NYC 9/11 Public Portal Document

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Anthrax: New York

Kathy Nguyen's Mystery Link

Bronx Woman's Death From Spores Baffles Medical Experts

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NEW YORK

Television trucks have abandoned the neighborhood, along with the reporters who accompanied them. Federal agents and police have removed the barricades and crime-scene tape and have gone elsewhere to question witnesses and search for clues.

The neat, six-story, red-brick Bronx apartment building where Kathy T. Nguyen lived is back to normal, except for the small shrine outside her apartment door. Prayer vigils occur nightly at 7: "All welcome!" reads a flier next to the mailboxes downstairs. "Bring your own chair."

Yet a week after Nguyen's funeral, the circumstances surrounding her death from pulmonary anthrax are anything but normal, and investigators appear no closer to determining how she became infected than they were on Oct. 28, when she checked into Manhattan's Lenox Hill Hospital complaining of headaches, fever and difficulty breathing.

Her case is crucial because it bears no relationship to any other. It could be the harbinger of a new wave of anthrax victims, or it could be the best hope yet of finding who is responsible for the nation's bioterrorism outbreak. Find out how Nguyen caught the disease, investigators suggest, and you will find the killer.

Nguyen, is "an outlier who doesn't fit the pattern," said Stephen Ostroff, a Centers for Disease Control and Prevention epidemiologist who is leading the New York anthrax investigation. "And very often the outliers are the ones that solve the problem. Since this woman was the victim of a crime, I feel doubly committed."

At the same time, the case illustrates the difficulties investigators face in trying to solve this mystery. At this juncture, the obvious trails have ended. Her home, workplace and belongings all tested negative for anthrax. There are no clues to how she may have come in contact with anyone who could have been involved. There is nothing about her life or habits that indicate how she was infected.

So investigators are continuing to interview friends, acquaintances and anyone else who saw Nguyen in the last half of October in hopes they may know where, or how, she caught the disease. They are painstakingly trying to fill in the gaps of her final two weeks. They are looking for other unexplained diseases in New York, and elsewhere, and keeping an eye out for any new illnesses that might be connected to Nguyen's.

There are two hypotheses: Either Nguyen was so anthrax-prone that she contracted the disease by inhaling a tiny number of spores from a contaminated letter or other object intended for someone else; or, she became infected after an encounter—accidental, or perhaps even deliberate—with the person or persons responsible for spreading the bacteria that have infected 17 people with anthrax and killed four, including Nguyen.

"It's important to evaluate all . . . opportunities for someone to come into contact with either an envelope or a package that may contain spores," the CDC's Julie Gerberding told reporters Thursday. "Or someone may have fortuitously come in contact with someone who is nefariously producing anthrax."



FILE PHOTO/BY SUZANNE PLUNKETT—ASSOCIATED PRESS

The Bronx apartment building where Kathy T. Nguyen lived a secluded life. No clues have been turned up on how she contracted pulmonary anthrax.

In the days since Nguyen's case surfaced, investigators have questioned neighbors and acquaintances twice and even three times. They have tested her apartment for anthrax, tested her clothes, tested the Manhattan Eye, Ear and Throat Hospital where she worked, and tested the post offices where she bought money orders.

They have taken her subway MetroCard to find out what trips she took. They have posted her picture and hot-line number at token booths in the five boroughs. And they are monitoring subway workers to ensure there is no uptick in sick days, because if Nguyen caught anthrax in the subway, it could be spreading.

They are also looking at recent, unexplained deaths in New York and several other cities to see if there were other victims like Nguyen, isolated accidents, or perhaps even human guinea pigs deliberately infected to test the strength of the pathogen.

The FBI and the New York Police Department have a Joint Terrorism Task Force with a 24-hour command post to sift leads on Nguyen and other cases. "Basically we're focusing on everything that happened to her from October 15th on," an FBI source said. "We're trying to reconstruct the two weeks before she died."

This is not easy. Nguyen lived alone, had no nearby relatives, worked late and maintained a quiet privacy

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Probing for Hot Clues on a Cold Trail

ANTHRAX, *From A10*

that masked her life even as her self-effacing gentleness endeared her to her neighbors.

"I thought I knew her," said Anna Rodriguez, 47, who lives two floors above Nguyen's apartment in West Farms Estates. "But when they started asking me about her husband and her son, and all that stuff, I didn't know anything about that."

It was reported that Nguyen had held a part-time job in a restaurant. Not true, said the FBI. Another report suggested she made trips to New Jersey. Unsubstantiated.

Investigators do know that Nguyen, 61, was a Vietnamese emigré who entered the United States in 1975 and moved to West Farms in 1980 after a short sojourn at another Bronx housing complex. She was alone even then, having separated from her husband, whom she eventually divorced.

