Firefighter Billi Romaka - a 9/11 First Responder

WTC Health Conditions: Scientific Update, January 5th, 2011
WTC Expert Cancer Presentation, June 21st-22nd, 2010

Population, April 6th, 2007

Expert Panel/Workshop on Cancer and Mortality Studies with WTC Exposed

Medical Experts Advisory Meeting, May 24th, 25th, 2006

Conferences Attended:

1AEP Redmond Symposium Panel on Zadroga Bill, August 2011

World Trade Center Community Labor Coalition, 2005-2008

since 2006

9/11 Workers Protection Task Force (Representing UFCW President Steve Cassidy)

World Trade Center Analytic Methods Workshop, 2009-2010

World Trade Center Medical Monitoring and Treatment Committee since 2005

Committees

Firefighters Association Local 94 of the IAFF since 2005.

Current Sergeant-at-Arms/Health and Safety Officer of the Uniformed
The First Responders
(with documented exposures)

- NY/NJ Port Authority Police and its Unions
- Detectives, Lieutenants, Captains, etc.
- NYC Police Officers
- NYC Superior Police Officers (includes
  Captains, etc.)
- NYC Emergency Medical Service
- NYC Fire Officers
- NYC Firefighters
Cancers?
Auto-immune diseases?
PTSD, Depression, Anxiety
Persistent Cough
GERD
(Bronchitis, asthma, reactive airway dysfunction syndrome, etc.)
Lower Respiratory Tract
(Sinusitis, rhinitis, upper airway hyperreactivity, etc.)
Upper Respiratory Tract

WTC Related Ailments
The co-pays, deductibles, and loss of benefits contribute to the financial ruin of what was once a contributing first responder and their respective families.

Elsewhere, they are told that they have to seek treatment when a first responder is diagnosed with cancer in the Center Medical Monitoring and Treatment Program is that.

The biggest complaint of members in the World Trade Center.

Continual Problems?
Continual Problems?
Included, a decision that will skew results.

addition, the PBA understands that deceased officers may not be
their disease. They spend enough time in medical offices. In
participating in a monitoring and treatment program that does not treat
informed the PBA that they do not wish to waste precious time
Many respondents with cancer have
now, cancer is not a covered illness, which is itself a deterrent to
For some time, the Program did not accept reports of cancer. Even

Continual Problems?
Disability was approximately the predicted retirement-related to pulmonary disease; based upon prior data and knowledge, during this time pulmonary disability due to firefighters and fire officers retire due to.

Since 9/11, the FDNY has had almost 1,750

The Known Exposure
expected SEER cases in the general population. In numbers that were approximately 4 times the
45 years old (exposed police officers first responders
this disease is showing in much younger (less than
repeated in the American College of Occupational
World Trade Center Responders: A Case Series
In the Molming et al case series, "Multiple Myeloma in
According to the National Cancer Institute's SEER Cancer Statistic Review, the median age of cancer patients at diagnosis is stated as 68 years old. In the recently published FDNY Cancer Study appearing in The Lancet, the mean age of first cancer diagnosis was 52.5 years.

Lifetime is one in two for men, and one in three for women (ACS). The probability that a person will develop cancer during their lifetime is one in 20. The authors point out that in the United States, the probability that a person will develop cancer during their lifetime is one in two. In the Cancer Epidemiology section, under Observed Associations and Causal Associations, the authors point out that in the United States, the probability that a person will develop cancer during their lifetime is one in two.
in our analyses." (Zie- Owens et al., 2011) Hodgkin lymphoma associated with inflammation was also increased prevalence of specific cancers (i.e., prostate, thyroid, melanoma, non-
- oncogenic), both experimentally and epidemiologically. The inflammatory disorders, all of which have been reported as factors in
through microbial infections, autoimmune diseases, or other
directly, WTC exposure could also trigger chronic inflammation,
carcinogens. Although some contaminants could cause cancer
hydropcarbons, polychlorinated biphenyls, and dioxins, are known
between WTC exposure and cancer is biologically plausible, because
Because this peer reviewed scientific study it states, "An association

Cohort Study

Firefighters after the 9/11 attacks: an observational
An Early Assessment of Cancer Outcomes in NYC
are subject to a fee schedule. „B. Medical Care. An employee who meets the statutory conditions of coverage

- „B. Medical Care. An employee who meets the statutory conditions of coverage: Claimsants. Its provisions further states the following: $5 Billion in benefits to 32,600 been met. Over 8 years it has paid out. Compensation Act (EEOCPA) once provisions of eligibility have

Exposure Cohort (SEC) and Energy Employees Occupational Illnesses. NIOSH already has a history of covering Cancer under its Special

NIOSH and our Government’s History
other herbicides during military service.

other diseases related to exposure to Agent Orange or presumptive diseases.

presumptive diseases.

VA has recognized certain presumptive military service. These are called qualifying military service. These are related to presumptive diseases.

The United States Department of Veterans Affairs

NIOSH and our Government's History
The mandate of the law to include periodic review of a link between cancer and exposure at the WTC sites suggests that there was reason to believe that exposure to the toxins at the WTC sites may lead to increase in the cancer rates. A scientific plausibility of a casual connection rather than biologically plausible.

According to the language of the statute, the Program Bill Zadroga
the WTC sites. This presumption already includes cancers.
benefit for all NYS and City workers who were exposed at
unique and approved a presumption accident disability
The NYS Legislature and Governor recognized this

Uniquely Events

make sense of this data in a timely fashion that might save
understand. Unfortunately, there is no comparison to help
synopsis that may take decades to fully analyze and
make. The exposure on 9/11 involved a very unique
some relevance when there is no similar comparison to
Science analyzes, documents and compares. Scien...
Documented exposure with early scientific evidence should support adding additional conditions.

Factors upon which policy is made should be the relevant predicted and what we are seeing. Should be the relevant plausibility biological basis upon what the experts have seen. This has been borne out by the science.

First cancers to be seen would be the blood cancers and the leukemias. The advisory meeting, the cancer experts told everyone that the cancer experts at the WTC Medical Experts on May 24th and 25th, 2006.