

TABLE 3.—DIETARY EXPOSURE AND RISK TO ACIFLUORFEN<sup>1</sup> FROM DRINKING WATER—Continued

Population	Acute Endpoint		Chronic Endpoint		Cancer Endpoint <sup>3</sup>	
	Exposure µg/L	DWLOC µg/L	Exposure µg/L	DWLOC µg/L	Exposure µg/L	DWLOC µg/L
Children 1 to 6	NA <sup>2</sup>	NA	0.99	40	-	-

<sup>1</sup> Acifluorfen derived from applications of lactofen.

<sup>2</sup> Acute endpoint applies only to females of childbearing age.

<sup>3</sup> Cancer risk is generally reported for the U.S. population.

HED has a concern if the DWLOC for any scenario is below the estimated environmental concentration from the models. All of the DWLOCs shown in the tables above exceed the estimated EECs.

2. *Non-dietary exposure.* Lactofen is proposed only for agricultural uses and no home owner or turf uses. Thus, no non-dietary risk assessment is needed.

#### D. Cumulative Effects

Section 408(b)(2)(D)(v) requires that the Agency must consider “available information” concerning the cumulative effects of a particular pesticide’s residues and “other substances that have a common mechanism of toxicity.” Available information in this context include not only toxicity, chemistry, and exposure data, but also scientific policies and methodologies for understanding common mechanisms of toxicity and conducting cumulative risk assessments. For most pesticides, although the Agency has some information in its files that may turn out to be helpful in eventually determining whether a pesticide shares a common mechanism of toxicity with any other substances, EPA does not at this time have the methodologies to resolve the complex scientific issues concerning common mechanism of toxicity in a meaningful way.

There are other pesticidal compounds that are structurally related to lactofen and have similar effects on animals. In consideration of potential cumulative effects of lactofen and other substances that may have a common mechanism of toxicity, there are currently no available data or other reliable information indicating that any toxic effects produced by lactofen would be cumulative with those of other chemical compounds. Thus, only the potential risks of lactofen have been considered in this assessment of aggregate exposure and effects.

Valent will submit information for EPA to consider concerning potential cumulative effects of lactofen consistent with the schedule established by EPA in the **Federal Register** of August 4, 1997 (62 FR 42020) (FRL-5734-6), and other subsequent EPA publications pursuant to FQPA.

#### E. Safety Determination

1. *U.S. population.* Water is not expected to be a significant source of exposure for lactofen, as it degrades quickly in the environment to numerous degradates, including acifluorfen. EECs for lactofen and acifluorfen are well below the DWLOC for chronic, acute, and cancer risk. Therefore, the only significant source of human exposure to lactofen is in food. Residues of lactofen are generally non-detectable at a LOQ of 0.005 ppm, in all food forms. The exposure is <0.1% of the acute and chronic PAD for all population subgroups. Exposure is generally not of concern if it is less than 100% of the PAD. The estimated cancer risk for the U.S. population is  $8 \times 10^{-8}$ , which is more than an order of magnitude less than the risk that is generally considered negligible  $1 \times 10^{-6}$ .

2. *Infants and children.* As stated above, dietary exposure assessments, including drinking water, utilize less than 0.1% of the acute and chronic PADs for all population subgroups, including infants and children. Reproduction and developmental effects have been found in toxicology studies for lactofen but only at levels that were also maternally toxic. This indicates that developing animals are not more sensitive than adults. FQPA requires an additional safety factor of up to 10 for chemicals which present special risks to infants or children. Lactofen does not meet the criterion for application of an additional safety factor for infants and children. The FQPA Safety Factor Committee met on March 13, 2000 to evaluate the hazard and exposure data for lactofen and recommended that FQPA, safety factor for protection of infants and children should be reduced to 3x for lactofen. This safety factor was reduced to 3x by The FQPA, Safety Factor Committee because available data provide no indication of quantitative or qualitative increased susceptibility from *in utero* and/or postnatal exposure to lactofen in rats. Information on the reproduction and developmental effects caused by the other diphenyl ether herbicides is not available to Valent. Additional time is needed for the Agency to evaluate the need for an

additional safety factor related to these other chemicals. However, even if an additional safety factor were deemed necessary, the dietary exposures are still expected to be well below the established reference doses.

#### F. International tolerances.

There are no Codex maximum residue limits established for lactofen on cotton or peanut commodities, so there is no conflict between this proposed action and international residue limits.

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## ENVIRONMENTAL PROTECTION AGENCY

[FRL–7445–4; RCRA–2002–0029]

### Land Disposal Restrictions: Treatment Standards for Mercury-Bearing Hazardous Waste; Notice of Data Availability

**AGENCY:** Environmental Protection Agency (EPA).

**ACTION:** Notice of data availability.

**SUMMARY:** This notice of data availability (NODA) makes available to the public two studies conducted on the treatment of mercury wastes. The studies were initiated to help evaluate whether EPA could propose treatment and disposal alternatives to the current land disposal restriction (LDR) treatment standard of mercury retorting. The studies were performed to assess conditions that affect the stability of waste residues resulting from the treatment of high mercury (greater than 260 mg/kg total mercury) wastes. This NODA also makes available the results of the peer review of these studies. As a result of our investigation, we have concluded that changes to our national regulations are impractical at this time. Additionally, this notice also provides information on how to use the existing treatability variance procedures to make site-specific choices on alternatives to mercury recovery. The treatability studies and the results of the peer review are presented here only to provide information—we are not