

EXHIBIT 3

FILED UNDER SEAL

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IN THE CIRCUIT COURT
TWENTIETH JUDICIAL CIRCUIT
ST. CLAIR COUNTY, ILLINOIS

)	
DIANA HOFFMANN, individually and as)	
Independent Administrator of the)	
Estate of THOMAS R. HOFFMANN,)	
Deceased, et al.,)	
Plaintiffs,)	
)	Case No.:
v.)	17-L-517
)	
SYNGENTA CROP PROTECTION, LLC, et al.,)	
Defendants.)	

February 27, 2020
8:31 a.m.

VIDEO DEPOSITION of
DR. CLIVE CAMPBELL, held at the offices of
Kirkland & Ellis LLP, located at 30 St. Mary
Axe, London EC3A 8AF, United Kingdom, before
Chanelle Malliff, Accredited Court Reporter
of the United Kingdom and Europe.

C O N F I D E N T I A L

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2

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 Mark Smith, in-house, Syngenta

 Phil Viner, Videographer, Veritext

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1 Olmsted County, Minnesota"

2 [Bates SYNG-PQ-00026349 to 354]

3

4 Exhibit 7 Paper titled "Survival143

5 Time, Mortality, and Cause of

6 Death in Elderly Patients With

7 Parkinson's Disease: A 9-Year

8 Follow-up" [Bates

9 SYNG-PQ-00421882 to 1886]

10 Exhibit 8 Paper titled158

11 "Feasibility of Conducting a

12 Prevalence Survey of

13 Parkinson's Disease in a

14 Bipyridil Cohort at Widnes"

15 [Bates SYNG-P1-11623014 to 16]

16

17 Exhibit 9 E-mail chain ending from162

18 John Tomenson to Keven

19 Ledgerwood, 8 September 2010

20 [Bates SYNG-PQ-03757123 to

21 127]

22

23 Exhibit 10 Paper titled "A study164

24 of the health of Malaysian

25 plantation workers with

 particular reference to

 paraquat spraymen" received 9

 June 1980 accepted 8 July 1980

 [Bates SYNG-PQ-22611735 to

 742]

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1 W I T N E S S I N D E X

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4 CLIVE CAMPBELL (sworn)6

5 Examination by Mr. Tillery7

6 Examination by Ms. Fiorillo128

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8 E X H I B I T I N D E X

9 PAGE

10 Exhibit 1 Document titled "The110

11 toxicity of paraquat and

12 handling precautions during

13 manufacture" [Bates

14 SYNG-PQ-03721769]

15 Exhibit 2 Report by J.K. Pitts to115

16 Dr. J.C. Gage, 9 September

17 1968 [Bates SYNG-PQ-03720397]

18 Exhibit 3 Document titled120

19 "Paraquat - The Occupational

20 Health Experience in Bangpoo"

21 [Bates SYNG-PQ-03750512 to

22 514]

23 Exhibit 4 BMJ Open paper titled128

24 "Mortality from Parkinson's

25 disease and other causes among

 a workforce manufacturing

 paraquat: a retrospective

 cohort study" [Bates

 SYNG-PQ-22612902 to 22612908]

 Exhibit 5 E-mail chain ending From130

 John Tomenson to Phil Botham,

 25 July 2011 [Bates

 SYNG-P1-04070334 to 339]

 Exhibit 6 Paper titled "Survival138

 Study of Parkinson Disease in

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1 P R O C E E D I N G S

2 (8:31 a.m.)

3 MR. NARESII: In which case, good morning.

4 The date is February 27. The year is 2020. The time

5 of commencement this morning is 8:32 a.m. We are here

6 in London at the offices of Kirkland & Ellis at

7 30 St Mary Axe for the deposition of Mr. Clive Campbell

8 in the matter of Diana Hoffmann, individually and as

9 Independent Administrator of the Estate of Thomas R.

10 Hoffmann, deceased, et al versus Syngenta Crop

11 Protection LLC, et al. The case is pending In The

12 Circuit Court, Twentieth Judicial Circuit, Saint Clair

13 County, Illinois. The case number is 17-L-517.

14 Could I please ask counsel to state their

15 names for the record, their firms and whom they

16 represent.

17 MR. TILLERY: For the plaintiffs,

18 Stephen Tillery of the law firm of Korein Tillery,

19 St. Louis, Missouri.

20 THE VIDEOGRAPHER: And on this side we have

21 with you.

22 MR. TILLERY: John Craig, Nicole Graham,

23 Rosemarie Fiorillo from the same firm.

24 MR. KELLY: Michael Kelly, Walkup, Melodia,

25 Kelly & Schoenberger, representing the California

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1 plaintiffs.

2 MR. NARESH: Ragan Naresh, Kirkland & Ellis.

3 representing the Syngenta defendants.

4 MR. SMITH: Mark Smith, Syngenta.

5 MR. ORLET: Joe Orlet, Ilusch Blackwell,

6 Chevron.

7 THE VIDEOGRAPHER: Thank you very much. Your

8 videographer today is Phil Viner, and your certified

9 court reporter is Ms. Chanelle Malliff, both of

10 Veritext. Could I please ask Ms. Malliff to swear the

11 witness.

12 CLIVE CAMPBELL

13 having been sworn testified as follows:

14 MR. TILLERY: Before we begin with the

15 deposition we should announce a stipulation that the

16 deposition is being taken pursuant to Illinois practice

17 rules and the Supreme Court Rule 206 provides that

18 other statements need to be made by the videographer.

19 We have stipulated prior to the deposition that the

20 compliance with all of the details of what the

21 videographer must state on the record are not

22 necessary. So the plaintiff stipulates.

23 MR. NARESH: That's fine with Syngenta.

24 MR. ORLET: That's fine.

25 MR. TILLERY: For the record I'll note this

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1 is a deposition of an adverse party or agent so I'll be

2 conducting it in accordance with Section 2-1102 of the

3 Illinois Code of Civil Procedure 735 ILCS 5/ 2-1102.

4 MR. NARESH: And we will mark the deposition

5 as confidential under the protective order and we'll

6 reserve the right to read and sign.

7 EXAMINATION BY MR. TILLERY:

8 Q. Would you state your name, please?

9 A. Clive George Campbell.

10 Q. What is your date of birth?

11 A. 15 August 1959.

12 Q. And what is your home address?

13 A. Nelkenweg 17, 4104 Oberwil, Switzerland.

14 Q. And your business address?

15 A. Syngenta Crop Protection AG,

16 Rosentalstraase 67, 4058 Basel, Switzerland.

17 Q. And how long have you been employed there?

18 A. Since 2001.

19 Q. Can you tell me when you graduated from

20 school?

21 A. 1982, June.

22 Q. And just generally what are your degrees?

23 What was your study?

24 A. May I correct, that was when I finished

25 medical school and my -- I studied medicine.

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1 Q. So let's start and just tell me after your

2 preparatory school, first college and up through the

3 completion of your education, if you would recite those

4 on the record?

5 A. After finishing school I went to the

6 University of Leeds and studied medicine for five

7 years. I qualified in 1982. I undertook a

8 preregistration house year as it's called in the U.K.

9 and was fully registered as a medical practitioner in

10 1983. Between 1983 and 1990 I qualified as a general

11 practitioner. In 1990 restarted training as an

12 occupational physician. I finished occupational

13 medicine training in 1998. And I have practised as an

14 occupational physician since then. I was practising as

15 a trainee between 1992 and 1998.

16 Q. And from 1983 to 1990 did you practice as a

17 doctor?

18 A. Absolutely. I was what you might call

19 general practice training. I finished general practice

20 training in 1987 and was a general practitioner from

21 1987 until 1990.

22 Q. And from 1998 to 2000 in the training

23 position?

24 A. 1992 --

25 Q. 1992 to 1998 where were you a trainee?

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1 A. I was a trainee at what was then Zeneca

2 Agrochemicals.

3 Q. So a predecessor corporation of the company

4 you're with?

5 A. Correct.

6 Q. And the name of the company changed when

7 Syngenta was created?

8 A. That is correct.

9 Q. And when did you move to Switzerland?

10 A. 2001.

11 Q. And has your job title changed over the years

12 at Syngenta?

13 A. No, not since 2001.

14 Q. What were your duties preceding that from

15 your work at Zeneca?

16 A. Within Zeneca I was the site occupational

17 physician for three Agrochemical sites in the U.K.

18 until 1998 where I became the principal medical

19 officer.

20 Q. When you say site officer, what does that

21 mean?

22 A. The doctor on a specific location.

23 Q. You were a plant doctor?

24 A. Plant, if you prefer it.

25 Q. Right. And you were a person who took care

Page 10

1 of employees who were working at that plant?
 2 A. Yes.
 3 Q. Did you provide onsite medicine care for
 4 them, or did you co-ordinate it with third party
 5 practicing physicians or hospitals?
 6 A. Initially it was the former. More latterly
 7 I had to use third parties. So once I became the
 8 principal medical officer we had third party support
 9 for the sites.
 10 Q. And so for the record then you moved out of
 11 the plant doctor positions into what role?
 12 A. The role is called principal medical officer.
 13 It was the senior medical officer of a business.
 14 Q. So you went from a plant doctor to that job
 15 directly: correct?
 16 A. Yes.
 17 Q. And that was in 2001?
 18 A. That was in 1998 for Zeneca. And then the
 19 role became the chief medical officer for Syngenta.
 20 Q. Where were you stationed physically in 1998?
 21 A. Fernhurst in Surrey.
 22 Q. And what facility was that for Zeneca?
 23 A. That was the Zeneca Agrochemicals
 24 headquarters.
 25 Q. Were your duties and responsibilities

Page 11

1 generally the same as they are today at that time?
 2 A. No, in reference to being the site or plant
 3 medical officer I would have a local hands-on clinical
 4 role. When I became the principal medical officer they
 5 would be very similar to the role that I have now.
 6 Q. And since 2001 has your job responsibility
 7 changed at Syngenta?
 8 A. It's not formally changed.
 9 Q. Did you ever work at a plant where paraquat
 10 was manufactured?
 11 A. Manufactured, no.
 12 Q. How many facilities when you started with
 13 Zeneca manufactured paraquat?
 14 A. In 1992 it was Widnes and Bayport.
 15 Q. Bayport, Texas?
 16 A. Yes.
 17 Q. When you were -- you told me you were the
 18 principal medical officer from basically 2001. Is that
 19 limited to any particular areas or a global position?
 20 A. It's a global position limited to
 21 occupational medicine.
 22 Q. Could you explain your responsibility in your
 23 position?
 24 A. My role would essentially be one of
 25 establishing policy, establishing the necessary

Page 12

1 standards, looking at compliance, assisting with the
 2 management of compliance and helping provide support to
 3 meet the standards.
 4 Q. And how do you interact with other
 5 departments of Syngenta?
 6 A. My position sits within the health safety and
 7 environment, or HSE department, so directly we work
 8 together with the safety and environmental teams. We
 9 would be advisers to the line management.
 10 Q. So how are you kept abreast of scientific
 11 studies, reports about different chemicals?
 12 A. I work with an occupational toxicologist who
 13 is part of my team and they regularly interact with the
 14 toxicology departments and the regulatory departments
 15 to make sure that we are aware of information.
 16 Q. As a matter of fact it would be very
 17 important that you're made aware of all of the results
 18 of studies, findings, et cetera that would potentially
 19 impact on your area of practice?
 20 A. Certainly the conclusions thereof.
 21 Q. What products were manufactured at the plants
 22 that you worked at as a plant doctor?
 23 A. I worked at three plants. Fernhurst was an
 24 office block.
 25 Q. I'm sorry, I didn't hear you, sir.

Page 13

1 A. I mentioned I worked at three plants as a
 2 site doctor. The first one, Fernhurst, was an office
 3 block. The second one, Jealott's Hill, was research
 4 and development. The third one was Yalding, which
 5 manufactured a number of suspension concentrate
 6 products, a number of insecticidal products and it also
 7 formulated Gramoxone from paraquat.
 8 Q. How long did you work there?
 9 A. From '92 to '98. I attended there one day a
 10 week as the site physician.
 11 Q. Does the U.K. have any statutory or
 12 regulatory occupational health and safety rules?
 13 MR. NARESH: Objection. Answer if you can.
 14 A. Yes, it does.
 15 BY MR. TILLERY:
 16 Q. And you're familiar with those?
 17 A. I was certainly very familiar with them in
 18 the 1990s when I was working practically.
 19 Q. And you understand that the U.S. has similar
 20 rules, right?
 21 MR. NARESH: Objection to form. Go ahead and
 22 answer.
 23 A. I'm aware that the United States has rules in
 24 a similar area.
 25 BY MR. TILLERY:

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1 Q. When was the first time that you had any
2 particular knowledge of paraquat?
3 A. In 1992.
4 Q. And as chief medical officer has it been
5 important for you to familiarize yourself with all the
6 aspects that you can about paraquat?
7 A. I like to keep abreast of all toxicological
8 information.
9 Q. Do you actively do that?
10 A. Through my colleague that I mentioned.
11 Q. Could you tell me in preparation for this
12 deposition who you spoke to?
13 A. I spoke to Rebecca Fitzpatrick.
14 Q. Who is she?
15 A. She is a lawyer from Kirkland & Ellis.
16 Q. You spoke to her in Basel?
17 A. Yes.
18 Q. And when was that?
19 A. Last week.
20 Q. Last week?
21 A. Last week.
22 Q. Was that the first time you'd spoken to
23 anybody about this case?
24 A. Other than being informed I was to be provide
25 a deposition.

Page 15

1 Q. Have you given a deposition before?
2 A. No.
3 Q. Have you testified in a hearing or trial
4 before?
5 A. No.
6 Q. Have you talked to anybody since?
7 A. Just at the start of the week I spoke with
8 Mr. Holmstead.
9 Q. Would you spell his name on the record?
10 A. I'll try. H-O-L-M-S-T-E-A-D.
11 Q. And who is he?
12 A. He's a lawyer from Kirkland & Ellis.
13 Q. Where did you speak to him?
14 A. Here.
15 Q. And how long have you been here?
16 A. Since Tuesday.
17 Q. And today is Thursday?
18 A. Thursday.
19 Q. So you haven't spoken to anybody but those
20 two lawyers from Kirkland & Ellis?
21 A. And Mr. Smith.
22 Q. And Mr. Smith, who you understand is also a
23 lawyer?
24 A. Yes.
25 Q. So has there been any employee or former

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1 employee of Syngenta you have spoken to?
2 A. I have spoken to Mr. McRorie, who is the
3 occupational hygienist who works with me. And
4 Ms. Walker, who is the occupational toxicologist who
5 works with me.
6 Q. And could you tell me when, where and how
7 long those conversations took place?
8 A. Monday of this week was Mr. McRorie in Basel
9 for about 15 minutes, and Ms. Walker on the preceding
10 Friday for about 10 minutes.
11 Q. What were the purpose or purposes of those
12 conversations?
13 A. I wanted to establish with them what the
14 latest hygiene monitoring results were from
15 manufacturing facilities and -- in the case of
16 Mr. McRorie. And to ask Ms. Walker to obtain for me
17 the most current ACGIH occupational or TLV for
18 paraquat.
19 Q. Did they give you that information.
20 A. They did.
21 Q. Have you spoken to any outside consultants of
22 Syngenta in preparation for the deposition?
23 A. Other than those mentioned, no.
24 Q. Who are the ones you mentioned? I thought
25 those were employees of Syngenta?

Page 17

1 A. No, Mr. Holmstead --
2 Q. Oh no, those are lawyers. Forgetting the
3 lawyers, have you spoken to anyone else?
4 A. No --
5 Q. Well let's make it channeled and broad to
6 make sure we get everybody. Has there been anybody
7 else that you've spoken to about this deposition other
8 than you've cited on the record?
9 A. No.
10 Q. Have you done any other preparation for the
11 deposition other than speaking to these people?
12 A. No.
13 Q. What do you understand your role to be here?
14 A. To provide information as to the controls in
15 place in manufacture and formulation of paraquat
16 products.
17 Q. Did you understand you were speaking as the
18 corporate representative for both Syngenta Crop
19 Protection LLC and Syngenta AG?
20 A. Yes.
21 Q. For purposes of this deposition when I refer
22 to Syngenta, will you understand that I mean both
23 Syngenta AG, and Syngenta Crop Protection LLC?
24 A. Yes, I understand that.
25 Q. We can have that understanding?

CONFIDENTIAL

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1 A. Yes.
2 Q. And you understand your role is that you are
3 speaking as those corporations would answering
4 questions that I ask; okay?
5 A. Yes.
6 Q. When was the first time that you learned
7 anything about paraquat or knew about it?
8 A. The first time I heard of paraquat was as a
9 house med. a junior hospital doctor.
10 Q. When?
11 A. 1982.
12 Q. And what were the circumstances by which you
13 heard of it?
14 A. It was a patient who had deliberately
15 ingested the product.
16 Q. Did the patient survive?
17 A. No.
18 Q. And how long did it take to kill the patient,
19 the paraquat?
20 A. Something in the region of 5 days.
21 Q. Did you care for the patient during that
22 period?
23 A. In part.
24 Q. Was the patient hospitalized during that
25 period?

Page 19

1 A. Yes.
2 Q. And it was an intentional taking of paraquat,
3 right?
4 A. It was.
5 Q. How much was ingested?
6 A. I don't recall.
7 Q. Did you understand that only a very small
8 amount of paraquat is lethal if ingested?
9 A. At that time I did not.
10 Q. You know that now, don't you?
11 A. I do know that now.
12 Q. Do you understand it's a teaspoon or so of it
13 that would kill a person?
14 MR. NARESH: I'll object to the scope. Go
15 ahead and answer.
16 BY MR. TILLERY:
17 Q. Do you know that?
18 A. I know that a teaspoon is -- it's slightly
19 more than a teaspoon. A teaspoon is usually
20 survivable.
21 Q. So a teaspoon and a half you wouldn't want to
22 take?
23 A. I wouldn't.
24 Q. And dare say you'd never take a tablespoon.
25 right?

Page 20

1 A. I would strongly discourage anyone from
2 taking any.
3 Q. Any of it. Because it -- what does it do?
4 What's the mode of action by which it kills people?
5 MR. NARESH: Objection to the scope.
6 A. It's acutely toxic. Primarily it affects the
7 renal or kidney function initially. In large doses it
8 will lead to multi-organ failure and death. In
9 intermediate doses it may lead to the development of
10 respiratory or lung fibrosis.
11 Q. Which also causes death?
12 A. Which is fatal.
13 Q. And do you know why it moves to the lungs?
14 A. I understand -- I do know why.
15 Q. Why?
16 MR. NARESH: Object to scope. Go ahead and
17 answer.
18 BY MR. TILLERY:
19 Q. It's preliminary information.
20 A. It is specifically taken into the respiratory
21 epithelial cells.
22 Q. It's attracted to oxygen-rich environments.
23 isn't it?
24 MR. NARESH: Objection to scope.
25 BY MR. TILLERY:

Page 21

1 Q. You knew that?
2 A. It's not so attracted to them, it is more
3 effective in them.
4 Q. Which is another way of saying the same
5 thing?
6 MR. NARESH: Objection to form.
7 A. It's not quite the same thing.
8 BY MR. TILLERY:
9 Q. It certainly does more damage in those areas,
10 would you agree with that?
11 A. I think that is a fair statement.
12 Q. Now after that experience and your
13 introduction to paraquat as a physician, what was your
14 next contact let's say or knowledge of this chemical?
15 A. That was in 1992 when I became the site
16 occupational physician at Yalding.
17 Q. How is it that you had some contact there?
18 A. That facility formulated Gramoxone products
19 from paraquat.
20 Q. And what was your any action with or
21 knowledge of paraquat?
22 A. I worked with the site operatives to ensure
23 that the product was well-handled and there was --
24 exposure was well-controlled in the workplace.
25 Q. That's it? Any more? Did you make

Page 22

1 recommendations for example about personal protective
 2 equipment?
 3 A. We assisted with the workplace, or as it was
 4 called then health risk assessment, and in the health
 5 risk assessment we established whether personal
 6 protective equipment was needed.
 7 Q. Did you do that yourself or did you just
 8 contribute as part of the team?
 9 A. I contributed as part of the team.
 10 Q. Who was the ultimate decision-maker regarding
 11 that issue at that time?
 12 A. I would be the adviser. The facility manager
 13 would have been the ultimate decision-maker. But
 14 I would have expected them to follow my advice.
 15 Q. Because you were a medical doctor and giving
 16 advice from that direction; correct?
 17 A. Yes.
 18 Q. Now what did you know about paraquat's
 19 chemical characteristics before you were first employed
 20 by Syngenta or its predecessors?
 21 A. Very little, if any.
 22 Q. What did you know about paraquat's herbicidal
 23 mode of action before you were first employed by
 24 Syngenta or any of its predecessors?
 25 A. Nothing.

Page 23

1 Q. What did you know about paraquat's toxicity
 2 to humans or other animals before you were first
 3 employed by Syngenta or any of its predecessors?
 4 A. Other than it was toxic, nothing.
 5 Q. And you're talking about being ingested and
 6 causing toxicity from your experience as a physician?
 7 A. That was my only prior experience.
 8 Q. Taking care of a patient who died from
 9 ingestion of paraquat; correct?
 10 A. Yes, that is correct.
 11 Q. And did you have any further contact with
 12 paraquat after that 1982 experience as a physician
 13 until you started working at Syngenta?
 14 A. No, I had no contact.
 15 Q. When I say Syngenta, I also mean to include
 16 all of the Syngenta entities that were corporate
 17 predecessors back to ICI Limited. You understand that?
 18 A. I do understand that.
 19 Q. And are you prepared to address my questions
 20 with respect to those time periods as well?
 21 A. I am.
 22 Q. And you were informed that that would be
 23 within the scope of this deposition; correct?
 24 A. I was informed.
 25 Q. Do you understand that Syngenta designated

Page 24

1 you to testify for them on certain topics?
 2 A. I do understand.
 3 Q. And they gave you those topics to look at,
 4 right?
 5 A. I received an e-mail.
 6 Q. Okay. During the deposition when I refer to
 7 "designated topics" will you understand that to mean
 8 the topics that counsel told you that you would need to
 9 address in the deposition?
 10 A. I will.
 11 Q. And again, I think we touched upon this, do
 12 you understand in testifying for Syngenta on the
 13 designated topics you're required to answer not based
 14 on the information known or available to you
 15 personally, not only that, but also based on
 16 information or reasonably available to Syngenta. Do
 17 you understand that?
 18 A. I understand.
 19 Q. All right. And did you take that into
 20 account in preparing for the deposition?
 21 A. I did.
 22 Q. And are you prepared to testify on the
 23 designated topics based on information known or
 24 reasonably available to Syngenta?
 25 A. I believe I am.

Page 25

1 Q. You believe that your preparation has given
 2 you sufficient information to testify for Syngenta on
 3 the designated topics?
 4 A. I believe so.
 5 Q. You understand that there's a line of
 6 corporate successors, predecessors that go all the way
 7 back to ICI and to the beginning of this product
 8 paraquat, you understand that, right?
 9 A. I do understand that.
 10 Q. And the scope of the deposition encompasses
 11 that period to the beginning?
 12 A. Yes, so I understand it.
 13 Q. For both Syngenta Crop Protection LLC and
 14 Syngenta AG; correct?
 15 A. Yes.
 16 Q. The sequence of redox reactions that
 17 transforms paraquat cation to paraquat radical and
 18 paraquat radical back to paraquat cation is an example
 19 of what's called redox cycling, isn't it?
 20 MR. NARESH: Object to the scope. This was
 21 the subject of extensive testimony over the last
 22 several days from a different witness who was
 23 specifically designated for these topics.
 24 MR. TILLERY: For the court, it's a
 25 preliminary question. Just a few preliminary questions

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1 on this topic because I have to understand the
 2 witness's knowledge and understanding of this and this
 3 will relate directly to his line of topics.
 4 MR. NARESH: If you're asking the witness in
 5 his personal capacity whether he has understanding
 6 about the properties of paraquat, I don't have a
 7 problem with that. But if you're asking for corporate
 8 testimony on that, you received that on these topics
 9 already.
 10 MR. TILLERY: Well we can take that up later,
 11 but I am entitled to find out preliminarily what he
 12 knows about this.
 13 MR. NARESH: That's fine as long as it's in
 14 his individual capacity.
 15 MR. TILLERY: I dispute that, but we can
 16 argue about it later. Could you read the question back
 17 to him, please?
 18 (Record read.)
 19 A. This is not my specific area of expertise,
 20 although in my understanding of paraquat toxicity I am
 21 aware that that is the case.
 22 BY MR. TILLERY:
 23 Q. And do you understand that it is redox
 24 cycling that causes the herbicide paraquat to be
 25 effective as a plant killer?

