February 10, 2014

The Honorable Suzanne Bonamici
Ranking Member, Subcommittee on Environment
Committee on Science, Space and Technology
U.S. House of Representatives
Washington, DC 20515

Dear Representative Bonamici:

We are writing to express our opposition to H.R. 4012 the Secret Science Reform Act of 2014. The American Lung Association is the oldest voluntary health organization in the United States. The Lung Association’s mission is to save lives by improving lung health and preventing lung disease. We achieve our mission through research, advocacy and education. The American Thoracic Society is a medical professional society dedicated to the prevention, detection, treatment and cure of pulmonary disease, critical care illness and sleep-disordered breathing through research, education and advocacy.

Science is the bedrock of sound regulatory decision making. The best science underscores everything our organizations do to improve health. We strongly believe in a transparent and open regulatory process. A vital element of research is patient confidentiality. Physicians and researchers have earned the trust of their patients by steadfastly maintaining patient confidentiality. Patient confidentiality is a clear legal and ethical obligation.

The legislation before the committee will compel the U.S. Environmental Protection Agency to either ignore the best science by prohibiting the agency from considering peer-reviewed research that is based on confidential patient information or force EPA to publicly release confidential patient information, which would violate federal law. This is an untenable outcome that would completely undermine ability of the EPA to perform its responsibilities under the Clean Air Act and myriad other federal laws. The legislation will not improve EPA’s actions; rather it will stifle public health protections.

The kind of information disclosure envisioned in this legislation exceeds that required by peer-reviewed journals. We believe much of the intent of this legislation is already achieved through the current peer-review process required by all academic journals. The vast majority of peer-reviewed journals require manuscript authors to register any trial using human subjects with clinicaltrials.gov. This public registry collects key information on the study population, research goals and methods that allow outside reviewers and scientists to either challenge or attempt to reproduce study results. Additionally, the peer-review process and publication of results invites the broader scientific community to debate study findings. Trial registry and manuscript publications are only part of the process by which scientific endeavors operate in a transparent environment.

Private organizations, public charities, research universities, the National Institutes of Health, the Centers for Disease Control and Prevention, the Centers for Medicare and Medicaid Services, the Department of Veterans Affairs, corporations and many other entities conduct medical research. Many of these organizations compile large longitudinal data sets that track patients over a period of time.
These data serve as the basis of many studies that permit epidemiologists to track disease and risk factor information for large patient populations.

The published peer-reviewed information from such data often inform regulatory decision making at the EPA and other federal agencies as well as future research. Not only do these data inform regulatory action, they help inform efforts to educate the public about the magnitude of a disease, risk factors and steps individuals can take to improve their health. In order for EPA to set the most appropriate standards, it must be informed by the best information.

Understanding the impact of air pollution on human health and the magnitude of harm caused by pollution at specific levels helps the agency meet its obligations under the Clean Air Act. Absent these data, it is unclear upon what basis the agency could make sound decisions.

We urge the committee to reject H.R. 4012.

Sincerely,

Harold Wimmer
National President & CEO
American Lung Association

Stephen C. Crane, PhD, MPH
Executive Director
American Thoracic Society