WHAT CPSC's STAFF EXPERTS CONCLUDED	HOW THREE CSPC COMMISSIONERS RESPONDED
The experts concluded that substances in the petition **cannot be treated as a class** due to their differing physicochemical properties and toxicological profiles.	**They rejected it**, saying it would be too time consuming to deal with ANOFRs on a case- by-case basis. They also said the "overwhelming" data presented to them and provided through public comment supported the Commission's ability to regulate these substances as a class under the FHSA.
The experts concluded that the class approach **cannot be taken under the FHSA** because not every ANOFR could be classified as toxic as part of the FHSA's definition of hazardous substance. Some, they concluded, present no toxicity at all.	**They ignored it**, and moved to grant the petition and convene a Chronic Health Advisory Panel (CHAP). The recommendation to convene a CHAP shows that they fully know this area merits further study. Nonetheless, they released public guidance, refusing to accept the fact-based determinations of CPSC staff – or wait for an independent group of scientists to deliver its findings.
The experts concluded that many of the **studies cited by the petitioners were "insufficient** to conclude that [ANOFRs] are all likely to cause similar effects in humans."	**They dismissed it** with the issuance of a public guidance document. What's more, they developed their own conclusion that ANOFRs in these products are a possible hazard to public health.
The experts concluded that most of the studies cited by the petitioners **cannot be linked to specific products.** Additionally, they determined that the mere presence of a chemical is not enough to demonstrate that an adverse health effect may occur.	**They defied it**, and weighed the claims of a group of special interest groups **over** the comprehensive scientific analysis conducted by CPSC's own set of accomplished experts.