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1 MR. NARESH: Can I have a standing objection?
 2 MR. TILLERY: Yes, you can.
 3 A. I'm afraid I'm less knowledgeable about the
 4 herbicidal mode of action of paraquat.
 5 BY MR. TILLERY:
 6 Q. I didn't understand you, sir. I didn't hear
 7 you.
 8 A. How it works as a herbicide is not my topic
 9 area of expertise.
 10 Q. Well whether it's your topic area, as a
 11 physician, as a matter of fact the chief physician in
 12 the entire Syngenta operation, how many people are
 13 employed by Syngenta?
 14 MR. NARESH: I'll object to the attorney
 15 commentary preceding the question.
 16 BY MR. TILLERY:
 17 Q. How many people are employed by Syngenta?
 18 MR. NARESH: Object to the scope.
 19 A. 28,000.
 20 BY MR. TILLERY:
 21 Q. And you're the chief physician for 28,000
 22 people; correct?
 23 A. Correct.
 24 Q. And you're the worldwide registrant for
 25 paraquat, right?

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1 MR. NARESH: Objection to the scope.
 2 BY MR. TILLERY:
 3 Q. Correct, the company is?
 4 A. To the best of my knowledge, yes.
 5 Q. Now in that context can you tell me what
 6 redox cycling is?
 7 A. It is the cycling of reduction and oxidation
 8 of producing free radicals which are toxic to cells.
 9 Q. So the cycle of reduction of paraquat cation
 10 to paraquat radical in one redox reaction and the
 11 oxidation of paraquat radical back to paraquat cation
 12 in a second redox reaction will continue if both a
 13 reductant to participate in the first reaction and O2
 14 to participate in the second reaction are present:
 15 correct?
 16 MR. NARESH: Objection: scope.
 17 A. That is my understanding.
 18 BY MR. TILLERY:
 19 Q. And paraquat has a very high potential to
 20 undergo redox cycling in the presence of a suitable
 21 reductant and oxygen, doesn't it?
 22 MR. NARESH: Objection: scope.
 23 A. That is my understanding.
 24 BY MR. TILLERY:
 25 Q. Now for purposes of your job in understanding

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1 how to give advice to users and employees of Syngenta
 2 who come in contact with this chemical, did you
 3 understand that redox cycling, as I have just stated
 4 and asked you about, will go on in the presence of a
 5 suitable reductant and oxygen, it will just keep
 6 cycling? Did you know that?
 7 A. I was aware of that.
 8 Q. And if you didn't have a full and complete
 9 understanding you had people to go to, didn't you, in
 10 the organization of Syngenta?
 11 A. There are people who I would go to.
 12 Q. And if you had a question about paraquat, who
 13 would you go to?
 14 A. I'd go to what's currently called the product
 15 safety department.
 16 Q. And who would be the head of that?
 17 A. Steve Maund is the current head. Phil Botham
 18 was the prior head.
 19 Q. You call Mr. Botham or Mr. Maund and you'd
 20 ask them questions. Have you ever done that about
 21 paraquat?
 22 A. I've not actively sought that out.
 23 Q. Okay. So have you ever called them at any
 24 time in the period that you've been the worldwide
 25 physician for Syngenta and asked them about redox

<p style="text-align: right;">Page 30</p> <p>1 cycling properties of paraquat? 2 A. I have had it explained to me by an expert in 3 the area. Not those two people. 4 Q. Who was the person who explained it to you? 5 A. Dr. Wilks. 6 Q. When? When was that done? 7 A. When? This would be in the mid-90s. 8 Q. And what was the circumstance by which you 9 asked about paraquat's redox cycling properties? 10 A. I wanted to understand the mode of action of 11 a number of chemicals that Syngenta or then Zeneca was 12 producing or working with, and paraquat was one of 13 them. 14 Q. So you understood then. I presume, that a 15 very small amount of paraquat once entering an 16 oxygen-rich environment can continue redox cycling 17 properties; you understood that? 18 A. Yes, I did understand that. 19 Q. And do you know in terms of physiology, which 20 would fit right in your expertise, correct, do you know 21 that dopamine metabolism in the substantia nigra 22 creates an oxygen-rich environment? 23 MR. NARESH: Object to the form, foundation 24 and scope. 25 A. I did not know that.</p>	<p style="text-align: right;">Page 32</p> <p>1 of making suggestions or decisions about the type of 2 protective equipments or warnings about exposure to the 3 chemical? 4 A. That's not been a key end-point of concern. 5 Q. You've never factored that in? 6 A. It's never been the end-point that we've been 7 concerned about. 8 Q. Well can you tell me, has it ever been 9 evaluated at all by Syngenta to your knowledge at least 10 in the department that you're affiliated with? 11 A. It's not an end-point that we've been 12 concerned about in setting exposure limits. 13 Q. And is there a reason you've not taken into 14 account the amount of paraquat that causes redox 15 cycling? 16 A. Because that's not the end-point that we have 17 been concerned about in the studies that we have used. 18 Q. What is the end-point you're concerned about? 19 A. The key ones are -- would be carcinogenicity; 20 it's not a carcinogen. It would be reproductive 21 toxicity, reprotoxicity -- 22 Q. I'm having trouble hearing you, sir. One 23 would be carcinogenicity and it doesn't cause cancer to 24 your knowledge, right? 25 A. Correct.</p>
<p style="text-align: right;">Page 31</p> <p>1 BY MR. TILLERY: 2 Q. Do you know what the substantia nigra is? 3 A. I do know what the substantia nigra -- 4 Q. What is it? 5 A. It's a part of the brain. 6 Q. Do you know what it does? 7 A. It produces dopamine. 8 Q. And do you know if it reaches a certain 9 level -- strike that. Is the brain an oxygen-rich 10 environment generally? 11 MR. NARESH: Objection to the scope. 12 A. Relatively I think. 13 BY MR. TILLERY: 14 Q. I mean, in terms of other organ systems, does 15 the brain generate or use a large amount of oxygen? 16 A. I have to say I'm not entirely sure relative 17 to other organs. 18 Q. Now how long do you believe that the basic 19 principles of paraquat's redox cycling have been known? 20 MR. NARESH: Objection to scope. 21 A. I don't know how long they've been known. 22 BY MR. TILLERY: 23 Q. And in terms of the amount of paraquat that 24 can cause redox cycling in a mammalian species, was 25 that something that you have tried to quantify in terms</p>	<p style="text-align: right;">Page 33</p> <p>1 Q. Okay. What's the next one? 2 A. It would be reproductive toxicity. 3 Q. And to your knowledge it doesn't influence or 4 affect reproductive toxicity; correct? 5 A. Correct. 6 Q. Okay. And what else? 7 A. Genotoxicity. 8 Q. And to your knowledge it doesn't cause an 9 alteration of DNA, or do you know? 10 A. It's not genotoxic. 11 Q. It's not a genotoxic chemical, okay. 12 Anything else? 13 A. Then we would be looking at the acute 14 toxicity then in terms of median lethal dose. 15 Q. Any other end-points? 16 A. Those would be the key ones. 17 Q. Are there any others you've considered with 18 respect to paraquat? 19 A. Those are the key ones in setting the 20 occupational exposure limit. 21 Q. And did you consider the neurotoxicity of 22 paraquat? 23 A. There is no neurotoxicity in the studies that 24 were presented to me. 25 Q. So would you answer my question though. Have</p>

<p style="text-align: right;">Page 34</p> <p>1 you ever considered neurotoxicity of paraquat in 2 establishing those exposure limits? 3 A. As I said, neurotoxicity is a study that we 4 considered the end-point of, yes. 5 Q. You did consider neurotoxicity? 6 A. Yes. 7 Q. So you studied neurotoxicity because you knew 8 paraquat was neurotoxic, right? 9 MR. NARESH: Objection to form. 10 A. I did not study neurotoxicity, the toxicology 11 department studied the neurotoxicity. It's a standard 12 and required investigation and it showed no 13 neurotoxicity. 14 BY MR. TILLERY: 15 Q. Okay, so what did your understanding or 16 knowledge of neurotoxicity do in terms of establishing 17 exposure limits? 18 A. We used a no effect level to establish an 19 occupational exposure limit. 20 Q. And from your perspective then there's no 21 neurotoxic aspect to worry about in terms of paraquat, 22 right? 23 A. From the toxicity studies there is no 24 neurotoxic end-point. 25 Q. And which toxicity studies are you</p>	<p style="text-align: right;">Page 36</p> <p>1 extremely fine particles of paraquat which are 2 improbable in the real -- in real world exposure but 3 are required for toxicity studies. 4 Q. And which studies did you use to establish 5 those levels in 2012? 6 A. We used inhalation toxicity studies that had 7 been generated by internal and external experts. 8 Q. Which ones is what I'm asking? 9 A. I'm afraid I do not remember the name of the 10 study authors. 11 Q. And which ones had been generated internally? 12 A. And when you say which ones, I'm sorry -- 13 Q. Which of the studies had been generated 14 internally that you relied on? 15 A. Which -- in -- 16 Q. When you say inhalation studies you relied 17 upon came from inside the company and outside the 18 company, I'm trying to ask you which ones were 19 generated within the company that you relied upon? 20 A. I cannot recall the names of the authors at 21 this point in time. 22 Q. Do you remember anything about the studies? 23 A. I remember the end-points which was the 24 key -- 25 Q. You remember the results, right?</p>
<p style="text-align: right;">Page 35</p> <p>1 referring to? 2 A. Standard neurotox studies. 3 Q. And did you establish those exposure limits? 4 A. The exposure limits -- we have established an 5 exposure limit very -- well, in 2012. Before that we 6 used the ACGIH or the U.K. HSE limit. 7 Q. And those were standard neurotoxicity limits? 8 What are those standards? 9 A. Those are occupational exposure limits. 10 Q. For paraquat? 11 A. Yes, for paraquat. 12 Q. And then you established your own in 2012? 13 A. Yes, we did. 14 Q. Were you responsible for establishing those 15 limits? 16 A. In 2012, as part of a team, yes. 17 Q. And who was on your team? 18 A. Myself, Mr. Ledgerwood, Mr. McRorie and 19 Dr. Botham. 20 Q. And were the exposure limits based on acute 21 toxicity? 22 A. They were based on respiratory toxicity. 23 Q. So they were based upon the inhalation of 24 paraquat, right? 25 A. They were based upon the inhalation of</p>	<p style="text-align: right;">Page 37</p> <p>1 A. (Witness nods). 2 Q. Do you remember anything about the external 3 studies? 4 A. The same. It was the results. 5 Q. Were any of those studies chronic long-term 6 inhalation studies? 7 A. They were not all acute but they were not 8 long-term either. They were short-term but not single 9 dose. 10 Q. So when you say short-term, what does that 11 mean? How long were these studies? 12 A. They would run for weeks. 13 Q. Oh, weeks. How many weeks? 14 A. I'm afraid I do not remember the details of 15 the studies at this point in time. 16 Q. Did you ever consider chronic long-term 17 exposure studies? 18 A. I personally have not. That would be a 19 decision for the toxicology department. 20 Q. Can you explain what the TLV standard was 21 that you referenced earlier in the deposition? 22 A. The TLV stands for threshold limit value. 23 It's set by the ACGIH. It's a non-regulatory standard 24 usually quoted as a time weighted average. 25 Q. And which regulatory standard in which</p>

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1 country established that TLV?
 2 A. TLV is specifically something that is
 3 produced by the ACGIH in the United States.
 4 Q. In the United States?
 5 A. Yes.
 6 Q. So we're clear, the exposure limits you said
 7 never took into account chronic long-term exposure to
 8 paraquat; is that a correct statement?
 9 A. No, that is an incorrect statement.
 10 Q. Okay, so which studies then, which were
 11 chronic long-term exposure studies, did you rely on?
 12 A. The long-term exposure studies for
 13 carcinogenicity --
 14 Q. For carcinogenicity.
 15 A. And for neurotoxicity, and for -- for the
 16 long-term exposure studies.
 17 Q. And which ones were those?
 18 A. They would be two-year rat and/or mouse
 19 studies.
 20 Q. Two year -- I'm having trouble hearing you.
 21 If you keep your voice up just a little bit. They were
 22 two year what?
 23 A. Rat studies or mouse studies.
 24 Q. Okay, and when was that study done or those
 25 studies done?

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1 A. I don't recall the exact dates of the
 2 studies.
 3 Q. And who did those?
 4 A. They would have been done by what is now
 5 called product safety.
 6 Q. And were they published? Were the results
 7 published anywhere?
 8 A. The results -- we're getting a little beyond
 9 my area of expertise. This is the area of toxicology
 10 and regulatory science.
 11 Q. Yeah, what I'm trying to find out is you
 12 relied, in establishing a threshold limit, on some
 13 studies. What I'm trying to find out is who did them,
 14 what were the circumstances, what were the design
 15 protocols. Can you answer any of those questions?
 16 A. I can say that the studies were done to GLP
 17 and they were satisfactory for the regulatory bodies
 18 who registered the product.
 19 Q. And do you know anything else that you can
 20 share with us on this record about the studies, where
 21 they were done, how long they took?
 22 A. I am not the best person to answer those
 23 questions.
 24 Q. So do you know for example how long the
 25 animals were exposed to paraquat?

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1 A. The studies go for a standard -- they have a
 2 standard protocol that I am aware of and they would
 3 have been -- a two-year study would be two years.
 4 Q. And how many animals were involved?
 5 A. That is a level of detail that I am unaware
 6 of. I would use the study output.
 7 Q. Do you know how the paraquat was administered
 8 to them?
 9 A. I do not know how it was administered.
 10 Q. What were the end-points that they were
 11 looking for or generated by the studies?
 12 A. Depending on the type of study it would be
 13 cancer, or neurotoxicity, or reprotoxicity.
 14 Q. Let's just talk about neurotoxicity for a
 15 moment. Do you know those studies?
 16 A. Not in detail. I'm not a toxicologist.
 17 Q. Is there anything else you know about those
 18 that you relied upon in setting the exposure limits?
 19 A. As a panel we involved an expert. That
 20 expert helped advise us on the value of those studies
 21 and we used the numerical end-points to design or to
 22 determine the relevant no effect level and therefore
 23 the occupational exposure limit.
 24 Q. Okay, so we're clear, you actually saw a
 25 long-term exposure study using paraquat yourself.

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1 right? That's what you're telling me? Because I'm
 2 just going to represent something to you on the record.
 3 That your company, and we've gone through significant
 4 discovery, has never produced to us, and I'll represent
 5 this to you, what we have determined to be a long-term
 6 paraquat exposure study through respiration. We've not
 7 seen that. And what I'm trying to do is get the
 8 details from you. If you have that study or you're
 9 aware of it we'd like to know the details of it?
 10 MR. NARESH: So I'll object to the form of
 11 the question.
 12 A. I know that the studies of -- that I'm
 13 talking about were not by inhalation.
 14 BY MR. TILLERY:
 15 Q. I thought we started this whole line by
 16 inhalation studies? So you didn't do an inhalation
 17 study?
 18 A. We're talking about acute inhalation studies
 19 that were done in as early as the 1960s.
 20 Q. Okay, acute inhalation.
 21 A. Yes.
 22 Q. So you're familiar with studies in the '60s,
 23 right?
 24 A. Yes.
 25 Q. Now I thought I'd asked you it, but

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1 apparently we disconnected here a bit. I thought
 2 I asked you if, when you established these threshold
 3 limits, if you relied on chronic exposure studies and
 4 long-term exposure studies of paraquat from a
 5 respiratory standpoint?
 6 A. In which case I apologize. I thought you
 7 were referring to long-term studies by any route.
 8 Q. Which means carcinogenicity or anything else
 9 with different end-points, right?
 10 A. Yes.
 11 Q. That's what you were answering?
 12 A. I was answering with reference to long-term
 13 studies which were certainly almost -- so they would be
 14 certainly by the oral route.
 15 Q. Now, just so we know then and we're clear, if
 16 you're relying on long-term studies of as you say the
 17 oral route, which are those studies?
 18 A. The ones that I have mentioned previously.
 19 Q. Do you remember when they were done?
 20 A. No sir.
 21 Q. And you're talking about the feeding of rats
 22 or mice foods -- food that has been laced with
 23 paraquat?
 24 A. It's talking about dosing animals orally,
 25 yeah.

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1 Q. Okay, so you dose the animals and then do it
 2 for some period of time and then after you've -- a
 3 period of time they're sacrificed and analyzed;
 4 correct?
 5 A. That is what is done by the toxicology
 6 experts. It's not my personal field.
 7 Q. Now let's move into a different realm and
 8 talk about inhalation toxicology, okay? Are you aware
 9 of any long-term inhalation study of paraquat?
 10 A. I am not aware of any.
 11 Q. And you certainly didn't use any in
 12 establishing exposure limits, did you?
 13 A. We did not.
 14 Q. And you're not aware of Syngenta ever having
 15 conducted one either, are you?
 16 A. I am not aware personally.
 17 Q. How many of the 1960 studies did you look at?
 18 MR. NARESH: Objection to the form. Can you
 19 clarify when? In 2012 or for preparation for today?
 20 MR. TILLERY: Any time in his association
 21 with Syngenta.
 22 A. I have not personally reviewed those studies.
 23 BY MR. TILLERY:
 24 Q. Okay, you've just been made aware of the
 25 results of them?

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1 A. That is correct.
 2 Q. And being made aware of them means somebody
 3 from the toxicology department sent you an e-mail or a
 4 letter or a phone call telling you what the results
 5 were, right?
 6 A. Specifically that's not precisely what
 7 happened.
 8 Q. How did it happen?
 9 A. My colleague, who is an expert in toxicology,
 10 collated those results into a paper for us to review in
 11 preparation for producing the OEL.
 12 Q. If you knew that paraquat was neurotoxic, if
 13 you'd been aware of the neurotoxicity of paraquat,
 14 would that have altered the approach you took on
 15 establishing threshold limits?
 16 A. We have no evidence to suggest that paraquat
 17 is neurotoxic.
 18 MR. TILLERY: I move to strike your response
 19 answer as non-responsive. Read the question back to
 20 him?
 21 (Record read.)
 22 MR. NARESH: And I'll object to the form of
 23 the question.
 24 BY MR. TILLERY:
 25 Q. Can you answer, sir?

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1 A. We were not aware -- we are not aware that
 2 paraquat is neurotoxic.
 3 Q. Okay, had you been made aware that it was,
 4 okay I'm just asking you to assume that, had you been
 5 made aware of it, would that have influenced or altered
 6 your exposure limits?
 7 A. It would depend hugely on whether it was
 8 material to the limit.
 9 Q. You referenced in the deposition OEL, is that
 10 what you said?
 11 A. Yes.
 12 Q. Is that an occupational exposure limit?
 13 A. It is.
 14 Q. And what is the definition of an occupational
 15 exposure limit?
 16 A. That is a limit that a worker can be
 17 exposed -- safely exposed to for 8 hours a day for
 18 50 weeks a year for a working lifetime.
 19 Q. Now how were you informed of the results of
 20 ongoing studies about paraquat?
 21 A. Through conversations with members of the
 22 product safety team.
 23 Q. And who would those people have been?
 24 A. Principally Dr. Botham and Mr. Cook.
 25 Q. If they became aware of studies showing the

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1 neurotoxicity of paraquat you would have expected to be
 2 made aware of them, right?
 3 A. Had they found anything I would expect them
 4 to tell me, if it is relevant to the worker.
 5 Q. Because it would be relative to your
 6 understanding of the neurotoxic effects, right?
 7 A. It would be relevant to the whole safety of
 8 the product or process.
 9 Q. And that's something that you think is
 10 essential for your job to be made aware of all that
 11 information, right? Would you agree with me?
 12 A. I think it's really -- it's important that we
 13 are aware of any hazard that might materially affect
 14 how we handle a product in manufacture.
 15 Q. Particularly if such studies impacted
 16 warnings about paraquat or worker safety or anything of
 17 that, that would be something you'd want to be made
 18 aware of, right?
 19 A. I would expect to be informed of anything
 20 that might materially affect the --
 21 Q. Now, were you made aware of studies showing
 22 that paraquat gets into the brain of humans who ingest
 23 it?
 24 A. Yes, I was aware of that.
 25 Q. From the 1960s?

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1 A. More recent than that I recall.
 2 Q. Okay. Were you made of any strike that.
 3 Were you made aware of any autopsy studies showing that
 4 it got into the brain of people who ingested it?
 5 A. I specifically was not.
 6 Q. Okay. Were you made aware of any studies
 7 performed by Dr. Louise Marks in the early 2000s
 8 studying the neurotoxicity of paraquat?
 9 A. I'm afraid I'm not aware of it by that name.
 10 Q. So you're not aware of any mouse studies
 11 being performed at CTL, 2003, 2004 involving paraquat
 12 by Dr. Louise Marks, the reviewer being Dr. Nicholas
 13 Sturgess, they never sent those to you?
 14 A. Not specifically by those names, I'm afraid
 15 I don't know.
 16 Q. Well, what is it that you got made aware of?
 17 I really would like to just get to it. Your counsel
 18 has asked to shorten the dep to 3 o'clock. If we
 19 co-operate and work together. If you just please try
 20 to answer my questions. Do you understand those
 21 studies or not?
 22 A. I do not.
 23 Q. Okay. Have you ever been made aware of any
 24 studies done during that time period, let's say between
 25 2002 and 2007 by Dr. Louise Marks, an employee of

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1 Syngenta, were you ever made aware where she was the
 2 principal investigator?
 3 A. The difficulty in answering you honestly is
 4 that I do not -- if you can tell me the nature or the
 5 substance of those studies I might be able to help.
 6 Q. There were sterology studies of mouse
 7 injection, intraperitoneal injection of paraquat?
 8 A. I apologize. I am aware of those studies.
 9 I did not know they were performed by Dr. Marks.
 10 Q. And what was your -- strike that. When were
 11 you made aware of the studies?
 12 A. It would be almost certainly as they were
 13 reported.
 14 Q. Okay. What is your understanding of the
 15 results of those studies?
 16 A. The studies by Dr. Marks I believe showed
 17 that at extremely high -- highly toxic doses of
 18 paraquat by a highly unrepresentative route of exposure
 19 that there was loss of the ability to find some cells
 20 in the substantia nigra.
 21 Q. What were the doses that you understood were
 22 used?
 23 A. The doses were close to the median lethal
 24 dose.
 25 Q. Well what would that be?

