WTC study: Workers

Half of screened rescuers suffer ailments

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There are nights since Sept. 11, 2001, says Peg Nolan, that her husband wakes up from a deep sleep, jumps off the side of the bed and gasps for breath. In the 23 years they have been married, she has never heard him snore so loudly. And then there are the unexplained fits of sneezing, the sinus congestion and a cough that never seems to go away.

Steve Nolan, 54, a seasoned crane operator who, like so many, was moved to spend night and day at Ground Zero doing rescue and cleanup work, tries not to worry about his long-term health.

"We'll never know what was in that stuff down there," said Nolan, a Valley Stream, L.I., father of three who came home caked in white dust and debris each night and shed his clothes at the front door. "Like most of us who were down there, you think sickness and cancer ain't gonna happen to me. You are so busy doing the work, you don't think of the consequences, unfortunately."

DAILY NEWS SPECIAL REPORT

Fifteen months after the twin towers attack, health problems remain an intractable issue: More than half of the 2,500 rescue workers and volunteers Mount Sinai Medical Center doctors have screened to date have persistent upper respiratory inflammation and at least one in four people has abnormal breathing consistent with lower respiratory disease. That is more than triple what is found in the general population.

The hospital's federally funded study also found about 20% have gastrointestinal acid reflux — or heartburn — most likely from swallowing large amounts of concrete dust, and more than 50% suffer from posttraumatic stress syndrome.

"These rates of abnormality are striking a year and three months after the event," says Mount Sinai study leader and occupational health specialist Dr. Stephen Levin. "People are coming to us with shortness of breath, wheezing, coughing, asthma. This is an urgent public health matter."

Called safe, at first

In the days immediately following the attack, officials trying to calm a traumatized and economically devastated city put out a different message. Underscoring federal Environmental Protection Agency chief Christie Whitman's assurances, then-Mayor Rudy Giuliani firmly told New Yorkers on Sept. 28, 2001: "The air quality is safe and acceptable. I know there are people concerned and worried about it, but that's just the reality."

But more than a year later, doctors and scientists are still puzzling over the possible health consequences of exposure to the large concentration of dust, some of which contained toxins such as benzene from burning jet fuel, asbestos and dioxin.

In the short term, the tragedy has spawned ailments, which together have been dubbed World Trade Center Cough.

At a meeting in September at the New York Academy of Medicine, Dr. Kerry Kelly, the Fire Department's chief medical officer, described WTC Cough as reduced lung capacity and extreme sensitivity of the airways to any and all particles, bacteria and viruses that a person inhales. The cough — which can be triggered by irritants, such as secondhand smoke, car exhaust, cold air and cleaning agents — is dry and nonproductive and can leave a person gasping for air.

Between 300 and 500 firefighters who worked at Ground Zero remain on the disabled list because of the ailment, and some of them are likely to be permanently disabled, say FDNY officials, who are screening their personnel in a separate study funded by the Centers for Disease Control and Prevention.

"We are just puzzled why these symptoms persist," said Dr. Lung Chi Chen of the New York University School of Medicine. Chen's team is continuing to analyze the dust, debris and air samples collected last year.

"From my experience as a toxicologist, people should have healed by now and would no longer have symptoms."

Part of the explanation, Chen says, may lie in the composition of the enormous amount of dust that fell when the towers collapsed.

"The dust we found was large-sized particles, highly alkaline and caustic in nature to the eyes, nose and throat, irritating the mucus membranes," Chen explained. "When inhaled in large quantities, the body's natural defense mechanisms would make a person cough. Perhaps there was some damage produced in the initial days of the exposure that has produced this long-lasting effect."

Doctors say they believe long-term, hidden cancer risks are low for most people who were exposed at or near Ground Zero. But they can't know for sure.

"I don't think there will be a huge wave of cancers from this exposure. But I can't say there will be no cancer," said Levin.

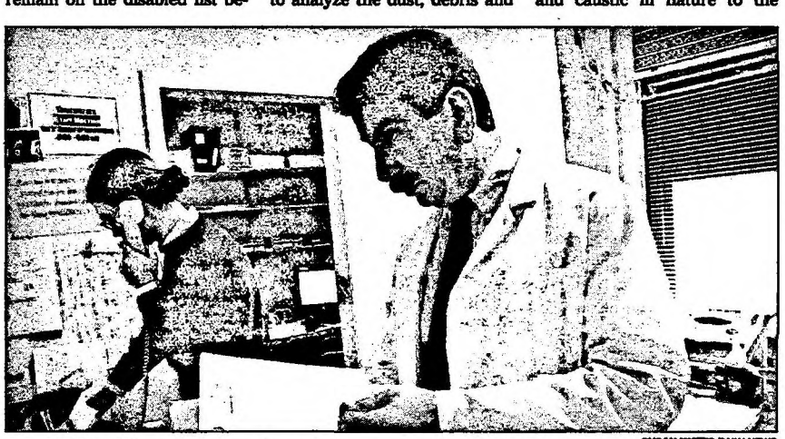
"There are those whom I worry about — the people who were on The Pile long hours, their faces in the debris day after day, like the ironworkers. And I worry about the day laborers, many of whom were immigrants we can't find, who did the cleanup in enclosed apartments and offices with no protection."

Levin added: "The cancers we are worried about down the road can't be detected now. That is why money for long-term monitoring is crucial."

Mount Sinai's $12 million federally funded study is only enough to screen 9,000 of the 35,000 workers and volunteers who were present at Ground Zero. The money runs out in July.

SUSAN WATTS DAILY NEWS

BREATH TEST Steve Nolan uses a device at Mount Sinai Medical Center to test lung function. He was a crane operator at Ground Zero and still suffers from coughing and sinus problems.



