

February 10, 2020

From: Eva Galvez, MD

Re: In support of House Bill 4109

Chair Salinas, Vice Chair Hayden, and Members of the Committee,

Thank you for this opportunity. My name is Dr. Eva Galvez. I am a family physician, the proud daughter of former seasonal farm workers, and born and raised in Hood River, Oregon. As a family physician, I care for families in all stages of life, including pregnancy. A significant portion of my patients are seasonal farmworkers or have close family members working in this industry.

My background as a the daughter of seasonal farmworkers along with my work has provided me with a front row seat to the working conditions that my patients face daily, from dangerous working conditions, long days, low wages, and chronic exposure to pesticides. It is well documented in medical literature that pesticide exposure is linked to serious short and long term health problems. As a physician that strives to ensure the health and safety of my patients, I am extremely concerned about the ongoing use of chlorpyrifos in the agricultural industry in Oregon and I am here today to urge you to phase out the use of chlorpyrifos in our state.

Farmworkers are exposed to pesticides, including chlorpyrifos, on a regular basis. Exposed at work, they transport pesticides on their work clothing, shoes, hair and into family vehicles and into their homes. Farmworker families that live in camps near the fields where they work are especially susceptible. Substandard housing such as broken windows, over heated cabins, and poor insulation makes it so they experience these exposures essentially around the clock. Their children, although may not be working directly in the fields are particularly vulnerable as they are exposed by pesticide drift from fields near their homes, from their parents's clothes, and by playing at the edge of the fields.

Symptoms of exposure to chlorpyrifos are often non-specific such as vomiting, tremors, headache, dizziness, and flu like symptoms, but the long term effects may not be apparent for decades. A 2017 paper published from the Agricultural Health Study has identified a borderline but statistically significant increased risk for pre-menopausal breast cancer among women who reported using chlorpyrifos, consistent with its known effects as an endocrine disrupting chemical. Many of my patients do not make the connection between their symptoms and exposure to pesticides. Even if they do, they often do not seek care for reasons such as fear of retaliation, lack of health care

services, and inability to get time off from work. For pregnant women and children, the adverse effects of chlorpyrifos exposure are also very serious. Studies have shown that even small levels are associated with damage to the developing fetus. We cannot ethically perform randomized controlled trials on pregnant women and children exposed to chlorpyrifos but extensive epidemiological research shows a link between exposure to chlorpyrifos and adverse health effects on both physical and neurological development. The American Academy of Pediatrics in 2012 stated that children have “unique susceptibilities” to toxic pesticides and evidence demonstrates “prenatal and early childhood exposure to pesticides is associated with pediatric cancers, decreased cognitive functions and behavioral problems.” In my practice I often care for infants and children with developmental problems with no “clear cause” but my clinical judgement tells me that exposure to pesticides, that include chlorpyrifos, either in utero or infancy, if not the primary cause, is a contributing factor.

Measures such as closing windows in homes, staying indoors after spraying and wearing personal protective equipment are not 100% effective, and personal protective equipment contributes to a workers’ heat burden, which itself can be dangerous. Closing windows and doors is nearly impossible during extreme weather conditions. Prohibiting children from playing after spraying is not an easy task, and the reality is that children continue to play outdoors despite warnings to remain indoors. My point here is that there are no measures that can adequately protect my patients from the risk of chlorpyrifos unless we phase out its use in agricultural settings.

I believe that the foundation for a healthy community requires a healthy environment for our children to grow. Based on extensive research, a child routinely exposed to chlorpyrifos will have more challenges growing into a healthy adult. I urge you to join me in phasing out chlorpyrifos in Oregon. By taking action today and ensuring that all Oregonians have the opportunity to live, work and play in safe conditions, we are taking a step towards building a healthier community in Oregon.

Sincerely,

Eva Galvez, MD  
13667 NW Hogan St  
Portland, OR 97229