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1 A. The actual dose -- I'm afraid that's a level
 2 of detail I don't know.
 3 Q. Well what would the lethal dose be?
 4 A. In the range of 50 milligrams per kilogram.
 5 Q. Did you understand that that's what she used?
 6 Is that what they told you?
 7 A. That's what they told me.
 8 Q. Just of the lethal dose, right?
 9 A. That's what I understood the --
 10 Q. Okay. And namely the dose was so high that
 11 it was basically on the threshold of killing the
 12 animals; correct?
 13 A. That was my understanding.
 14 Q. So that an explanation for the findings of
 15 loss of dopaminergic neurons was due to acute toxicity
 16 or systemic toxicity. Did you understand that?
 17 A. I understood that the -- that the findings
 18 were in association with an extremely toxic -- an
 19 extremely high dose of paraquat, that's what
 20 I understood.
 21 Q. And you thought that -- that's -- in most
 22 mouse studies that would be roughly 50 milligrams per
 23 kilogram of paraquat intraperitoneally; correct?
 24 A. That would be correct as I understand it.
 25 Q. You said you were made aware of the Marks

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1 studies as they were reported. When was that?
 2 A. It would be in the mid-2000s.
 3 Q. And who made the report to you or made you
 4 aware of the results?
 5 A. That would be Dr. Smith at the time.
 6 Q. And did you participate in the decision to
 7 not report those findings to the USCPA?
 8 MR. NARESH: Objection to the form; scope.
 9 A. I had no involvement in any regulatory
 10 decision. My only involvement was as an occupational
 11 physician.
 12 BY MR. TILLERY:
 13 Q. Did you ever get a copy of the actual report
 14 of the study?
 15 A. No sir.
 16 Q. Did you ever ask for one?
 17 A. No sir.
 18 Q. Did you ever think that would be important to
 19 the performance of your job duties in oversight of
 20 worker safety at the Syngenta plants?
 21 A. The results of those studies were not
 22 considered of any relevance to the occupational setting
 23 where we're talking about exposures --
 24 Q. At such high levels?
 25 A. It's not -- we would not expect -- would not

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1 allow exposures anything near those levels, anything
 2 remotely near those levels.
 3 Q. Okay. So, what levels would you consider to
 4 be environmentally relevant?
 5 A. If we're talking the workplace environment
 6 then we have an occupational exposure limit of 0.01
 7 milligrams per meter cubed now.
 8 Q. Do you ever use intraperitoneal injection
 9 studies to establish occupational exposure limits?
 10 A. No.
 11 Q. What types of studies do you limit your
 12 reference to for purposes of establishing what you
 13 refer to as OELs?
 14 A. We would consider any regulatory study that
 15 was performed.
 16 Q. A regulatory study being one that was
 17 performed by Syngenta for purposes of sending to a
 18 regulatory body?
 19 A. That would be correct.
 20 Q. Did you ever think about using those in the
 21 published literature, peer review journals?
 22 A. We rely on our internal regulatory documents
 23 for the setting of our OELs.
 24 Q. Did you ever read a study by McCormack in
 25 2002 regarding paraquat neurotoxicity?

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1 A. I did not.
 2 Q. Did you ever read a study in 2002, 2003 by
 3 DiMonte regarding paraquat toxicity?
 4 A. I did not.
 5 Q. Did you even know who those researchers are?
 6 A. I have heard of the latter.
 7 Q. DiMonte?
 8 A. Yes.
 9 Q. How have you heard of him?
 10 A. I've heard his work mentioned by our
 11 colleagues in product safety.
 12 Q. Do you know what he concluded or findings he
 13 made?
 14 A. I do not. I have ...
 15 Q. So is it safe to say that you never
 16 incorporated any of Dr. Louise Marks' studies into any
 17 aspect of your job, in terms of either establishing
 18 occupational exposure limits or making recommendations
 19 about such; correct?
 20 A. Those studies were not considered relevant to
 21 the setting of occupational exposure limits.
 22 Q. So the answer to my question would be clearly
 23 "yes" you never considered them and never used them?
 24 A. We did not use those.
 25 Q. Do you know how many studies Dr. Marks did?

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1 A. I do not.
 2 Q. Do you know if the replicability of the study
 3 would enhance its reliability?
 4 MR. NARESH: Objection to the form. Scope.
 5 A. I am not a toxicology expert.
 6 BY MR. TILLERY:
 7 Q. Well, let me ask you, isn't it a fairly
 8 general statement that applies to medical doctors in a
 9 laboratory or to scientists, other scientists, that
 10 repeating test results or replicability of test results
 11 is sort of a fundamental notion or tenet of science;
 12 you understand that?
 13 MR. NARESH: Objection to scope. You can
 14 answer if you know.
 15 A. It would seem sensible.
 16 BY MR. TILLERY:
 17 Q. Were you ever told by Dr. Smith, you said who
 18 informed you of results -- he did, correct?
 19 A. He did.
 20 Q. Did Dr. Smith or anyone else at Syngenta ever
 21 tell you that Dr. Marks conducted a study to rule out
 22 general toxicity for the loss of dopaminergic neurons
 23 she found with paraquat?
 24 A. Not specifically. I have no recollection of
 25 that.

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1 Q. And had she done such a study would that have
2 been important to you to know?
3 A. I think the key for us would be what the
4 doses were and where they were relevant to the
5 workplace. and my understanding is that the doses were
6 highly irrelevant to the workplace.
7 Q. I move to strike your answer as unresponsive
8 would you read my question back to the witness, please.
9 (Record read.)
10 A. I'm sorry, that's not the question
11 I remember.
12 MR. NARESH: Do you need to hear it again?
13 A. Yes, please.
14 BY MR. TILLERY:
15 Q. And read the one before that, please.
16 (Record read.)
17 A. Were such a study done and were it done at
18 representative doses then it would be important to
19 know. If it were at unrepresentative doses it would
20 not affect the exposure limit.
21 Q. So you wouldn't care? You wouldn't care
22 about knowing about it one way or another, right?
23 A. That's not what I said.
24 Q. Well let me just ask you. As the chief
25 medical officer of Syngenta worldwide, is that

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1 something you would have wanted to know about?
2 MR. NARESH: Objection: asked and answered.
3 A. Say again, I'm sorry?
4 MR. NARESH: I was just objecting. Go ahead
5 and answer if you remember the question.
6 A. I would be interested in the results of any
7 studies per se. The question as to whether it would
8 alter the occupational exposure limit is different
9 I think.
10 BY MR. TILLERY:
11 Q. But you never know if you don't hear about
12 it, right?
13 A. I don't know what I don't know.
14 Q. That's right. So if you're shielded from
15 that information you can't really give an adequate use
16 or explanation of that information, right?
17 A. I don't have any recollection of being
18 shielded from any information.
19 Q. Well would you agree with me that the free
20 flow of scientific information, the sharing of
21 scientific information is essential to the advancement
22 of science? General. This is a general proposition.
23 A. Generally speaking that would sound sensible.
24 Q. Did you ever inform Syngenta employees about
25 the neurotoxic potential of paraquat?

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1 A. It was never considered of any practical
2 relevance to Syngenta employees to inform people of the
3 neurotoxic.
4 Q. I move to strike your answer as unresponsive.
5 Would you read back the question, please.
6 (Record read.)
7 A. We have a population of ex-ICI/Zeneca workers
8 who were the subject of a long-term follow-up, and in
9 that population, because of their involvement, we did
10 inform them of the outcome of a Witness study that we
11 did which looked at the potential for Parkinson's
12 disease to have occurred in them.
13 Q. So you informed the people at which facility
14 or facilities about the neurotoxic effects of paraquat?
15 MR. NARESH: Objection to the form. That's a
16 different question than you previously asked.
17 BY MR. TILLERY:
18 Q. Well that's the question I asked before,
19 I hope you were answering.
20 MR. NARESH: No, it's not.
21 BY MR. TILLERY:
22 Q. You weren't answering that question, sir?
23 MR. NARESH: No, you were asking -- your
24 prior question was about neurotoxic potential --
25 MR. TILLERY: Are you objecting to something

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1 or not? Are you making an objection? If you're not
2 then you know what you should do right now, you know
3 what I suggest you do?
4 MR. NARESH: Steve, I suggest you ask your
5 question.
6 MR. TILLERY: I was asking one.
7 BY MR. TILLERY:
8 Q. Now, do you want this read back to you?
9 A. Please?
10 (Record read.)
11 A. In terms of neurotoxic effects of paraquat,
12 we have not identified that there are any neurotoxic
13 effects relevant to workers so we have not informed any
14 workers thereof.
15 BY MR. TILLERY:
16 Q. And has that been the case to your knowledge
17 from the beginning of the usage or manufacture of
18 paraquat up until today's date?
19 A. I think that is correct. Just we have not
20 made any representations to workers about neurotoxicity
21 of paraquat because there is none -- no concern in
22 the --
23 Q. Whether you have concerns or not, I'm trying
24 to get an answer to my question. Let's start over. If
25 you want to venture those topics, you can with counsel.

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1 What I'm looking for are direct answers to my direct
 2 questions. From -- start over, okay?
 3 From the beginning of the time that any
 4 Syngenta corporate predecessors, which would be ICI,
 5 started the production of paraquat and the sale of
 6 paraquat throughout the world, up until let's say this
 7 morning, have you ever informed any of your workers
 8 about the neurotoxic potential of paraquat?
 9 A. We have made no such representation.
 10 Q. During that same period of time from the
 11 beginning of production, manufacture, sale,
 12 distribution of paraquat, I think first in 1962 in this
 13 country, until today, have you ever told users,
 14 consumers, farmers who use paraquat of any neurotoxic
 15 potential of paraquat?
 16 MR. NARESH: Object to the scope.
 17 A. I'm afraid I am unaware as to what has gone
 18 on with stewardship activities.
 19 BY MR. TILLERY:
 20 Q. With what?
 21 A. End-user activities, any --
 22 Q. Okay, you don't know anything about end-user
 23 warnings?
 24 A. I don't know about end-user warnings.
 25 Q. Only plant?

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1 A. Correct.
 2 Q. Okay. Did you ever tell any people who
 3 whether employees or anybody else who mixed, loaded or
 4 applied paraquat anything different about the
 5 neurotoxic potential of paraquat than what you told the
 6 people who bought it?
 7 MR. NARESH: I'll object to the scope to the
 8 extent it's beyond the workers, which is the scope of
 9 today.
 10 BY MR. TILLERY:
 11 Q. Let me start over and reframe the question.
 12 Did you ever tell people who worked at your plants
 13 producing the chemical paraquat anything about
 14 neurotoxic effects that was different than what you
 15 told people who bought the paraquat from you?
 16 MR. NARESH: Same objection.
 17 A. I don't know -- I cannot answer the question
 18 in terms of the end-users and what they have been told.
 19 BY MR. TILLERY:
 20 Q. Did you ever tell people who worked in plants
 21 in the production of anything different about the
 22 neurotoxic effect of paraquat than you may have told
 23 people who mixed, loaded and applied it at research
 24 facilities or field trials?
 25 A. We have never told anyone any different.

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1 Q. So that means whether or not they were
 2 involved in any aspect of production or any aspect of
 3 testing, mixing, applying it at research facilities or
 4 test fields, they've never been informed that the
 5 chemical is potentially neurotoxic; correct?
 6 A. They have not been informed of any concern
 7 about neurotoxicity.
 8 Q. Who made the decision to -- regarding that --
 9 strike that question. Who made the decision not to
 10 tell them?
 11 A. I'm not sure I can answer that question
 12 helpfully.
 13 Q. You didn't make that decision I guess?
 14 A. More to the point, there was never -- it was
 15 never considered there was anything to tell therefore
 16 we didn't tell anybody anything.
 17 Q. Who at the Syngenta company decides what
 18 warnings about toxicity of substances are given to
 19 employees at Syngenta facilities?
 20 A. The key document would be the material safety
 21 data sheet and that's produced by a group within
 22 Syngenta who write those material safety data sheets.
 23 Q. And where is that group located?
 24 A. It's located in Basel.
 25 Q. What is the name of the group?

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1 A. The material safety data -- or, the safety
 2 data sheet team.
 3 Q. The safety data sheet team?
 4 A. Correct.
 5 Q. And they decide what warnings are given to
 6 employees?
 7 A. They decide what goes on the safety data
 8 sheet. The safety data sheet is a key tool in
 9 communicating hazard.
 10 Q. Does the safety data sheet contain the
 11 information that should be supplied to employees?
 12 A. It contains information that should be
 13 supplied to employees.
 14 Q. Are there any other warnings to employees
 15 beyond the safety data sheets?
 16 A. The key process for managing workplace
 17 hazards is the workplace risk assessment which now is
 18 replaced what we used to call the health risk
 19 assessment. In this process we identify the workplace
 20 hazards, who can be affected, what the controls are,
 21 what the current controls are, what other controls may
 22 be needed, and as part of the output we decide what
 23 hazard information needs to be communicated. So this
 24 is done on the basis of hazard information, as in the
 25 safety data sheet, and local controls currently in

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1 place, the local situation.
 2 Q. How are the workplace hazards and the
 3 information about controls communicated to employees?
 4 A. It depends on the facility. Sometimes it is
 5 with the safety data sheet. Often it's with warning
 6 labels and/or descriptions of controls that must be
 7 employed during the use of the or the production of the
 8 product.
 9 Q. We had talked about telling employees about
 10 neurotoxicity and you told me that you'd never done
 11 that. I'm going to expand that topic a little bit for
 12 the next question, okay?
 13 Have you ever given Syngenta employees any
 14 warnings about long-term exposure to paraquat spray or
 15 mist?
 16 A. When it comes to that sort of use that would
 17 be handled using the product label if people are using
 18 the product.
 19 Q. I'm talking about employees.
 20 A. I realize, but as the product is a registered
 21 pesticide the key communication tool for that group
 22 would be the product label.
 23 Q. So in other words, whatever the restrictions
 24 or recommendations or warnings were to the end-user,
 25 were equally applicable to your plant workers?

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1 A. I was talking about people using it as a
 2 product, as a herbicide. The plant workers are
 3 involved in the manufacture of that herbicide.
 4 Q. Right, and what I'm trying to find out is
 5 what did you -- what warnings or instructions did you
 6 give them about long-term exposure to paraquat spray or
 7 mist whether or not you believe it's neurotoxic?
 8 A. Yeah, I'm just -- our plant workers, by which
 9 I take it you mean the people who manufacture,
 10 formulate --
 11 Q. I'm talking about the people that you employ.
 12 who are in your facilities who make paraquat?
 13 A. Who make paraquat. They would not be exposed
 14 to a spray mist in any way, shape or form.
 15 Q. And the -- including the manufacturing,
 16 formulation, packaging --
 17 A. Mm-hmm.
 18 Q. -- they would never be exposed to a spray
 19 mist?
 20 A. They would not.
 21 Q. Okay. And there would be no reason because
 22 they were never exposed to tell them anything about
 23 that, right?
 24 A. We would not need to tell them how to manage
 25 spraying.

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1 Q. Did you ever consider the potential routes of
 2 exposure to your plant workers who make paraquat from
 3 the chemical?
 4 A. Yes, we would do that. We do do that.
 5 Q. What are they?
 6 A. Well the key -- the only viable route of
 7 exposure would be ingestion, and ingestion is managed
 8 by not allowing eating, drinking or smoking in the
 9 workplace because paraquat product -- because paraquat
 10 is highly water soluble, not volatile, and very poorly
 11 absorbed through the skin, the potential for exposure
 12 in the manufacturing facility is now virtually nil.
 13 Q. So you understand that just licking your lips
 14 creates the potential for airborne dust of paraquat to
 15 become absorbed into the body, right? Did you know
 16 that?
 17 A. I think the point I was making is that there
 18 is no opportunity for it to get on your lips for you to
 19 lick them in the workplace, unless you deliberately
 20 contaminate yourself. Which is, again, not possible
 21 with the processes involved.
 22 Q. When you say the processes involved, what do
 23 you mean?
 24 A. The manufacture of paraquat is now an
 25 entirely closed process and the output is paraquat in

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1 solution, which is then moved to a formulation facility
 2 in solution where it is then formulated into the final
 3 product.
 4 Q. Are the potential routes of exposure in
 5 formulation and packaging facilities different than
 6 manufacturing facilities of the active ingredient?
 7 A. Broadly they're very similar.
 8 Q. Is there any difference?
 9 A. There are more people involved in the
 10 formulation -- in formulation and filling and packing
 11 than in manufacture, which is largely an automated
 12 process now.
 13 Q. How long have you had a closed system in
 14 paraquat manufacturing?
 15 A. A very long time.
 16 Q. Explain to me again, if you wouldn't mind,
 17 what a closed manufacturing system is?
 18 A. In terms of paraquat this would mean that the
 19 raw materials are moved into the manufacturing process
 20 vessels from external tanks by pumps. The process, the
 21 manufacturing process takes place inside the vessels,
 22 and the final product is what effectively comes out of
 23 the end of the product -- the end of the process,
 24 I apologize, into a drum or a tanker.
 25 Q. So effectively you prevent exposure to your

<p style="text-align: right;">Page 66</p> <p>1 employees of the active ingredient? 2 A. We -- the process would do that, yes. 3 Q. And you said that's been in existence for a 4 very long time. How long? 5 A. Certainly the LTS process that was run in 6 Widnes in the '80s, that in Bayport that was run in the 7 '90s and early 2000s, and the two new manufacturing 8 processes -- I say "new". The two processes in 9 Huddersfield and Nantong would be relatively closed. 10 Q. So is any employee directly exposed to the 11 finished product in the open air? 12 A. There is some drum filling. There is some 13 tanker filling. But again, the product is in solution. 14 It's not volatile. The skin is a very effective 15 barrier, so the likelihood of systemic exposure is 16 extremely low. In fact very low. 17 Q. What I'm trying to get at is you make the 18 effort to make sure that your employees are not exposed 19 to the active ingredient; correct? 20 A. We make the effort to make sure that all 21 employees of all products within Syngenta are not 22 exposed. It's a general principle that we would adopt. 23 Q. And on what studies do you base your 24 conclusion that skin is a very effective barrier for 25 paraquat?</p>	<p style="text-align: right;">Page 68</p> <p>1 you're asking is, how much paraquat is absorbed through 2 the skin? 3 Q. No. I'm asking you the physiology involved of 4 what happens when paraquat winds up on your skin? Do 5 you understand if it can get into your body? 6 A. My understanding is a very, very small 7 amounts. 8 Q. What does that mean? What is a -- is that a 9 scientific term "very, very small"? 10 A. My understanding is it's something around 11 about a 3 percent absorption rate. 12 Q. 3 percent absorption rate. Is that what you 13 you've used and relied upon in terms of formulating 14 your exposure limits? 15 A. The exposure limits are set primarily for the 16 protection of exposure by inhalation. That's the 17 standard -- 18 Q. We're talking dermal exposure now. 19 A. I'm sorry, I thought you were asking me about 20 the exposure limits. 21 Q. Yeah, so they've only been inhalation 22 exposure limits? 23 A. Exposure limits -- it is normal, it is 24 standard that exposure limits are set for controlling 25 exposure by inhalation.</p>
<p style="text-align: right;">Page 67</p> <p>1 A. I'm basing this on information received from 2 our toxicology colleagues. 3 Q. What did they tell you? 4 A. They told us that skin -- that a very small 5 amount of paraquat is absorbed in studies. 6 Q. Through the skin? 7 A. Through the skin. 8 Q. So you don't have to really be concerned 9 about it if it's just exposure to the skin, right? 10 A. I don't have to be concerned about a systemic 11 absorption. I mean clearly we'd want it washed off the 12 skin as quickly as possible. That would be standard 13 practice for any chemical exposure. 14 Q. Has anyone in your toxicology department ever 15 made you aware of dermal studies of exposure routes of 16 paraquat? 17 A. I've been -- as I have mentioned before, I've 18 been given the outcome of those studies. 19 Q. Which? For dermal exposure? 20 A. For der -- for absorption. 21 Q. Dermal absorption. And paraquat coming in 22 contact with the skin and then being absorbed in the 23 system; what do you understand happens when that 24 occurs? 25 A. My understanding -- the question I think</p>	<p style="text-align: right;">Page 69</p> <p>1 Q. So you've not even factored dermal exposure 2 in your occupational exposure limits? 3 A. That would not be correct. 4 Q. So how have you considered them? 5 A. We know that the dermal median lethal dose is 6 very high and that the material is toxic by ingestion, 7 or moderately toxic by ingestion. So we know that if 8 we were working to an exposure limit for inhalation, 9 and we're using baseline personal protective equipment, 10 that there is no risk from the -- exposure by the 11 dermal route in the workplace. 12 Q. What clothing or equipment has been required 13 of Syngenta employees when they're working around the 14 active ingredient in a manufacturing or formulation 15 plant of Syngenta's? 16 A. We would use standard or baseline workwear 17 which would be an overall or a coverall, safety steel 18 toecap boots, mainly for mechanical hazards. Light eye 19 protection or safety glasses. There would be an 20 expectation of wearing gloves if you're involved in 21 getting into the process. And a hard hat is standard 22 workwear in Syngenta. That is standard for all 23 chemicals -- for all chemicals that we handle. 24 Q. Can you explain to me the plant processes and 25 equipment at the Widnes plant and at Huddersfield that</p>

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1 have been implemented to make workers safety with
2 respect to paraquat?
3 A. So I think I need to start by saying they're
4 two quite moderately different processes, and Widnes of
5 course had some very different processes in the past.
6 So talking about Huddersfield, which is the current
7 plant.
8 Q. Sorry, talking about what?
9 A. Huddersfield. Talking about Huddersfield,
10 which is our currently operating plant in the U.K., the
11 standard workwear there would be coverall, light eye
12 protection, gloves, boots and helmet. The process is
13 otherwise only -- well the only time a worker would
14 come into contact with the process is in the area of
15 sampling where -- would be in sampling, and additional
16 protection would be used there in the form of a face
17 shield.
18 Q. Any respirators required?
19 A. Respirators are not required -- they're not
20 required in this process.
21 Q. In manufacturing?
22 A. In manufacturing facilities.
23 Q. Of paraquat?
24 A. In the manufacturing of paraquat in
25 Huddersfield.

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1 Q. And have they ever been used?
2 A. Respirators have been used -- or I say
3 respirators. Respiratory protection has been used in
4 the past, in the early processes for the manufacturing
5 of paraquat, yes.
6 Q. And when you say the "past" and "early", can
7 you affix some dates to those times?
8 A. Sure. In the original manufacturing process
9 by the high temperature sodium method, which was
10 employed in the very early '60s, '62 to '64 give or
11 take, then respiratory protection was required there.
12 Q. At that time in '61?
13 A. In that early time period of yeah '62 to '64
14 when the IITS program.
15 Q. And that was around paraquat?
16 A. That was around the generation of
17 4,4'-bipyridyl and its final methylation into paraquat.
18 Q. And you said '62 through what period, '64?
19 A. '62 to '64 was when the high temperature
20 sodium plant was operating. Between '62 and about '66
21 there was an additional -- an alternative process
22 called MAG, which again respiratory protection was
23 employed in the manufacturing process at times. And
24 from '66 onwards the low temperature sodium process was
25 employed at Widnes. And certainly by the '80s that

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1 process was such that the respiratory protection was
2 not required.
3 Q. What date was a respirator disregarded or not
4 required?
5 A. I don't have that information specifically as
6 to when.
7 Q. But it was in the '80s?
8 A. It's certainly by the '80s it wasn't.
9 Q. Okay. So from '62 to '80 you think a
10 respirator was required, roughly in that period?
11 A. I have seen evidence that the process of
12 methylation as it's called, the methylation of
13 4,4'-bipyridyl, a resp -- I say a respirator, it's a
14 dust mask that is employed in that process.
15 Q. And I was going to ask you that. When you
16 use a respirator during these periods of time, '62 to
17 '80 in that period, was there a change in the type of
18 actual mask or respirator that was used?
19 A. I have seen evidence that it was proposed.
20 I don't know the outcome or the decision that was made.
21 Q. So you don't know what they were actually
22 using?
23 A. I don't know specifically what -- which of
24 the two types they were using.
25 Q. Well, what were the two types?