A son was killed in a motorcycle accident. A cousin once visited her, but no one has stepped forward as a next of kin. She had an $18,000 insurance policy with Local 1199 of the Service Employees International Union; no beneficiary was named. The union used part of the money to pay for her funeral and put the rest into its insurance fund.

Nguyen worked the late shift in the basement stockroom of the Eye, Ear and Throat Hospital on Manhattan's East Side and took the Lexington Avenue Local subway home every night, arriving at her building around midnight. After a 40-minute ride, the neighborhood was dark and empty. "It scared her," said next-door neighbor Jenny Espinal, 37, who had known Nguyen for more than 20 years.

Nguyen went shopping in Chinatown and to Mass in the Bronx and in midtown Manhattan, bought staples at a bodega half a block from her apartment and did her laundry at the laundromat two doors away. She was a devout Catholic who worshiped at St. John Chrysostum Church near her apartment, but she wasn't a member. She ate at the Vermicelli Vietnamese restaurant near her office, but nobody remembered her. She was a good tenant and good neighbor, and comfortable as an Asian in an environment dominated by transplanted Puerto Ricans and Dominican immigrants.

And that was all. "She was a friendly woman that you could easily greet and speak to," said Eduardo Carrero, a co-worker and neighbor who often rode the subway to work with her. "But she was not the sort of person who made friends with just anyone."

She knew about the ongoing anthrax outbreak. "She got home so late, she never watched television, so I warned her not to open any mail if she didn't know where it came from," Espinal said. "She said, 'Oh, thank you, thank you.' "

But when Nguyen became ill Oct. 25, she went to work the following two days, succumbing on Sunday, Oct. 28, when building superintendent David Cruz drove her to the hospital, where she was put on a ventilator immediately. Just before she went into intensive care, she entreated her physician, Jeffrey Glick, "Please don't leave me. I'm just all alone in the world." She died Oct. 31, never able to describe how she may have been infected.

For investigators, the first thought was that Nguyen was the opening case of a new anthrax outbreak. The other New York cases involved skin anthrax traceable to at least two letters containing crudely milled powder and sent to news organizations in late September.

Another outbreak occurred in Washington in mid-October, caused by at least one letter—sent to Senate Majority Leader Thomas A. Daschle (D-S.D.). The spores were more finely milled than those in New York, and therefore much more dangerous. They caused seven pulmonary cases, and two deaths, and cross-contaminated mail in locations ranging from a central New Jersey sorting facility to the diplomatic pouch at the U.S. Embassy in Vilnius, Lithuania.

Hazardous materials specialists backtracked Nguyen, looking for clusters of spores like those that accompanied the Daschle letter. They tested her apartment, her workplace and the No. 6 Lexington Avenue subway. They found nothing. They got an early hit on the clothes she wore into the hospital, but final results were negative.

Looking for leads at the Bronx apartment, investigators rummaged through Nguyen's possessions. They found an airline ticket receipt, but it was dated 1991. They tried to use her MetroCard to trace her movements in the days before she fell sick. But a co-worker had lent her the card; the trips were not all hers.

Investigators found out she liked to pay her bills with postal money orders, so they tested a post office in the Bronx where she might have stood in line. The test results were negative.

City Health Department spokeswoman Sandra Mullin said several dozen city health officials continue to work the case every day, and while the critical clue has not emerged, the department said some new information about Nguyen's movements is trickling in.

The scientists are also plodding forward. The CDC checked the bacteria in Nguyen's lungs and found them "indistinguishable," according to Ostroff, from the pathogens in the earlier New York and Daschle letters. This bit of knowledge, however, did not appreciably advance the investigation because it said nothing about either spore size or the sophistication of the aerosol that infected Nguyen.

The only research on anthrax's rate of infection is monkey studies showing that half the cases of the pulmonary disease will result in death if the victim inhales between 8,000 and 10,000 spores.

But this is an inexact science. Was Nguyen an "outlier" because she represented a tiny percentage of the population that could inhale a minuscule number of spores and then die of pulmonary anthrax weeks after initial exposure?

Perhaps, but Ostroff said that possibility is diminishing with time. "It's the less likely explanation," he said. "I think the most likely explanation is that her exposure was relatively proximate to her onset of illness."

If this is the case, then Nguyen was an outlier for another reason, and suspicion is growing that she somehow came in contact with the perpetrator or perpetrators of the anthrax outbreak.

So while Health Department officials keep calling their hospitals and clinics to head off an epidemic, Mullin said they are also prowling admissions records looking for the single person who may have inadvertently caught the disease after infecting Nguyen.

They are also checking with medical examiners across the country to see if there are unexplained deaths in the past few months—accidents, or perhaps experiments, that occurred in a killer's quest for the perfect microbe. "Believe me," Ostroff said. "We've thought of every potential scenario that we could think of."

Special correspondents Colum Lynch and Christine Haughney and staff writer Michael Powell contributed to this report.

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