any interviews with the 2016 graduates or the next-of-kin. We got information on possible individual risk factors that they may have had from information reported to the Cancer Registry and from their medical records. We thought that with the small number of cases that we had and the different leukemia types that they had, it would be unlikely that interviewing would have produced any useful information that would guide us to the source of the unusual pattern of leukemias.

Q: Did the study include community outreach such as door knocking, mailers/e-mails to residents? Why or why not?

A: We did not use any of these techniques. We relied principally on the New York State Cancer Registry. We found it to be an excellent source of information on cancer cases in neighborhoods. We have done some community surveys from time to time in the past, asking people to report their cancers or cancers in their neighbors. When we've done that, we only got a fraction of the cases that we could identify in the Cancer Registry. The Cancer Registry is required reporting and is done by physicians, hospitals, and laboratories. It is very complete. And it is done confidentially, of course. It is a very reliable source of information.

Q: On page 2, it states that "this study includes some, not all of the students of 2016 were reported to us". What does this mean? Why were they not included?

A: When we did the quantitative analysis of observed vs. expected, at that time, the most recent data that we had available was 2018. We knew some of the 2016 graduates had been diagnosed with cancer in 2019. However, the 2019 data were not official at that time. We couldn't extend the analysis to that year.

Q: On page 9, in tables 3 & 4, children 0-14 cancer cases are shown. Why is there no table for those ages 18-25? Young adults diagnosed with cancer, specifically 2016 graduates ages 18-24, were the impetus of this study.

A: We didn't show the numbers because they were mostly less than 6 individuals. In concordance with our confidentiality policy, we don't show numbers when they are small. I did note in the body of the text that there were seven older teenagers and young adults who were diagnosed with leukemias in this period and less than 2 cases was expected. I didn't want to put up a table that was not really informative, where we couldn't provide a lot of data.

Q: There were 7 young adults with leukemia and lymphoma but less than 2 cases was expected. Observed cases were more than three times higher than expected. You've recognized that this is statistically significant, but you also say there's no cause for alarm and no follow-up is needed. Is there some threshold beyond statistical significance that would trigger greater alarm? If so, what is that threshold and what is the rationale behind using some higher threshold than simple statistical significance? In other words, what is the scientific basis for discounting your own findings?

A: We did look at statistical significance; it's important. But we looked a little bit further than statistical significance. We looked at the characteristics of the young people diagnosed with leukemia. We looked at the type of leukemia they had. We looked at where they went to middle school. We looked at some things among their medical history. We looked at other types of blood cancers. They lived in different areas of the school district. It was statistically significant, but still it was a very small number and we didn't think that any further investigation would be useful.

Q: This study defines a 2.5% difference between expected and actual cancers to be "statistically significant". If there was a 7% difference between expected and actual cases in the Northport Middle School Area, but no difference in the East Northport Middle School Area, how is that NOT considered STATISTICALLY SIGNIFICANT?

A: The statical significance depends on the number of cases that were expected. For the entire school district, there were approximately 4,400 expected, so small differences would come out statistically significant. The number was small in the individual middle school districts. In the Northport area, the 7% was statistically significant. There was a smaller difference in the East Northport school area. It depends on the number of cases that were expected.

There is an analogy I made about tossing a coin. If you toss a coin ten times, and four times it comes out heads and six times it comes out tails, you wouldn't think there is anything wrong with the coin. It just happens. If you toss a coin a hundred times or a thousand times, and you have 400 heads and 600 tails, then you might think there is something unusual going on. It is the size of the population that you are working with. It is a condition of a statistical test.

Just want to make a point, when we talk about all types of cancers combined, since different cancers are different diseases, it is not really useful from a public health point of view. If you want to talk about how to prevent cancers and treat cancers, you need to look at individual cancers. And that's what we did.

The 0.025 (2.5%) mentioned on p.1 in this report is not a percentage difference. Instead, it is the probability or risk of committing a Type I error (false positive). For this report, that is the probability of concluding that the difference between the observed and expected numbers of cases are statistically significantly higher (or lower) when in reality they are similar. For a large sample, a small percentage difference might be statistically significant, while for a small sample, a similar or even bigger percentage difference might not be statistically significant.