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1 A. Just in the heat of the moment I've forgotten
2 the names, but they're effectively filter --
3 non-powered filter masks.
4 Q. A non-powered filter mask?
5 A. Yes.
6 Q. Could you describe that on the record?
7 A. I'll do my best. I would call it is dust
8 mask that is form fitting. If I can give a
9 contemporaneous example?
10 Q. Of course.
11 A. It's the sort of mask of its day that is now
12 being recommended for people protecting themselves
13 against the coronavirus.
14 Q. Okay. That gives us a poignant point of
15 reference. So that type of mask is what you think they
16 were using as one alternative possibility?
17 A. Yes.
18 Q. And what was the other one?
19 A. A similar version and I'm afraid it's
20 probably an essentially similar type of masks that
21 we're looking at difference in supply rather than
22 difference in performance.
23 Q. Were they ever using canisters, respirator
24 canisters, do you know what those are?
25 A. I do know what they are. I cannot give you

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1 an equivocal answer that would be clear and honest so
 2 I don't know specifically.
 3 Q. Do you know of any use of canisters by
 4 Syngenta employees working around paraquat in any
 5 capacity?
 6 A. I'm aware that in certain facilities where
 7 they break into filling vessels they occasionally
 8 choose to wear that sort of -- I think canister is --
 9 I would use the word cartridge now, if that's okay, the
 10 smaller plastic version of a canister.
 11 Q. Do they use cartridges today?
 12 A. Occasionally.
 13 Q. Where?
 14 A. I've seen them in use in Nantong in the
 15 formulation area. And in a number of other facilities
 16 where the filling vessel is stopped and opened.
 17 Q. Talking about Thailand?
 18 A. That would be another example where I have
 19 seen it in the past.
 20 Q. What was the chemical exposure risk that was
 21 required -- that required the use of a mask?
 22 A. From our workplace risk assessment or health
 23 risk assessment we would establish that this was not
 24 required for this activity and that the operator of the
 25 facility chose to employ this in what we would call

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1 secondary protection or secondary prevention.
 2 Q. How long have cartridge respirators been
 3 required or available to Syngenta employees working
 4 around paraquat?
 5 MR. NARESH: Object to the form.
 6 A. Those types of respiratory protection has
 7 been available for many years and therefore it's
 8 potentially available to Syngenta/ICI/Zeneca employees.
 9 BY MR. TILLERY:
 10 Q. And by that I mean made available to the
 11 company -- strike that. By that I mean made available
 12 to the employees by the company. Do you understand
 13 that?
 14 A. Yes, I understand your question. They have
 15 been made available for -- they have been available for
 16 all of the duration that paraquat has been
 17 manufactured. The workplace risk assessment indicates
 18 that are not required as primary prevention.
 19 Q. And how often are they used?
 20 A. It would be for occasional -- if I can just
 21 say our practice and our process would say that the use
 22 of PPE is to be avoided and control should be by other
 23 means where possible. For occasional or non-routine
 24 tasks PPE is allowed to be employed and may be part of
 25 the control process there.

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1 Q. Are you aware of warnings or instructions to
 2 end-users of a product and what goes on the label of
 3 paraquat containers?
 4 A. I am aware of the label in the U.S.
 5 Q. Are you aware of there being any difference
 6 in what Syngenta has warned or recommended on labels of
 7 its paraquat products from what it requires of its
 8 employees in Syngenta's paraquat manufacturing plants?
 9 MR. NARESH: Object to the scope. You can
 10 answer if you can.
 11 A. I think -- sorry. Our operators manufacture,
 12 formulate, fill and pack any and all of those every day
 13 of their working lives. Should there be an unusual
 14 occurrence we would say that the use of PPE is allowed.
 15 So I think there is some similarity as with the person
 16 who uses paraquat occasionally as a product, or uses
 17 Gramoxone should I say occasionally as a product.
 18 BY MR. TILLERY:
 19 Q. Do you have any understanding as to whether
 20 employees of Syngenta manufacturing plants potential
 21 exposure to paraquat by any route of exposure is
 22 different than that from what is anticipated of the
 23 users, end-users of the chemical?
 24 MR. NARESH: Same objection.
 25 A. My understanding would be the key difference

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1 would be that of time, as in the simple amount of time
 2 that a manufacturing worker is working in
 3 manufacturing, formulation, fill or pack, as in all the
 4 time as opposed to an end-user who would use it
 5 occasionally.
 6 BY MR. TILLERY:
 7 Q. So in general terms would you believe that
 8 your plant workers have greater exposure to paraquat in
 9 the manufacturing process than the typical or usual
 10 farmer end-user?
 11 A. I think there is a greater potential for
 12 exposure, yes.
 13 Q. You said at Syngenta the use of personal
 14 protective equipment is to be avoided, right?
 15 A. The use of personal protective equipment as
 16 the primary means of control of exposure is to be
 17 avoided, yes.
 18 Q. And why is that?
 19 A. Because personal protective equipment is
 20 uncomfortable, particularly if you're going to use it
 21 all day and every day. It needs a lot of careful
 22 managing and it's not as effective as the use of -- the
 23 employment of engineering controls where they're
 24 available.
 25 Q. In other words using an automated system or

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1 systems to prevent exposure versus using or relying on
 2 personal protective equipment to prevent exposure;
 3 correct?
 4 A. The former is preferable for routine and
 5 repeated activities.
 6 Q. So let's go back to Widnes from the beginning
 7 of the early '60s during production up until the time
 8 you became the director of the medical division, okay,
 9 that period of time.
 10 MR. NARESH: Stephen, we've been going for
 11 about an hour and a half.
 12 MR. TILLERY: We can take a break.
 13 THE VIDEOGRAPHER: In which case, we will go
 14 off the record at 10:19.
 15 (Break taken.)
 16 THE VIDEOGRAPHER: We are back on the record
 17 as of 10:41. This is now media 2 in the deposition of
 18 Mr. Clive Campbell. You may continue.
 19 BY MR. TILLERY:
 20 Q. So we were discussing the Widnes plant and
 21 you're familiar with the operations of the Widnes
 22 plant?
 23 A. I've never been to the Widnes plant during
 24 its operation because it closed in 1995 and at that
 25 stage I was the site physician for Yalding.

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1 Q. So how did you get your information about the
 2 Widnes plant?
 3 A. That facility at the time was operated by a
 4 part of ICI Zeneca called the fine chemical
 5 manufacturing organization and it -- so I spoke with
 6 their medical officer to find out what was going on
 7 there.
 8 Q. And that medical officer is who?
 9 A. That at the time was a gentleman called
 10 Magnus Taylor, Dr. Magnus Taylor. T-A-Y-L-O-R.
 11 Q. And is he still employed in a similar
 12 capacity?
 13 A. Unfortunately he's deceased.
 14 Q. And what was his role at the Widnes plant?
 15 A. He was a principal medical officer for that
 16 group, the fine chemical manufacturing organization.
 17 Q. During the period of time that the Widnes
 18 plant first started making paraquat?
 19 A. No, he was younger than that. So he was --
 20 he would be a contemporary of mine at that stage.
 21 Q. So do you know when he started at the Widnes
 22 plant?
 23 A. I do not. He was already employed there --
 24 he was already employed in the fine chemical
 25 manufacturing organization, not specifically at the

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1 Widnes plant when I started in 1992.
 2 Q. So is he the person you relied upon for your
 3 knowledge about Widnes plant operations?
 4 A. I acquired my knowledge from a number of
 5 sources. One, as I mentioned, was through the medical
 6 side. The other was through occupational hygiene
 7 colleagues from the fine chemical manufacturing
 8 organization.
 9 Q. Who were they?
 10 A. And I'm going to -- I am going to remember.
 11 I'm forgetting the name just in the heat of the moment.
 12 Can I come back to that or shall I --
 13 Q. No, of course you can. If you think of a
 14 name later, please tell us. And who else?
 15 A. And the population who had worked at Widnes
 16 had been -- had been and remained the subject of that
 17 medical surveillance program, and that population was
 18 handed over to me by Dr. Taylor. But the population
 19 had been the subject of some epidemiological work by
 20 Dr. Paddle and so he was able to give me some
 21 information about the history of that work -- of that
 22 work site.
 23 Q. And who is Dr. Paddle?
 24 A. Dr. Paddle is the now retired or therefore
 25 was the head of the ICI epidemiology unit.

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1 Q. So you pieced together your understanding of
 2 operations through the discussions with these people?
 3 A. With these people and by reviewing a number
 4 of documents that had been provided to me about the
 5 history of the manufacturing process.
 6 Q. So you understood the equipment that was
 7 used, the engineering type equipment and other safety
 8 equipment used?
 9 A. I would say I understood how it was described
 10 and how it was named without actually -- never having
 11 physically seen it.
 12 Q. Was it closed by the time you started?
 13 A. It was closed by the time I stopped being
 14 site physician. So it closed in 1995.
 15 Q. So it operated from what years, please?
 16 A. Widnes as in terms -- if I may restrict this
 17 to paraquat, which is the level of my knowledge --
 18 operated from the early 1960s, so 1961/2. 1962 to '64
 19 there was a batch operation --
 20 Q. And let's stop there, if you don't mind.
 21 Explain what you mean by '62 to '64 it was a batch
 22 operation?
 23 A. Yes. If I may contrast it with a continuous
 24 operation. A continuous operation runs essentially all
 25 the time. Whereas a batch operation is started, it

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1 stops, it restarts again, and stops.
 2 Q. Is that the only distinction?
 3 A. Between a batch and a continuous operation?
 4 Q. Yes.
 5 A. That's, to the best of my knowledge that's
 6 the key difference.
 7 Q. Okay. So it may be a day shift or two
 8 shifts, and then close or close on the weekends. But a
 9 continuous operation of the equipment would continue
 10 days a week, 24 hours a day?
 11 A. Certainly continuous operation would be
 12 days a week, 24 hours a day. A batch operation may run
 13 for a week or two weeks and then stop for a period of
 14 time and then run. It may be longer than just a day or
 15 just a week.
 16 Q. Understood. All right. Were the facilities
 17 the same? In other words, the equipment used for
 18 manufacturing, the methods for manufacturing the same
 19 from '62 up through '64?
 20 A. I think the key point is that they were
 21 distinctly different.
 22 Q. Different in the equipment use?
 23 A. In the equipment and indeed the process.
 24 Q. Okay, then if you wouldn't mind, please,
 25 educate us about the difference. So you've talked to

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1 us about '62 to '64. How is that equipment -- what
 2 equipment was used by Syngenta in that process?
 3 A. The process was called high temperature
 4 sodium process. It employed the use of solvents at
 5 greater than 0 degrees.
 6 Q. What? Greater than what degrees?
 7 A. Zero. So I think you might imagine from the
 8 name "high temperature sodium" that there were concerns
 9 with this about the process safety as well as the
 10 process efficiency. I have read that the high
 11 temperature sodium process was only around about 40 to
 12 60 percent efficient in converting the raw materials to
 13 4,4'-bipyridyl.
 14 Q. What was the raw material?
 15 A. Pyridine. The low temperature sodium
 16 temperature by contrast works at below, operates below
 17 0 degrees Celsius, runs continuously, and has a much
 18 higher efficiency in terms of the conversion of the raw
 19 materials into 4,4'-bipyridyl.
 20 Q. Is there any other difference in the plant?
 21 What about the equipment being used?
 22 A. As I mentioned, I never saw that equipment.
 23 In fact, I was very young. Even I was very young in
 24 1962. So it has been described to me as being
 25 different.

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1 Q. How different? Please tell me?
 2 A. In the sense that it has been told it was
 3 less specifically designed, and it was more a process
 4 that was -- it was perhaps slightly more, can I say
 5 embryonic, or younger in its design process.
 6 Q. You're talking between '62 and '64?
 7 A. Correct, yes.
 8 Q. And you said embryonic in that it was the
 9 initiation of the manufacturing process?
 10 A. It was the first of a larger scale
 11 operations.
 12 Q. All right. Now, earlier in the deposition
 13 you described that there were manufacturing techniques
 14 made to minimize contact with a chemical to employees,
 15 right? When did those efforts first develop?
 16 A. The first significant improvement was with
 17 the development or launching of the low temperature
 18 sodium process in 1966. So this process was, as
 19 I mentioned, much more efficient in terms of the
 20 production and it also certainly -- because it was more
 21 efficient in producing 4,4'-bipyridyl, the key
 22 intermediate, it means that there was considerably less
 23 unwanted byproducts in that process. So that
 24 definitely improved the risk to workers from those
 25 potential byproducts. Sorry not -- the potential risk

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1 to workers from those byproducts.
 2 Q. I think we may have missed two years.
 3 I think you were talking '62 to '64. What about '64
 4 to '66? And then I'll come back and ask you specifics
 5 about the equipment differences.
 6 A. Okay. Between '64 and '66 there was another
 7 process that was -- which is referred to as MAG, M-A-G,
 8 which I think from my reading was very little, not much
 9 of an improvement on the HTS process. But it is -- it
 10 was more of a continuous process.
 11 Q. All right. So far we've used pretty general
 12 statements to describe these processes and what I want
 13 to do is come back and talk about specifics. But I'd
 14 like to get through the differences in the plant, and
 15 then come back to these.
 16 So we've talked about '62 to '64, '64 to '66.
 17 And then the low temperature changes to the plant
 18 in '66.
 19 Were there any significant engineering
 20 changes or process changes between '66 and the late
 21 '90s when the plant stopped producing paraquat?
 22 A. What I can tell you is that in 1982 when a
 23 population of the workforce was examined because of the
 24 development of skin conditions, it was determined that
 25 by then the exposure to paraquat -- anything but

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1 paraquat in that plant was considered to be low. And
 2 if I may reflect, I think that is not '82 I think that
 3 is '88. I apologize.
 4 Q. So I'm trying to understand how that answers
 5 my question. I'm trying to get you to explain the
 6 differences in engineering processes between 1966 and
 7 the time that the plant closed?
 8 A. Sure. I think I understand the question.
 9 I'm not sure that I actually have the information about
 10 the process.
 11 Q. So as far as you know there was no difference
 12 between the process, between 1966 and the time that the
 13 plant closed?
 14 A. What I can say is that the concept of the
 15 process was the same, the low temperature sodium
 16 process. I think it likely, but again this is just
 17 from experience of working in the corporation, I think
 18 it likely that as things were changed they were changed
 19 with better and improved versions as the plant
 20 developed between those time periods.
 21 Q. But you don't know specifically what it was?
 22 A. But what I can't tell you is on this day they
 23 changed this pump for that pump.
 24 Q. So in terms of changes in the plant to
 25 control worker exposure, that's what I'm really focused

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1 on. Was there any difference in terms of exposure to
 2 the chemicals after the plant changed to a low
 3 temperature plant?
 4 A. I think -- just to be clear, they are two
 5 distinctly different plants. It's not -- it's not that
 6 we changed -- we modified one to the other. The high
 7 temperature sodium plant use was discontinued, and the
 8 low temperature sodium plant that was started in 1966
 9 was effectively a distinctly different and new plant.
 10 Q. It was a completely different facility?
 11 A. Yes.
 12 Q. So you didn't just repair or alter or modify
 13 the high temperature batch plant, you started off with
 14 a new building and a new processing unit?
 15 A. That is correct.
 16 Q. And that would be in what year again for
 17 clarification?
 18 A. That would be in 1966 when the low
 19 temperature sodium plant was produce --
 20 Q. Okay, and tell me where they were located?
 21 A. They were all located on the Widnes site.
 22 Q. Okay, so when we're talking from '62 to '66
 23 the batch plant, is that what you referred to it as?
 24 A. It's probably easiest to describe it as the
 25 HTS or high temperature sodium plant.

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1 Q. HT --
 2 A. HTS, high temperature sodium.
 3 Q. And that plant discontinued in 1964 or 1966?
 4 A. That plant stopped being used to manufacture
 5 bipyridyl in 1964. It was used for the final step, the
 6 step that's described as quaternization until 1966.
 7 Q. Well what plant was manufacturing --
 8 A. That was the MAG.
 9 Q. So there was yet a third plant?
 10 A. I think I mentioned it earlier, but there
 11 is -- there was a plant between 1964 and 1966 in fact
 12 1967 called the MAG or M-A-G plant.
 13 Q. And where was it located?
 14 A. They were all located on the Widnes site.
 15 Q. With the beginning of production in 1966 with
 16 a low temperature method, was the MAG plant
 17 discontinued?
 18 A. It was. All the manufacture was moved on to
 19 the LTS. And I think --
 20 Q. And the LTS plant was using the same type of
 21 equipment but a different methodology, or was it using
 22 different equipment?
 23 A. As I said, I am not entirely au fait with the
 24 actual process engineering activities. I know it was a
 25 new plant.

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1 Q. Well, here's what I'm focused on is worker
 2 exposures.
 3 A. Yes.
 4 Q. And what I'd like you to do is detail for me
 5 the methods taken to reduce worker exposures to the
 6 active ingredient paraquat, and I want you to tell me
 7 the differences, if there are any, between those plants
 8 moving from 1962 forward? Can you do that, sir?
 9 A. I will do my very best. The key concern in
 10 1964 was twofold. One was the plant was inefficient.
 11 And two, that inefficiency led to the generation of
 12 materials that were, it turned out, were detrimental to
 13 the health of the workforce.
 14 Q. And how were they detrimental?
 15 A. That material was called -- there were tars
 16 or they were described as tarry byproducts, and at the
 17 end of a significantly long investigation they were
 18 identified as being the cause of some aktinic or solar
 19 keratosis on the skins of those workers.
 20 Q. And can you be more specific about what this
 21 byproduct is?
 22 A. Actually, no. They were -- those, they were
 23 probably based on bipyridyls or terpyridyls but they
 24 were never actually quantified. I think the key reason
 25 was that it did not happen with the LTS plant.

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1 Q. Right. So do you know how the byproduct
 2 would cause any exposure to plant workers?
 3 A. The byproduct was, again by reading records,
 4 was visible on the surfaces of the plant.
 5 Q. The surfaces of the plant?
 6 A. I don't think it was all over it, but it was
 7 described as "tarry residues" that were on the
 8 facility.
 9 Q. And this wasn't something that had the same
 10 chemical structure as paraquat?
 11 A. Absolutely was not. It was a byproduct of
 12 4,4'-bipyridyl production, which as you know is the
 13 precursor to the final step of paraquat.
 14 Q. And what happens from creating the -- strike
 15 that. What is the next step -- we'll come back to the
 16 plants -- in the process of creating paraquat?
 17 A. It's a process that's called methylation
 18 where methyl chloride is added to 4,4'-bipyridyl
 19 resulting in the production of paraquat.
 20 Q. And where was that done at that time?
 21 A. That was done up until 1966 on the old HTS
 22 plant between '64 and '66, and then from '66 onwards it
 23 is part of the LTS process.
 24 Q. The '64 to '66, was that low temperature
 25 process as well or high temperature?

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1 A. That was -- sorry, it was called MAG but it
 2 was not low temperature.
 3 Q. So it was high temperature as well?
 4 A. Certainly in terms of the occupational health
 5 issues related to the tarry byproducts it wasn't
 6 perceived as being any better.
 7 Q. So from '62 to '64 at a high temperature
 8 batch plant, and that was the HTS facility, from '64
 9 to '66 it was the MAG, yet another building?
 10 A. Another facility.
 11 Q. Another facility at the same location?
 12 A. They're all closely located on the Widnes
 13 plant.
 14 Q. And that was low temperature?
 15 A. Sorry, MAG --
 16 Q. Or high temperature, MAG temperature was
 17 high?
 18 A. MAG was closer to HTS than it was to LTS.
 19 Q. Can you tell me the difference?
 20 A. The specific temperatures I'm afraid I don't
 21 know but it was -- I'm describing what I have read in
 22 those reports.
 23 Q. And then from '66 on, it was low temperature
 24 processing?
 25 A. Yes.

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1 Q. All right. Now talk to me about specific
 2 equipment that was used? Can you tell me the equipment
 3 that was used to reduce worker exposure?
 4 A. I mean, even back in the 1960s the idea would
 5 be to reduce exposure by engineering means, where
 6 possible, by making sure the process did not expose the
 7 worker. I'm aware that in addition to the usual and
 8 expected workwear for operators at that time the use of
 9 some form of respiratory protection, more like the N95
 10 mask but it was called --
 11 Q. What kind of mask?
 12 A. The coronavirus type mask. In addition -- it
 13 was a similar thing from the 1960s. That was used in
 14 the methylation or quaternization process. Sorry,
 15 methylation, quaternization --
 16 Q. In other words, the actual creation of
 17 paraquat?
 18 A. Yes, in that activity led to the handling of
 19 the 4,4'-bipyridyl to generate the paraquat.
 20 Q. And how long did the workers wear those
 21 masks, how many years?
 22 A. I'm aware that -- I have information to say
 23 that they were wearing them in the '60s. I know that
 24 they were no longer considered to be required -- well,
 25 by '66 the new process was in place and actually there

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1 was a more controlled process for quaternization. So
 2 it was more contained, the quaternization process.
 3 Even back in the '60s formulation, fill and
 4 pack did not require respiratory protection. All other
 5 overalls, gloves et cetera was. Maintenance, which is
 6 an activity which is relatively less controlled, it's
 7 an infrequent occasional -- well, yeah occasional
 8 activity, it's a non-routine activity, then respiratory
 9 protection was required for that.
 10 Q. So from years did personal protective
 11 equipment cease being used, if it did?
 12 A. The only personal protective equipment that
 13 ceased being used would be the respiratory protection.
 14 All other workwear and any protection to protect
 15 against splashing would have continued to be worn.
 16 Q. And what would those have been?
 17 A. Apron and face shield.
 18 Q. And coveralls?
 19 A. Sorry, that was on top of your -- in addition
 20 to your --
 21 Q. So let's talk about all of them, if we can.
 22 A. Okay. The standard workwear would be
 23 coverall --
 24 Q. To cover all parts of your body?
 25 A. Overall, coverall.

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1 Q. Over your clothes?
2 A. It would be instead of your clothes. You'd
3 be required to change out of your personal clothes.
4 Q. And what kind of coveralls were these?
5 A. Heavy cotton, twill.
6 Q. And these were long sleeved?
7 A. Long sleeved.
8 Q. And gloves?
9 A. And gloves.
10 Q. What kind of gloves?
11 A. They would be rubber gloves in the '60s.
12 Q. And boots?
13 A. Exactly.
14 Q. What kind of boots?
15 A. Steel toecapped boots which would be chemical
16 resistant as well.
17 Q. Chemical resistant boots. And then what kind
18 of face shield?
19 A. I'm going to say perspex. I don't
20 specifically know what the material that was employed
21 in the '60s was. Certainly any that I have seen have
22 been perspex.
23 Q. As you have described this personal
24 protective equipment, what years was that used?
25 A. That was used back in the '60s and for any

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1 activities that have involved decanting of finished
2 product. Because the paraquat final product as it
3 comes out of the LTS plant is a water-based solution.
4 The paraquat is highly polar, it's dissociated in the
5 water. It's completely non-volatile. So the key
6 concern would be getting -- if the material, can I use
7 the word glooped or surged or splashed the operator and
8 that's really what we're trying to protect against with
9 that equipment.
10 Q. And that included the face mask, all of the
11 rest of the equipment?
12 A. For those activities that could happen.
13 Q. And that continued on until the end of
14 production at the Widnes plant?
15 A. Yes, and -- yes, it did.
16 Q. All right. Was there ventilation in all of
17 the plants?
18 A. I have not heard that there was or wasn't.
19 I would be speculating.
20 Q. So you don't know one way or another?
21 A. I don't know for sure one way or the other.
22 I would be speculating, I apologize.
23 Q. Now in 1966 you said in the low temperature
24 plant that was built they used techniques or methods to
25 contain the chemical to the very end in terms of

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1 quaternization, right?
2 A. Yes.
3 Q. And explain that, please?
4 A. The LTS plant could and in fact did produce
5 4,4'-bipyridyl which was put into drums and shipped
6 around the globe for local quaternization. But the
7 point is that it was also possible to methylate the
8 4,4'-bipyridyl to produce the paraquat without putting
9 it into drums.
10 Q. And what did you do with it then if it wasn't
11 in drums? Where did you put it after it was produced?
12 A. It would go into the next stage of the
13 production for methylation.
14 Q. Into methylation?
15 A. Yes. Or the other term that is used is
16 quaternization.
17 Q. And what percentage of it during that
18 production period went through that process?
19 A. I'm afraid I don't know that specific.
20 Q. And how many employees were involved in that
21 quaternization process?
22 A. I'm not certain. I think it is in the 10s,
23 not higher than that.
24 Q. 10 people?
25 A. That sort of order of magnitude.

