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Testimony of Abby Fleisch, MD, MPH

In Support of LD582—

An Act to Require Health Insurance Carriers to Provide Coverage for Blood Testing for Perfluoroalkyl and Polyfluoroalkyl Substances

March 4, 2025

Good afternoon Senator Bailey, Representative Mathieson, and members of the Committee on Health Coverage, Insurance, and Financial Services. My name is Abby Fleisch—I am a pediatric endocrinologist and am speaking today on behalf of the Maine Chapter of the American Academy of Pediatrics. I live and practice in Portland, Maine, and I lead research on health effects of PFAS. I currently lead or co-lead 4 large grants from the National Institutes of Health to study the health impact of PFAS exposure. My research is focused on the impact of PFAS on cardiovascular and bone health, and one of our studies aims to identify exposure sources and mental health impacts of the PFAS biosolids contamination in Maine. I also follow several patients in my clinic for high PFAS exposure.

I am here to testify “in support of” LD582. You have already heard about the many residents in central Maine exposed to PFAS and that many of these residents cannot afford a PFAS blood test. During this testimony, I want to tell you more about the research on PFAS-related *health effects* and *why a blood PFAS test is important* to guide long-term medical monitoring of Mainers exposed to PFAS.

Health Effects of PFAS Exposure

In my research, we have used data from the Diabetes Prevention Program. This was a large study of about 1000 adults at risk for diabetes who were followed over 15 years. Adults with higher PFAS levels at the beginning of the study had greater **weight gain,¹ risk of diabetes,² and risk of high cholesterol.³**

I also study health effects of PFAS exposures in the longitudinal Project Viva study of 1000 mother/child pairs. Mothers in Project Viva with higher PFAS concentrations during pregnancy had infants with **lower birth weight.⁴** Children in Project Viva with higher PFAS concentrations had **adverse fat distribution and lower bone mineral density.^{5,6}**

Other researchers have consistently found higher PFAS concentrations to be associated with higher cholesterol, elevated liver markers, abnormal thyroid function, and increased risk for testicular and kidney cancer.^{7,8}

Long-term Medical Monitoring

Exposed Mainers need a PFAS blood test to guide medical monitoring.

Evidence-based guidance from the National Academies of Sciences

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recommends^a: DEDICATED TO THE HEALTH OF ALL CHILDREN

--Extra testing for high cholesterol, thyroid dysfunction, and kidney cancer if the PFAS level is above a certain threshold.

--Following PFAS levels over time to ensure adequate exposure reduction.

Knowing the pattern of PFAS elevation and comparing the pattern of PFAS in the blood to the pattern in the well water can help to identify sources of PFAS exposure to guide exposure reduction advice.

Finally, the medication cholestyramine can be used to decrease PFAS body burden in individuals with high concentrations in their blood.

Summary

I am in support of LD582 because research suggests that exposures to PFAS have potential to impact human health, and a PFAS blood test is critical to ensure appropriate medical monitoring of exposed individuals. I believe that all Mainers exposed to PFAS, even those who cannot afford it, deserve the option to monitor their blood PFAS levels.

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