

Management Specialist, Division of Health Assessment and Consultation, ATSDR, 1600 Clifton Road, NE M/S E-32, Atlanta, Georgia 30333, telephone 1-888-42-ATSDR (28737), fax 404/498-1744.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: October 31, 2002.

John Burckhardt,

Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. 02-28453 Filed 11-7-02; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60 Day-03-11]

Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call the CDC Reports Clearance Officer on (404) 498-1210.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information

technology. Send comments to Seleda Perryman, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS-D24, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

Proposed Project: Case-Control Study of Environmental Exposures and Genetic Susceptibility in Individuals with Multiple Sclerosis in Three Geographic Areas—New—The Agency for Toxic Substances and Disease Registry (ATSDR) is mandated pursuant to the 1980 Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) and its 1986 Amendments, the Superfund Amendments and Reauthorization Act (SARA), to serve the public by using the best science, taking responsive public health actions, and providing trusted health information to prevent harmful exposures and disease related to toxic substances. This legislation was, in part, in response to the lack of scientific information about potential adverse health effects resulting from exposure of a general population to hazardous substances.

Citizens across the nation living near hazardous waste sites have expressed concern about a perceived increase of multiple sclerosis (MS) in their communities and many believe this occurrence is directly linked to exposure to hazardous substances. Evidence indicates that multiple sclerosis is a complex disease with a multifactorial etiology determined by both environmental factors and genetic susceptibility. Although the specific biological mechanism of MS is unknown, one possibility is that an environmental exposure triggers an inappropriate type of immune response where the T-lymphocytes become sensitized to myelin which slows or blocks signals transmitted to the central nervous system. Unfortunately, basic epidemiologic data does not exist regarding the number of people affected with this disease, but estimates range from 250,000 to 400,000 people in the United States. MS differentially affects women, people in the 30 to 60 year-old age group, and Caucasians.

Recently, ATSDR collaborated with researchers from the Texas Department of Health, the Ohio Department of Health, and the Jackson County Missouri Health Department to conduct a prevalence study in order to respond to community concerns of multiple

sclerosis and possible associations with hazardous waste sites. This research was conducted to establish methodologies for estimating MS prevalence and to determine the prevalence rates for this disease in three geographic areas near source(s) of hazardous waste: Lorain County, Ohio; the cities of Independence and Sugar Creek, Missouri; and a 19-county area surrounding Lubbock, Texas. Medical records of individuals from neurologists' offices were used to ascertain cases and a consulting neurologist for each geographic area reviewed the clinical and laboratory data available in the patient's medical record to verify diagnosis. No patients were contacted in this study.

ATSDR is currently proposing a case-control study that will examine specific environmental exposures that affect the immune system as well as specific genes that are associated with an immune response. Cases will include individuals who have been diagnosed with MS and were identified through the prevalence study conducted in Ohio, Missouri and Texas. Controls will be selected from patients who attended the same neurologists' office from which the cases arose and who meet eligibility requirements. Study participants will be asked to complete a questionnaire to ascertain exposure to heavy metals and other toxic chemicals either through occupational exposures, hobbies or lifestyle activities, or due to residential proximity to industry or hazardous waste sites. Participants will also be asked to provide a blood sample to test for exposure to possible infectious agents and to evaluate specific candidate genes as potential risk factors of disease.

To reduce the amount of time required by the respondents, Computer Assisted Telephone Interviews (CATI) will be conducted. Following completion of all respondent interviews, the data will be tabulated and analyzed, comparing high versus low exposed participants. The information collected in this proposed study will provide information on the potential role of environmental exposures and genetic factors in the development of multiple sclerosis.

There is no cost to respondents other than their time to participate in the study.

Respondents	Number of respondents	Number of responses/respondents	Average burden/response (in hours)	Total burden (in hours)
Cases	500	1	1	500
Controls	1,000	1	1	1,000
Total				1,500

Dated: October 30, 2002.

Kathy Cahill,

Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention.

[FR Doc. 02-28454 Filed 11-7-02; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60 Day-03-13]

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Proposed Project: A Research Program to Develop Optimal NIOSH Alerts in

Farming (OMB No. 0920-0501)—REVISION—National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention (CDC).

The mission of the National Institute for Occupational Safety and Health (NIOSH) is to promote "safety and health at work for all people through research and prevention." Alerts are some of the primary publications by which NIOSH communicates health and safety recommendations to at-risk workers. Each Alert is mailed to workers affected by a particular health or safety hazard and contains information about the nature of the hazard, as well as recommendations for avoiding or controlling it. Despite the important role of Alerts in conveying health and safety information to workers, these publications have not been routinely pretested and evaluated for effectiveness. Therefore, it is important to continue research that examines the degree to which the NIOSH Alerts produce risk awareness, as well as comprehension, acceptance and use of the recommended health and safety measures.

The OMB-approved project, "A Research Program to Develop Optimal NIOSH Alerts in Farming" (0920-0501), applied theoretical advances in communication research to the development of NIOSH Alerts to ensure maximal effectiveness in conveying health and safety information to workers. This project applied psychology and communication theories to experimentally manipulate features of the NIOSH Alerts and examine the effects of these manipulations on the effectiveness of the Alert. To design these theory-based Alerts, the concepts of goal attainment imagery and risk imagery were applied. Goal attainment imagery asks the readers to imagine themselves carrying out the safety recommendations provided in the Alert, while risk imagery asks the readers to imagine themselves in a high risk situation where the safety recommendations are not followed.

Field research from the project, which applied these two types of imagery, has shown that farmers who received an Alert containing goal attainment imagery found the Alert easier to visualize, stronger, more convincing and more attention getting than a standard Alert. Farmers who received an Alert with goal attainment imagery reported heightened perceptions of risk awareness and more positive attitudes toward engaging in safety recommendations. In addition, they reported that they would be more likely to pass the information on to other farmers. No differences were found between farmers who received Alerts containing risk imagery and farmers who received a standard Alert. Therefore, goal attainment imagery seemed to have the strongest effect when included in the Alerts.

The original OMB-approved protocol proposed that a national mail-out survey would be conducted in order to test the generalizability of the data collected in the field. Farmers would receive an experimental (high imagery) or a standard version of an Alert along with a survey to complete and return to NIOSH. However, based on results from similar projects, we have learned that mail surveys generate low response rates. We propose changing the data collection format from a mail survey to a telephone survey. Farmers would receive an experimental version of the Alert and then be contacted approximately two weeks later to complete a telephone survey.

This change to the data collection format would serve three purposes. It is expected that the response rate for the telephone survey would be considerably higher than the response rate for the mail survey. Also, surveying a national sample of farmers would allow us to generalize the results to the broader population of farmers. Finally, the distribution of the experimental Alerts is similar to the way in which NIOSH Alerts are distributed to at risk workers and would present an opportunity to test the effectiveness of this distribution method. There is no cost to respondents.