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1 Q. And that's when the product became paraquat;
2 right?
3 A. Yes, that is the quaternization process.
4 Q. Exactly. And before that how many -- before
5 that stage of the process how many employees were
6 involved?
7 A. I -- my understanding is that the employees
8 were involved in all of the process rather than it
9 being they were involved in particular steps of it.
10 Q. I'm sorry, I did not hear you, sir.
11 I apologize.
12 A. My understanding is that the group of
13 employees were involved in the production from start to
14 finish rather than being employed in specific steps of
15 the process.
16 Q. So the same people followed it all the way
17 through?
18 A. That's my understanding.
19 Q. And how many people did it take to run the
20 1966 LTS plant?
21 A. My recollection is not entirely clear.
22 I think it is in the tens rather than the hundreds or a
23 single digit number of people.
24 Q. Single digit group of people?
25 A. I think it's probably more than single digit.

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1 Q. Oh, more than single digits.
2 A. Yeah.
3 Q. But maybe 10 or 20 people?
4 A. That's my recollection, but we would have to
5 look up the information to give you a precise answer.
6 Q. And that plant terminated on what year?
7 A. The LTS?
8 Q. LTS.
9 A. It finally finished production in 1995.
10 Q. And was there from 1966 to 1995 any
11 significant change to impact worker exposures?
12 A. I have no specific knowledge of what that
13 would be. My experience of ICI and Zeneca is that
14 where a better version of the existing equipment exists
15 it would be replaced over time.
16 Q. Was there any difference in terms of the use
17 of personal protective equipment at any other time from
18 which you've told me?
19 A. The only thing that I have already told you
20 is that the opportunity or the risk of exposure in 1988
21 was considered low compared with preceding -- compared
22 with historical times.
23 Q. Historical times?
24 A. Historical '60s, '70s.
25 Q. Are you saying that the '66 plant was better

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1 in terms of worker exposure than the '64 plant or '62
2 plant?
3 A. I think that is -- yes. I think that's
4 correct.
5 Q. So the techniques or production methods that
6 were used, were however we described them, that
7 contained the material until the very last stage and
8 including the last stage in the LTS plant was
9 significantly better in terms of exposure to the active
10 ingredient than preceding two plants?
11 A. I think that is the case.
12 Q. Do you know what it was that was different
13 that made the risk of exposure to paraquat by 1988 low
14 compared to 1966?
15 A. Specifically not, I'm afraid. I do not know
16 what the process changes were, if any, in that time.
17 Q. And you don't know that it wasn't the same
18 exact in 1966?
19 A. I don't know that. I know that it was
20 considered -- I know that exposure was considered to
21 have been medium risk in the period between '66 and '68.
22 Q. But you don't know why it changed?
23 A. I'm sorry, I'm not aware of the process
24 changes.
25 Q. In 1966 the workers at the Widnes plant wore

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1 personal protective equipment so their exposure was low
2 at that time compared to earlier production facility in
3 1962; correct?
4 A. I think there was personal protective
5 equipment worn in the earlier times.
6 Q. As well?
7 A. I don't think -- I've not seen anything to
8 suggest that PPE was not employed in the earlier
9 plants, that the earlier plants were just less good.
10 Q. Yeah, in terms of the temperature, the high
11 temperature was an issue and then eliminating the high
12 temperature, eliminating the MAG sort of as you said,
13 intermediate temperature processing and the byproduct
14 efficiency going up so that you weren't exposing them
15 to whatever this other chemical byproduct was; correct?
16 A. Yes, that's -- I thought you were suggesting
17 that PPE was not employed in the earlier.
18 Q. But it was?
19 A. But it was, so that's not the reason for the
20 improved --
21 Q. It was the improvements in the plant itself,
22 in the byproduct of the production?
23 A. That's my understanding.
24 Q. The primary difference being you went from a
25 very high temperature to a low temperature; isn't that

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1 correct?
2 A. That is correct, and it improved process
3 efficiency as well as safety. And the environmental
4 impact as well.
5 Q. And so as of 1966 even though the LTS plant
6 itself had -- strike that.
7 We talked earlier in the deposition about
8 neurotoxicity and warnings. What warnings, if any, did
9 you give your plant workers who worked around paraquat?
10 A. Paraquat is considered acutely toxic so very
11 clearly we needed to make sure that the workers were
12 not putting themselves at risk of inhalation and/or
13 ingestion of the product. In addition, we mentioned it
14 has an adverse impact on the skin. It's an irritant
15 and it's effectively could stick to the eye, so we
16 needed to make sure workers did not get it in their
17 eye. If they got it on their skin they were to wash
18 immediately. And clearly we were not allowing eating,
19 drinking or smoking on the workplace, and there was a
20 requirement to wear the PPE that we have mentioned.
21 Q. And why did you not want them smoking,
22 drinking or eating on the premises?
23 A. Well as I mentioned, because paraquat is such
24 a polar molecule in solution with a very low vapour
25 pressure, and the risk of inhalation is actually almost

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1 non-existent, the key route of exposure that -- the key
2 theoretical route of exposure would be oral or by
3 ingestion. And so we would not want people putting
4 contaminated cigarette ends in their mouths, nor
5 drinking from potentially contaminated glasses or
6 eating food that may have been contaminated in the
7 workplace. So eating, drinking and -- well, I mean to
8 be honest smoking on a manufacturing facility is very
9 wrong for so many reasons, as well as ingestion, but
10 that was the given reason at the time.
11 Q. Was there any specific paraquat related
12 training for employees?
13 A. I don't know for sure. I'm sorry, I don't
14 know for sure what was given in the 1960s, '70s, or
15 '80s.
16 Q. Is there today?
17 A. Every facility now has training on the use of
18 the equipment and that would include the hazards of any
19 material that is used within it.
20 Q. So in other words there's nothing that's
21 paraquat specific in terms of training?
22 A. Well in answering your question I am
23 struggling to think of anything that would be paraquat
24 specific. But the hazards of paraquat, as they're
25 understood, would be communicated to the workforce.

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1 Q. And how would that happen, sir?
2 A. If we're talking about now, I can say that
3 here we use pictograms. We use short version safety
4 data sheets. And of course a specific trainer-led
5 interventions.
6 Q. Effectively you just have a team leader in a
7 production facility sit down and talk to them?
8 A. Would be an example.
9 Q. Has that training or instruction changed over
10 time while you've been at Syngenta or predecessors?
11 A. I don't believe it's changed much in the past
12 few years, to the best of my knowledge. I mean, it
13 would be fair to say there are changes sometimes in
14 formulation. If the formulation changes the training
15 may or may not change.
16 Q. Taking into account the nature of the various
17 paraquat monitoring -- strike that. Taking into
18 account the nature of the various paraquat
19 manufacturing processes and the personal protective
20 equipment that was used along with each of those
21 different processes, was there any period from 1962
22 through the closing of the Widnes plant when workers at
23 the Widnes plant had any meaningful levels of exposure
24 to paraquat?
25 A. The evidence that we have, that I have seen,

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1 indicates that there was some hygiene monitoring
2 undertaken, and those results do show that paraquat was
3 detected in those samples.
4 Q. What samples would those be?
5 A. They would be static monitoring samples taken
6 over -- static monitoring samples taken at various
7 places. I can't say for sure where.
8 Q. Are these air monitoring samples?
9 A. I'm sorry, static air monitoring samples.
10 Q. And do you know the levels and what the
11 reports were?
12 A. I remember that the levels were considered to
13 be well below the regulatory limit at the time.
14 Q. And is that the source of information you
15 have about potential exposure?
16 A. That's part of the source. The other would
17 be the job description of the person.
18 Q. Could you tell me how the job description
19 would help you answer that question?
20 A. Yes. An operator would be considered to have
21 a higher potential for exposure than a shift leader for
22 example, or a maintenance operative/operator would be
23 considered to have a higher potential than an office
24 worker. So those are the sorts of things that we would
25 use to help.

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1 Q. How would an office worker be exposed?
2 A. Well I think the answer is it's almost --
3 it's highly improbable that they would.
4 Q. Was there ever any effort undertaken to
5 determine if certain employees of different parts of
6 the plant had different levels of exposure?
7 A. More recently, by which I mean between '83
8 and '93, I'm aware that there were certain employees
9 who had what is called personal monitoring or personal
10 air sampling.
11 Q. When the plant closed how many people were
12 employed there?
13 A. When the plant closed the cohort of people
14 who had worked in --
15 Q. No, I don't mean the cohort of people who had
16 worked there.
17 A. Okay.
18 Q. How many people worked there?
19 A. My recollection is that it was around about
20 200.
21 Q. So at some point you told me it had tens of
22 people. When did that number change?
23 A. Yeah, I understand your question. We're
24 talking about the people who are working -- who were
25 working in the Widnes plant or who had worked on the

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1 Widnes plant in the period '88 to '93. It was around
 2 about 200. Each shift -- the shifts would be smaller.
 3 So I think when I'm talking about the smaller number,
 4 this would be shifts of people.
 5 Q. So the tens, or you said 10 to 20, would be a
 6 shift of workers?
 7 A. On reflection I think that's correct.
 8 Q. Okay. So there may be 10 to 20 people
 9 working per shift, and how many shifts were there?
 10 A. I have seen the figure six.
 11 Q. Six shifts in a week?
 12 A. A shift being a group of workers, rather than
 13 a time period, if I'm clear.
 14 Q. Okay, so could you break that down for me?
 15 You're talking about doing different assignments in the
 16 process?
 17 A. What I think I'm trying to say is that we
 18 have -- there would be six shifts, six groups of
 19 workers, I think is my recollection from reading the
 20 paper some time ago, each containing for the sake of
 21 discussion 30 people. So 3 x 6 is 18 -- 180 or so
 22 people working in the plant plus maintenance et cetera.
 23 Q. So how many of these shifts work at the same
 24 time?
 25 A. One.

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1 Q. One shift. So how do you make six shifts
 2 work? Explain that to me?
 3 A. I'm afraid I can't tell you precisely how the
 4 shift pattern works, but it includes holidays and
 5 obviously it's a 24-hour plant so three shifts a day.
 6 Some shifts on downtime. Some shifts on holiday.
 7 Q. So do you know how many hours a week a person
 8 who was assigned to the Widnes plant worked?
 9 A. I do not know. I could only infer.
 10 Q. What did you infer?
 11 A. My inference would be that in that time
 12 period a standard working week in ICI would be
 13 40 hours.
 14 Q. So there were six shifts. And I'm a little
 15 confused about your shifts, how six different shifts of
 16 30 people all working 40 hours. So what time did they
 17 report to work?
 18 A. I'm afraid I don't know the shift pattern.
 19 Q. You're saying if it's a continuous plant,
 20 it's working 7-days a week, they work swing shifts or
 21 different shifts assigned and they work 8 hours. So
 22 the three shifts would cover five days, and then you'd
 23 have coverage on a weekend if it's a continuous plant,
 24 right?
 25 A. And some shifts would be on holiday.

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1 Q. I see. Okay.
 2 A. I don't recall what the shift -- in fact
 3 I never knew what the shift handover times were.
 4 Q. Was there ever any air sampling in the '60s?
 5 A. What I can say that I know is that there
 6 were -- there was air sampling done, and now I recall
 7 the answer to that is to the best of my knowledge
 8 I have no evidence of the results of those. '73 is
 9 when I think I have information.
 10 Q. '83?
 11 A. '73.
 12 Q. '73 you have air sampling information?
 13 A. There's some air sampling information from
 14 the time period of '73.
 15 Q. And what were the air sampling results in
 16 '73?
 17 A. I'm afraid I don't recall the exact numbers.
 18 I do know the conclusion was that they were compliant
 19 with the occupational exposure limit.
 20 Q. And what about any personal air sampling
 21 equipment? Do you understand what I mean by that?
 22 A. I do. As I mentioned earlier, we were aware
 23 that there were static samples, so not personal
 24 samples.
 25 Q. Right, in a fixed location in the plant?

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1 A. Exactly.
 2 Q. Okay.
 3 A. That's what we have information of there
 4 being in the '70s. In the time period more recently
 5 then we have evidence of personal sampling. And the
 6 results were all considered comfortably inside the
 7 occupational exposure limit of that time.
 8 Q. Was there ever an air sampling result that
 9 was above that threshold limit?
 10 A. I cannot tell you that for sure. I think it
 11 would be surprising if there wasn't.
 12 Q. You indicated to me earlier that paraquat
 13 inhalation is not an issue in the plant because
 14 paraquat is not volatile, remember?
 15 A. In manufacturing formulation, fill and pack,
 16 in our risk assessments we have established that there
 17 is no risk of inhalation because of the --
 18 Q. So workers were not subject to paraquat spray
 19 mist because of the manufacturing process, remember you
 20 telling me that?
 21 A. In -- yes, this is absolutely correct.
 22 Q. Then why was air monitoring undertaken for
 23 paraquat at Widnes?
 24 A. I think it's -- we're talking here about a
 25 plant that is producing tens of millions of litres a

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1 year. So in a completely non-breakdown situation the
 2 paraquat is well contained. I would be surprised if
 3 there weren't some spills or seepages or drips that
 4 would lead to the paraquat leaving the process, in
 5 obviously very small amounts that were not clearly
 6 recognized, and therefore it would be sensible to
 7 monitor for that and the results showed very little.
 8 MR. TILLERY: Let's go off the record for a
 9 couple of minutes.
 10 THE VIDEOGRAPHER: Off the record at 11:38.
 11 (Break taken.)
 12 THE VIDEOGRAPHER: We are back on the record
 13 as of 11:52. This is now media 3. You may continue.
 14 BY MR. TILLERY:
 15 Q. Could you mark this as Exhibit 1, please.
 16 (Exhibit 1 marked for identification.)
 17 The reporter has handed you an exhibit marked
 18 number 1. Could you take a look at that and
 19 familiarize yourself with it, please?
 20 A. Thank you.
 21 Q. If you take a look at the bottom right-hand
 22 corner it says SYNG. Do you see that in the bottom
 23 right-hand corner of the document?
 24 A. Yes.
 25 Q. And then PQ-03721769?

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1 A. Yes.
 2 Q. That's a Bates number, and that indicate that
 3 your counsel gave us this document in production in
 4 this lawsuit. Okay?
 5 A. (Deponent nods.)
 6 Q. And the title of this document is:
 7 "The toxicity of paraquat and handling
 8 precautions during manufacture."
 9 A. Yes.
 10 Q. The date of the document is August 8, 1972.
 11 And who would RDW be?
 12 A. I'm afraid I do not know who RDW is.
 13 Q. BKM?
 14 A. I could surmise that's could be
 15 Brian Mountfield.
 16 Q. And who is that?
 17 A. If it is Brian Mountfield he was the
 18 occupational hygiene lead for ICI.
 19 Q. And that time period would correspond with
 20 that, wouldn't it?
 21 A. It could do.
 22 Q. And this document is talking about the
 23 toxicity of paraquat, isn't it, in the manufacturing
 24 process?
 25 A. And the handling precautions.

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1 Q. And if you go to the middle of the first page
 2 it says:
 3 "Inhalation of dust particles causes nose
 4 bleeding but this ceases on removal from exposure."
 5 Do you see that?
 6 A. Yes.
 7 Q. "Contact of the solid with the mucous
 8 membrane of the lips will cause soreness and, in some
 9 cases, blister formations."
 10 Do you see that?
 11 A. Mm-hmm.
 12 Q. "The presence of dust particles is perhaps
 13 the major hazard in the manufacture and formulation of
 14 paraquat and can be reduced by careful attention to
 15 cleanliness and avoidance of spillages at all stages in
 16 the operation."
 17 Do you have any reason to dispute that that
 18 was the state of affairs at the plant in 1972?
 19 A. I can see no reason to dispute what this
 20 gentleman has written.
 21 Q. All right. Then if you go down a little
 22 further it says protective clothing to be worn. Do you
 23 see that?
 24 A. I do.
 25 Q. "The following should always be worn". In

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1 quaternization, that's the part you described in the
 2 deposition where the actual paraquat is assembled
 3 methylized, right?
 4 A. Correct, yes.
 5 Q. All right, so let's look at what has to be
 6 worn there:
 7 "Overalls, a full-face respirator fitted with
 8 a canister filter to trap dust particles ..."
 9 Right?
 10 A. Mm-hmm.
 11 Q. "... rubber or PVC gloves and apron, rubber
 12 boots."
 13 Now that is not what you told me before, is
 14 it?
 15 A. I think I mentioned the need for a
 16 respirator. I didn't recall the need for an apron or
 17 rubber boots.
 18 Q. What about the canister filter? They were
 19 wearing canister filters during quaternization at that
 20 time, weren't they?
 21 A. It looks that way.
 22 Q. Okay, so that's a significant difference in
 23 terms of what you call the coronavirus mask, isn't it?
 24 A. It is different from the coronavirus mask.
 25 Q. In fact it's much, much more protective.

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1 isn't it, sir?

2 A. I think it is somewhat more protective rather

3 than "much, much more".

4 Q. Were you aware of this? Had anybody ever

5 given you this document before?

6 A. If I have seen it I have not recalled that.

7 Q. All right. And in "Formulation" it says:

8 "A full face shield, overalls, rubber or PVC

9 gloves and apron and rubber boots."

10 Right?

11 A. Yes, it says that.

12 Q. And then "Filling and packaging", it says:

13 "Eye protection (goggles or face shield),

14 overalls, rubber or PVC gloves, rubber boots."

15 Right?

16 A. That's what it says, yes.

17 Q. And then in "Plant maintenance", people who

18 are just working in the plant:

19 "Technicians carrying out maintenance on the

20 plant should wear overalls, rubber or PVC gloves and a

21 full-face respirator fitted with a canister filter to

22 trap fine dust particles."

23 Correct?

24 A. That's what it says.

25 Q. And you weren't aware that they were doing

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1 that, were you?

2 A. I think I've given you my view what I thought

3 was the situation. And this is going back to 1972,

4 which is quite early in production.

5 Q. And it may be that the source of your

6 information, hearing it from different people orally

7 and the hearsay on hearsay might have been a little bit

8 of a problem. Would you agree with me?

9 A. I can only know what I've heard.

10 Q. And what you read here?

11 A. And now what I read here.

12 Q. And I'm representing to you that Mr. Naresh

13 gave me that document. All right? I'm telling you

14 that.

15 A. Yes.

16 Q. I don't want you to think that I've handed

17 you something I made up. This was given to me by

18 Syngenta, okay?

19 A. I have no reason to doubt you, sir.

20 Q. All right, thank you. Now let's look at the

21 next exhibit. We'll call this one number 2.

22 (Exhibit 2 marked for identification.)

23 Take your time and familiarize yourself with

24 it.

25 A. Okay.

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1 Q. Okay. This is a document that's dated

2 September 10, 1968, correct? Upper right-hand corner,

3 sir.

4 A. Yes.

5 Q. And it's a Syngenta number 03720397; is that

6 correct?

7 A. Yes.

8 Q. And it's signed by the works manager, right,

9 do you see that?

10 A. I do.

11 Q. And who is the works manager's signature?

12 I can't make it out.

13 A. I would conclude, from looking at the

14 document, it would be the J.K. Pitts in the top right

15 corner.

16 Q. And this is from Widnes, correct? Do you see

17 that?

18 A. It's from Widnes, yes.

19 Q. And it's to J.C. Gage, Industrial Hygiene

20 Research Laboratories, Alderley Park, right?

21 A. Correct.

22 Q. And copies to K.P. Whitehead, T.D. Brown,

23 D.V. Greenwood, and Dr. P.B. Dransfield. Three of

24 those individuals appear to be doctors, right?

25 A. Doctors of some sort.

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1 Q. Doctor, yes, of some sort. Do you know any

2 of them?

3 A. No.

4 Q. This pre-dates you?

5 A. I'm afraid --

6 Q. Because it was a year before you were born,

7 right? Or, no, it wasn't, 10 years.

8 A. I was 9 at this time.

9 Q. Okay, 9. Let's look at that first paragraph.

10 "I.H.R.L." what is that?

11 A. Looking at the address at the top I would

12 conclude it's the Industrial Hygiene Research

13 Laboratories.

14 Q. And the subject matter of this memo, this six

15 paragraph memo, is "NOSE BLEEDS" right?

16 A. Correct.

17 Q. And this says that I.H.R.L., which is

18 Industrial Hygiene Research Laboratories, that's for

19 Syngenta; correct?

20 A. That is correct.

21 Q. At that time it was ICI; it's now called

22 Syngenta?

23 A. Correct.

24 Q. "... will investigate the performance of the

25 Filta-Safe respirators that we are currently using on

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1 the Paraquat plant, and will also investigate the
 2 performance of the Martindale pad type dust mask."
 3 Do you see that?
 4 A. I do see that.
 5 Q. What was the Filta-Safe respirator?
 6 A. Filta-Safe to the best of my knowledge is a
 7 brand or a manufacturer.
 8 Q. Okay. Did you know they were using these
 9 respirators?
 10 A. No, I thought they were using the dust mask
 11 as stated there.
 12 Q. And it turns out that the information on this
 13 topic was also incorrect that you had received, wasn't
 14 it?
 15 A. Well this does refer to the type of mask
 16 I mentioned.
 17 Q. To one of them at least?
 18 A. Yes.
 19 Q. And then it says:
 20 "I.H.R.L. will look into the possibility of
 21 establishing what quantity of paraquat is needed to
 22 produce nose bleeds. If possible I.H.R.L. will
 23 establish the particle size."
 24 So people were having nose bleeds working
 25 around it, weren't they?

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1 A. It would appear so from this memo --
 2 Q. Were you aware of that?
 3 A. I mean, I was certainly aware that working
 4 in -- working with paraquat can lead to nose bleeds.
 5 Q. Were you aware that at the Widnes plant that
 6 we just spent a great deal of time talking about,
 7 despite wearing these respirators the employees were
 8 having nose bleeds?
 9 A. I was not aware of that.
 10 Q. And do you know what the means of access into
 11 the brain by paraquat includes? In other words the
 12 transport mechanism, do you know all the methods?
 13 A. I can't for sure say I know all the methods.
 14 Q. Well let me ask you this. Do you understand
 15 the olfactory bulb to be one of the routes of exposure?
 16 A. I have heard that.
 17 Q. And you've heard that because you breath in
 18 the particles of paraquat, it goes into the olfactory
 19 bulb, and has direct route to the substantia nigra
 20 portion of the brain. Were you aware of that, sir?
 21 A. I'm aware of that theoretically.
 22 Q. Theoretically? As a matter of human
 23 physiology do you know any reason why that won't
 24 happen?
 25 A. What I mean is we know that very small

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1 amounts of paraquat can cause nose bleeds.
 2 Q. And we also talked about this morning about
 3 the redox cycling properties of paraquat and how very
 4 small amounts of them can cause harm, remember?
 5 A. I do remember.
 6 Q. Do you know how much paraquat is necessary if
 7 it travels through your nose, gets in through the
 8 olfactory bulb, into the substantia nigra, to cause a
 9 redox cycling cascade? Do you know what that is?
 10 A. I do not.
 11 Q. Have you ever seen any such research at any
 12 time at Syngenta that would address that question?
 13 A. I have not seen that research.
 14 Q. Mark this as Exhibit 3.
 15 (Exhibit 3 marked for identification.)
 16 And this is a document marked as Plaintiff's
 17 Exhibit 3. SYNG-PQ-03750512. I believe this is
 18 a document that came through your office?
 19 A. It is.
 20 Q. Did you write it, sir, or edit it?
 21 A. I edited this with help from a number of
 22 others.
 23 Q. And it's entitled "Paraquat - The
 24 Occupational Health Experience in Bangpoo". Is that a
 25 manufacturing facility in Thailand?

