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12 **UNITED STATES DISTRICT COURT**
13 **FOR THE NORTHERN DISTRICT OF CALIFORNIA**
14 **SAN FRANCISCO DIVISION**

15 IN RE: ROUNDUP PRODUCTS LIABILITY
16 LITIGATION

MDL No. 2741

HON. VINCE CHHABRIA

17 THIS DOCUMENT RELATES TO:

18 ALL ACTIONS

**PLAINTIFFS' SUPPLEMENTAL
MEMORANDUM IN RESPONSE TO
MONSANTO'S CONTENTION THAT
PLAINTIFFS' EXPERTS OFFERED NEW
OPINIONS**

TABLE OF CONTENTS

1

2 TABLE OF CONTENTS..... i

3 INTRODUCTION 1

4 ARGUMENT 2

5 I. Dr. Ritz and Dr. Portier Did Not Offer Any “New” Opinions During either Daubert

6 Hearing.....2

7 A. Dr. Ritz’s Opinions Regarding Confounding and Latency at the Daubert

8 Hearings Were Described in Her Reports and Discussed in her Depositions 2

9 1. Dr. Ritz Did Not Offer Any “New” Opinions about Confounding, and

10 Monsanto’s Claim that She Never Considered Adjusted Odd Ratios Is a

11 Complete Fabrication..... 2

12 2. Dr. Ritz Offered No “New” Opinion Concerning Latency..... 8

13 B. Dr. Portier Did Not Offer Any “New” Opinions During Daubert 12

14 II. Even If New Opinions Were Disclosed, It Would Not Preclude Their Consideration by

15 the Court..... 13

16 CONCLUSION..... 15

17

18

19

20

21

22

23

24

25

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INTRODUCTION

1
2 On March 19, 2018, the Court issued PTO 43, in which the Court ordered the Plaintiffs to
3 bring back certain experts for additional days of testimony because, *inter alia*, that there was
4 insufficient time during the *Daubert* hearing, held during the week of March 5, 2018, to address the
5 epidemiology opinions of Drs. Ritz and Portier. The Court further provided that it intended to ask
6 follow up questions at the second *Daubert* hearing, which the Court scheduled for April 4 and 6,
7 2018. See PTO No. 43. In addition to PTO No. 43, at the oral argument on March 14th, the Court
8 identified many of the epidemiology issues the Court wanted answered. The Plaintiffs came
9 prepared on April 4th and 6th to answer the issues that the Court identified. None of that testimony
10 is “new”; to the extent that it was presented in a different format or with hypotheticals or examples,
11 it remains squarely within the scope of the experts’ opinions as set forth in their reports. To rule
12 otherwise would be to penalize the Plaintiffs for doing exactly what the Court asked: to address the
13 questions that the Court posed during the *Daubert* hearing of March 5 - 9, 2018 at the oral argument
14 on March 14th.

15 In its supplemental brief, Monsanto incorrectly argues that Plaintiffs’ experts Dr. Beate Ritz
16 and Dr. Christopher Portier offered “new” opinions during their *Daubert* testimonies and that,
17 because these opinions were not previously disclosed, they should be excluded from this Court’s
18 consideration. In other words, Monsanto asks this Court to ignore relevant testimony—testimony
19 that was subjected to rigorous cross-examination and is based on sound scientific methodology.
20 Further, as stated above, it is evidence that is encompassed in both experts’ opinions. Monsanto’s
21 argument has no merit.

22 First, the supposedly “new” opinions that Monsanto seeks to exclude are not new at all. As
23 explained below, each of these opinions were disclosed in Dr. Ritz’s and Dr. Portier’s expert reports
24 and were discussed during their depositions. Thus, the *Daubert* testimony of Drs. Ritz and Portier
25 only served to further explicate or elaborate upon existing opinions. Second, even if these opinions
26 were deemed “new,” the unique posture of this case would militate against excluding the testimony.
27 The Court is engaged in a highly complex *Daubert* proceeding, far removed from any jury. The
28 risk of “sandbagging” before a jury is not at issue. Plus, the opinions that Monsanto now

1 challenges were all proffered in response to questions raised by the Court, and Monsanto has been
2 afforded a complete opportunity to cross-examine and challenge those opinions during the
3 proceeding. In the absence of any prejudice and considering the purpose of these *Daubert*
4 proceedings, the Court is fully within its discretion to consider them.

5 **ARGUMENT**

6 **I. Dr. Ritz and Dr. Portier Did Not Offer Any “New” Opinions During either *Daubert***
7 **Hearing**

8 At the heart of Monsanto’s supplemental brief is the assertion that Dr. Ritz and Dr. Portier
9 offered “new” opinions during the *Daubert* hearings. This is simply untrue. As discussed below,
10 every “new” opinion challenged by Monsanto was either clearly disclosed in their expert reports
11 and/or in their various depositions.

