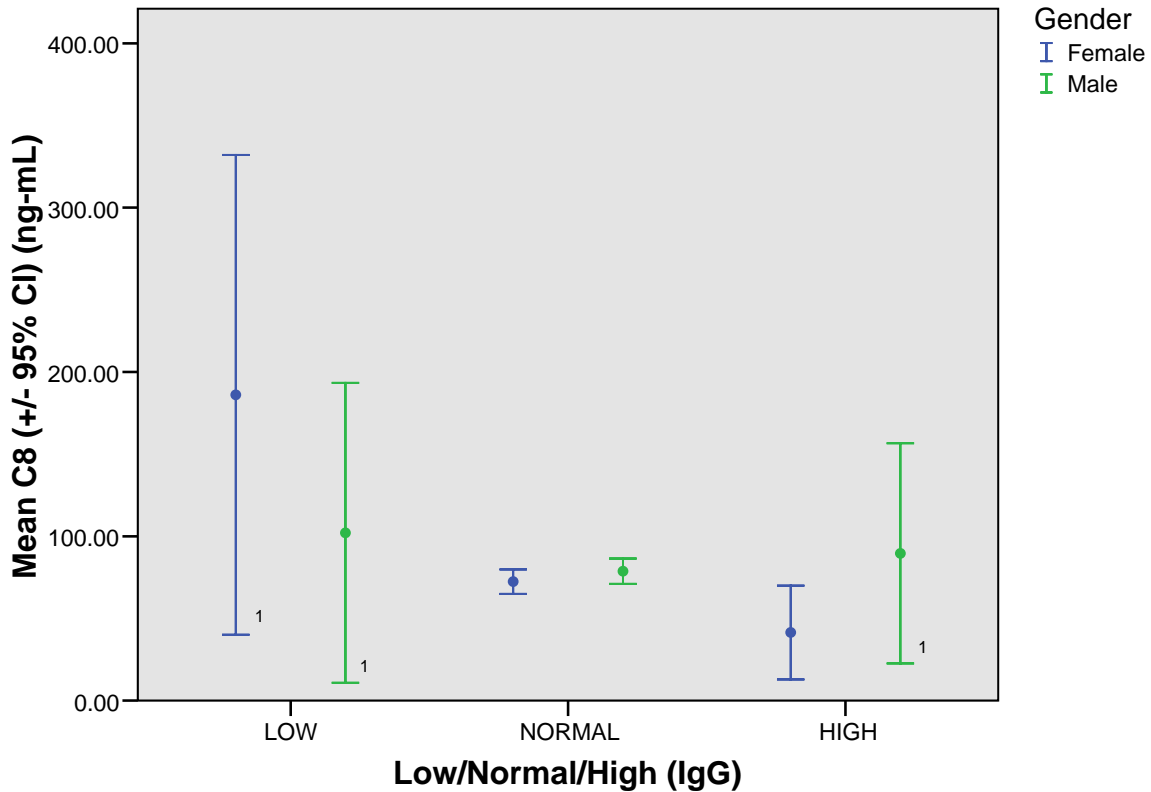


**Serum C8 By Immunoglobulin G (Serum) Levels  
In Participants  $\geq 7$  And  $< 10$  Years Of Age**  
C8 (ng-mL)

IgG (Serum)	Gender	N	Mean
LOW	Female	11	186.0909
	Male	8	102.1000
	Total	19	150.7263
NORMAL	Female	887	72.3821
	Male	927	78.7867
	Total	1814	75.6550
HIGH	Female	21	41.4429
	Male	15	89.5933
	Total	36	61.5056
Total	Female	919	73.0361
	Male	950	79.1537
	Total	1869	76.1456

**Serum C8 By Immunoglobulin G (Serum) Levels  
In Participants  $\geq 7$  And  $< 10$  Years Of Age**



Low  $< 572$ , Normal 572-1474, High  $> 1474$  (Units: mg/dL)

Source: <http://www.labcorp.com/datasets/labcorp/html/chapter/mono/sc012800.htm>

<sup>1</sup> Note, very small sample size.

The WVU website is a communication vehicle to depict associations or their absence for public use. These tables and graphs show many comparisons between lab tests and corresponding population serum PFOA (C8) levels. When it appears that there is a clear relationship between serum C8 and a clinical laboratory value, the meaning of that relationship still requires thought and discussion. Some of the relationships, while real, are weak and not likely to be important. Several are strong, interesting and potentially important, and none of them can be taken to show an etiologic (cause and effect) relationship or its absence without more work. When it comes to causes, scientists interpret these preliminary data with deference to additional work that needs to be done.

These data concerning associations are for public use. They will receive additional collaborative work in peer review format. We hope they prompt public curiosity and suggestions of interested scientists.