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1 A. It's a formulation, fill and pack.
 2 Q. A formulation plant. I'm sorry, I misspoke.
 3 In Thailand?
 4 A. In Thailand, yes, correct.
 5 Q. Did you visit the plant?
 6 A. I have visited the plant in the past.
 7 Q. The top of this says:
 8 "Edited by: - Dr Clive Campbell, Head of
 9 Occupational Health and Syngenta Chief Medical
 10 Officer", doesn't it, and this document says, quoting:
 11 "This document is intended to provide a
 12 summary of the occupational health experience for
 13 workers in Syngenta's paraquat formulation facility in
 14 Bangpoo, Thailand. Syngenta operate control strategies
 15 at all facilities."
 16 And the next sentence says:
 17 "Local health risk assessments have confirmed
 18 that targeted health surveillance is not justified or
 19 required for workers involved in the manufacture of
 20 paraquat or the production and packaging of paraquat
 21 formulations."
 22 Is that what it says?
 23 A. It is what it says.
 24 Q. And then under "Background", 1.1, second
 25 paragraph:

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1 "Syngenta operates two paraquat dichloride
 2 manufacturing facilities globally. The Ammonia Cyanide
 3 process is operated at sites in Huddersfield, UK and
 4 Nantong, China. Previously, Syngenta operated a
 5 paraquat manufacturing facilities in Widnes, UK and
 6 Bayport, USA using Low Temperature Sodium (LTS)
 7 process. These were closed when the site at
 8 Huddersfield, UK came on stream."
 9 And then under number "1.2 Paraquat
 10 formulation and packaging locations":
 11 "Syngenta formulate and pack paraquat end-use
 12 products at a number of facilities globally including
 13 the facility at Bangpoo."
 14 Have I read and recited those correctly, sir?
 15 A. As far as I recollect.
 16 Q. Let's go to the 2.1, third paragraph:
 17 "The risk assessments carried out have
 18 confirmed that no routine monitoring or targeted health
 19 surveillance is justified or required for paraquat, or
 20 any other synthesis component during the synthesis of
 21 paraquat."
 22 Is that what it says?
 23 A. It is what it says.
 24 Q. And then on the top of the second page it
 25 says:

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1 "For the past 20 years Syngenta has used a
 2 process of health risk assessment (HRA) to identify
 3 risks to health and enable them to be adequately
 4 managed. At Bangpoo site the processes of transferring
 5 the paraquat into the storage vessels, formulating the
 6 final product and its filling/packing have all been
 7 subject of HRA. These assessments demonstrate that the
 8 risk of chronic exposure is negligible, with baseline
 9 PPE."
 10 Which stands for?
 11 A. Personal protective equipment.
 12 Q. "This would consist of long sleeved overalls,
 13 safety glasses, safety shoes, helmet, and nitrile
 14 gloves. For drum emptying, a chemical resistant
 15 overall and face shield are also employed to reduce the
 16 risk from acute exposure."
 17 If you go to the third paragraph:
 18 "The health risk assessments have confirmed
 19 that targeted health surveillance is not justified or
 20 required for workers involved in the production and
 21 packing of paraquat formulations."
 22 Correct?
 23 A. (Deponent nods).
 24 Q. And did that mean that you suspended the
 25 health care risk assessments at those facilities?

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1 A. The health risk assessment is an activity
 2 that goes on repeatedly. So we do a health risk
 3 assessment and then it should be repeated at regular
 4 intervals, or certainly if anything changes. It's the
 5 health risk assessment.
 6 (Counsel change seats.)
 7 MS. FIORILLO: Rosemarie Fiorillo for the
 8 plaintiffs.
 9 MR. NARESH: Are we switching attorneys?
 10 MS. FIORILLO: Yes.
 11 MR. TILLERY: Just for one topic.
 12 MR. NARESH: Well, I don't agree to that.
 13 MR. TILLERY: It's a different topic.
 14 MR. NARESH: I don't agree to that at all.
 15 If you wanted to do this, you needed to give us notice
 16 of this.
 17 MR. TILLERY: A corporate designee topic we
 18 can do it if it's a different topic.
 19 MR. NARESH: We have never discussed this.
 20 You have never given us notice of this. I don't agree
 21 to this.
 22 MR. TILLERY: Well, are you telling me you're
 23 not going to let him answer questions?
 24 MR. NARESH: Look, there's a one lawyer --
 25 I can't have five different people objecting.

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1 MR. TILLERY: I agree with you in a standard
 2 deposition. I agree with that. I am fully aware of it
 3 and I totally agree and consent and stipulate that that
 4 is the rule.
 5 MR. KELLY: And may I just say for
 6 Illinois --
 7 MR. NARESH: I wouldn't have a problem with
 8 California lawyers asking questions.
 9 MR. KELLY: Well, I'm not suggesting --
 10 sorry, I just wanted that on the record.
 11 MR. NARESH: I do object to switching
 12 attorneys in the middle of a deposition from two
 13 attorneys from the same firm. I don't agree with that.
 14 MR. TILLERY: And what I'm suggesting is on a
 15 different topic, a completely different topic in a
 16 corporate designee dep.
 17 MR. NARESH: I don't agree to it. Steve,
 18 I think you should continue your deposition. This is
 19 your deposition.
 20 MR. TILLERY: So are you telling me he won't
 21 answer if she asks questions --
 22 MR. NARESH: You should ask your questions.
 23 MR. TILLERY: Well she's going to ask them,
 24 so are you telling me --
 25 MR. NARESH: Are you not prepared to ask the

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1 questions?

2 MR. TILLERY: No, no, I'm ready --

3 MR. NARESH: Then please proceed.

4 MR. TILLERY: -- but she's smarter than I am.

5 MR. NARESH: Look, there's plenty of people

6 smarter than me that could be defending this

7 deposition, but here I am. So please, proceed.

8 MR. TILLERY: So just so we're clear, are you

9 telling me that the dep will be suspended if she asks

10 the questions? Because otherwise if it is, we can take

11 it up with the court.

12 MR. NARESH: Look, what I think you need to

13 do is if you're going to switch attorneys in the middle

14 of a topic you need to --

15 MR. TILLERY: And we're not. No, no, no, no,

16 we're not doing that. Just so you know, I want to make

17 clear, we're not doing that. She's talking about

18 something -- a totally different topic than me.

19 Nothing that I have spoken about so far.

20 MR. NARESH: What topic? So let's define the

21 parameters on the record of what are your topics and

22 what are Ms. Fiorillo's topic?

23 MR. TILLERY: Well, she's talking about only

24 one topic, and I am talking about the rest, and the

25 only topic she's addressing is the epidemiology study

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1 of Widnes --

2 MR. NARESH: So here's -- okay.

3 MR. TILLERY: The epidemiology study that he

4 coauthored.

5 MR. NARESH: All right. So here's the

6 condition on which I am willing to proceed is if --

7 what I will not allow to happen is for you to now --

8 MR. TILLERY: Do more questions on this --

9 MR. NARESH: Correct -- no, no, I think you

10 should do whatever you are going to do, and then hand

11 it off to Ms. Fiorillo, and then the deposition is

12 over. What I do not agree to is a tag team where you

13 tag out, and Ms. Fiorillo tags in, and then you tag

14 back in. So --

15 MR. TILLERY: Okay, I understand. That's

16 fine. We'll agree to that. She can go forward.

17 MR. NARESH: So my understanding, just so

18 we're clear, is your role in the deposition for today

19 is now over, and it's Ms. Fiorillo and only

20 Ms. Fiorillo for the rest of the day?

21 MR. TILLERY: Right, that's correct.

22 MR. NARESH: Okay, with that condition I'm

23 fine proceeding.

24 MR. TILLERY: Proceed.

25 MR. NARESH: And let's take a break in about

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1 15, 20 minutes anyway for lunch.

2 MR. TILLERY: Okay, sure.

3 EXAMINATION BY MS. FIORILLO:

4 Q. Rosemarie Fiorillo for the plaintiffs.

5 (Exhibit 4 marked for identification.)

6 I've handed you Exhibit 4. If you would be

7 so kind as to read the title. Can you please read the

8 title on the record?

9 A. I just have. You mean read it out loud?

10 Q. Yes, read it out loud. I'm sorry.

11 A. "Mortality from Parkinson's disease and other

12 causes among a workforce manufacturing paraquat: a

13 retrospective cohort study."

14 Q. And who are the authors?

15 A. Myself, and Dr. John Tomenson.

16 Q. And who is Dr. Tomenson?

17 A. Dr. Tomenson is an epidemiologist.

18 Q. Is he a Syngenta consultant?

19 A. He is a Syngenta consultant.

20 Q. And is he a paid Syngenta consultant?

21 A. He is a paid Syngenta consultant.

22 Q. And was this study published in 2011?

23 A. Yes, it was published in 2011.

24 Q. And what was your position in 2011?

25 A. I was in the same position that I'm in now.

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1 Q. And can you tell me the name of the journal

2 that this study was published in?

3 A. BMJ Open.

4 Q. And what does it mean to be published in a

5 peer reviewed journal?

6 A. Sorry, can you clarify that question for me.

7 Q. Yes. Are you familiar with peer reviewed

8 journals?

9 A. I am.

10 Q. And what does that mean?

11 A. It means that the document, the subsequent

12 publication, has been reviewed by a number of people

13 who have given a view as to the value or otherwise of

14 the publication.

15 Q. And is BMJ Open a peer reviewed journal?

16 A. It is.

17 Q. Do scientists have to pay to have their

18 studies published in BMJ?

19 MR. NARESH: Objection to the scope. If you

20 know.

21 A. They do not.

22 BY MS. FIORILLO:

23 Q. Well, I am going to represent to you that

24 according to -- did Syngenta have to pay to have this

25 study published in BMJ?

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1 A. To the best of my knowledge, no.

2 Q. I'm going to represent to you that according

3 to BMJ's website it says the authors are asked to pay

4 article publishing charges on acceptance. Did you know

5 that?

6 MR. NARESH: Objection: form. Go ahead.

7 A. I am -- I was not aware that this was part of

8 the process, now you mention it.

9 BY MS. FIORILLO:

10 Q. Before this study was published in BMJ was it

11 rejected by three journals?

12 A. It was rejected by a number of journals.

13 I don't know how many off the top of my head.

14 Q. I'm going to hand you Exhibit 5.

15 (Exhibit 5 marked for identification.)

16 One of the journals it was rejected by was

17 the journal of Environmental Health Perspectives, is

18 that right?

19 A. Sorry, may I read this?

20 Q. Yes. I'm sorry.

21 Again, and I will direct you to the bottom of

22 page 5 and the top of page 6. So the study was

23 rejected by the journal of Environmental Health

24 Perspectives; is that right?

25 A. It is.

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1 Q. And just for clarity, I'm going to refer to

2 the study that you coauthored as "the mortality study";

3 okay?

4 A. Okay.

5 Q. And the mortality study was also rejected by

6 the International Archives of Occupational and

7 Environmental Health, is that right? Also on page 5.

8 A. That is correct.

9 Q. And it was also rejected by the journal of

10 Occupational and Environmental Medicine, noted on page

11 4; is that right?

12 A. Yes, that is right.

13 Q. And if you wouldn't mind keeping that

14 document handy because I am going to refer to it in the

15 future.

16 Please go back to the mortality study. If

17 you would read on the record the first two sentences

18 under "INTRODUCTION"?

19 A. "A large body of epidemiological literature

20 exists concerning the relationship between pesticides

21 and Parkinson's disease, mainly studies which have used

22 a case -- control design. Interest has focused on

23 paraquat (PQ) in part because of its structural

24 similarity to 1-methyl-4-phenylpyridine (MPP-), a

25 metabolite of 1-methyl-4-phenyl-1, 2, 3, 6

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1 tetrahydropyridine (MPTP)."

2 Q. The study was conducted because there were no

3 studies on the incidence of Parkinson's among paraquat

4 production workers; is that right?

5 A. There were no studies -- there are no studies

6 on the paraquat production workers.

7 Q. So this is the first of its kind?

8 A. It is, to the best of my knowledge.

9 Q. In addition, if we turn to page 1, it says

10 that:

11 "Personal monitoring results were indicative

12 that the exposure of a PQ production worker on a daily

13 basis was at least comparable with that of a PQ sprayer

14 or mixer/loader."

15 Is that right?

16 A. So in "Key messages"?

17 Q. The Results section?

18 A. I'm sorry, which page are we on now?

19 Q. Page 1, "Results".

20 A. I'm really sorry, I don't see -- in the

21 abstract.

22 Q. In the abstract, I'm sorry.

23 A. Yes, I see that.

24 Q. Because at least according to this,

25 production workers would have similar exposure to those

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1 of paraquat sprayers, mixers or loaders?

2 A. It says indicative that exposure of PQ

3 workers on a daily basis was "at least comparable" to

4 that of "PQ sprayer or mixer/loader".

5 Q. So they're comparable?

6 A. It says "at least comparable".

7 Q. But this study is a mortality study; is that

8 right?

9 A. This study is a mortality study.

10 Q. So that means you were measuring the number

11 of people who died from Parkinson's that had been

12 exposed to paraquat?

13 A. It's actually looking at the number of people

14 within the cohort who have died.

15 Q. Right, within the cohort at the Widnes plant

16 who died from Parkinson's disease?

17 A. From any disease.

18 Q. Is Parkinson's one of them?

19 A. And Parkinson's is one of them.

20 Q. But the title does say "Mortality from

21 Parkinson's disease". It does say other causes but

22 that was one of them, right?

23 A. It clearly is looking at people who have died

24 of all diseases, which includes looking at people who

25 have died with Parkinson's disease.

<p style="text-align: right;">Page 134</p> <p>1 Q. And the study focused on the years at the 2 Widnes plant from 1961 through 1995; correct? 3 A. It looked at that cohort, had been 4 identified. 5 Q. And the original -- the cohort was chosen as 6 part of an investigation into why people were suffering 7 from skin lesions; is that right? 8 A. The original cohort was put together to 9 review those skin lesions I mentioned earlier in the 10 day. 11 Q. And that study was performed by Dr. Paddle? 12 A. The original study was performed by 13 Dr. Paddle, correct. 14 Q. And the study cohort consisted of all workers 15 who had ever been associated with the production of 16 4,4'-bipyridyl or its subsequent conversion by 17 quaternization to paraquat; is that right? 18 A. That is correct. 19 Q. And 4,4'-bipyridyl is a precursor to 20 paraquat; right? 21 A. It is. 22 Q. So it's not actually paraquat yet? 23 A. It's not yet paraquat. 24 Q. Okay. And as you mentioned earlier, the 25 quaternization is the final step to actually making</p>	<p style="text-align: right;">Page 136</p> <p>1 of which plant people have worked in. 2 Q. But they all didn't work in the final 3 quaternization plant; is that right? 4 A. Quaternization is part of the production of 5 paraquat, so I've no reason to believe that there are 6 groups of workers who simply didn't take part in that 7 process. 8 Q. At some point in time you're saying? 9 A. As part of the process of manufacturing 10 paraquat. 11 Q. Does 4,4'-bipyridyl have the same 12 toxicological profile as paraquat? 13 A. I have no reason to think it does. 14 Q. We had mentioned the four plants. One was 15 the high temperature sodium plant; is that right? 16 A. One of the plants is the high temperature 17 sodium plant, yes. 18 Q. And that was used from 1961 to 1969, 19 according to this study; is that correct? 20 A. It was used for quaternization latterly. It 21 was used as a manufacturing facility till about '64. 22 Q. And the magnesium plant was used from '62 to 23 '67? 24 A. I think that's well accepted. 25 Q. And as we said, the low temperature sodium</p>
<p style="text-align: right;">Page 135</p> <p>1 paraquat; is that right? 2 A. That is correct. 3 Q. And that includes methylating the pyridine 4 rings? 5 A. It includes methylation, or quaternization, 6 of the 4,4'-bipyridyl. 7 Q. So some of the people who participated in 8 this study within the plant weren't necessarily exposed 9 to paraquat? 10 A. I think it's as I mentioned earlier, most of 11 the operators worked in all areas, so it is unlikely 12 anyone was specifically unexposed to the paraquat. 13 Q. Okay but we don't know -- so you're saying -- 14 excuse me. There are four plants within Widnes; is 15 that right? 16 MR. NARESH: Objection to form. 17 BY MS. FIORILLO: 18 Q. Four different facilities within the Widnes 19 plant? 20 A. There had been four different facilities 21 within the Widnes plant by the time it closed. 22 Q. So does this study take into account where 23 specifically those people were? 24 A. This study allows the opportunity to look at 25 potential for exposure by -- including considerations</p>	<p style="text-align: right;">Page 137</p> <p>1 plant used from '66 to '95; is that right? 2 A. It is. 3 Q. And ammonia cyanide from '85 to '93? 4 A. Ammonia Cyanide came on in that time period. 5 Q. And the cohort included all employees who had 6 ever worked in any of those four facilities? 7 A. The cohort did include all of those people. 8 Q. And the final cohort in this study consisted 9 of 926 males and 42 females; is that right? 10 A. That is correct. 11 Q. And again, since it's a mortality study, 12 we're interested in people who died from Parkinson's 13 disease among other diseases; is that right? 14 A. That is an -- certainly an end-point of 15 consideration. 16 Q. Okay. So in order to determine if someone 17 died from Parkinson's you looked at death certificates: 18 is that right? 19 A. That's where the information came from. 20 Q. And you also -- and also whether Parkinson's 21 disease was mentioned on the death certificate; is that 22 right? 23 A. That's correct. 24 Q. But is it true, do people actually die from 25 Parkinson's or do they die from a complication of</p>

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1 Parkinson's?
 2 A. It is unusual for people to die from
 3 Parkinson's. They usually die of a complication or
 4 something else.
 5 Q. And what would be recorded on a death
 6 certificate in those cases where people die of a
 7 complication?
 8 A. The first cause of death is usually the
 9 immediate cause. The next cause would be something
 10 like Parkinson's disease, if that was -- that would be
 11 considered an underlying cause. And then there is also
 12 an area where you could mention, as the other word is
 13 mentioned, other conditions that an employee -- a
 14 person may have been suffering with.
 15 Q. So there would be -- so that would be a
 16 mention?
 17 A. So there's an area to mention other illnesses
 18 that a person may have been suffering with.
 19 Q. I'm going to hand you Exhibit 6.
 20 (Exhibit 6 marked for identification.)
 21 My questions are going to be limited to the
 22 part about use of death certificates.
 23 A. Okay. I have not seen this particular paper
 24 before. Can I just confirm this is American?
 25 Q. Yes. It was produced to us in discovery from

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1 Syngenta documents.
 2 A. I'm just saying this is referring to a
 3 study --
 4 Q. Yes. Minnesota.
 5 A. -- undertaken in --
 6 Q. In the United States, yes.
 7 A. Well, I haven't read it in detail but if
 8 there's a particular area you'd like me to look at,
 9 maybe we can do that.
 10 Q. Yes. I will direct you there.
 11 A. And if I can't answer them, maybe I have to
 12 read the whole thing.
 13 Q. Fair enough. Can you read the title into the
 14 record, please?
 15 A. "Survival Study of Parkinson Disease in
 16 Olmsted County, Minnesota".
 17 Q. And this study was published in 2008, yes, at
 18 the bottom of page 1?
 19 A. Yep.
 20 MR. NARESH: Did you mean 2008?
 21 BY MS. FIORILLO:
 22 Q. I'm sorry, it was downloaded from the website
 23 in 2008. It was published in 2003. Would you read the
 24 objective of the study on page 1?
 25 A. In the abstract?

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1 Q. Yes please.
 2 A. "To compare survival in incident cases of
 3 Parkinson Disease (PD) with survival in subjects free
 4 of PD from the general population."
 5 Q. And would you read in the "Methods" section
 6 of the abstract the first sentence, first two sentences
 7 I'm sorry?
 8 A. "We used the medical records linkage system
 9 of the Rochester Epidemiology Project to identify all
 10 subjects residing in Olmsted County, Minnesota, who
 11 developed PD in the period 1976-1995. Details about
 12 the study population and the identification of incident
 13 cases were reported elsewhere."
 14 Q. So in order to determine who had Parkinson's
 15 disease the researchers of this paper used medical
 16 records; is that right?
 17 A. "We used the medical records link ..."
 18 I am afraid I don't know what the medical
 19 records linkage system of the Rochester Epidemiology
 20 Project is. I'm afraid.
 21 Q. Well, they are medical records, but we'll
 22 turn to page 5, if you wouldn't mind?
 23 MR. NARESH: I'll move to strike the attorney
 24 commentary.
 25 BY MS. FIORILLO:

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1 Q. Bates 26353.
 2 A. 26353. Okay.
 3 Q. The second paragraph in the right-hand column
 4 reads:
 5 "Parkinson disease was recorded anywhere in
 6 the death certificate in only 57% of the patients."
 7 Is that right?
 8 A. I'm sorry?
 9 Q. So am I reading this correctly?
 10 A. I believe it says:
 11 "Parkinson disease was recorded anywhere in
 12 the death certificate in only 57% of the patients."
 13 Yes, that's what it says.
 14 Q. The next sentence reads:
 15 "This finding is in agreement with other
 16 studies showing a sizable underreporting of PD in death
 17 certificates."
 18 Is that right?
 19 A. That is correct.
 20 Q. The next sentence reads:
 21 "Underreporting should be considered when
 22 interpreting findings of studies based on PD cases
 23 identified through death certificates."
 24 Is that right?
 25 A. That is what it says.

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1 Q. Did you consider underreporting of PD on
 2 death certificates when you coauthored the Widnes
 3 study?
 4 A. Specifically Dr. Tomenson did, yes.
 5 Q. And how did he do that?
 6 A. He looked at a number of studies that showed
 7 figures not dissimilar to this. In the United Kingdom
 8 we've got mentions as well as underlying cause, so when
 9 mentions were considered the figure goes up to
 10 76 percent rather than 57 percent, as is said here.
 11 Q. Okay, but that's still under-reported, right,
 12 at 76 percent?
 13 A. That would be true -- the figure will be true
 14 for the observed cases as well. So in fact it will
 15 probably more likely skew the SMR to over-represent
 16 Parkinson's disease in the population.
 17 Q. And how will that be?
 18 A. The death certificates are used to determine
 19 the observed numbers of cases.
 20 Q. And what do you mean by observed numbers of
 21 cases?
 22 A. In the study "Mortality from Parkinson's
 23 disease and other causes among a workforce
 24 manufacturing paraquat: a retrospective cohort study",
 25 presents the outcome as a standardized mortality ratio.