The statistical test applied here is to test the null hypothesis that the observed number of cancer cases and the expected count are the same. We are not assessing the probability and thus the significance if there is an excess in the Northport Middle School Area, while there is no difference in the East Northport Middle School Area.

Q: What would a large, elevated amount of cancers be?

A: We have done studies in the past and we see 10% excess. If you have a really small area, you are likely to get an even greater excess just because of the small number and they fluctuate randomly. But it would be more likely to be due to chance. I don't think it is useful to focus on percentages. It is more useful to look at what's making up the

excess. Something like a 3% in excess, it might be useful to look at different ways of reporting or recording of cancers, or somebody doing a lot of screening, or different doctors diagnosing things in different ways. That's the kind of things that come up when you got a 1%, 2% or 3% excess.

Q: Is it accurate to say that our community has "an elevated cancer rate" above other Long Island communities?

A: It was our finding that the total numbers of cancers in the whole school district were above expected; that is the conclusion, that there is a higher cancer rate. But it's by 3%, which is not a large amount. I'd characterize it as slightly elevated.

We did compare the cancer rate with all of New York State, outside of New York City. I'm not really sure where Long Island falls compared to other counties or regions in New York State regarding cancer. Usually there may be higher rates of one type of cancer and lower rates of another type of cancer.

Q: Is it common for increase in cancer population like Northport in other areas on Long Island?

A: We spent a lot of time looking at cancers in different areas and different populations. When you look at an entire area like a school district or a county, it is not uncommon to find elevations in certain kinds of cancers and deficits of certain types of cancers. We've done this for a long time and we were taking an average over the comparison areas, an average over all of New York State, outside of New York City. So generally, with an average, we expect to see some places where cancer is high and somewhere cancer is low.

Q: What other towns/districts on Long Island with a similar population have cancer rates similar?

A: We haven't looked at that for this study. We do have data on the Department's website from the Cancer Registry, looking at the six most frequently diagnosed types of cancer on census tract level. You'll get an idea of what may be high or what may be low from that. It is a partial picture. When you look at communities, some types of cancer will be high, some cancers will be low. That is on the Cancer Registry's section of the New York State Department of Health's website... If you go to https://www.health.ny.gov/statistics/cancer/registry/ and scroll down to the "Cancer incidence by census tract" section. The link will bring you to a page on which you can find some of these data statistics by census tract. In addition, we do have cancer rates by subdivisions of the counties, including the large townships that we have in Nassau and Suffolk. If people are interested, they can take a look at the data. If you go to https://www.health.ny.gov/statistics/cancer/registry/, click on the link "Selected areas in Nassau, Rockland, Suffolk, and Westchester counties", you will find the average incidence for most recent five years in six areas in Suffolk County.

Q: We keep talking about the class of 2016, was there any elevated cancer levels in classes after that?

A: We looked at cancers in all the older teenagers and young adults and didn't see anything statistically significant. There is a range of ages and different types of cancer. We looked at that and we didn't see any that would be unusual.

Q: Can it be explained why the cancer cases in Northport Middle School are significantly higher than expected? Why would East Northport Middle not be affected equally?

A: I think what we are talking about is the Northport Middle School District. We didn't specifically look at cancer cases among people attending Northport Middle School or people who might have taught there or been employed there. As I said earlier, in the whole district we saw a 7% higher rate than what would be expected. It can be attributed to a number of different types of cancer. In the Northport Middle School area, there were high numbers of cases of melanoma of the skin and prostate cancer – that probably accounted for a good portion of the excess and then you look at what are the risk factors for those cancers. For prostate cancer, I did look a little more closely

at cases of prostate cancers in the Northport Middle School area and looked at what we call the stage distribution, that is the percentage of the cancers that were diagnosed at different stages, whether they were early or late stage. We did see a higher percentage of prostate cancers that were diagnosed at an early stage in the Northport Middle School area compared to the comparison population and also compared to the East Northport Middle School area. So that's telling me there may be a higher level of prostate screening among men in the Northport Middle School area. The risk factors of melanoma of the skin are related to skin tone and sun exposure. I think it's more useful to look at the individual types of cancers and these things do vary from place to place, depending on how much screening is going on or how many people are at higher risk.

