Children’s health issues have skyrocketed into the public consciousness in the past several years, and *Environmental Health Perspectives* has played a major role in publishing articles that address these concerns. In 1995, *EHP* published what was probably, at that time, the most comprehensive treatise on children’s environmental health (Carlson and Sokoloff 1995). Editorials promoting the need for more research and concern for children’s health issues were published in 1996 (Olden 1996) and 1997 (Goehl 1997). The expansion of *EHP*'s coverage of children’s environmental health continued in 1998 when we began dedicating one full issue each year to this topic. The increasing number of submitted manuscripts in this field prompted *EHP* to initiate a monthly children’s environmental health research section in July 1999.

In addition to the printed journal, *EHP* expanded its coverage of children’s environmental health on its website (http://www.epsonline.org). Last year, *EHP*'s website was awarded Tufts University’s Child and Family WebGuide’s five-star rating. Further enhancements of our website are planned, including an expansion to foster better communication between researcher and clinician.

To further enhance *EHP*'s coverage of children’s environmental health, we are very happy to announce the appointment of two outstanding scientists as our co-editors for the expanded Children’s Health section of the journal: Dr. Brenda Eskenazi of the School of Public Health at the University of California, Berkeley, and Dr. Philip J. Landrigan of the Department of Community and Preventive Medicine at Mount Sinai School of Medicine in New York City. Drs. Eskenazi and Landrigan, who have been at the forefront of the children’s environmental health issues, will help formulate the future directions for *EHP*'s coverage of this critical area of research. We are extremely pleased to have such outstanding scientists supporting our goals.

Dr. Eskenazi is a professor of maternal and child health and epidemiology in the School of Public Health at the University of California, Berkeley. She directs the Center of Excellence in Children’s Environmental Health Research at Berkeley, where she investigates pesticide exposure and its potential health effects in farmworker children and develops interventions to prevent exposure. Dr. Eskenazi is a neuropsychologist and epidemiologist whose longstanding research interest has been the effect of environmental exposures on male and female fertility, pregnancy, and children’s health. She has studied the health effects of numerous reproductive toxicants, including lead, environmental tobacco smoke, dioxin, and pesticides as well as other environmental agents. She is on the editorial boards of the *American Journal of Epidemiology* and the *Journal of Children’s Health* and is a fellow of the American College of Epidemiology.

Dr. Eskenazi has contributed widely to the field of children’s environmental health, including the Surgeon General’s report on smoking and women’s health, the World Health Organization’s Tobacco-Free Initiative report on environmental tobacco smoke, and the United States–Vietnam Committee on the Human Health and Environmental Exposures of Agent Orange and Dioxin in Vietnam. She also served for nearly a decade on the State of California’s Scientific Advisory Board for the Toxics Initiative (Proposition 65), which aimed to identify chemicals that were reproductive or developmental toxicants. Dr. Eskenazi currently serves on the Scientific Advisory Board of the Children’s Health Environmental Coalition, and the Study Design Working Group of the National Children’s Study.

Dr. Landrigan, a pediatrician, is the Ethel H. Wise Professor and chair of the Department of Community and Preventive Medicine at the Mount Sinai School of Medicine, and also holds a professorship in pediatrics at Mount Sinai. He directs the Mount Sinai Center for Children’s Health and the Environment. Dr. Landrigan is a member of the Institute of Medicine of the National Academy of Sciences (NAS) and is currently editor-in-chief of the *American Journal of Industrial Medicine*. He has served in many other capacities, including editor of *Environmental Research* and committee chair at the NAS on *Environmental Neurotoxicology* (NAS 1992) and on *Pesticides in the Diets of Infants and Children* (NAS 1993).

The report of the NAS committee that Dr. Landrigan chaired on pesticides and children’s health was instrumental in securing passage of the Food Quality Protection Act of 1996, the major federal pesticide law in the United States. In New York City, he served on the Mayor’s Advisory Committee to Prevent Childhood Lead Paint Poisoning and on the Childhood Immunization Advisory Committee. He is chair of the New York State Advisory Council on Lead Poisoning Prevention. From 1995 to 1997, Dr. Landrigan served on the Presidential Advisory Committee on Gulf War Veteran’s Illnesses. In 1997 and 1998, Dr. Landrigan served as senior advisor on children’s health to the administrator of the U.S. Environmental Protection Agency (EPA). He was responsible at the U.S. EPA for helping to establish a new Office of Children’s Health Protection.

The 1997 editorial on children’s environmental health issues ended with the statement “We intend that *EHP* be an active voice for children’s advocacy.” With the enthusiastic support of our readership and the generous assistance of such noted scientists as Drs. Eskenazi and Landrigan, *EHP* will continue to fulfill that commitment.

Kenneth Olden  
Director, NIEHS  
Research Triangle Park, North Carolina  
olden@niehs.nih.gov

Thomas J. Goehl  
Editor-in-Chief, *EHP*  
Research Triangle Park, North Carolina  
goehl@niehs.nih.gov

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Environmental Health Perspectives and Children’s Environmental Health

Environmental Health Perspectives has become the world’s leading journal in children’s environmental health. The annual issues devoted to children’s health, published since 1998, have become the premier publication in the field. Coverage grew in 2000, and EHP now includes a special section on children’s health every month. Topics addressed have included the impacts of lead, PCBs, and pesticides on neurobehavioral development (e.g., Bauer et al. 2002; Eskenazi et al. 1999; Jacobs et al. 2002); asthma and air pollution (e.g., Delfino et al. 2002; Gehan 2002); endocrine disruption and reproductive health and development (e.g., Crisp et al. 1998; Eskenazi et al. 2002); dioxins and child health (e.g., Vreugdenhil et al. 2002); chemical contamination of breast milk (e.g., Landrigan et al. 2002a); and the costs of diseases of environmental origin in children (Landrigan et al. 2002b). The number of children’s health articles published each year in EHP has increased steadily from 12 in 1996 to 46 in 2001. Increasingly, too, EHP has recognized that problems in children’s environmental health are international in scope, and so has carried reports from around the world.

