MEDCHI, THE MARYLAND STATE MEDICAL SOCIETY
HOUSE OF DELEGATES

Resolution 10-17

INTRODUCED BY: Public Health Committee

SUBJECT: Hydraulic Fracturing

Whereas, as Maryland physicians, we are obliged to speak up on behalf of our patients to protect them from preventable environmental harm where evidence has accumulated suggesting the public is harmed by proposed activities; and

Whereas, proposed hydraulic fracturing (HF) regulations for Maryland may obstruct public health research and gathering of information on health consequences by allowing the requirement that public health officials sign a “confidentiality agreement before disclosure” of fracking chemicals labeled as trade secrets by companies, keeping in place a form of the “gag rule;” and

Whereas, hydraulic fracturing averages the use of 5 million gallons of water per gas well and hundreds of tons of chemicals per well; and

Whereas, climate change is a public health emergency, HF is not a solution. Methane, the primary component of natural gas, is a climate forcing gas that, over a 20 year window, is 86 times as potent as carbon dioxide (C02). Methane leakage over a shale gas well’s lifetime from extraction to distribution is estimated at 3.6%-7.9% making HF’s greenhouse gas footprint greater than conventional gas, oil and coal over this period; and

Whereas, despite staff working on a Congressional study being unable to get information on all of the products used due to “proprietary secrets”, the study found that Between 2005 and 2009, the oil and gas service companies used hydraulic fracturing products containing 29 chemicals that are (1) known or possible human carcinogens, (2) regulated under the Safe Drinking Water Act for their risks to human health, or (3) listed as hazardous air pollutants under the Clean Air Act; and

Whereas, prominent among the pollutants emitted are methane and the volatile organic compounds (VOCs) "btex": benzene (a known carcinogen), toluene, ethylbenzene and xylene, hazardous chemicals regulated usually under Clean Air Act and Safe Drinking Water Act; and

Whereas, Congress modified the Safe Drinking Water Act (SDWA) in 2005 to exclude regulation of chemicals (other than related to diesel fuel) injected into wells for HF; and

Whereas, VOCs, including methane and btex chemicals are now being regulated under the Clean Air Act but only for wells that were completed or revised after 8/2013; and

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Whereas, the EPA concluded recently that HF activities can impact drinking water under some circumstances; and 

Whereas, the Marcellus Shale Public Health Study final report 2014 found there would be a high likelihood of health impacts from hazardous air pollution, public safety issues and occupational exposure if HF were to come to Maryland; and 

Whereas, despite the difficulty gathering information from Pennsylvania where a strong gag rule is in place, a study by the Johns Hopkins School of Public Health (JHSPH) found a statistically significant association between a composite measurement for proximity and activity exposure to HF and the outcome of premature births and high-risk pregnancies; and 

Whereas, another study from JHSPH found a statistically significant association between the same composite measurement and the outcome of asthma exacerbation; and 

Whereas, most recently, using a questionnaire to 7,000 adult primary care patients, the same epidemiologists from JHSPH found a statistically significant association between composite measurement and migraines, sinusitis, and fatigue symptoms; and 

Whereas, in addition to the Safe Drinking Water Act, HF is exempt from parts of Resource Conservation and Recovery act of 1976, The Emergency Planning and Community Right to Know Act (EPCRA), Clean Water Act, Clean Air Act, the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA), and the National Environmental Policy Act (NEPA) leaving much regulations up to the states; and 

Whereas, injection of waste water from HF has been associated with increase in incidence of manmade earthquakes; and 

Whereas, the Pennsylvania Medical Society has recently called for a moratorium in a state that has enforced the physician gag rule while expanding HF venues; therefore be it 

Resolved, that MedChi express gratitude to Governor Larry Hogan and the Maryland General Assembly for its 2017 passage of the hydraulic fracturing ban and opposes any business practice that bars physicians from communicating with patients and colleagues regarding the public health implications of hydraulic fracturing in the service of direct patient care or research. 

As amended and adopted by the House of Delegates at its meeting on April 30, 2017.