Q: Northport Middle School clearly shows cases above expected, while East Northport Middle School roughly shows observed as expected. How do we explain that?

A: It is more useful to look at the individual cancer types. I talked a little bit about risk factors for them.

Q: Did NYSDOH itself evaluate the health risk from the known conditions at the Northport Middle School?

A: We did not conduct sampling or do analyses in the school. The school decided to engage a consultant to do a very comprehensive look at the school and environmental conditions in the school. We reviewed what they did and we reviewed the results of that effort. We weighed in, saying that we didn't see anything out of the ordinary from those results. But we didn't ourselves conduct that investigation.

Q: Exposure to benzene and petrochemicals are known caused of blood cancers. These chemicals were found at Northport Middle School. What are the chances that three years of exposure to students at Northport Middle School could have caused or contributed to the 2016 graduates' illnesses?

A: I just want to point out that not all 2016 graduates attended Northport Middle School.

The exposures to benzene and petrochemicals when the K wing was investigated in 2017 initially. The levels of volatile organic chemicals that were measured were generally at levels that are like what is often found in background, but there were some that were higher than we'd like to see. Our goal is always to minimize exposures, so actions were taken. We often say when we release reports like this that we can't rule out environmental exposures having contributed to the cancers that were observed and so I would say that again here. However, we didn't see an overall increase in leukemia in higher ages. Our analysis showed a marked excess among the 2016 graduates as a group, but we didn't see it as an overall pattern. And again, not all young people in the graduating class had gone to the Northport Middle School, but of course, that doesn't mean exposures couldn't have affected some of the people who ended up getting leukemia. So, I can't say a definite "no" to exposures being important, but the exposures we saw were not at a level where we'd expect to see a measurable increase in cancer. That's one way to put it. They are near background level.

The other issue which was raised earlier is latency and one of the frustrations with these cancer studies is that we don't know what people were exposed to many years prior from birth onwards. And in this case, we don't know how long those chemicals may have been an issue in that storage room. We don't have a way to answer the question as it's asked. The question is "what are the chances"? I can't say what are the chances. But of course, we can't completely rule out that those exposures could have affected some of the children.

R: You are sharing inaccurate information. The chemicals stored in the K wing were immediately removed without proper remediation and without testing. Testing was done 3 days later after the chemicals were removed, and the area where they were stored was cleaned, hoses out and repainted.

A: The only products removed prior to the 4/27/2017 testing from the K-wing storage area were flammable products and containers that had been opened. The removal was directed by the Health and Safety official. It was after the testing that additional materials were removed and stored in another location. Further information about events in the K-wing and the sequence of product removal and testing should be directed to the Northport School District and/or their website:

http://northport.k12.ny.us/Assets/Buildings_and_Grounds_Documents/081017_NMS_Environmental_Presentation.pdf?t=636379767595830000 .

Q: What was the pollution they found in the ground at the Northport middle school? How did they go about remediating it and could that be a source of the elevated cancer levels?

A: The pollution the School District and its contractors found was through the course of routine testing of the cesspools and sewage areas that were connected to some of the wings of the school. They did find some compounds, some VOCs (volatile organic compounds). Metals were detected in the ground. However, there was no direct connection of those cesspools or sewage connections to the classrooms. To the best of our knowledge, there was no direct exposure to what was dumped there historically throughout the years of use of that school through those drains. I am not sure that we can speak to the elevated cancer level related to that, simply because we have nothing to suggest that they had any direct exposure to the pollutants detected.

