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Dr Amanda Cohn MLC
Chair
Portfolio Committee No. 2 - Health
Legislative Council
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Question on notice - NSW Health – 27 October 2023 Hearing

Dear Dr Cohn

I refer to the inquiry into current and potential impacts of gold, silver, lead and zinc mining on human health, land, air and water quality in New South Wales, and to the hearing conducted on 27 October 2023.

Please find enclosed NSW Health answers to the Committee's questions taken on notice during the hearing.

For more information, please contact Ms Seija Duffy, A/Director, Parliament, and Cabinet, Executive and Ministerial Services, NSW Ministry of Health .

Yours sincerely

Susan Pearce AM
Secretary, NSW Health

Current and potential impacts of gold, silver, lead and zinc mining on human health, land, air and water quality in NSW

Hearing – 27/10/2023

Questions on Notice

QUESTION 1 – Page 52

THANJIRA JIRANANTAKAN: I may add into that, then. The initial number of test results we received—that's through EPA, and that's non-identified. I can check the exact number, but it's about 10-something, which is a very small number of samples, and those results have mildly elevated, some of the heavy metal level, and that mildly elevated levels of the health-based reference don't have immediate health impact.

ANSWER

NSW Health received de-identified clinical test results of 11 individuals from the NSW Environment Protection Authority, which were reviewed by the NSW Health Expert Advisory Panel. Some samples showed mildly elevated heavy metal levels with no expected health impacts.

QUESTION 2 – Page 52-53

Ms CATE FAEHRMANN: Thank you, Chair. Yes, just in relation to the situation about informing GPs, in terms of the decision-making within NSW Health. Was the Minister made aware of that decision to instruct GPs in the local area not to proactively test residents?

JEREMY McANULTY: There was not a recommendation not to proactively test residents. The advice was for clinicians to use their clinical judgement. But, in the absence of exposure or symptomatology, broad screening of the whole community wasn't recommended at this time.

Ms CATE FAEHRMANN: Who made that decision?

JEREMY McANULTY: That was based on the expert panel. The expert panel met, reviewed the available data. The expert panel has a range of experts in different clinical and other areas, and that was based on them.

Ms CATE FAEHRMANN: Does that brief go to the health Minister?

JEREMY McANULTY: I was on leave at the time. I can't tell you for sure that the Minister was briefed.

ANSWER

The Minister's office is regularly briefed on health-relevant mining activities and recent events.

QUESTION 3 – Page 55

The Hon. SUSAN CARTER: Thank you all for being here today to explore this very important issue. A number of the questions I had intended to ask have been well covered by my colleagues, so thank you for the information. In the normal population, if such a thing exists, what would be the incidence of elevated lead or other metals in the population in blood tests? Are some metals more commonly found than others? Perhaps you could provide some general background.

JEREMY McANULTY: Could I defer to—

ANDREW DAWSON: Sure. It's not uncommon to have people arrive with elevated heavy metals. There are particular things such as mercury and arsenic, which are common in food. Generally these levels are all very, very low levels that don't require treatment and, indeed, sometimes, depending on the source of the metal, may not actually have any risk at all. I'd have to take the question on notice to give you an absolute instance of, if you just screen people, how often you would find various heavy metals.

ANSWER

Reported laboratory ranges for metals typically assume the 95% of the “normal” population would fall within that range. Broadly speaking a normal population would not have any unusual exposure to metals so in that population 5% could be just above the laboratory range. Being above the range is the trigger for further evaluation to look for sources of exposure. The higher a level is above the range the higher the likelihood that there is an unusual exposure.

There are large variations in how metals are handled by the body, this includes both metals that are considered essential elements for human health (in low levels) and those that have no role in human health. Specifically, in how long they persist in the body. So, for example up to 80% of a population eating a high seafood diet will have high mercury levels for at least a few days after their last seafood meal. A lead level just above the range in a child requires investigation as it likely to reflect current exposure, whereas that same level in say a 70-year-old man may reflect lead exposure 50 years previously.

QUESTION 4 – Page 57

The CHAIR: Can I ask one last question? I want to try to clarify some of the discussion that we were having earlier about the data collection in that Orange region. You mentioned a couple of times the very small data set that you have at the moment. I imagine that data set is small because there hasn't, up until this point, been an effort to do widespread testing. But you also said in one of your answers—when you were talking, I think, about the expert working group—that that committee is still collecting data. I was hoping you could clarify for the Committee what data you're now collecting. What is that process?

JEREMY McANULTY: We're working with the EPA, and we've asked the EPA to urgently provide the expert panel with data they're collecting from the environment. We're concerned about that exposure pathway we talked about earlier—what has actually been coming from the environment and from the mine in terms of water or soil or air contamination—to help understand what the risks to individuals might be. We've got, I understand, most of that data in from the EPA now. It's been very useful. There's a further human health risk assessment that the EPA has required to be redone by the company to understand what those—so we need to see what the results of that are, which we expect in some weeks. We'll put all that information and any other new data, including the deep dive I mentioned earlier, to the expert panel to reconsider their advice on a regular basis.

Ms CATE FAEHRMANN: I'm wondering who sees that data. Does it stay with the expert panel? How transparent is that?

JEREMY McANULTY: I'd have to check with the EPA. It's EPA data that we're reviewing.

ANSWER

The NSW Environment Protection Authority has collected environmental monitoring data for properties in areas close to the Cadia mine and analyses this data. The individual data for each property was provided to the owner and/or tenant of that property in a letter, along with recommended actions to take where there were exceedances of the relevant health guideline value from the Australian Drinking Water Guidelines. Residents were also offered an opportunity to discuss with an EPA officer. The EPA presented a summary of the data to its Cadia Valley Expert Panel for consideration and advice before making it publicly available. The reports, summarising the data, are available on EPA's website at: www.epa.nsw.gov.au/working-together/community-engagement/updates-on-issues/cadia-gold-mine .