



### A. Interested Party Information

A1. Do you represent an organization (are you submitting this petition on behalf of an organization)?

Yes (Go to A2)  No (Go to A3)

A2. Organization Information:

Name of Organization: \_\_\_\_\_

A3. Name of Individual Petitioner or Organization Representative:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Position, if representative of organization: \_\_\_\_\_

A4. Mailing Address:

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

A5. Telephone Number: \_\_\_\_\_

A6. Email Address: \_\_\_\_\_

### B. Proposed WTC-Related Health Condition Information

B1. Health Condition Information

Name of health condition you wish to petition to add to the List of covered conditions: \_\_\_\_\_

ISCHEMIC CARDIOMYOPATHY, ULCERATIVE COLITIS / CROHN'S

If the name of the condition is not known, please provide a description of the condition or the name of the diagnosis provided by a physician or other healthcare provider.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



## Statement of Medical Basis and 9/11 Exposure Connection

I respectfully request that the WTC Health Program Administrator consider adding **ischemic cardiomyopathy** and **Crohn's disease** to the list of covered health conditions. The following outlines the reasons and medical basis supporting this request.

### 1. Exposure to 9/11-Related Toxins

I was a New York State Court Officer [REDACTED] assigned to [REDACTED] from [REDACTED]. I was present during the terrorist attacks on September 11, 2001, and I directly participated in recovery efforts on September 14, 2001, as part of the bucket brigade for approximately 7–8 hours. Following the attacks, I continued working in Lower Manhattan, regularly exposed to the airborne toxins, dust, and debris from the World Trade Center collapse for months afterward.

According to the WTC Health Registry and numerous environmental assessments, the dust cloud contained a complex mix of hazardous substances, including:

Asbestos

Polycyclic aromatic hydrocarbons (PAHs)

Silica

Cement dust

Fiberglass

Heavy metals

Combustion byproducts

These substances are known to trigger chronic inflammation and autoimmune responses, particularly in genetically susceptible individuals.

### 2. Ischemic Cardiomyopathy – Proposed Inclusion

**Ischemic cardiomyopathy** is a condition resulting from reduced blood flow to the heart, often due to coronary artery disease. Recent studies indicate a link between chronic exposure to fine particulate matter (PM<sub>2.5</sub>) and cardiovascular disease, including ischemic heart disease and heart failure. Notably:

**Jordan HT et al. (2020)** – A study published in *JAMA Network Open* followed 6,841 WTC-exposed firefighters and found increased risk of **cardiovascular disease** proportional to their exposure at Ground Zero.

**Lin S et al. (2010)** – Research published in *Environmental Health Perspectives* observed that long-term exposure to PM and environmental toxins was associated with ischemic heart conditions and heart failure.

These findings strongly support the link between 9/11 exposure and subsequent development of ischemic cardiomyopathy.

### **3. Crohn's Disease – Proposed Inclusion**

**Crohn's disease**, a chronic inflammatory bowel disease, is suspected to develop or worsen with prolonged exposure to environmental toxins. Emerging research has suggested:

**Environmental triggers** such as silica, air pollutants, and immune system dysregulation may activate or worsen IBD in genetically susceptible individuals.

**Weiden MD et al. (2016)** – The WTC exposure has been linked with **autoimmune disease** development, citing higher than expected incidence in rescue/recovery workers.

A 2022 study in *Frontiers in Public Health* noted the **increased risk of autoimmune and gastrointestinal disorders** in WTC-exposed populations.

The chronic inflammatory environment caused by 9/11 exposure—especially with persistent symptoms such as gastrointestinal dysfunction, immune dysregulation, and systemic inflammation—may be a triggering factor in my diagnosis of Crohn's disease.

### **4. Personal Impact**

My medical records document the onset of these conditions following 9/11. My cardiologist and gastroenterologist have both supported my disability application due to the debilitating nature of these diseases. My ischemic cardiomyopathy has resulted in significantly reduced ejection fraction, and Crohn's disease has led to chronic fatigue, frequent diarrhea, and periods of hospitalization.

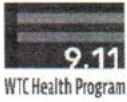
### **Conclusion**

Given the direct exposure to 9/11 toxins during and after the attacks, and in light of emerging peer-reviewed medical studies showing a plausible connection between WTC environmental exposure and the onset of ischemic cardiomyopathy and Crohn's disease, I respectfully request these conditions be reviewed for inclusion in the WTC Health Program.

I am also prepared to submit further documentation from my treating physicians, peer-reviewed studies, and my employment records showing my presence and exposure at Ground Zero.

Sincerely,

[REDACTED]



### D. Signature of Petitioner

Sign your name below to indicate that you are petitioning the WTC Program Administrator to consider adding a health condition to the list of health conditions identified in 42 C.F.R. Part 88.

Signature \_\_\_\_\_ [Redacted] \_\_\_\_\_ Date: [Redacted]

### Privacy Act Statement

In accordance with the Privacy Act of 1974, as amended (5 U.S.C. § 552a), you are hereby notified of the following:

Title I of the James Zadroga 9/11 Health and Compensation Act of 2010 amended the Public Health Service Act (PHS Act) to establish the World Trade Center (WTC) Health Program. Sections 3311, 3312, and 3321 of Title XXXIII of the PHS Act require that the WTC Program Administrator develop regulations to implement portions of the WTC Health Program established within the Department of Health and Human Services (HHS). The WTC Health Program is administered by the Director of the National Institute for Occupational Safety and Health (NIOSH), within the Centers for Disease Control and Prevention (CDC). The information provided with this form and supporting documentation will be used by the WTC Program Administrator to consider the disposition of a petitioned-for health condition. Disclosure of this information is voluntary.

Records containing information in identifiable form become part of an existing NIOSH system of records under the Privacy Act, 09-20-0147, "Occupational Health Epidemiological Studies and EEOICPA Program Records and WTC Health Program Records, HHS/CDC/NIOSH." These records are treated in a confidential manner, unless otherwise compelled by law.

Information submitted to WTC Health Program which may be considered "protected health information" pursuant to the Health Insurance Portability and Accountability Act of 1996 (HIPAA) (Pub. L. 104-191; 42 U.S.C. § 1320d) and the HIPAA Privacy, Security, Breach Notification, and Enforcement Rules (45 C.F.R. pts. 160, 162, and 164) will be maintained in accordance with all applicable laws.

NIOSH may disclose information in identifiable form only insofar as such disclosure is permitted pursuant to the HIPAA Privacy Rule; this may include disclosure to the WTC Health Program Scientific/Technical Advisory Committee (STAC), which may be asked to consider the petition and issue a recommendation to the WTC Program Administrator. Information in identifiable form will be redacted from submitted petition forms and supporting documentation that become a part of the public record (e.g. in conjunction with STAC consideration or a rulemaking).