Q: "NYSDOH was asked to comment on the report and its recommendations. After review, NYSDOH responded in January 2021 that the report addressed past and more recent environmental concerns at the school, and that the Soil and Materials Management Plan, if implemented, would be expected to mitigate against potential future exposures." Where do residents find this plan and how do we know if it is implemented?

A: The Soils and Materials Management Plan is available on the Northport School District website: http://northport.k12.ny.us/Assets/Buildings_and_Grounds_Documents/Soil_and_Materials_Management_Plan_-_2020-12-031.pdf?t=637940081392570000 .

Q: How much remediation is left to be completed at Northport middle school? And when will it be completed?

A: The Suffolk County Department of Health Services (SCDHS) required the remediation/clean-up of cesspools/sanitary sewers that were found to contain levels of volatile organic compounds and metals above standards. That remediation was completed and the SCDHS has indicated that no further action was warranted. Relevant discussion and documentation can be found on the Northport School District website: http://northport.k12.ny.us/Assets/District_Links/031220_NMS_Comuunity_Letter31220.pdf?t=637196346689770000 .

Q: Should continued environmental testing be conducted at the school to confirm volatiles don't exist? Thank you.

A: Based on review of the testing performed at the school, the NYSDOH does not believe that any additional testing is necessary. The NYSDOH is not aware of any plans by the School District to conduct any further testing. All recommendations put forth by PW Grosser in their Comprehensive Report were satisfied and are summarized in the following link: http://northport.k12.ny.us/Assets/NMS_Closure/Satisfaction_of_Recommendations_-_2020-12-11.pdf?t=637433039865600000 .

Q: The report did have significant findings with CO2. Why do you think there were none?

A: I think they are referring to the various investigations that were done at the school to evaluate ventilation. CO2 (carbon dioxide) is one by-product of respiration that is often looked at to evaluate if adequate ventilation is occurring. While I don't have those numbers in front of me, I don't recall there had been any significant levels that warranted any specific actions other than efforts to increase ventilation where possible. CO2 is highly variable, depending on when students and staff move from room to room. So again, if there is something more specific, a follow-up question will be helpful.

R: Referring to the testing, the report did have significant findings with CO, carbon monoxide, from the buses. Why do you think there were none?

A: The School District did do period testing of carbon monoxide inside the school because there were concerns over the buses that would be idling. To the best of my recollection, I don't believe carbon monoxide was ever detected at a level that was considered high or elevated relative to idling buses or transportations or any other sorts of vehicles that might be in the school area during school hours. So again, if there is something specific, I'd be glad to follow up. I just don't have the data in front of me at the moment.

R: That is not true. It is in the report. That is why they moved the busses.

A: We will follow up and try to address that.

To address concerns in the school community and the potential exposure to exhaust and vapors from petroleum storage, the Northport School District felt it would be prudent to relocate the bus depot and remove the bulk petroleum storage. The results of the carbon monoxide testing were not relevant in that decision. As previously stated, the carbon monoxide measurements during the several rounds of testing were largely non-detect. There were some positive results that were short term and very low. Exposure at the levels detected would not be expected to cause adverse health effects. For information about the relocation of the bus depot should be directed to the Northport School District or their website: http://northport.k12.ny.us/Assets/Buildings_and_Grounds_Documents/NMS_Update_112519.pdf?t=637103152831200000 .

R: Northport Middle school housed a bus depot. Three fuel tanks fueled the fleet of buses and they idled daily. Can exposure to bus exhaust as well as to the fuel tanks with their many citations cause cancer in students?

A: The testing that we are aware of doesn't show exposures within the school to the exhaust that is outside. There is always going to be incidental exposures when children are around buses, waiting in line, getting on or off. Those are pretty much present everywhere for any child that's involved in a bus ride to school. We are not aware of anything particularly unusual. We were aware that there were concerns about the amount of bus traffic in the garage at Northport Middle School. But I feel that the testing indoors did try to address that and showed that at least there was no impact indoors from all those activities.

As far as the fuel tanks, there was no significant, or measurable, quantifiable values of BTEX (benzene, toluene, ethylbenzene, and xylenes) and also the chemicals commonly associated with petroleum in the fuel storage. Levels that were found in the school were either well below background or were not detected. As to this specific question, I'd like to defer back to the report and be able to better answer this person's question and concern.