12 **A. Dr. Ritz’s Opinions Regarding Confounding and Latency at the *Daubert* Hearings**
13 **Were Described in Her Reports and Discussed in her Depositions**

14 **1. Dr. Ritz Did Not Offer Any “New” Opinions about Confounding, and**
15 **Monsanto’s Claim that She Never Considered Adjusted Odds Ratios Is a**
16 **Complete Fabrication**

17 At oral argument, Monsanto told this Court:

18 Dr. Ritz does not present and did not present, in this hearing or in her Expert Reports,
19 an opinion that was predicated on the adjusted Odds Ratios. She repeatedly went to
20 the unadjusted Odds Ratios as providing a basis for her opinions. So we don’t have an
21 opinion from her that is based upon the properly adjusted Odds Ratios.

22 Tr. of Proceedings on March 14, 2018 (“*Daubert* Argument”) at 8:13-18. This is plainly false. Not
23 only did Dr. Ritz discuss her consideration of adjusting for other pesticides, but she specifically
24 *invited* Monsanto’s counsel to discuss how she considered this issue for each study during her
25 deposition.

26 In Dr. Ritz’s initial report, she specifically defines confounding, *see* Exh. 1¹ at 7, and then
27 explains that she considered confounders in arriving at her opinion:

28 *The most highly adjusted estimates (also known as “fully adjusted” models) are the estimates that adjust for as many confounding variables as possible, such as adjusting for age, sex, race, and also sometimes other pesticide exposures. This is relevant because it gives the reader confidence that the findings are most likely due*

¹ All exhibits cited are from the official *Daubert* record.

1 ***to glyphosate/Roundup exposure, instead of another potential cause that acts as a***
 2 ***confounder.*** As such IARC’s Working Group conducted their own meta-analysis
 3 using solely the most highly adjusted estimates from the same studies, and reported a
 4 meta risk-ratio of 1.3 (95% CI, 1.03–1.65), with consistent findings across studies
 5 (low heterogeneity). I concur with the IARC conclusions after ***conducting my own***
 6 ***independent analysis of the studies***[.]

7 *Id.* at 16 (emphasis added). Throughout her report, Dr. Ritz discusses various odds ratios (“ORs”)
 8 from the published literature, many of which did adjust for exposures to other pesticides.
 9 Specifically, Dr. Ritz discusses De Roos 2003, which adjusted for 47 other pesticides, and she
 10 explained that “the OR for glyphosate was among the highest of 47 pesticides tested, which
 11 suggests that glyphosate may indeed be the pesticide most strongly related to NHL in these farmers
 12 among all pesticides they used.” *Id.* at 19. Dr. Ritz also reported ORs from Cantor 1992, Hardell
 13 1999, Hohenadel 2011, Schinasi 2014, and Chang 2016, which also adjusted for exposures to other
 14 pesticides. *Id.* at 14. She also discussed the effects of co-exposures of glyphosate and other
 15 pesticides in the McDuffie 2001 study. *Id.* at 18. And, while Dr. Ritz did not specifically report the
 16 multivariate ORs for Hardell 2002 and Eriksson 2008, she reviewed those studies and considered
 17 the ORs of the multivariate analyses. *See* Ritz Sept. Depo. at 154:19-158:5. Regarding the North
 18 American Pooled Project (“NAPP”), Dr. Ritz did not have the fully-adjusted ORs when she
 19 prepared her initial report, but she did review them later and concluded “[t]he only way it changed
 20 my opinion is that it solidified the opinion that there is, in fact, carcinogenicity to go after.” *Id.* at
 21 429:21-23.

22 Dr. Ritz also discussed the confounding issue in her rebuttal report, responding to criticism
 23 from Monsanto’s experts that she did not properly consider confounding by exposures to other
 24 pesticides. Exh. 2 at 7, 9-10. She explained that throwing everything into a model can generate its
 25 own bias and that epidemiologists are very careful in deciding what, if anything, to adjust for:

26 This generates the necessity to distinguish between true confounding co-exposures
 27 (pesticides that truly cause NHL and are also associated with glyphosate exposures)
 28 and co-exposures that solely act as ‘proxy measures’ for glyphosate/GBFs but do not
 cause NHL. ***For the latter, one should not adjust since this would lead to over-
 adjustment and introduce major bias.***²

² During the first day of *Daubert* testimony, after Dr. Ritz had left the stand, the Court queried
 “unless we are confident that there’s not a link, I don’t understand why we would ever think it is not
 a good idea to adjust.” *Daubert* Tr. 211:7-9. This is the reason—over adjustment can, itself, inject

1 ...

