# Exhibit 16

In accord with the TLC study, Baltimore City's Department of Housing and Community Development provided property owners an opportunity to apply for a five-year forgivable loan of up to $7,500 for the purpose of reducing lead at a particular property. The loan was forgiven 20% per year for five years. Although Kennedy Krieger informed owners and landlords of the opportunity to take advantage of this loan program, it neither made the loans, made any decision regarding loan eligibility, disbursed funds, nor contracted for repair and maintenance activities.

At the point of formal enrollment in the study, each home was professionally cleaned in an effort to reduce exposure to lead house dust. All children were provided a vitamin mineral supplement (which, in addition to general health benefits, potentially decreased/slowed lead absorption in the event of further exposure). Either Succimer or the placebo was provided in appropriate doses and blood lead levels were followed. Detailed testing of children's cognitive development, neuropsychological function, and behavior was administered at baseline and at protocol-driven intervals during the study period.

The results of the TLC study were reported in the New England Journal of Medicine in May 2001. The NIEHS concluded that while children who had been given Succimer had more rapid drops in blood lead levels, any differences in test scores between that group and the placebo group were inconsistent and not statistically significant. Additionally, children given Succimer had an unexpectedly higher rate of injuries, a finding that remains unexplained. Based on this data, Succimer therapy (and chelation therapy in general) for children with blood lead levels below 45 micrograms per deciliter is not recommended. Succimer remains the recommended therapy for treatment of children with blood levels at or above 45 micrograms per deciliter.

[4] Each of the clinical centers worked with an IRB that was responsible for fulfilling the oversight role for that particular center. The IRB that oversaw the Kennedy Krieger Institute's participation in the study was the Joint Committee for Clinical Investigation (JCCI) of the Johns Hopkins Medical Institutions.