We don't like to see a lot of buses idling and spewing exhaust for periods of time anywhere, particularly outside of schools. But I think this was investigated to some degree at least. Someone in the Bureau of Toxic Substances Assessment can speak with the person who is asking the questions to actually go into the report and have more of a discussion about these issues, if that's desirable.

Q: The train runs through our district. Do we know what the railroad uses to control plant/weed growth? Was Roundup used or other carcinogens?

A: Assuming we are talking about the LIRR (Long Island Railroad), we don't know what they used to store or use to control plant or weed growth, or currently. That's something we can look into and see if there is any answer that is informative.

Q: Has there been studies on the effects of Covanta?

A: I am not sure what the question is asking. I see Google says it is an energy plant or waste-to-energy plant. That's something that we can look at; and the person who's asking can stay in touch with us by using the email address canmap@health.ny.gov. And we can see if we can find any answer that specifically addresses the question. That's not a concern that has come to our group.

Q: Could the overall increase in cancer be from the proximity to the power plant?

A: I just wanted to make a point before people talk about the power plant. The overall increase is made up of increase in different specific types of cancer. It is more informative to look at specific types of cancers that are elevated.

The power plant has come up; we've known that for many years that there are concerns about various issues associated with the power plant. I will start by making the point that staff in the Cancer Surveillance Program did not see a clustering of cases in a particular area within the area that was studied. That's one important type of additional investigation that they did to look at the locations where people live within the area. And they didn't cluster. The power plant, Northport Power Station, has been a concern that we have addressed in various ways over the years. But it is permitted by the State Department of Environmental Conservation (DEC) that has on-going programs to monitor. We can answer more specific questions with the help of DEC about concerns if people have them, for example, odors. There are ways to report them. But we didn't see the power plant as an issue as this report found.

Q: How can you claim that this is a cancer study while failing to mention contamination from the VA Superfund site, Huntington Landfill/Covanta and the fallout area from the Northport Power Station? The DOH exists to protect the community it serves.

A: With respect to environmental concerns at the Northport Middle School, the NYSDOH, in cooperation with the United States Environmental Protection Agency and the SCDHS, reviewed historical information related to petroleum releases and the Superfund classification at the adjacent VA Center. This review showed that past spills and the former VA Center disposal area were remediated. The school and adjacent community are not at risk for exposures associated with the site.

The Northport Power Station and the Huntington Landfill (Covanta) operations are regulated under various programs of the New York State Department of Environmental Conservation (NYSDEC). Records associated with these facilities have not shown that their operations would be expected to harm the public's health. The Northport School District's Comprehensive report provides a summary of historical activities and current operations of these facilities: https://drive.google.com/file/d/1nxMi-PBEbfDvr5glXJZ9u9_VJzzrK6kC/view?usp=sharing .

Q: Are you saying this is simply an anomaly? Or has the source of the cancer not been found?

A: So far, most childhood cancers have not been shown to have environmental causes. Many are likely to occur by chance. In this particular investigation, we did not identify any strong risk factors among the 2016 graduates that might account for their leukemia or other cancers individually. Therefore, it is possible that the elevation could be a statistical anomaly or it could result from factors that we just don't know.

Q: When will this end? The DOH has known far before 2019 that there is a high incidence of blood cancers and aplastic anemia in our community. There are decades of documentation, indicating that the DOH has been aware of this as well as the problems at Northport Middle School.

A: This investigation examined childhood cancer incidence in the area approximating the Northport/East Northport School District from 1999 through 2018 as well as more recent data. As stated in the report, we didn't observe a higher incidence of childhood blood cancers in this area.

The focus of this team was to conduct a cancer incidence investigation. We are unable to comment on the incidence of aplastic anemia (a rare blood condition when your body stops producing enough new blood cells) in your community.