2 [T]he issue of confounding control as raised by both defense experts is clearly out of
 3 step with the current thinking in epidemiology. This methodology, used by both Drs.
 4 Rider and Mucci, is not the methodology that is currently accepted by
 5 epidemiologists, especially those who study and analyze complex exposures. For
 6 example, multiple exposures have to be cautiously addressed in terms of *what is or
 7 isn't a risk factor for the outcome or should be considered a confounder. We have
 8 to consider prior knowledge, and just claiming that something is a confounder is
 9 not enough. Rather, the question would be how strong a confounder we would need
 10 to change the results we observe and in what direction this change would be* [not all
 11 confounding changes the estimates away from the null]; and *what variables would
 12 qualify as confounders*].

13 Exh. 2 at 7, 9-10 (emphasis added). Dr. Ritz's critical evaluation about whether there is true
 14 confounding is proper science. *See, e.g.,* Ref. Man. at 591 ("Often the mere possibility of
 15 uncontrolled confounding is used to call into question the results of a study. This was certainly the
 16 strategy of some seeking ... to undermine ... studies ... linking cigarette smoking to lung cancer.
 17 The critical question is whether it is plausible that the findings of a given study could indeed be due
 18 to unrecognized confounders."); *see also In re Abilify (Aripiprazole) Prod. Liab. Litig.*, No. 3:16-
 19 MD-2734, 2018 WL 1357914, at *19 (N.D. Fla. Mar. 15, 2018) (rejecting defendant's attempt to
 20 discredit an epidemiology study during general causation phase because of potential confounders:
 21 "[C]onfounding is a 'reality' inherent in all epidemiological research... It cannot be said that an
 22 epidemiological analysis ... is unreliable evidence ... simply because it did not account for all
 23 possible confounders. Only when a methodology' is so incomplete as to be inadmissible as
 24 irrelevant' should it be excluded[.]"). Indeed, Monsanto's own epidemiologist, Jennifer Rider,
 25 agrees:

26 Well, I think this is why epidemiologists need to know, you know, something about
 27 the relationship between the exposure and the outcome to determine what those
 28 potential confounders might be. *The wrong approach is just simply, you know,
 throwing everything in a model.* You have to think that that could actually be a
 common cause potentially of the exposure and the outcome.

major bias into a study, rendering the results meaningless. When the Court asked this question,
 Plaintiffs offered to put Dr. Ritz back on the stand to answer it, but the Court declined. That said, it
 is stated in her report and she discussed this issue during her second *Daubert* testimony. Ritz
 Second *Daubert* at 18:1-14.

1 Rider Depo. at 46:12-21 (emphasis added).³ And, in the epidemiological studies that looked at
2 confounding from other pesticides, there was *no* indication other pesticides had any impact:

3 **Cantor 1992:** “There was minimal evidence for confounding of results for any
4 single pesticide by exposure to pesticides belonging to other chemical families.” Exh.
222, pg. 2461.

5 **McDuffie 2001:** “Among individual pesticides, carbaryl, lindane, DDT, and
6 malathion insecticides, and captan fungicide user/nonuser were included in the initial
7 multivariate model and found not to contribute significantly to the risk of NHL.” Exh.
21, pg. 1160.

8 **De Roos 2003:** “Adjustment for multiple pesticides suggested that there were few
9 instances of substantial confounding of pesticide effects by other pesticides.” Exh.
15, pg. 7.

10 **Andreotti 2018:** “In our study, controlling for other pesticides did not change the risk
11 estimates.” Exh. 17, pg. 7.⁴

12 During her original deposition, Monsanto’s attorney Eric Lasker spent considerable time
13 asking Dr. Ritz about her opinions related to confounding and Dr. Ritz made it abundantly clear that
14 she considered the issue. Even Mr. Lasker pointed out that Dr. Ritz offered the opinion in her
15 report, prompting Dr. Ritz to invite Mr. Lasker to go through each study and discuss confounding:

16 Q. Dr. Ritz, we were talking about confounding, and I think *one of the points*
17 *you made in your report*, I think elsewhere, in analyzing or conducting a
18 study, you’d want to identify as best you can other risk factors for disease that
you’re studying to be able to see whether or not those are confounders;
correct?

19 A. It is correct that you’re always very worried about confounding no matter
20 what and that you’re identifying strong risk factors for the disease that also is
associated with exposure. ...

21
22 ³ Indeed, Dr. Rider’s definition and methodological approach to potential confounders is strikingly
23 similar to Dr. Ritz’s. Rider Depo at 45:21-48:11. Dr. Rider testified that the propriety of adjusting
24 for potential confounders depends upon one’s “biological knowledge” and the relationship between
the potential confounder and the disease. *Id* at 45:21-46:6. And Dr. Rider agrees with Dr. Ritz that
reflexive adjustment for *any* potential confounder is the “wrong approach.” *Id.* at 46:17.

25 ⁴ Monsanto’s concerns about confounding from other pesticides finds little support in the
26 epidemiological data for glyphosate. Indeed, as Dr. Aaron Blair noted in a publication devoted
27 expressly to the issue of confounding in occupation epidemiology: “It is rare to find substantial
28 confounding in occupational studies (or in other epidemiologic studies for that matter), even by risk
factors that are strongly related to the outcome of interest.” Exh. 31 at 205. The reason for this is
that it is rare for an agent to be both associated with NHL *and* differentially associated with just
glyphosate use. In the epidemiological studies, other pesticides are either not strongly associated
with NHL or they are similarly distributed among glyphosate and non-glyphosate users.