SUSAN WATTS DAILY NEWS

ON THE CASE Dr. Stephen Levin looks over data from screening program for WTC workers.

still gasping for air

CORSY SIPKIN DAILY NEWS

COVERED IN DUST **Firefighters take a breather Sept. 11, 2001, their uniforms caked with debris from the World Trade Center.**

Sen. Hillary Clinton (D-N.Y.), who led the fight for the health-tracking funding, and Rep. Carolyn Maloney (D-Manhattan) are pushing for $90 million to continue monitoring workers for the next two decades. About $25 million would be earmarked for firefighters and paramedics.

"We cannot fool ourselves that evaluating people now is enough. We have learned from the asbestos industry that we must follow people for 20 years," said Dr. David Prezant, the FDNY's deputy medical director and pulmonologist. "We have a moral and medical responsibility to monitor the health of these people. They deserve nothing less for the public service they have done."

Despite intense lobbying from New York's congressional delegation, President Bush vetoed a bill in August that included the $90 million for health tracking. Clinton said she is determined to get the money when Congress reconvenes on Jan. 7.

"We are just not going to give up until we get money for the Ground Zero workers and volunteers," she said. "They performed far beyond their responsibilities; we must at least live up to ours."

Asked about the Mount Sinai findings, Clinton said, "I'm not surprised that the clinical exams are proving what we have all seen and heard from people for months now. It is a fact.

"Let's just face it. People's health were adversely affected depending on the length and amount of their exposure to what was in the air."

Drastic decline

Kevin Mount is a good example.

The 49-year-old sanitation worker was an active father of two and bicycling enthusiast. Now, twice-daily puffs on steroid inhalators help him breathe.

On the night of Sept. 12, 2001, Mount was dispatched to Ground Zero to drive dump trucks filled with steel and human debris away from the site. After two weeks of working 14-hour days, with nothing more than a paper mask he mockingly refers to as a "party hat," he was sent back to the Fresh Kills landfill on Staten Island to dump debris from 7 World Trade Center for law enforcement agents to sift through.

"That's what we wore until the end of October when they fitted us for a proper mask," said Mount. "By the time we got them, we were all coughing."

By mid-November, Mount said the cough was persistent, but he chalked up his symptoms to the flu. His job was important for his city and his country, he told himself, and he kept working.

Three months later, in February, he was rushed to a New Jersey emergency room with a high fever and unable to breathe. He stayed in the hospital for four days, where he was put on antibiotics and steroids.

Levin later diagnosed him with an inflammation in his lungs from the Trade Center dust. Mount, who also has lost hearing in one ear, was out of work until May.

"I never went to a doctor before this," said Mount, angry that he can't exert himself without getting winded. "Now I know more about doctors than I ever did. I'd just as soon never had met any of them."

Mount said he often blames himself for his ills, saying he and his co-workers should have been more assertive about getting protective gear.

"The FBI and government big shots were well taken care of. They got those environmental hazard suits, masks, gloves, the works. We were too stupid to ask for it. Our bosses told us we were lucky to have a job."

But Mount and other recovery workers, like crane operator Steve Nolan, are grateful for the help they are now receiving.

Leaving the Fifth Ave. Mount Sinai clinic last week after a four-hour screening that included a chest X-ray, blood work and meeting with a psychologist, Nolan and his wife said it was time well-spent. Despite his symptoms, he performed well on a key breathing test.

"I'm relieved," he said with a smile. "For now."

GETTING HELP

Two separate federally funded studies are being conducted:

To find out if you are eligible for Mount Sinai's World Trade Center Worker and Volunteer Medical Screening Program, call (888) 702-0630.

If you are a member of the New York City Fire Department, an appointment has been scheduled for you at the Bureau of Health Services, 9 MetroTech Center in Brooklyn. If you have not received an appointment or if you have retired from the FDNY since Sept. 11, 2001, call (718) 999-1947.

Some 2,500 World Trade Center and Fresh Kills workers and volunteers have been examined as part of the Mount Sinai screening program. Preliminary findings include:

50% suffering from UPPER RESPIRATORY PROBLEMS

What it is: Ear, nose and throat inflammation.

Symptoms: Persistent throat irritation, nasal, sinus or head congestion, postnasal drip or nasal irritation.

Treatment: Saline spray; oral or spray decongestants; steroid nasal sprays; antibiotics when infection is present; surgery in severe cases.

50% suffering from LOWER RESPIRATORY PROBLEMS

What it is: Asthma and bronchitis

Symptoms: Persistent cough; chest tightness; shortness of breath and/or wheezing; extreme sensitivity to airborne irritants, such as cold air, secondhand smoke, vehicle exhaust and cleaning solutions.

Treatment: Inhaled steroids to reduce inflammation; inhaled medications to open the airways (bronchodilators); oral anti-inflammatory medications; cough suppressant at night; antibiotics when infection is present.

50% suffering from POSTTRAUMATIC STRESS DISORDER

What it is: Persistent, severe stress-related symptoms

Symptoms: Flashbacks and uncontrollable images; jumpiness; sleep disturbance, often with nightmares; mood disturbances such as depression or feeling numb.

Treatment: Counseling; for more severe cases, psychiatry and/or medication.

20% suffering from ACID REFLUX

What it is: Heartburn, resulting from excess stomach acid backing up into the esophagus and throat.

Symptoms: Heartburn, indigestion, regurgitation at least once a week or more. Sour or burning sensation in the back of the throat.

Treatment: Medicine to inhibit acid production; diet and lifestyle modification.

Treatments should be guided by a physician after a thorough clinical evaluation. Source: Mount Sinai Center for Occupational and Environmental Medicine; Mount Sinai World Trade Center Worker & Volunteer Medical Screening Program

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