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1 Q. But you told me earlier that people don't
 2 typically die from Parkinson's disease?
 3 A. But it still presents the data as a
 4 standardized mortality ratio, or SMR. So if the data
 5 for Parkinson's disease is not appearing on the death
 6 certificates then the number of cases expected will
 7 appear to be fewer than it actually is. So when
 8 comparing the workplace number of cases, the figure you
 9 divide it by will be smaller, which would mean that it
 10 is not impossible that it would overestimate the effect
 11 on causing Parkinson's disease.
 12 MR. NARESH: You want to take a lunch break.
 13 THE VIDEOGRAPHER: Going off the record at
 14 12:45.
 15 (Lunch recess.)
 16 THE VIDEOGRAPHER: We are back on the record
 17 as of 1:34. You may continue.
 18 BY MS. FIORILLO:
 19 Q. I'm going to hand you Exhibit 7.
 20 (Exhibit 7 marked for identification.)
 21 Take a minute and look at that.
 22 A. I have not seen this, personally seen this
 23 paper before. So, do you want me to ask me about the
 24 totality of it or is there a particular --
 25 Q. No, I'm going to direct you to certain parts.

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1 A. I'll read the extract, if I may?
 2 Q. Yes, please.
 3 A. I've read the extract of this paper.
 4 Q. And the title of Exhibit 7 is:
 5 "Survival Time, Mortality, and Cause of Death
 6 in Elderly Patients With parkinson's Disease: A 9-Year
 7 Follow-up".
 8 Is that correct?
 9 A. That's what it says, yes.
 10 Q. This paper was published in 2003; is that
 11 right?
 12 A. Yes, it is. Correct.
 13 Q. The first line of the abstract reads:
 14 "This community-based study of Parkinson's
 15 disease (PD) investigated age at death and cause of
 16 death in a cohort of 170 previously studied patients."
 17 Is that right?
 18 A. That's what it says.
 19 Q. And this study took place in Sweden; is that
 20 right?
 21 A. Again, it's certainly got Swedish authors.
 22 Q. It's in the abstract.
 23 A. It is, yes "a defined area of Sweden". It
 24 is.
 25 Q. Again, following in the abstract, it says:

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1 "Only 53% of the death certificates for the
 2 deceased patients recorded PD as an underlying or
 3 contributory cause of death."
 4 Is that right?
 5 A. I'm not going to argue with you. I haven't
 6 found it yet. If you could just steer me towards it?
 7 Q. It is the third-to-last sentence in the
 8 abstract.
 9 A. Yes:
 10 "Only 53% of ... underlying or contributory
 11 cause of death."
 12 Q. So you would agree with that?
 13 A. Yes, that's what it says.
 14 Q. If you would turn to page -- at the bottom of
 15 page 2, in the column that reads "RESULTS" the last
 16 sentence says:
 17 "Table 2 presents the causes of death for
 18 cases and controls. The largest category of deaths --"
 19 "Would you agree with that first sentence?"
 20 A. "Table 2 presents of the causes of death for
 21 cases and controls."
 22 Yes, that's right.
 23 Q. The second sentence:
 24 "The largest category of deaths in the PD
 25 group was 'other diseases' (38%), which included

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1 'weakness due to old age', 'dementia', and
 2 'arteriosclerosis'.
 3 Is that right?
 4 A. That's what it says, yes, I agree.
 5 Q. And again in table -- looking at Table 2,
 6 "Major causes of death for patients with PD after 10
 7 years of follow-up" it has that other diseases was 38
 8 percent of the causes of death. Is that right? Other
 9 causes for people with PD?
 10 A. Other disease, yes.
 11 Q. If you would refer back to Exhibit 5 or 6,
 12 the subject of the e-mail at the top page is "Paraquat
 13 and Parkinson Disease"?
 14 A. Yes, I have that document in front of me.
 15 Q. Looking at the top of page 5. reading in the
 16 first paragraph:
 17 "The second reason seems to be the fact that
 18 Morbus Parkinson normally does not lead to death."
 19 Is that what it says?
 20 A. I'm terribly sorry.
 21 Q. Page 5, at the top of page 5.
 22 A. "Please accept our sincere apologies..."
 23 Q. Further down the paragraph.
 24 A. I'm with the paragraph, I'm just trying to
 25 find the exact place where we are.

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1 "The second reason seems to be the fact that
 2 Morbus Parkinson normally does not lead to death."
 3 Q. And this is written by the editor of the
 4 journal of International Archives of Occupational and
 5 Environmental Health, and this is one of the journals
 6 that rejected your paper; is that right?
 7 A. It is indeed, yes.
 8 Q. And he's saying they rejected it for a second
 9 reason because the fact that Morbus Parkinson normally
 10 does not lead to death; is that right?
 11 A. That's what they've said, yes.
 12 Q. In addition "Morbus Parkinson studies should
 13 be conducted as morbidity studies, not as mortality
 14 study."
 15 Is that right?
 16 A. That is what it says.
 17 Q. So the journal is saying that the Widnes
 18 mortality study should have been a morbidity study; is
 19 that right?
 20 A. I don't think it's specifically singling out
 21 our study and saying it should be. I think they're
 22 saying it would be better as a morbidity study.
 23 Q. But they're rejecting it for that second
 24 reason as well; is that right?
 25 A. That is one of the reasons they rejected it.

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1 Q. And morbidity meaning disease. right?
 2 A. It means disease, yes.
 3 Q. So in the editor's opinion that rejected your
 4 study, saying that paraquat exposed workers -- that the
 5 workers should have been -- strike that. So the study
 6 should have determined how many paraquat exposed
 7 workers got PD, not how many died from it; is that
 8 right?
 9 A. I think it would be right to say that they
 10 would recognize it as a better study and they will have
 11 probably published it had it done so.
 12 Q. But they rejected it -- this is one of the
 13 reasons why it was rejected, right, because it was a
 14 mortality not a morbidity study?
 15 A. That is correct.
 16 Q. Turning to page 6. And this is a comment
 17 from the journal of the Environmental Health
 18 Perspectives, it starts on the bottom of page 5 and
 19 goes to page 6. The journal of Environmental Health
 20 Perspectives rejected the mortality study because:
 21 "The consulting editors felt that the paper's
 22 impact would be low due to limitations related to the
 23 use of death certificate data and SMR to estimate
 24 associations".
 25 Is that right?

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1 A. That's what it says.
 2 Q. Turn to page 2, and we're going to go back to
 3 the actual study. And for the record this is Exhibit
 4 number --
 5 MR. NARESH: It's 4.
 6 BY MS. FIORILLO:
 7 Q. Thank you. I'm going to read under the
 8 section that says "Exposure assessment" on the
 9 right-hand side:
 10 "Limited information is available to assess
 11 the exposures to PQ of the workers in the cohort."
 12 Is that what that says?
 13 A. That is what it says.
 14 Q. "However, 1330 static monitoring results were
 15 collected between 1979 and 1993, and 100 personal
 16 monitoring results were collected between 1973 and
 17 1993."
 18 Is that right?
 19 A. That's what it says.
 20 Q. "Only summary information was available for
 21 static monitoring results collected before 1987"
 22 Is that right?
 23 A. That's what it says.
 24 Q. "There was insufficient sampling information
 25 available to use these measurements to perform a

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1 quantitative exposure assessment."
 2 Is that right?
 3 A. That's what it says.
 4 Q. So the paraquat sampling equipment used in
 5 the plant was not sufficient to perform quantitative
 6 exposure assessment for the entire cohort; is that
 7 right?
 8 A. I wouldn't put it entirely that way. I think
 9 what it says is the information that had been collected
 10 using these 1,330 static monitorings and 100 personal
 11 monitorings and the summary data was insufficient to be
 12 able to use those measurements to perform a
 13 quantitative exposure assessment on the group.
 14 Q. Okay, so we don't have a quantitative
 15 exposure assessment for this group in this paper for
 16 everyone?
 17 A. We don't have a quantitative exposure
 18 assessment for people in this group. I mean I think
 19 this -- this is clearly stated in the paper.
 20 Q. And by static monitoring, you mean air
 21 sampling monitors; is that right?
 22 A. Static monitoring means air sampling monitors
 23 that are put in a single place rather than attached to
 24 a worker.
 25 Q. And the study doesn't say exactly how many of

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1 those static monitors there were, does it?
 2 A. I'm sorry, could you rephrase that question?
 3 Q. I'll strike it. So the 100 personal
 4 monitoring results were collected from 1983 to 1993; is
 5 that right?
 6 A. That's what it says in the paper, yes.
 7 Q. But there were -- so that means for 900 or so
 8 people in the study you didn't have personal monitoring
 9 results?
 10 A. There were the 100 personal monitoring
 11 results collected. It would therefore be improbable
 12 that everybody had one done. It seems improbable.
 13 Q. So you did not have them for the vast
 14 majority of the people in the study?
 15 A. I think we need to remember that a lot of the
 16 people in the study -- a lot of the 930 would have
 17 retired before this time, so there would be fewer
 18 active workers than 930.
 19 Q. So again, "yes" or "no", for the 900 or so
 20 people you would not have had personal monitoring
 21 results, right, "yes" or "no"?
 22 MR. NARESH: Objection: asked and answered.
 23 A. Sorry, could you just repeat the question?
 24 BY MS. FIORILLO:
 25 Q. Sure. Can you read back the question.

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1 (Record read.)
 2 A. Yes, as I said before.
 3 Q. The Paddle study was based on a limited
 4 qualitative exposure assessment of 11 chemicals; is
 5 that right?
 6 A. In the paper they say they performed a
 7 limited quantitative exposure assessment for 11
 8 chemicals.
 9 Q. And paraquat was just one of those; is that
 10 right?
 11 A. Paraquat was one of those.
 12 Q. And in this study about 300 of the 729 male
 13 workers were assessed to have high or medium exposure
 14 to paraquat; is that right?
 15 A. That's right.
 16 Q. So what does medium mean? Let me strike that
 17 question. The paper does not give a quantitative
 18 assessment of what medium exposure means; is that
 19 right?
 20 MR. NARESH: Objection to form. I'm just
 21 confused as to which paper. Paddle paper --
 22 MS. FIORILLO: In the Widnes study. This
 23 paper.
 24 A. I'm terribly sorry, I've forgotten the
 25 question already.

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1 BY MS. FIORILLO:
 2 Q. Can you read it back?
 3 (Record read.)
 4 A. That is right. The purpose was to identify
 5 which groups were more exposed and which groups were
 6 less exposed.
 7 Q. So that's all we know, more or less; is that
 8 right?
 9 A. That's what we meant.
 10 Q. The last sentence on page 2 of the study
 11 reads:
 12 "Exposure levels were not assessed for
 13 research staff, plant laboratory workers, (day and
 14 shift) and technical administrative staff (day and
 15 shift), but their exposure was likely to have been
 16 low."
 17 Is that right?
 18 A. That's what it says.
 19 Q. Do you have reason to believe that they had
 20 any exposure?
 21 A. I cannot think of any reason, and let me
 22 quickly review. Laboratory workers may have been
 23 exposed when handling samples. I would have thought
 24 research staff similarly. Technical administrative
 25 staff I think is highly unlikely.

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1 Q. So some of the people classified as having
2 low exposure in this study you believe may not have
3 been exposed at all or unlikely to have been exposed?
4 A. It is unlikely they would have been exposed
5 significantly.
6 Q. On page 3, a total of 118 workers were
7 assessed to have held jobs that entailed high exposure
8 to paraquat, and a further 202 held jobs that entailed
9 medium exposure to paraquat; is that right?
10 A. If you could just steer me to which part?
11 Q. Sure, in the results section on page 3?
12 A. In the --
13 Q. Second sentence.
14 A. "Over 40% had worked on the two earliest
15 plants and almost half had only worked on the LTS
16 plant. A total of 118 workers were assessed to have
17 held jobs that entailed high exposure to PQ, and a
18 further 202 held jobs that entailed medium exposure to
19 PQ."
20 Yes.
21 Q. So would the high exposure to paraquat people
22 have been in the quaternization plant?
23 A. They would have been working in the HTS and
24 they would have had some time working in HTS and MAG
25 plants.

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1 Q. So you're saying the total exposure would be
2 reported as high for all three of those plants?
3 A. Two. HTS and MAG.
4 Q. Oh, I'm sorry. And it's in the HTS plant
5 where quaternization took place?
6 A. HTS was the first plant where paraquat was
7 produced in batches in the form of 4,4'-bipyridyl which
8 then underwent quaternization. And in the MAG plant
9 similarly.
10 Q. So where did quaternization take place?
11 A. Quaternization took place in the HTS plant
12 all through its production period and it was also used
13 for quaternization during a period after it stopped
14 being used for production of 4,4'-bipyridyl. But that
15 doesn't mean it's the only place where quaternization
16 occurred.
17 Q. I understand. And the personal monitoring of
18 these 100 individuals took place in one month, is that
19 right, or during one month?
20 A. (Reads.) "...and the mean of the six
21 personal monitoring results available for this period,
22 all collected for workers in a single location during 1
23 month", yes. These six took place over one month.
24 Q. So again, they took place over one month;
25 yes?

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1 A. Those six took place over one month, yes.
2 Q. And if you read further on, it says:
3 "... the 94 personal monitoring results
4 collected during the same time period ..."
5 So does that mean they were collected during
6 that same one month?
7 A. May I just find that? Well, as I'm reading
8 this the six person monitoring results available were
9 for a period before 1987, and the 94 were for the
10 period '87 to '93.
11 Q. At the top of page 3, "Statistical methods".
12 "The observed number of deaths from selected
13 causes and groups of causes was compared with the
14 expected number calculated on the basis of national and
15 local age and period-specific mortalities."
16 Is that right?
17 A. That's what it says here, yes.
18 Q. "The standardised mortality ratio was
19 calculated as the ratio of the observed to the expected
20 deaths, expressed as a percentage."
21 Is that right?
22 A. That is correct, yes.
23 Q. The results of this Widnes study show there
24 was only one death from PD as the underlying cause
25 among male workers compared with 1.8 expected; is that

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1 right?
2 A. I think that's on a subsequent page, isn't
3 it?
4 Q. It's on page 3, just above the Table 2.
5 Middle of the paragraph.
6 A. So "At least 3.3 death certificates ... would
7 have been expected to have mentioned PD".
8 Q. Well I was reading the sentence before that.
9 "There was only one death from PD as the
10 underlying cause among male workers (1.8 expected), and
11 the death certificate of this worker was the only one
12 that mentioned PD".
13 Is that right?
14 A. That's what that says, yes.
15 Q. Again, the next sentence:
16 "At least 3.3 death certificates of male
17 workers would have been expected to have mentioned PD."
18 Is that right?
19 A. That's right.
20 MS. FIORILLO: Can we go off the record for
21 two minutes?
22 THE VIDEOGRAPHER: Off the record at 1:59.
23 (Break taken.)
24 THE VIDEOGRAPHER: Back on the record as of
25 2:04.

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<p style="text-align: right;">Page 158</p> <p>1 BY MS. FIORILLO: 2 Q. Sir, I'm going to hand you what is Exhibit 8. 3 (Exhibit 8 marked for identification.) 4 A. Okay, I haven't read this document. 5 Q. This is the "Feasibility of Conducting a 6 Prevalence Survey of Parkinson's Disease in a Bipyrid 7 Cohort at Widnes". Is that the title of the document? 8 A. It is the title of the document. 9 Q. And the authors are Philip Cole, Jack Mandel, 10 Dimitrios Trichopoulos and Hans Olov Adami; is that 11 right? 12 A. Indeed it is. 13 Q. Philip Cole is a paid Syngenta consultant; is 14 that right? 15 A. I'm afraid I don't know -- the only name 16 I recognize is Jack Mandel. 17 Q. And is he a paid Syngenta consultant? 18 A. He has been. 19 Q. So you don't know who Dimitrios Trichopoulos 20 is; is that what you're saying? 21 A. I'm saying I don't recall these gentlemen 22 specifically. 23 Q. So these gentlemen gave their opinion on 24 whether doing the study that we've been discussing, the 25 Widnes study, was feasible; right? That's what the</p>	<p style="text-align: right;">Page 160</p> <p>1 difficult. 2 Q. Can we turn to page 3? 3 A. Of? 4 Q. Of this document. 5 A. Yes, certainly. 6 Q. It says: 7 "In summary, a prevalence survey of an 8 uncommon, difficult-to-diagnose condition in a small, 9 possibly select, cohort is most unlikely to produce 10 informative results." 11 Is that right? 12 A. I think that is exactly right, which is why 13 we didn't do one. 14 Q. And how was the Widnes cohort study 15 different? 16 A. Earlier in your questioning you asked me 17 about -- you pointed out to me that a number of the 18 journals had suggested we should -- a morbidity study 19 would be better. This document explains why a 20 morbidity study would be extremely difficult and the 21 conclusion was that we would refrain from doing a 22 morbidity study until we saw the outcome of the 23 mortality study to see if it was justified doing. 24 Q. And what did you decide, based upon what you 25 just said?</p>
<p style="text-align: right;">Page 159</p> <p>1 title suggests? 2 A. The title suggests -- it's not how I'm 3 understanding it, if I've understood your question 4 correctly. 5 Q. They're commenting on the Widnes study, is 6 that right? 7 A. They are commenting on a prospective -- a 8 potential study at Widnes. 9 Q. And we've been talking about the Widnes 10 study; is that right? 11 A. That is correct. 12 Q. Are you aware of a group informally called 13 the Epiteam of consultants at Syngenta? 14 A. I'm loosely aware of that team. 15 Q. Do you know who is on that team? 16 A. From Syngenta there must be a representative. 17 I'm not sure other than that. I have personally met 18 once with that team. 19 Q. And the study they commented on -- strike 20 that. Were you aware that Syngenta asked these 21 gentlemen to comment upon a prevalence study at 22 Syngenta? 23 A. I am and I think it's very -- I think this is 24 referenced in the paper itself. Because this document 25 explains why doing a mortality study would be</p>	<p style="text-align: right;">Page 161</p> <p>1 A. We decided that we should go ahead with the 2 mortality study that was done. 3 Q. I'm going to turn back to exhibit -- the one 4 that starts with the e-mail heading "Paraquat and 5 Parkinson Disease". Page 5, at the top, again the 6 Widnes study, was rejected because it says: 7 "The prevalence of the diagnosis Morbus 8 Parkinson is 100 to 200 per 100,000 inhabitants." 9 Is that right? 10 A. "The prevalence of the diagnosis ... is 100 11 to 200 per 100,000 inhabitants." 12 Q. "Therefore, in a study population of about 13 1000 exposed persons one to two cases of illness would 14 be expected." 15 Is that right? 16 A. That's what it says. 17 Q. And this was rejected by the International 18 Archives of Occupational and Environmental Health; is 19 that right? 20 A. It was. 21 Q. They go on to say: 22 "A doubling of the risk -- which means a 23 relative risk of 2 -- would therefore not be 24 significant yet." 25 Is that right?</p>

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<p style="text-align: right;">Page 162</p> <p>1 A. That's right. 2 Q. I'm going to hand you Exhibit 9. 3 (Exhibit 9 marked for identification.) 4 And I am going to direct you to page 4? 5 A. I have not read the rest of the document. 6 Q. Go ahead. 7 A. I don't mind moving to page 4 but I can't 8 comment -- 9 Q. Okay. That's okay. My questions are only 10 going to be on page 4. In the middle of the page there 11 is an e-mail from John Tomenson, who is one of the 12 authors, he's the first author of the Widnes study. 13 A. Yes, he is. 14 Q. To Kevin Ledgerwood, is that right? 15 A. That's right, yes. 16 Q. And you were copied on this: is that right? 17 A. Yeah, I am. 18 Q. The second paragraph reads: 19 "I have deliberately avoided mentioning there 20 was no data for 1986, and I ducked the question of 21 whether the results were respirable or total dust 22 measurements." 23 Is that right? 24 A. That's what it says. 25 Q. "A sharp referee will probably pick up on</p>	<p style="text-align: right;">Page 164</p> <p>1 it in the study. 2 Q. I'm going to hand you Exhibit 10. 3 (Exhibit 10 marked for identification.) 4 A. Okay. 5 Q. Are you aware of this study? 6 A. If I've seen this paper it would have been a 7 very, very long time ago. As it refers to end use of 8 Gramoxone it would not be my specialist topic area, my 9 expert area. 10 Q. Move to strike. There's no question pending. 11 This is a study of the health of Malaysian 12 plantation workers with particular reference to 13 paraquat spraymen; is that right? 14 A. That's what it says. 15 Q. And this study was performed by people at 16 ICI, is that right, J.K. Howard and others? 17 A. I know Dr. Sabapathy, or I knew 18 Dr. Sabapathy. I don't know Anne Whitehead or 19 J.K. Howard. In fact, according to this, J.K. Howard 20 works for the Chemical Industries Association. 21 Q. I'm sorry, I apologize. It's the 22 Sabapathy -- is that right? 23 A. Dr. Sabapathy works -- 24 Q. And Whitehead that worked for ICI? 25 A. Correct.</p>
<p style="text-align: right;">Page 163</p> <p>1 that." 2 Is that right? 3 A. That's what it says. 4 Q. "I also haven't said anything about the 5 exposure studies that attempted to quantify dermal and 6 oral exposure of users, and I have focussed on the two 7 studies with 24 hour urine collections." 8 Is that right? 9 A. That's what it says, yes. 10 Q. So you were missing exposure data; is that 11 right? 12 A. It says there's no data for 1986. That's 13 what it says. 14 Q. But you didn't disclose it, right, in the 15 report -- in the study, excuse me? 16 A. I don't think it claims it -- I don't think 17 the study claims anything that is or isn't true. 18 Q. So when he says "I have deliberately avoided 19 mentioning ..." this, what does that mean? 20 A. I think it means he's not specifically 21 mentioned that there was no data for 1986. Which is 22 not the same as trying to claim there was. 23 Q. But he doesn't put that in the study. He 24 doesn't specifically say that? 25 A. I think you're right. I don't think he put</p>	<p style="text-align: right;">Page 165</p> <p>1 Q. And are you aware that Dr. Howard was a paid 2 consultant? 3 A. As I said, I have -- if I've seen this paper 4 it would have been a very long time ago. 5 Q. And are you relying on this study as evidence 6 that occupational exposure to paraquat does not cause 7 long-term chronic effects? 8 A. I am not because this is a paper relating to 9 end-use and my remit is in the facility. 10 Q. But speaking at Syngenta, as the corporate 11 designee for Syngenta, is Syngenta relying on this? 12 MR. NARESH: Objection to scope. His scope 13 is limited as set forth in the topics in the agreement 14 of the parties. 15 MS. FIORILLO: It does say occupational. 16 MR. TILLERY: Re-read your topics. We just 17 looked at them. Obvious too. 18 MR. NARESH: Are you limiting your question 19 to occupational exposure? 20 MS. FIORILLO: Spraying, that's an 21 occupation. Applicators are occupational. 22 MR. NARESH: Are you limiting your question 23 to occupational exposure? 24 MS. FIORILLO: I'm going to ask him about 25 this study.</p>

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1 MR. NARESH: Are you limiting your question
 2 to occupational exposure?
 3 MS. FIORILLO: This is occupational exposure
 4 in this study.
 5 MR. NARESH: Look, he's here as a corporate
 6 rep on the topics, for which he's disclosed. And then
 7 we provided disclosure on February 18 making clear our
 8 interpretation of the topics and I received an e-mail
 9 agreement with our interpretation of several of these
 10 topics. We can have an argument about scope later, but
 11 my position is he is here as a corporate representative
 12 on a topics for which he's designated and the parties
 13 subsequently agreed on limitation of certain of those
 14 topics. So if you want to ask a question, he can
 15 answer the question, and we can argue later about
 16 whether or not it's within the scope.
 17 BY MS. FIORILLO:
 18 Q. I'm going to move on. Have you ever
 19 submitted this study to any regulatory authority in
 20 support of continued paraquat registration?
 21 MR. NARESH: Objection to the scope.
 22 A. I have not.
 23 BY MS. FIORILLO:
 24 Q. Has Syngenta ever submitted this study to any
 25 regulatory authority in support of continued

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1 registration of paraquat?
 2 MR. NARESH: Same objection.
 3 A. I don't know.
 4 BY MS. FIORILLO:
 5 Q. The bottom of page 1:
 6 "Concern has been expressed, nevertheless,
 7 that the full extent of the potential hazard to
 8 sprayworkers has not been sufficiently explored."
 9 Am I reading that correctly?
 10 A. That's what it says here.
 11 Q. "Claims have been made that generalised
 12 ill-health may result after working with paraquat and
 13 that the spraying of paraquat may represent an
 14 important health hazard."
 15 Is that right?
 16 A. That's what it says.
 17 Q. So Syngenta was concerned about the potential
 18 chronic health effects of paraquat to spraymen; is that
 19 right?
 20 MR. NARESH: Objection to the scope.
 21 A. I can't answer that question without
 22 referring to the references mentioned.
 23 BY MS. FIORILLO:
 24 Q. This study was published in 1981; is that
 25 right?