1 ...

2 And so what that means is we have to convince ourselves that a variable is a
3 confounder, meaning, there's an underlying true association between that
4 variable and the outcome as well as that variable and the exposure of interest
and that that variable is not just a proxy measure of the exposure that I'm
actually trying to evaluate.

5 ...

6 *So confounding is always a possibility especially with highly correlated*
7 *exposures.* So the intellectual challenge here is to decide how to treat these
8 variables. *Are they truly confounders in the sense that we are assuming that*
9 *glyphosate has no effect and all the effect comes from the other pesticide, or*
10 *are there one or two or three carcinogens, all of them contributing to the*
11 *risk of NHL, and how do we put those together in a model* if we -- if they're
12 highly correlated, we put them all three in the model, then they will just split
13 variance, and none of them will show anything.

14 ...

15 Q. Has there been, in fact, an epidemiological study conducted that you've
16 reviewed that would allow you to tease out that fact between the different
17 pesticide exposures?

18 [Objection omitted]

19 [A]. That depends on which study we are talking about because *confounding is a*
20 *study-specific issue.* So in some studies, one of these pesticides may be a
21 confounder. In another study, it might not be, and that would depend on the
22 timing of exposure.

23 ...

24 [Q]. Is there an epidemiological study that you've identified in the literature that
25 allows you to distinguish between glyphosate and other pesticides that are
26 potentially being used by that population to determine whether all of them are
27 risk factors, one of them is a risk factor, or distinguish between them?

28 [objection omitted]

[A]. Well, I think the De Roos 2003 study is actually a very good example where
even after we adjust for 40-some pesticides, the effect of glyphosate is still
apparent.

...

Q. Other than De Roos 2003, is there a study that you believe allows you to tease
out the effects of glyphosate versus another pesticide to determine which of
those are risk factors and which of those are just correlated?

A. I believe that the Eriksson study also made multiple adjustments and
glyphosate survived those, but it is real [sic] study to study. *We could go*
through all of them.

Ritz Sept. Depo. at 144:24-145:11, 167:12-20, 330:18-331:8, 333:4-333:16, 334:13-335:22

1 (emphasis added). Mr. Lasker, however, did *not* take Dr. Ritz up on her offer to go through each
2 study.⁵

3 This issue came up, again, during her original *Daubert* testimony. There, Dr. Ritz once again
4 defined confounders and discussed why it was important to be cautious in making adjustments for
5 other pesticides. *See* Daubert Tr. 14:24-16:22, 23:1-26:15. During that discussion, the Court asked
6 a clarifying question:

7 THE COURT: So your opinion is that if we don't know a pesticide is a risk factor for
8 NHL, we should not adjust for it in a study?

9 THE WITNESS: That's not -- sorry if it came across wrong. No. I'm not saying we
10 should not adjust for it, but when we adjust for it, we should really be careful about
11 how we interpret what's happening to the effect estimates. Most likely is that the
12 confidence intervals widen when you do this, and that the effect estimates -- if that
13 pesticide is highly correlated with the one under investigation, it is you who has to
14 decide whether it means as a confounder it's a true risk factor and I should adjust for
15 it, or it's a proxy, like the breath mint. Right? And nobody will take that away from
16 us. We just have to do that.

17 Daubert Tr. at 26:5-15. Clearly, nothing about this testimony was new. It was, in fact, nearly
18 identical to the discussion in her rebuttal report and deposition testimony.

19 Finally, at the April 4, 2018, hearing, the Court asked Dr. Ritz some specific questions about
20 her consideration of confounders. And, once again, her testimony was the same:

21 THE COURT: In the opinions that you provide in your reports and in your
22 testimony, you -- you place very heavy emphasis on numbers that are not adjusted for
23 other pesticide use. And I wanted to ask you sort of a methodological question, I
24 guess, which is: Is it okay in, you know, forming an opinion like this to place such
25 heavy emphasis on numbers that are not adjusted for other pesticide use when you
26 have numbers that are adjusted for other pesticide use that you could be emphasizing
27 instead?

28 THE [WITNESS]: I'm actually a little shocked that you say that because I didn't feel
that I did that. And I feel very misunderstood if that's what you read. ***Definitely, I
want to look at adjusted estimates. I looked at adjusted estimates.*** But for the early
studies, as I said, ***I would be just as worried about that sparse data bias which you
throw everything in to the model.*** And sometimes ***with the multiply adjusted
estimates, I'm a little worried about them putting things in there that they shouldn't
be putting in there.*** ...[W]hat I tried to convey is that even though we are generally
having a knee-jerk reaction of, oh, just put everything into the model, that is probably
the wrong approach. ***You have to think about which of the pesticides are risk
factors, are associated with glyphosate.*** The number issue. ***Can I adjust without***

⁵ Although, for the Eriksson 2008 study, Mr. Lasker did discuss the fully-adjusted estimate and how, if at all, it affected Dr. Ritz's opinions. *See* Ritz Sept. Depo. at 308:2-312:19.

