## Senate Finance Subcommittee on General Government and Agency Review

Am. Sub. HB 49
Interested Party Testimony
Dr. Russ Lee-Wood, Physician
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My name is Russ Lee-Wood. I am a board-certified physician and have been practicing medicine in the state of Ohio for over 20 years. During that time, I have been a medical officer with the U.S. Army Reserve, a family physician, an ER doctor and, most recently, the medical director for Ohio Hills Health Services in Barnesville, Ohio. Over the years I have treated thousands of patients for a variety of different medical conditions, however, in recent years I have noticed a startling trend.

With the rapid expansion of oil and natural gas development and the introduction of hydraulic fracturing technology in Belmont County, I have seen a drastic increase in the number of patients with serious respiratory problems. These patients, most of whom live near horizontal well sites or compressor stations complain of ailments ranging from shortness of breath to severe allergies to asthma attacks. This recent trend is surprising because most of my patients have no history of respiratory issues. Some of are even in top physical condition, otherwise.

It is my professional opinion as a physician that there is a link between this new oil and gas infrastructure in southeast Ohio and my patients' health problems. But you don't have to take my word for it. There's a growing body of evidence linking hydraulic fracturing operations to negative health outcomes for people living nearby. Since 2013, there have been nearly 400 papers published on the environmental and health impacts of shale gas development. Of those studies, 84% show a link between health impacts and shale gas development.

The chemicals used in hydraulic fracturing are a mixture of chemicals we know are safe, chemicals we know are hazardous and chemicals we know virtually nothing about. For the chemicals we know nothing about, this is for one of two reasons: either 1. because they haven't been fully studied or 2. because they are withheld as confidential business information or trade secrets.

In the case of trade secret protected chemicals, it is nearly impossible to know what chemicals or chemical combinations might cause specific health conditions. That being said, in general, we do know that exposure to the suite of chemicals used in hydraulic fracturing have been linked to a number of serious health problems including: respiratory problems, kidney problems, birth defects, neurological problems, and gastrointestinal problems among other things.

We also know that the only way a physician can properly treat or diagnose a patient who has been exposed to one or more of these chemicals, is for health professionals to have access to the full list of chemical additives.

Fortunately, Ohio law does require that oil and gas producers provide a comprehensive list of chemical additives, including trade secret chemicals, directly to physicians who request the information in order to treat or diagnose a patient. Unfortunately, not everyone who needs this information to protect human health is able to get it.

Under current state law, the identify of trade secret chemicals are not allowed to be disclosed to first responders, drinking water operators or state agencies responding to emergencies. As a result, we are asking those charged with protecting public health, safety, and drinking water to respond to oil and gas emergencies without key pieces of information. They cannot possibly accurately assess the situation and make the best possible decision to protect public health so long as the chemical reporting loophole remains in Ohio law.

I respectively request that members of this committee do all that you can do to support and advance an amendment in the state budget bill which would close the chemical reporting loophole and make sure that emergency responders, drinking water operators and state agencies who help protect public health have access to <u>all chemical information</u>.

Thank you for allowing me to submit this testimony to the committee.