## Centers for Disease Control and Prevention (CDC) / Agency for Toxic Substances and Disease Registry (ATSDR) Comments on the Interagency Science Discussion Draft IRIS assessment of Methanol (Noncancer) (dated July 2013)

Date: August 26, 2013

Date:	August 23, 2013
From:	Centers for Disease Control and Prevention / Agency for Toxic Substances and Disease Registry
Subject:	Comments on EPA's Toxicological Review of Methanol (noncancer)
То:	Environmental Protection Agency

We appreciate the opportunity to review and comment on the EPA's final draft Toxicological Review and IRIS Summary on Methanol (noncancer). In general, we found that the responses to public comment and peer review questions have adequately addressed the concerns we expressed in our prior review.

## **Comments on the Final Draft Toxicological Review Appendices**:

**General Comment**: We suggest that you avoid the use of the word "normal" throughout the document. Instead use "endogenous" or "background concentrations of serum methanol".

**Page A-54, Response to Comment 3 and PageA-70, Response to Comment 6:** Please provide further clarification that the model is likely sensitive to a change in the RfC or RfD for a population, but not for an individual. In the responses, page 5-39 of the Toxicological Review Document is referenced, which states "RfC and RfD exposures would result in approximately 85% and 94% increases, respectively, in the number of individuals with peak methanol blood levels at or above 2.5 mg/L." We believe that the estimated percent of the population that can be affected by an increase of the RfC is likely less than the percent demonstrated in the example since the model used to develop these estimates was designed using a fixed value and a specific group in the population. This group in the population is likely at most "potential" risk from this increase in the serum methanol concentration based on the reported CNS effects in a non-human primate model (NEDO 1987).

## **Comment on the Final Draft IRIS Summary:**

**Section I.A.5. Confidence in the Chronic Oral RfD:** We found the first sentence confusing, as it starts with a reference to the RfC but is actually describing the RfD.