1 *introducing bias? And all of that goes into my evaluation. And, yes, if I'm able to*
 2 *adjust for as much as I want to, I definitely want to see those numbers, and I think*
 3 *that the De Roos paper did a really good job in that. So if it came across like I*
 4 *didn't look at those, that's not what I intended.*

5 Tr. of Proceedings on April 4, 2018 (“Daubert II Tr.”) at 36:24-38:5 (emphasis added). Again,
 6 there was nothing new in her testimony. Rather, she continued to take the position that she did, in
 7 fact, review the fully adjusted ORs and they supported her opinion—although, she was cautious of
 8 mindlessly adjusting for all possible confounders.

9 Later in the hearing, the Court delved further into Dr. Ritz’s opinions, and asked whether Dr.
 10 Ritz’s opinion would change if she exclusively relied on fully-adjusted data, and she explained that
 11 it would not. *See id.* at 38:6-39:2. Again, testifying that her opinion does not change when she
 12 ignores certain data does not qualify as a new opinion—it is just clarification about her already-
 13 expressed opinion.

14 The entire premise of Monsanto’s argument is that Dr. Ritz offered new opinions at the
 15 *Daubert* hearing and that Monsanto was deprived of its ability to properly cross-examine her. As
 16 shown above, this is not true. Monsanto was fully apprised of Dr. Ritz’s opinions concerning
 17 adjustment for other pesticides and that opinion did not change from day one. Moreover, not only
 18 did Monsanto have an opportunity to explore this topic during her deposition, but Dr. Ritz
 19 specifically invited Monsanto’s counsel to do so. Any attempt to exclude this testimony because it
 20 is supposedly “new” and unfair is wholly without merit.

2. Dr. Ritz Offered No “New” Opinion Concerning Latency

21 At the *Daubert* argument, Mr. Lasker attempted to discredit Dr. Ritz’s opinions about latency,
 22 suggesting her opinion about the issue shifts depending on whether it supports her opinion. He told
 23 the Court:

24 The issue for Dr. Ritz with the Cantor Study is that it recorded a 1.1 Odds Ratio. It
 25 was not statistically significant. And you can look at the study to see how they
 26 analyzed that and came to that conclusion, but it was not an Odds Ratio that was
 27 helpful to the plaintiffs’ case. And Dr. Ritz, in her Expert Report, says, Well, true, but
 28 this is not informative, because of the latency. There’s only 6 to 10 years of possible
 time that could have elapsed in this study. And the issue, of course, is: Why would
 that same analysis not apply, then, to De Roos?

Daubert Argument at 18:25-19:9. This argument was also reasserted in Monsanto’s supplemental
 brief. *See* Suppl. Br. at 5:14-21. The argument, however, is dishonest. Dr. Ritz explained in her

1 report that the Cantor study was incorporated into the Lee study, which was then pooled into De
2 Roos 2003. *See* Exh. 1 at 18-19. She also explained that “[t]he Lee study utilized Cantor’s cohort
3 to build upon by including subjects from Nebraska who were diagnosed July 1983 to June 1986,
4 thus this study includes cases with a longer latency period, which improves confidence in results.”
5 Exh. 1 at 19. Then, at her deposition, Mr. Lasker asked about whether the latency concern in
6 Cantor applied to De Roos 2003, and Dr. Ritz agreed that it did, but explained that De Roos 2003
7 was slightly better because it contained longer latency data from Nebraska:

8 Q. Am I correct, though, in my understanding that the -- your concern -- while
9 you’re concerned about the latency period in the Cantor study as making that
10 study less informative, you do not have that same concern for the De Roos
2003 study?

11 A. ... ***With respect to latency, the same rules apply.*** However, she added some
12 studies that actually had longer latency. Again, the latency issue is an issue
13 because I’m missing cases that are truly caused by the exposure, if I believe
exposure causes disease, and so it has to do with early studies where I’m
catching these early cases and not yet the later ones.

14 ...

15 Again, the latency period in Cantor cannot be different from what the latency
16 period of the part of the data that is Cantor data in this pooled analysis is. So it
17 is what it is. However, adding additional states and additional data improves
what this study can do over the Cantor study. Plus it overall increases the
latency because we have the Nebraska study as well.

18 ...

19 Q. ... In the Cantor 1992 study, you raised concerns about a median latency
20 period of less than ten years as making that study which had a 1.1 adjusted
21 odds ratio, in your mind, less informative. And I’m just trying to understand if
that same concern about the median latency period of less than ten years
22 makes the De Roos 2003 study which has that hierarchy ratio that you cite less
informative.