The NYSDOH began assisting the Northport School District in May 2017. In particular, the Northport School District asked NYSDOH to evaluate the results of indoor air testing in the K-wing of the Northport Middle School. The NYSDOH and the Suffolk County Department of Health Services also provided technical advice on ways to improve overall indoor air quality in the K-wing and in other areas of the school. Prior to that date the Northport School District utilized a private consultant in conjunction with expertise from the Suffolk County Department of Health Services to respond to indoor air complaints and other environmental issues. The Northport Middle School

Comprehensive Report by PW Grosser includes copies of testing and follow-up activities that were taken by the private consultant and SCDHS. Relevant information can be found on the Northport School District website: http://web.northport.k12.ny.us/district/bg_northport_ms_information .

Q: Is there anything that people should be doing?

A: We don't recommend anything different than our typical advice to people in the community. Just the normal things to keep yourself healthy, visiting your doctor, avoiding tobacco, and getting your recommended screenings. We don't have any indications that there is something that people in the community should be doing.

Q: Based on the fact that there's an elevated cancer rate in the entire area do they plan on checking things like the water, air etc.?

A: What we found doesn't point to any one contaminant or material that might be related, so at this point we really don't have any place to start or any hypothesis to pursue in that way. It's more what we know about the cancers that we've already confirmed and what causes them. And unfortunately, a lot of the causes of cancers are still unknown. We know some risk factors for leukemia, but we don't understand the exact causes of leukemia. Most people with known risk factors don't develop leukemia. And many people with leukemia have none of these risk factors. It is beyond the scope of this cancer incidence investigation to discover an unknown cause of leukemia.

Q: Is there going to be any follow-up?

A: We do not plan to conduct any follow-up at this time. We don't have a basis for any hypothesis that we would need to pursue if we were going to do a follow-up. There wasn't enough information to show ways to do a follow-up that would provide useful information.

Q: Do they plan on following up on the class of 2016 to see if there is an increase of cancers in the future?

A: I think that's something that we can consider if there is interest. One problem, however, is that we need some significant additional information. We need a complete list of all students in the 2016 graduating class, including names, sex, date of birth, social security number, and the latest residential information. People graduate from high school, then they go off to all corners of the world. It'd be very difficult to identify them if they left the area. For something like that, we would need information on where they might be living. For a small number of people that might be possible, but for an entire graduating class, that would be very difficult. That's something that we could consider.

Q: Do you plan on monitoring the situation going forward to see if an increase in cancer occurs going forward?

A: We did take a look at the data that were not yet official at the time of analysis. We did not see unusual occurrence of leukemias in graduates of the 2016 class. That was going forward after the ones that we knew about in 2019 and in 2020. That's something that we could take a look at if there is sufficient interest.

Q: Rather than further tracking the class of 2016 since as you mentioned they may live in all corners of the world, are there any plans to check the classes of 2019, 2020, 2021, 2022, etc. to see if there is any pattern in this community in particular?

A: This investigation did not identify any unusual patterns of leukemia or other blood cancers in the community as a whole, aside from the 2016 graduates of Northport High School. The investigation was not able to suggest any avenues for further investigation that may be useful and no further investigation is planned.

Q: How do we request a follow-up study for the Northport area?

A: The best way to do that is to send an email to canmap@health.ny.gov, the same mailbox you used to submit questions. And a NYSDOH staff person will get back to you.

There is a bit of lag time between data becoming official and the current time. If you want to get a sufficient period, there probably will be a wait.

Q: What about the area in Northport that goes to Kings Park schools? Were those elevated?

A: We did not look at the area that was served by the Kings Park schools. We only looked at the area approximating the Northport-East Northport School District.

Q: Do you plan on looking at the area in Northport that goes to Kings Park school district based on a higher number of cancer cases?

A: We did not look at the area that was served by the Kings Park schools. We only looked at the area approximating the Northport-East Northport School District.

We don't have any plans at the moment to look at other school districts. We are willing to talk to somebody if they have any additional information, any reason, that should be attempted.

