

**BEFORE THE ILLINOIS POLLUTION CONTROL BOARD**

IN THE MATTER OF: )  
)  
WATER QUALITY STANDARDS AND )  
EFFLUENT LIMITATIONS FOR THE ) R08-9  
CHICAGO AREA WATERWAY SYSTEM ) (Rulemaking – Water)  
AND THE LOWER DES PLAINES RIVER: )  
PROPOSED AMENDMENTS TO 35 III. ) Subdocket B  
Adm. Code Parts 301, 302, 303 and 304 )

**NOTICE OF FILING**

TO: See Attached Service List

PLEASE TAKE NOTICE that on the 14th day of June, 2010, I filed with the Office of the Clerk of the Illinois Pollution Control Board the attached Prefiled Questions of the People of the State of Illinois to Samuel Dorevitch, a copy of which is hereby served upon you.

Respectfully submitted,

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**PREFILED QUESTIONS OF  
THE PEOPLE OF THE STATE OF ILLINOIS TO SAMUEL DOREVITCH**

The People of the State of Illinois hereby files questions to Samuel Dorevitch:

1. Regarding your testimony that the information presented in the CHEERS Interim Technical Report “should not be viewed as answers to primary study questions”:
  - a. What purpose does this report serve?
  - b. Are the findings accurate and statistically reliable?
  - c. Is the information provided therein sufficient to make a determination whether biological contaminants in the CAWS represent a public health risk?
  - d. Have you developed similar interim reports with incomplete or inconclusive findings for other research projects like CHEERS?
2. Are you aware of the MWRD Press Release entitled “Study Confirms Chicago Waterways not Harmful to Recreational Users” dated May 12, 2010?
  - a. Were you consulted in preparation of this release?
  - b. Do you agree with the statement that the CHEERS study has confirmed that Chicago waterways are not harmful to recreational users?
  - c. The press release states that the CHEERS study “reveals that there are no increased health risks for recreational users in the inland Chicago Area Waterways System (CAWS) compared to swimmers in Lake Michigan” and “[t]here is, essentially, no greater health risk to individuals who canoe/kayak in the CAWS and have water splashed on them than those recreating in other bodies of water . . . .” Are these statements accurate?

- d. The press release states that “after 21 days, the illness rate among unexposed participants was actually higher than for the two water exposed groups.” Is this accurate? If so, on what information from the Interim Technical Report is it based?
  - e. The press release states that microorganisms associated with wastewater effluent are “ever-present in the environment, including Lake Michigan, all inland lakes, and rivers receiving disinfected effluent, and are not unique to the CAWS.” Are the levels of bacteria and pathogens in the CAWS the same as other waterbodies included in the CHEERS study?
3. The press release describes the CHEERS study as “the first research of its kind in the United States.”
    - a. What aspects of the CHEERS study are novel or unprecedented?
    - b. Are you aware of any other studies that are sufficiently similar in design, focus, and scope that could be used to corroborate CHEERS findings?
  4. Once completed, will the CHEERS study demonstrate whether a causal relationship exists between CAWS recreation and occurrence of gastrointestinal illness and respiratory, skin, eye and ear symptoms?
  5. Is it your opinion that the CHEERS study will be capable of concluding definitively whether or not biological contaminants in the CAWS pose a public health risk?
  6. Your testimony describes your previous advocacy efforts regarding more stringent regulation of ozone, particulate matter, diesel and coal-fired power plant emissions and lead.
    - a. Do you feel that these air quality issues represent public health risks?
    - b. What information led you to conclude that these are public health risks that require more stringent regulation?
  7. Will the results of the CHEERS study be capable of characterizing risks to sensitive subgroups such as children, the elderly or those who have a health condition that makes them susceptible to infection?
  8. If CHEERS study participants develop asymptomatic infections from waterborne pathogens that are passed to other family members, will these secondary illnesses be captured in the study?
  9. Does the CHEERS study account for the possibility that individuals with more frequent exposure to CAWS water may be at greater risk of experiencing gastrointestinal or other illnesses?

- a. What portion of the cohort was studied following only a single recreational event?
  - b. How many individuals participated in CAWS activities beyond the 21 day follow-up period and re-enrolled in the study, thereby receiving multiple follow-ups?
  - c. How will the study account for frequency of exposure?
  - d. The Interim Technical Report indicates that study participants were asked about additional water contact during the follow-up telephone calls. If a participant indicated that they had additional water contact during the 21 day follow-up period, how was this information used?
10. The Interim Technical Report provides water quality data for pathogens and indicators aggregated to daily averages. Will the final report examine risks to acute exposures from peaks occurring during the recreational period?
11. Your testimony indicates that some of the water quality samples measuring E. coli and enterococcus are "implausibly low" and therefore will be excluded from the study.
- a. How many samples does this affect?
  - b. To what do you attribute these implausible results?
  - c. Is it possible that this issue affects the results of other water samples as well?
12. Water sampling methods and the specific pathogens analyzed as reported in the Interim Technical Report vary by study year.
- a. Is this common in a study like CHEERS?
  - b. Why does the list of analytes and analytical methods vary from year to year?
13. The Interim Technical Report indicates concerns regarding sample quality in terms of "precision, accuracy and validity" for Pseudomonas, Salmonella and Shigella in 2007. Therefore, these pathogens were not included in 2008 or 2009.
- a. Were attempts made to address these issues?
  - b. How will the lack of data on these pathogens affect the ability of the report to characterize risk of illness to recreators?
14. The Interim Technical Report refers to a study sample size of 11,297, which includes those who participated in at least one phone call. However, only 7,478 participated in all three phone calls. Is it possible that symptoms in the remaining 3,819 participants could have been overlooked?

15. The Interim Technical Report indicates that only 745 of 2433, or 31 percent, of participants with any gastrointestinal symptoms provided a stool sample. Is this an adequate sample size from which to draw conclusions about detection of pathogens?
16. The Interim Technical Report provides a specific definition for acute gastrointestinal illness. Regardless, stool samples were collected from individuals with any new gastrointestinal symptoms. Is it possible that some of the stool samples were taken from people without illness?
17. The Interim Technical Report indicates that the timing of follow-up with participants was based on the latency periods between exposure and acute gastrointestinal illness.
  - a. Is this same follow-up schedule used for other illnesses (e.g., respiratory symptoms)?
  - b. Do these other illnesses have similar latencies?
18. Have you received any written comments from the peer review panel? If so, will you please file them with the Board?

LISA MADIGAN,  
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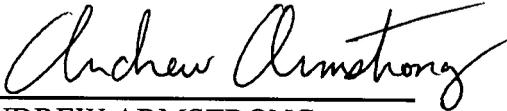
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DATE: June 14, 2010

**CERTIFICATE OF SERVICE**

I, ANDREW ARMSTRONG, do certify that I filed electronically with the Office of the Clerk of the Illinois Pollution Control Board the foregoing Notice of Filing and Prefiled Questions of the People of the State of Illinois to Samuel Dorevitch and caused them to be served this 14th day of June, 2010 upon the persons listed on the attached Service List by depositing true and correct copies of same in an envelope, first class postage prepaid, with the United States Postal Service at 69 West Washington Street, Chicago, Illinois, unless otherwise noted on the Service List.

  
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ANDREW ARMSTRONG