23 ...

24 [A]. Cantor is part of the study; however, the beauty of pooled studies is that they
25 ***pool across different studies with different strengths and different***
weaknesses. It helps for the sample size. It helps for the statistical power. ***In***
26 ***this case, it helps even to adjust for more variables that you would be happy***
to adjust for, and overall, it’s more powerful because of all of these reasons.

27 ...
28

1 I think De Roos is a really excellent study that did everything we can do in
2 terms of pooling data in terms of relating the exposures that she had access to
3 to the outcomes *in adjusting and trying different methods* and in actually
4 lengthening the overall latency by including Nebraska.

5 ...

6 Q. My question is: Do you believe that the De Roos study is less informative
7 because it has a median latency period of less than ten years?

8 ...

9 [A]. So the De Roos study generally is a better study than the Cantor study because
10 it pools data. So it's not less informative. It's actually more informative, *that*
11 *it cannot go beyond the latency period of one of the studies included for that*
12 *data is a no-brainer.*

13 However, she added data with a longer latency; so she is actually now covering all
14 sorts of latency periods that we can look at. *And the longer, of course, we would*
15 *have a latency period, the more powerful.* If she had another study to add, it would
16 become more powerful, but it is an incremental step going from one study that may
17 be less informative to two studies that are more informative to three studies that are
18 even more informative.

19 Ritz Sept. Depo. at 214:13-223:1 (emphasis added).

20 This latency issue in De Roos 2003 did not arise during Dr. Ritz's first day of testimony, but it
21 did arise during her second. And, her testimony on April 4, 2018 was the same as her testimony
22 during her deposition. She stated that the latency issue was not as much of a problem in De Roos
23 2003 because it included data from a longer study and it was able to adjust for other pesticides.
24 Daubert II Tr. at 15:19-18:14. Nothing in her testimony changed.

25 Monsanto, however, argues that Dr. Ritz offered three new opinions during her second
26 *Daubert* testimony. These assertions are meritless.

27 First, Monsanto claims that "Dr. Ritz opined that latency would only be an issue for solid
28 tumors and apologized if she hadn't qualified that for blood-related tumors." Suppl. Br. at 6:5-6.
29 However, Dr. Ritz did not say that latency is only an issue for solid tumors. She testified, in
30 reference to a quote from her expert report on page 18-19, that "I'm phrasing here very carefully
31 what usually would be expected in cancer studies. And I apologize if I didn't qualify that for blood-
32 related cancers. *I thought I did*, but I guess I didn't." Daubert II at 14:16-19 (emphasis added). It
33 turns out, however, that Dr. Ritz was right—earlier in her report, at page 17, she qualified blood-
34 related cancers with a shorter latency period: "typically we would generally expect a *5-10 year*

1 minimum latency between exposure and disease onset for *blood system related cancers*. (However,
2 in an individual case the latency period could be as short as 1 year, and as long as 50+ years.)[.]”
3 Exh. 1 at 17 (emphasis added).

4 Second, Monsanto claims that “Dr. Ritz claimed for the first time at the April 4, 2018 *Daubert*
5 hearing that the latency problem in the Cantor study was ‘fixed’ in De Roos (2003) by the study
6 authors’ methodology adjusting for all other pesticides[.]” Suppl. Br. at 6. However, the word
7 “fixed” appears nowhere in the transcript. Instead, Dr. Ritz was answering the Court’s question
8 about other causes of the increased NHL in the US studies: “How do we know that it wasn’t
9 something else that was causing the NHL that the people in these groups were being exposed to
10 before they started being exposed to glyphosate given particularly that we know that farmers have
11 always had elevated cases of NHL?” *Daubert II Tr.* at 16:2-6. And, in response, Dr. Ritz explained
12 that this “hidden” confounder was not an issue in De Roos 2003 because the study was able to
13 adjust for all other possible pesticides and still observe a statistically-significant doubling of the
14 risk. This point was expressly noted in her expert report, where she explained that the De Roos
15 2003 data “suggests that glyphosate may indeed be the pesticide most strongly related to NHL in
16 these farmers among all pesticides they used.” Exh. 1 at 19. And, during her deposition, Dr. Ritz
17 explained that “I think the De Roos 2003 study is actually a very good example where even after we
18 adjust for 40-some pesticides, the effect of glyphosate is still apparent.” Ritz Sept. Depo. at 334:23-
19 335:2. There was nothing “new” in her *Daubert* testimony.

