

Gilsenan, Michael

From: Chapin, Diana [NYCDEP/QUEENS/DIANAC3]
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From: Ronald J. Tramontano [mailto:rjt03@health.state.ny.us]
 Sent: Friday, April 26, 2002 1:26 PM
 To: excrotty@gw.dec.state.ny.us; cxjohnso@gw.dec.state.ny.us;
 dianac@dep.nyc.gov; bmojica@health.nyc.gov
 Subject: In the news - Dr. Levin

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April 26, 2002

Expert Says Asbestos Slightly Raised Risks for Disease Among Residents of
 Lower Manhattan
 By KIRK JOHNSON

The risk of asbestos-related disease, including cancer, has risen slightly for tens of thousands of people in Lower Manhattan as a result of the collapse of the World Trade Center, a prominent New York physician said yesterday.

The risk is higher, he said, for those who worked under the most hazardous conditions, and much of the danger could have been reduced or eliminated entirely if proper preventive action had been taken.

But the physician, Dr. Stephen M. Levin, the medical director at the Mount Sinai School of Medicine's Irving J. Selikoff Center for Occupational Health and Environmental Medicine, which has treated more patients for trade center-related respiratory complaints than perhaps any other hospital, also had some reassuring news.

In a presentation in Manhattan before a panel of the American College of Preventive Medicine, Dr. Levin said that for the vast majority of people exposed to asbestos ? from being caught in the dust cloud of the collapsing towers, for example, or from cleaning up their apartments or offices ? the risk of ever getting sick was "very, very small."

He also said, after examining test results and cleanup records in some schools in Lower Manhattan, including Stuyvesant High School and Public School 150, that students and parents in those schools should have little concern about long-term health effects.

In general, he said, people who regularly walked by the disaster site on their way to or from work in the days and weeks afterward were exposed to lower asbestos levels, which should not worry them.

"It's important to keep this risk in perspective," he said. "It's not a zero increase in risk, but it's not a magnitude of risk that I think people ought to be terrorized by or fearful of on a day-to-day basis."

Asbestos, a fibrous mineral that was used for decades in the insulation of buildings, including parts of the twin towers, was not the only material that people were exposed to after the Sept. 11 attack. The billowing dust cloud contained pulverized concrete, fiberglass and other materials. Acrid smoke from the fires that burned for more than three months at the site irritated the lungs and sinuses of thousands.

But it is asbestos, perhaps because of the broader public awareness of its risks and the fear its name evokes, that has dominated the debate about the medical and environmental consequences of the attack. Scientists have weighed in on the risks presented by short asbestos fibers and long ones. Some residents and workers have said that they believed there were cover-up conspiracies, perpetrated by the city, the federal government or building owners, to minimize cleanup costs and liabilities.

Dr. Levin's presentation concluded that for most people, the added risks were slight, not because asbestos is less deadly than believed, but because most people did not get the level of exposure that, statistically, has produced disease. One-time exposure that results in cancer many years later is extremely rare, he said, and the scarring of the lungs that characterizes diseases like asbestosis generally requires years of exposure.

The catastrophic collapse of the towers smashed much of the asbestos in the buildings into tiny fibers, which have been shown in animal tests to be generally less dangerous than longer fibers. (Short fibers, however, have been linked in some studies to a relatively rare cancer called mesothelioma that affects about one in a million people in the general population, Dr. Levin said.)

But the risks from asbestos exposure were also compounded for many people, including rescue and cleanup workers, who did not wear respirators sufficient to protect their lungs at ground zero and nearby. Many day laborers, including large numbers of immigrants who spoke little or no English, were hired to clean up dust-laden buildings, Dr. Levin said, with little or no protection or instruction.

"It's a public health outrage that they were permitted to be exposed this way," he said.

Other public health experts said that Dr. Levin's presentation reinforced their assessment that the long-term health consequences of the attacks were not likely to be severe for the general population.

"My assessment hasn't changed," said Patrick L. Kinney, an associate professor of public health at the Mailman School of Public Health at Columbia University. "The main health concern was workers around the pile," he said.

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But Professor Kinney added that there had been health effects that were not life-threatening, including new cases of asthma and sinusitis in people who were exposed to the dust.

"Beyond that, I'm not aware of any data that has suggested that people off-site have suffered any important health consequences," he said.

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