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1 MR. NARESH: Can we go off the record for a
 2 minute here?
 3 THE VIDEOGRAPHER: Off the record at 2:27.
 4 (A break taken.)
 5 THE VIDEOGRAPHER: Back on the record at
 6 2:29.
 7 MR. NARESH: So, for the record we have a
 8 statement from Mr. Tillery at 12:14 p.m. that he agreed
 9 on a condition that the only basis by which we were
 10 allowing a switching of attorneys from a single firm in
 11 the middle of a deposition was that Ms. Fiorillo would
 12 take only one topic. Mr. Tillery is the rest. The only
 13 topic she is addressing is the epidemiology study of
 14 Widnes, the epidemiology study he coauthored.
 15 Plaintiffs have now moved beyond that, with
 16 Ms. Fiorillo asking questions about a study from 1981
 17 or 1980 that is not the study he coauthored, is not
 18 related to Widnes. We object to that.
 19 If Ms. Fiorillo has additional questions
 20 about the Widnes study that he coauthored, she's free
 21 to continue and ask questions about that, as agreed.
 22 If she's moving on beyond the one topic that plaintiffs
 23 represented she would be asking about, we object to
 24 that and we do not agree to further questioning.
 25 MR. TILLERY: And what does that mean when

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1 you say you won't agree to further question? Off the
 2 record, before we resumed this, you said you were
 3 terminating the dep. Is that your intention?
 4 MR. NARESH: If Ms. Fiorillo has more
 5 questions about the Widnes study, as agreed, then go
 6 ahead.
 7 MR. TILLERY: No, I'm sorry, if she moves on
 8 in the topic under discussion with another one, on
 9 exactly the same topic, which is what she was talking
 10 about, if -- I told you about topics. If I misspoke,
 11 I apologize, counsel, but I referenced a "topic", and
 12 that is what I told you when I explained to you how the
 13 practice rules work in Illinois. Is that when you're
 14 dealing with an individual witness you really can't
 15 change horses in mid-stream. When you're dealing with
 16 topics, you can. And this is a corporate designee
 17 deposition. This is not an individual witness
 18 deposition.
 19 MR. NARESH: Which topic?
 20 MR. TILLERY: Excuse me a second.
 21 MR. NARESH: Go ahead.
 22 MR. TILLERY: If that's the case, and you
 23 are, then if you're telling us we're not going to
 24 proceed otherwise, and if you're terminating it you
 25 need to make that statement otherwise she's going to

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1 resume the dep.
 2 Now, if you do, let me explain to you what
 3 I'm going to do. Well, let me first hear what you're
 4 going to do. Are you moving to terminate the
 5 deposition?
 6 MR. NARESH: I'd like to know -- I have the
 7 quote from you, and it's on the record.
 8 MR. TILLERY: I understand you've read it.
 9 MR. NARESH: And I hear that you're changing
 10 the representation you made earlier, which I do take
 11 issue with. But now you're saying that she's taking a
 12 different topic than the one you said earlier. So
 13 I want to hear on the record what your position is,
 14 because you've changed your position in the middle of
 15 this deposition. So please tell me what topic
 16 Ms. Fiorillo is supposedly asking questions about that
 17 is different than the one that you told me about
 18 earlier?
 19 MR. TILLERY: You know, I don't have the
 20 topics in front of me. I think it's 31(d) is what
 21 I think it is, but I haven't memorized all the topics
 22 but it deals with worker safety. That's exactly what
 23 he has in front of him.
 24 MR. NARESH: Then why did you say something
 25 different earlier on the record?

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1 MR. TILLERY: Counsel, I'm not here to answer
 2 questions. But I will tell you, if you tell us what
 3 you're doing, what your plan is with respect to the
 4 depo, then I'll respond to it. She's going to go ahead
 5 with -- our intention is she's going to go ahead with
 6 the questioning. You tell us what you are going to do.
 7 MR. NARESH: My -- we proceeded with an
 8 agreement that, quote, she's taking only one topic,
 9 you're the rest, Mr. Tillery. The only topic she's
 10 addressing is the epidemiology of the Widnes, the
 11 epidemiology study he coauthored. I said this is the
 12 condition I will agree to proceed, that --
 13 MR. TILLERY: So you don't have any problem
 14 with me asking these questions of the witness?
 15 MR. NARESH: No. And then I said: what
 16 I don't agree that if you tag out then Ms. Fiorillo is
 17 going forward and you're not stepping back in. And you
 18 said "correct, proceed".
 19 MR. TILLERY: So you don't have any objection
 20 with her proceeding with the questions?
 21 MR. NARESH: On the question, the topic of
 22 the Widnes statement.
 23 MR. TILLERY: Oh, so but she can only talk
 24 about that study, right?
 25 MR. NARESH: That's what you agreed with me

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1 on.
 2 MR. TILLERY: Okay, so what you're saying is
 3 I can't come back and ask further questions, and she
 4 can't ask any questions other than that one study, when
 5 we've only touched about half of his topics?
 6 MR. NARESH: Look, if you wanted to do -- if
 7 you had a different --
 8 MR. TILLERY: Excuse me. Is that what you're
 9 saying? Because I think the judge might find a little
 10 bit of humor in that.
 11 MR. NARESH: I think the judge might find a
 12 little humor in the fact that you -- we specifically
 13 had an agreement, and if you're renegeing on the
 14 agreement just tell me you're renegeing on it.
 15 MR. TILLERY: No, here's what --
 16 MR. NARESH: Are you renegeing on the
 17 agreement. Steve?
 18 MR. TILLERY: No, I'm not. Now tell me what
 19 you're going to do? Here's your choice. You can have
 20 me ask the questions, or you can have
 21 Rosemarie Fiorillo ask. Which one do you want?
 22 MR. NARESH: No, you also agreed that you're
 23 not asking further questions on this topic.
 24 MR. TILLERY: That's right, she was going to
 25 ask them on this topic. I said "topic", that's right.

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1 She was gonna ask on this topic. She prepared for this
 2 topic. And that's what I was trying to explain that
 3 under a corporate designee structure we get to have
 4 people, different lawyers prepare. There might be
 5 multiple, dozens of topics, and people prepare and they
 6 present in a corporate designee context. That's what
 7 she's done. Now, if you want me to take these instead
 8 of her, I'm happy to do that, right now, and I'll be
 9 happy to finish this line until this gentleman has to
 10 leave for whatever he's going, where you told me he has
 11 to go. If you want on the other hand for her to do it,
 12 she can do it. But if you're saying I can't proceed
 13 and she can't proceed, you're effectively terminating
 14 the dep.
 15 MR. NARESH: Look, I'm just having a hard
 16 time understanding why you said something that you
 17 didn't mean.
 18 MR. TILLERY: So --
 19 MR. NARESH: If you could just help me
 20 understand that, then maybe we can find a path forward
 21 here.
 22 MR. TILLERY: We're chewing up the clock. Go
 23 ahead and do what you're going to do, and then I'll
 24 respond. I've already told you what's happening.
 25 MR. NARESH: What I'm asking you -- you told

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1 me the topics --

2 MR. TILLERY: I said topics.

3 MR. NARESH: Hang on. Don't interrupt me.

4 You told me the topic, and you told me what the topic

5 is, and I have it on the record. We did it on the

6 record for a reason. And now you've changed your

7 topic, you've expanded the topic, and you still won't

8 give me a number, you won't tell me what topic she's

9 talking about. And I do have an issue with the fact

10 that you're continuously changing the scope of what

11 we're talking about here. I want to have an

12 understanding on what your position is. That's

13 something you're gonna live with.

14 MR. TILLERY: Look, here is what it looks

15 like. You haven't prepared him on this study. If

16 that's it, that's no problem, you just tell us and you

17 can prepare him later. But if that's -- you know,

18 there's no sense in beating around the bush about it.

19 If he's not prepared, that's fine, we can deal with it

20 later. But the bottom line from my perspective is

21 simple. It's a topic. We can ask the questions.

22 I can read the topic in, if you want me to get it.

23 I don't have it memorized. I'm happy to read it into

24 the record. But if you want me to -- if you want the

25 dep to go forward and you're not terminating -- if

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1 you're terminating it, you have the right to do that.

2 The practice rules permit you to terminate the dep.

3 Now you probably are going to be facing a motion that

4 requires you to pay all of our travel expenses back to

5 England, okay, and our lodging expenses but that's on

6 you. That's your decision. So I'm just telling you,

7 our intention will be to immediately seek compensation

8 for the return trip.

9 MR. NARESH: That was a very self-serving

10 description of what just happened earlier today. What

11 I am looking for -- we had an agreement, just two hours

12 ago, right before lunch on what Ms. Fiorillo was going

13 to ask questions about. You are now renegeing on your

14 agreement. And now, all I'm asking you to do, so that

15 I can make a decision over where to go from here, is

16 what your position is now that you've changed your

17 position?

18 MR. TILLERY: I just told you.

19 MR. NARESH: No, no, no, you still have not

20 identified for me -- the only thing you've identified

21 for me is something that you've renegeed on. And so if

22 you have a topic for which Ms. Fiorillo and only

23 Ms. Fiorillo is asking questions, then you need to

24 identify that for me by number since you've already

25 renegeed on what you did by description.

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1 MR. TILLERY: It's the same one she just

2 asked about. There it is. It's 31(d). I think that's

3 what I told you before.

4 MR. NARESH: Okay, so let's go back to

5 Ms. Fiorillo and ask your questions for 20 minutes on

6 31(d) and only on 31(d), no-one else asks questions on

7 31(d), and then we'll end at 3 o'clock.

8 MR. TILLERY: Well, here, I think we can

9 probably get this clarified, since you're saying --

10 you're effectively saying that's the end of it, I can't

11 ask others. So we'll go ahead and present the motion

12 to the court -- excuse me, counsel. We'll present our

13 motion to the court unless we get an understanding that

14 we can resume this deposition on the remaining topics

15 he hasn't spoken to. And if that's your position that

16 we can't, no problem, but we'll take it to the judge.

17 MR. NARESH: What we ought to do is, rather

18 than waste any more time, is -- I believe you've

19 renegeed on an agreement, but if Ms. Fiorillo has more

20 questions on 31(d) she should ask the questions, I'll

21 object on scope as appropriate, and go from there.

22 MR. TILLERY: We're happy to do that and she

23 can proceed with respect to the study that she was

24 talking about.

25 MR. NARESH: I may object on scope but that's

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1 fine.

2 MR. TILLERY: Was this witness designated for

3 31(d)?

4 MR. NARESH: He was designated for 31(d), 64

5 through 67. And then we had some discussions on 64 and

6 67 in our disclosure with you.

7 MR. TILLERY: So I think 31(d) is the topic.

8 MR. CRAIG: I want to make clear, Ragan, is

9 your position that 31(d) only covers epidemiological

10 studies of Syngenta employees?

11 MR. NARESH: I believe 31(d) says

12 occupational health and safety and then goes on from

13 there.

14 MR. TILLERY: And the study she's talking

15 about is an occupational health and safety --

16 MR. NARESH: Look, we can argue about scope

17 later. We can argue about that much later. Let's not

18 waste any more time. Let's go ahead. Let's do this

19 thing.

20 BY MS. FIORILLO:

21 Q. Can you read back the last question, my

22 question?

23 (Record read.)

24 MR. NARESH: I'll object to the scope.

25 BY MS. FIORILLO:

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1 Q. Your answer to my last question would be?
 2 A. My answer to your last question is, I'm
 3 unaware of what this paper has been used for. It's
 4 outside the scope of the topics I thought I was
 5 covering for on behalf of Syngenta.
 6 Q. This paper was published in 1981, is that
 7 right?
 8 MR. NARESH: Same objection. Can I have a
 9 standing scope objection with the understanding that
 10 you don't agree to it at this time.
 11 MS. FIORILLO: Yes.
 12 A. It says here it was published in 1981.
 13 BY MS. FIORILLO:
 14 Q. And the concern was that the potential hazard
 15 to spray workers had not been sufficiently explored; is
 16 that right?
 17 A. It says "Concern has been expressed,
 18 nevertheless, that the full extent of the potential
 19 hazard to spray workers has not been sufficiently
 20 explored."
 21 Q. And paraquat came on the U.S. market in 1965;
 22 is that right?
 23 A. I am not sure when it first was sold in the
 24 U.S.
 25 Q. And when was it first sold within the U.K.?

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1 A. Before that, in the early '60s.
 2 Q. And again, two of these authors are from ICI
 3 which is a predecessor of the company of Syngenta; is
 4 that right?
 5 A. Oh, one of them is from plant protection,
 6 London, Dunlop Estates. I guess that must be ICI as
 7 well.
 8 Q. And so whether -- so if my math is correct,
 9 so 19 years after paraquat had been on the U.K. market,
 10 Syngenta still had not understood paraquat's long-term
 11 health effects; is that right?
 12 A. It says claims have been made, it doesn't say
 13 who made them.
 14 Q. But ICI was performing this study, right?
 15 A. ICI is performing this study, yes.
 16 Q. To answer the question of what the potential
 17 long-term health effects of paraquat were, right?
 18 A. I haven't read this paper so I'd have to take
 19 your word for it.
 20 Q. Okay, would you take a few minutes to read
 21 it?
 22 A. I can take quite a few minutes, sorry.
 23 (Pause while witness reads document.)
 24 So I've read the introduction. Do I need to
 25 know more than that?

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1 Q. Yes.
 2 A. Is there any area you'd particularly like to
 3 draw my attention to?
 4 Q. No, we're going to cover several areas.
 5 A. Okay. My concern is that even having read
 6 it, it would be outside of Syngenta occupational health
 7 and therefore outside of my remit.
 8 Q. There was no question pending, but can you
 9 read back his answer?
 10 (Record read.)
 11 MR. TILLERY: So he's not going to answer
 12 questions?
 13 MR. NARESH: You can ask questions.
 14 By the way, we still have an understanding on the ongoing
 15 scope objection.
 16 A. Okay, I've very quickly skim read it. And
 17 I think I see the shape of it.
 18 BY MS. FIORILLO:
 19 Q. In your role at Syngenta do you review
 20 studies regarding the long-term health effects of
 21 paraquat exposure?
 22 A. Only to employees, by which I mean Syngenta
 23 employees.
 24 Q. For the paraquat mortality study you
 25 authored, did you review studies regarding the

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1 long-term health effects of paraquat exposure?
 2 A. I did not.
 3 Q. And what was your role in coauthoring the
 4 Widnes study?
 5 A. My key role was the identification of the
 6 synthetic routes and the history of the -- the history
 7 of the plants at Widnes.
 8 Q. Did you say synthetic routes?
 9 A. The routes of synthesis. The manufacturing
 10 processes. Sorry, introducing a new term for the same
 11 thing.
 12 Q. Have you ever given a presentation discussing
 13 the occupational health of applicators and sprayers?
 14 A. I may have given a presentation on behalf of
 15 somebody else.
 16 Q. So what does that mean?
 17 A. I may have given someone else's presentation
 18 because they were unable to do so.
 19 Q. And that was about paraquat?
 20 A. It would have been. It would have been about
 21 paraquat.
 22 Q. Do you remember when that was?
 23 A. My recollection is that it was in Portugal a
 24 long time ago.
 25 Q. And to whom were you giving it?

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1 A. People in Portugal I'm afraid is the best
2 I can remember.
3 Q. And do you remember why you were giving it?
4 A. Because the normal presenter was unable to
5 present.
6 Q. But why were you discussing the occupational
7 health of applicators of paraquat?
8 A. Presumably it was for -- the population there
9 needed to know about it.
10 Q. Looking back at the Howard study. The study
11 compared 27 paraquat sprayers to two control groups; is
12 that right?
13 A. That's how I read it.
14 Q. And in one control group of what they call
15 general plantation workers, some of those men may only
16 occasionally work in areas where paraquat was recently
17 sprayed; is that right?
18 A. Where does it say that, please?
19 Q. At the top of page 736:
20 "One was a group of general workers, some of
21 whom may occasionally work in areas recently sprayed
22 with paraquat ..."
23 Do you see that?
24 A. Yes.
25 Q. Is that right?

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1 A. That's what it says.
2 Q. And that group included rubber tappers and
3 harvesters; is that right?
4 A. Sorry, where does it say that?
5 Q. Where does it say that? If you go below
6 "POPULATION", in the second paragraph.
7 A. "It had been intended to use two groups of
8 estate workers".
9 Q. One of rubber tappers, and oil palm
10 harvesters; is that right?
11 A. Tappers, yeah.
12 Q. Tappers, I'm sorry.
13 "Some members of this group had received
14 minimal exposure to paraquat as a result of working in
15 areas of the plantations in which spraying had recently
16 be completed."
17 Is that right? The top left-hand corner on
18 page 2.
19 A. "Some members of this group". Which group is
20 "this group"? Yep.
21 Q. And that group had 24 people in it; is that
22 right?
23 A. Again, remind me where it says that?
24 Q. The second paragraph, top right:
25 "The final three groups consisted of 27

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1 sprayers, 24 general workers, and 23 factory workers."
2 Is that right?
3 A. Yes, that's what it says.
4 Q. And so we talked about one control group.
5 The other control group was a group of latex processing
6 factory workers who were not exposed to paraquat at
7 work; is that right?
8 A. I think that's what it has said.
9 Q. Again, that's at the top of page 2 in the
10 left-hand corner:
11 "... the other a group of latex processing
12 factory workers, who had received no known exposure to
13 paraquat in the course of their work."
14 Is that right?
15 A. Yeah.
16 Q. And the participants in this study were all
17 male; is that right?
18 A. I think that's what it said.
19 Q. And the sprayers averaged 3 to 5 years of
20 spraying; is that right?
21 A. I think I recall seeing that but can you
22 remind me where it says that?
23 Q. In the abstract.
24 A. Okay, yeah. (Reads.)
25 MR. NARESH: Do you have a stopping point?

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1 MS. FIORILLO: No.
2 MR. NARESH: We agreed the deposition would
3 end at 3, for his purposes.
4 MS. FIORILLO: Okay, so we'll continue.
5 MR. NARESH: We can do this on or off. I'll
6 just tell you that I view this document as related to
7 exposure related topics 31(b), 31(n) and 31(o) for
8 which we'd already agreed that there could be a
9 continuation of that deposition. And so that's what
10 I'd suggest that we do with this one, since in my view
11 this is an exposure document not an occupational health
12 document. I don't think we have to reach that
13 resolution right this second, but I think we can
14 continue that conversation later.
15 MR. TILLERY: To clarify, your view is that
16 Mr. Botham would cover this topic?
17 MR. NARESH: I think that this is an exposure
18 assessment document, for which Mr. Botham was
19 designated.
20 MR. TILLERY: We're willing to agree to that.
21 But I will tell you this. As I have -- as this
22 deposition has progressed, I looked at this 31(d) and
23 it very clearly says the methodologies, results,
24 significance and replication of, and Syngenta's
25 internal and external communications about studies

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1 investigating the health effects or other aspects of
 2 the safety of paraquat or any paraquat product or
 3 formulation, whether published or unpublished, and
 4 whether performed by or for Syngenta or by others,
 5 including investigations, investigating. And then (d)
 6 "occupational health and safety". And then it says
 7 "including". So you should, I hope, understand that it
 8 was a fair belief of ours when you listed this
 9 gentleman to cover this topic that occupational health
 10 and safety which is not limited to Syngenta employees
 11 would include a study upon which Syngenta has heavily
 12 relied that it's definitely occupational health and
 13 safety. But I'm willing to agree that we can do it
 14 with Mr. Botham.
 15 MR. NARESH: Again, I read it differently.
 16 I read this as an exposure document. I'm not saying
 17 that -- I think I'm right. You sound like you think
 18 you're right. But it sounds like we've reached a path
 19 forward on it, and I suggest we take that path.
 20 MR. TILLERY: We will.
 21 THE VIDEOGRAPHER: So we are concluding
 22 today's deposition at 3:04.
 23 (The deposition closed for the day at
 24 3:04 p.m. To be continued.)
 25

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1 Ragan Naresh, Esq.
 2 ragan.naresh@kirkland.com
 3 March 5, 2020
 4 RE: Hoffmann, Diana v. Syngenta Crop Protection LLC
 5 2/27/2020, Dr. Clive Campbell (#3984468)
 6 The above-referenced transcript is available for
 7 review.
 8 Within the applicable timeframe, the witness should
 9 read the testimony to verify its accuracy. If there are
 10 any changes, the witness should note those with the
 11 reason, on the attached Errata Sheet.
 12 The witness should sign the Acknowledgment of
 13 Deponent and Errata and return to the deposing attorney.
 14 Copies should be sent to all counsel, and to Veritext at
 15 cs-ny@veritext.com.
 16
 17 Return completed errata within 30 days from
 18 receipt of testimony.
 19 If the witness fails to do so within the time
 20 allotted, the transcript may be used as if signed.
 21
 22 Yours,
 23 Veritext Legal Solutions
 24
 25

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1 CERTIFICATE OF COURT REPORTER
 2
 3 I, Chanelle Malliff, an Accredited Real-time Reporter
 4 of the United Kingdom and Europe, hereby certify that
 5 the testimony of the witness Dr. Clive Campbell in the
 6 foregoing transcript, numbered pages 1 through 186,
 7 taken on this 27th day of February, 2020 was recorded
 8 by me in machine shorthand and was thereafter
 9 transcribed by me; and that the foregoing transcript is
 10 a true and accurate verbatim record of the said
 11 testimony.
 12
 13
 14 I further certify that I am not a relative, employee,
 15 counsel or financially involved with any of the parties
 16 to the within cause; nor am I an employee or relative
 17 of any counsel for the parties; nor am I in any way
 18 interested in the outcome of the within cause.
 19
 20
 21 **CHANELLE MALLIFF**
 22 Signed:
 23 Name: CHANELLE MALLIFF
 24 Date: February 28, 2020
 25

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1 Hoffmann, Diana v. Syngenta Crop Protection LLC
 2 Dr. Clive Campbell (#3984468)
 3 ERRATA SHEET
 4 PAGE ___ LINE ___ CHANGE _____
 5 _____
 6 REASON _____
 7 PAGE ___ LINE ___ CHANGE _____
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 20 _____
 21 REASON _____
 22 _____
 23 _____
 24 Dr. Clive Campbell Date _____
 25

1 Hoffmann, Diana v. Syngenta Crop Protection LLC
2 Dr. Clive Campbell (#3984468)
3 ACKNOWLEDGEMENT OF DEPONENT
4 I, Dr. Clive Campbell, do hereby declare that I
5 have read the foregoing transcript. I have made any
6 corrections, additions, or changes I deemed necessary as
7 noted above to be appended hereto, and that the same is
8 a true, correct and complete transcript of the testimony
9 given by me.

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Dr. Clive Campbell Date
*If notary is required
SUBSCRIBED AND SWORN TO BEFORE ME THIS
DAY OF _____, 20____

NOTARY PUBLIC