20 Finally, Monsanto argues that “Dr. Ritz presented a new theory regarding latency, speculating
21 that individuals who are exposed later in life would be more susceptible to cancer due to age or
22 weakened immune systems[.]” Suppl. Br. at 6:15-17. But, this opinion was *not* new. In Dr. Ritz’s
23 deposition, she clearly explained that age and susceptibility relate to latency:

24 I’m using this in terms of epidemiologic latency time which we are estimating was in
25 groups. ... *That’s why I also refer to age*. For example, *somebody who is already*
26 *age 60 and is more susceptible to exposures*, that cancer might just happen earlier
27 after exposure than in somebody where the cancer cell is dormant and *kept in check*
28 *by the immune system and other factors for 20 more years*. So the latency period is
really an average or minimum dependent on what population I’m looking at and
whether I allow for that population to age into the time when the cancers would
occur. So mostly I would imagine *I have higher power in my study when the people*
are aged into that age when they actually have cancer.

1 Ritz Sept. Depo. at 188:16-189:15 (emphasis added). Once again, Monsanto misrepresents the
2 facts.

3 Like Monsanto's assertions regarding confounding, these claims about new opinions related
4 to latency are completely unfounded. Dr. Ritz's opinions concerning latency have been consistent
5 and were not only explored during her deposition, but were described in her expert reports.

6 **B. Dr. Portier Did Not Offer Any "New" Opinions During *Daubert***

7 Monsanto claims that Dr. Portier offered two new opinions during his Daubert testimony on
8 April 6, 2018. This is not correct.

9 First, Monsanto argues that "Dr. Portier presented a series of complicated, hypothetical
10 calculations regarding what he opined were possible biases created by the imputation methodology
11 used in the 2018 Andreotti study." Suppl. Br. at 7. This imputation methodology, as reflected in the
12 slides discussing his opinion, comes from the Heltshe 2012 publication, which describes, in detail,
13 how the Agricultural Health Study ("AHS") imputed missing data in the cohort. Dr. Portier's
14 supplemental AHS expert report discusses this publication, noting that there was considerable bias
15 for the glyphosate imputation which "suggests either a systematic bias towards imputing no
16 exposure or there is some aspect of non-response that is correlated with cohort members having less
17 exposure during this period." Exh. 164 at 3. In his supplemental report, Dr. Portier explains that
18 "[i]f the bias is systematic, this would lead to a differential exposure misclassification potentially
19 assigning cohort members to the unexposed group when they are really exposed." *Id.* What is
20 more, Mr. Lasker questioned Dr. Portier about the Heltshe publication extensively at his
21 Supplemental deposition. During his testimony on April 6, 2018, Dr. Portier explained what this
22 means using a graphical display designed to explain the best and worst-case scenarios. His overall
23 opinion, however, was that "you still have differential exposure misclassification and you could
24 have a lot of non-differential exposure misclassification error" using the imputation methodology.
25 Tr. of Proceedings on April 6, 2018 ("Daubert III Tr.") at 56:9-13. This is not a new opinion—it is
26 reflected in his report and was also discussed, at length, in his AHS deposition. *See* Portier AHS
27 Depo. at 78:6-104:18.

28 Second, Monsanto asserts that Dr. Portier offered "new, undisclosed opinions seeking to

1 distinguish between latency concerns in cohort and case control studies.” Suppl. Br. at 7 20-22.
2 Remarkably, Monsanto chose *not* to depose Dr. Portier about his epidemiological opinions for any
3 length of time (other than the AHS). However, Dr. Portier explained in his expert report that
4 “[b]ecause the latency period for cancers can be long (years), evaluation of studies should consider
5 whether the exposure occurred sufficiently long ago to be associated with cancer development[.]”
6 Exh. 162 at 5. And, in discussing the epidemiological data, Dr. Portier discussed what the data
7 showed regarding latency. When the Court asked Dr. Portier to apply his understanding of latency
8 to a particular study, he responded, consistent with the opinion in his report, that De Roos 2003 “is
9 the strongest study with sufficient power[.]” *Id.* at 9:

10 Because De Roos adjusted for every other pesticide she could possibly adjust for,
11 unless there is a phantom pesticide out there or a phantom exposure causing the NHL,
12 then seeing NHL should worry you. If you hadn’t seen NHL in that study you might
 argue: Okay, the latency wasn’t long enough. But having seen it and having adjusted
 for everything, I would have to conclude that that’s a real NHL finding.

13 Daubert III Tr. at 150:12-19. This opinion, too, is not new—it is merely foundational to his overall
14 discussion of De Roos 2003 and the weight Dr. Portier placed on the study.

15 Thus, as with Dr. Ritz, Monsanto’s attempt to characterize Dr. Portier’s testimony as a “new”
16 opinion is unpersuasive and unsupported. Dr. Portier did not offer any new opinions—his
17 testimony simply consisted of deeper explication of already-disclosed opinions.