Now, with the beginning of this new academic year, EHP plans to increase its coverage of children’s environmental health again. EHP will publish more articles each month in the Children’s Health section and will continue the publication of monographs on children’s health. In addition, there will be more children’s health coverage in the Environews section and on the EHP Web site. We aim to publish a quarterly EHP Children’s Health edition beginning next year. We are delighted to have been named pediatric co-editors of EHP with responsibility for overseeing this increased effort. We pledge to work diligently with the entire EHP community to ensure a steadily increasing flow of manuscripts of ever-improving quality.

Children’s environmental health as a field has grown with extraordinary rapidity. Since 1998, 12 Children’s Environmental Health Research and Disease Prevention Centers have been established in medical schools and schools of public health across the United States with the joint support of the NIEHS and the U.S. EPA [see “On a Growth Curve: Children’s Environmental Health Centers,” pp. A570–A572 this issue]. These centers conduct multidisciplinary basic and applied research as well as community-based prevention research. They have become powerful generators of new knowledge on the environmental causes of developmental disabilities, including learning disabilities and autism, and on the causes, triggers, and genetic determinants of pediatric asthma. These centers provided essential epidemiologic follow-up of children born in New York City after 11 September 2001. Eleven Pediatric Environmental Health Specialty Units have been formed with grants from the Agency for Toxic Substances and Disease Registry. These academic referral centers work collaboratively with practicing pediatricians and provide clinical service for children exposed to hazardous substances. The Ambulatory Pediatric Association has created a national fellowship program in environmental pediatrics that accepted its first trainees in July of this year. And planning is under way for the National Children’s Study, an ambitious prospective epidemiologic investigation that was proposed in 1998 by the President’s Task Force and authorized by the Children’s Health Act of 2000. This study will follow 100,000 children in all regions of the United States from early in pregnancy through adulthood to examine the impact of early environmental exposures on health and development over the life span.

Why has research in children’s environmental health expanded so rapidly? We trace this growth to two events. First, in 1993, the National Academy of Sciences (NAS) published a landmark report, Pesticides in the Diets of Infants and Children (NAS 1993). This study found that children have unique patterns of exposure to environmental toxicants as well as developmentally determined vulnerabilities that have no counterpart in adult life. It found that the approaches to risk assessment and regulation then in use—which focused on average population exposures and were based principally on the adult experience—potentially failed to protect children. It called for fundamental and far-reaching revisions in research, risk assessment, and regulation. The NAS report focused on pesticides, but the implications went far beyond. Second, one year later in 1994, the Children’s Environmental Health Network convened its first scientific conference on children’s environmental health. This gathering reaffirmed the special susceptibility of children, examined critically the gaps in knowledge of pediatric toxicology, and recommended development of a research agenda in children’s environmental health as an urgent national priority.

In 1996, those recommendations were codified into U.S. national policy with unanimous passage by both houses of Congress of the Food Quality Protection Act, which adopted all of the major recommendations of the NAS report. It requires that pesticide standards be set at levels protective of children’s health. It mandates screening of chemicals for endocrine toxicity. It requires the imposition of safety factors in regulation when data on developmental toxicity are lacking. It set the stage for the establishment of the U.S. EPA’s Office of Children’s Health Protection in 1996, for the Presidential Executive Order of 1997 (Clinton 1997) requiring all federal agencies to reduce environmental threats to children’s health, and for the current outpouring of research.

There has occurred a similar, more recent burst of activity in children’s environmental health internationally. The World Health Organization has created a Task Force in children’s environmental health in response to growing concerns by member nations about the contributions made by environmental threats to the global burden of pediatric disease (Brundtland 2002). Its mission is to prevent disease and disability caused in children by chemical, physical, and biological threats. In the past three years, the task force has organized major international meetings in Manila, Washington, and Bangkok to raise consciousness and to disseminate knowledge about children’s health worldwide [see “World’s Children Threatened.” EHP 110:A290 (2002)]. At the Bangkok meeting, scientists and policy makers issued a statement committing themselves to work together to protect the health of all children (WHO 2002). The theme of World Health Day 2003 will be “Healthy Environments for Children.”

We anticipate that in the years ahead publication of research in children’s environmental health from nations around the world will continue to increase. A sound infrastructure has been established, and newly trained scientists of many disciplines are coming into the field. Extraordinary interdisciplinary synergy has been seen
in the United States in the Children’s Environmental Health Centers, and these will continue to be uniquely important foci of scientific excellence. We expect that new knowledge will be gained of children’s environmental exposures, that gene–environment interactions will be elucidated, that breakthroughs in understanding the environmental causes of disease in children will be made, and that community-based intervention research will provide a sound basis for prevention. It will be our responsibility to continue EHP’s proud tradition of publishing outstanding research in children’s health.

Brenda Eskenazi
University of California, Berkeley
Berkeley, California
eskenazi@berkeley.edu

Philip J. Landrigan
Mount Sinai Medical Center
New York, New York
plandrigan@mssm.edu

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Editorials

Our Children’s Health Coverage Is Growing

We’re expanding EHP’s coverage of the environmental, medical, and policy issues that particularly affect children with a dedicated Children’s Health section guided by co-editors Brenda Eskenazi and Philip J. Landrigan.

We invite submissions in these areas.

Please send to:
Editors
Environmental Health Perspectives
ehpsubmit@niehs.nih.gov