Q: Do you have any plans to investigate the Kings Park school section of Northport? Part of the Northport town goes to Kings Park school, do you plan on monitoring the area of the see if there's an increase?

A: Is Kings Park a separate school district or is it an elementary school there? We looked at areas within Northport School District. We looked at two large areas that go to the two different middle schools. We do not plan on looking at the Kings Park School District.

We saw higher number of cancer cases in Northport-East Northport for a very small defined population. We didn't have any indication that was a need to look in Kings Park.

We don't have any plans at the moment to look at other school districts. We are willing to talk to somebody if they have any additional information, any reason, that should be attempted.

Q: This is a follow up from the recent investigation of cancer in Northport School District. I am a resident living on the border of Northport & Kings Park school district. I would like to request a thorough investigation of the Kings Park school district, in particular the area that goes to Fort Salonga Elementary School, as this area is close to Northport School District, the Covanta plant, and energy plants. I would also like to request information about cancer rates and other health concerns related to the energy plants. Finally, I would like to request a report/investigation into the Covanta plant.

A: We have posted some basic information on NYSDOH's website if the public are concerned about cancers in their community: https://www.health.ny.gov/statistics/cancer/environmental_facilities/mapping/about/concerned_about_cancer_in_your_community.htm . In addition, much information about cancer in small areas of the state is available on the Department's web site at NYS Cancer Registry: https://www.health.ny.gov/statistics/cancer/registry/ .

We can do investigations of cancer occurrence in different parts of the state because we have a readily available source of cancer data with the New York State Cancer Registry. However these investigations do not allow us to link cancers to any specific facility.

In 2009, in response to a petition from a local resident which NYSDOH worked with the Agency for Toxic Substances and Disease Registry (ATSDR) and the Suffolk County Department of Health Services (SCDHS) conducted a thorough

investigation of the Northport Power Station. The report was posted on the ATSDR website: https://www.atsdr.cdc.gov/hac/pha/NorthportPowerStation/NorthportPSLHC08-31-2009.pdf .

The Huntington Landfill/Covanta waste-to-energy facility is regulated by the New York State Department of Environmental Conservation (NYSDEC) Air Program. Records associated with this facility have not shown their operations would be expected to harm the public's health. For information about the facility, including any investigations of its operations, you should contact the NYSDEC Region 1 Air Pollution Engineer at 631-444-0205. In addition, the Northport School District's Comprehensive report provides a summary of historical activities and current operations of this facility: https://drive.google.com/file/d/1nxMi-PBEbfDvr5glXJZ9u9_VJzzrK6kC/view?usp=sharing .

Q: What about the cancers of teachers who taught at Northport Middle School?

A: We did not look into cancers among teachers at Northport Middle School. That was not the subject of the request. But if anybody has additional information that they'd like us to look into, they are welcome to get in touch with us. The mailbox canmap@health.ny.gov is a good way to get in touch with us. We will get back to you.

R: It would be prudent to follow up with the teachers who worked at Northport Middle. There are many instances of cancers and miscarriages of teachers who worked/still work in that building. Thank you.

A: Anyone with specific information about cases of cancer or miscarriages of teachers or other staff that work or worked at Northport Middle School is welcome to contact us via email canmap@health.ny.gov. A NYSDOH staff member will get back to them to discuss their concerns in greater detail and together decide whether any further investigation may be needed.

Q: There seems to be a cancer cluster around my area that I'm just now finding out about. It's definitely strange and concerning. Four houses that I know of. What can be done to see if there's something causing it around here?

A: That's a question that we actually get a lot. NYSDOH staff will explore concerns with people. We like to talk to people about first is that cancer is a common disease, especially among middle-aged and older people. Different cancers have different causes. I would be very important to look at not only how many people or how many houses have people with cancers, but what types of cancer. If it is all one type of cancer, that is a different level of concern than if it is different types of cancer. Do people have common cancers or are they particularly unusual? It is a whole conversation that we need to have. And if you are interested in following up on those concerns, I'd encourage you to send an email to canmap@health.ny.gov and we will get back to you to discuss your concerns.