18 **II. Even If New Opinions Were Disclosed, It Would Not Preclude Their Consideration by** 19 **the Court**

20 Setting aside whether Drs. Ritz and Portier offered any “new” opinions at the *Daubert*
21 hearing, there is an issue of whether that even matters in this procedural context. In expert
22 discovery, “the party’s duty to supplement extends both to information included in the report and to
23 information given during the expert’s deposition[.]” Fed. R. Civ. P. 26(e)(2). “Any additions or
24 changes to this information must be disclosed by the time the party’s pretrial disclosures under Rule
25 26(a)(3) are due.” *Id.* And, under Rule 26(a)(3), supplementation must be done at least 30 days
26 before trial.” In the context of expert discovery, the obligation to supplement is tethered to a trial
27 date. And this makes sense—new facts emerge or developments occur and the disclosure deadlines
28 are designed to prevent undue surprise to opposing party when presenting to a trier of fact, where

1 “surprise” opinions can cause unfair prejudice.

2 Here, there is no trial date. For now, the Parties and Court are exclusively concerned with
3 general causation, defined by the Ninth Circuit as “whether the substance at issue had the capacity
4 to cause the harm alleged[.]” *In re Hanford Nuclear Reservation Litig.*, 292 F.3d 1124, 1133 (9th
5 Cir. 2002). This is a circumscribed inquiry. For example, in *Hanford*, the Ninth Circuit reversed a
6 district court for requiring plaintiffs, at the general causation phase, to prove causation at “specific
7 threshold dose levels of exposure.” *Id.* Thus, the purpose of this initial *Daubert* hearing is to allow
8 the Court, acting as a gatekeeper, to explore and understand the nuances and bases of Plaintiffs’
9 experts’ opinions relating to general causation only. And, as part of that process, the Court is
10 empowered to ask questions seeking clarification and even challenge Plaintiffs’ expert opinions. It
11 would make little sense to prevent Plaintiffs’ experts from responding to those questions because, in
12 preparing their expert reports, the expert did not foresee the Court’s specific question. This is
13 especially true when Monsanto is permitted to cross-examine any “new” response or opinion long
14 before the case ever gets submitted to a jury.

15 As the Court noted, *In re Seroquel Prod. Liab. Litig.*, No. 6:06-MD-1769-ORL-22D, 2009
16 WL 3806435, at *13 (M.D. Fla. June 23, 2009), is particularly applicable here. In *Seroquel*, the
17 plaintiffs’ expert decided to proffer an entirely new opinion concerning the potential dose-response
18 of a drug on a disease. *Id.*, at *13. That opinion was offered only a few weeks before the *Daubert*
19 hearing. The *Seroquel* court held that “[i]n the ordinary toxic tort case, in which the parties often
20 have only a few months to evaluate the expert testimony proffered by the opposing side prior to
21 trial, ... failure to promptly form and voice an opinion on dose-response ... would likely result in
22 exclusion of her testimony.” *Id.* But, “[t]he circumstances of th[e] MDL counsel against such a
23 result” because “the parties have had many months to develop and examine the testimony of
24 Plaintiffs’ general causation experts” and the defendant “was able to test these opinions at the
25 *Daubert* hearing ... and will have ample time to prepare a response to the opinions before her trial
26 testimony is taken.” *Id.* Thus, according to the court, the defendant “suffered no apparent prejudice,
27 as counsel for the company had ample opportunity to question ... these new opinions at the *Daubert*
28 hearing.” *Id.*

1 Here, unlike the expert in *Seroquel*, there is absolutely no evidence that Dr. Ritz or Portier
2 offered a substantially new opinion—at worst, Dr. Ritz and Dr. Portier merely explained in greater
3 detail the bases of their already-disclosed opinions. That said, the reasoning in *Seroquel* applies
4 with equal force. Like the defendant in *Seroquel*, Monsanto has not suffered and will not suffer any
5 prejudice in this case. Neither Dr. Ritz nor Dr. Portier are expected to be testifying to a jury in the
6 case any time soon—the parties still have to work up general liability and any potential trial picks.
7 Moreover, Monsanto was given ample time and opportunity to cross-examine both Dr. Ritz and Dr.
8 Portier about these allegedly “new” opinions, and, in fact, Monsanto took that opportunity. Like the
9 court in *Seroquel*, this Court should not exclude otherwise relevant and important testimony.

10 Ultimately, this Court has broad discretion to consider or restrict new opinions offered during
11 a *Daubert* hearing. And, considering many of these “new” opinions were offered in response to the
12 Court’s inquiry, it would only make sense for the Court to exercise its discretion and consider these
13 important and relevant opinions in the context of the overall *Daubert* analysis.

14 CONCLUSION

15 For the foregoing reasons, the Court should reject Monsanto’s effort to exclude any testimony
16 from the *Daubert* hearings, and it should consider the entire record before it.

17 DATED: April 11, 2018

Respectfully submitted,

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CERTIFICATE OF SERVICE

I, R. Brent Wisner, hereby certify that, on April 11, 2018, I electronically filed the foregoing with the Clerk for the United States District Court for the Northern District of California using the CM/ECF system, which shall send electronic notification to counsel of record.

/s/ R. Brent Wisner
R. Brent Wisner

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