

Dragon, Karen E. (CDC/NIOSH/EID)

From: Christine Murphy [cmurphy@myeloma.org]
Sent: Friday, April 29, 2011 2:34 PM
To: NIOSH Docket Office (CDC)
Cc: 'Arin Assero'
Subject: Docket Number NIOSH-227 - Request for Information on Conditions Relating to Cancer To Consider for the World Trade Center Health Program
Attachments: IMF 911 Bill Implementation FINAL.pdf

To Whom It May Concern:

On behalf of the International Myeloma Foundation, attached are comments for Docket Number NIOSH-227 - Request for Information on Conditions Relating to Cancer To Consider for the World Trade Center Health Program. Should you have any questions or need more information, please feel free to contact me at 703-738-1498 or cmurphy@myeloma.org.

Thank you,

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"Until There is a Cure... There is the IMF"



IMF

April 29, 2011

John Howard, MD
Director
National Institute for Occupational Safety and Health
395 E Street, S.W.
Suite 9200
Patriots Plaza Building
Washington, DC 20201

Dear Dr. Howard:

On behalf of the International Myeloma Foundation (IMF), the oldest and largest myeloma foundation dedicated to improving the quality of life of myeloma patients while working toward prevention and a cure, we are writing to submit comments related to the implementation of the *James Zadroga 9/11 Health and Compensation Act of 2010*. Our comments will concentrate on the establishment of a research program on health conditions resulting from the September 11, 2001 terrorist attacks and an education and outreach program.

Myeloma Background

Myeloma is a cancer in the bone marrow that affects the production of normal blood cells and is characterized by bone destruction with pain and disability. It is also called "multiple myeloma" because multiple areas of bone marrow may be involved. Myeloma is the second most common blood cancer after lymphomas. Each year, approximately 20,000 Americans are diagnosed with myeloma and 10,000 lose their battle with this disease. At any one time there are over 100,000 myeloma patients undergoing treatment for their disease in the U.S.

Although the incidence of many cancers is decreasing, the number of myeloma cases is on the rise. Once a disease of the elderly, it is now being found in increasing numbers in people under 65. Even while they live with the disease, myeloma patients can suffer debilitating fractures and other bone disorders, severe side effects of their treatment, and other problems that profoundly affect their quality of life, and significantly impact the cost of their health care. There is no cure for myeloma, remissions are not always permanent, and additional treatment options are essential.

Research on Health Conditions

The 2009 President's Cancer Panel Report suggests that much of the increase in cancer incidence is being caused by environmental toxins. IMF research demonstrates a link between myeloma and toxins in the environment including dioxins, chemical contaminants

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produced by combustion.¹ Research into the risks associated with developing cancer, including myeloma, dates back to a 1990 study published in the *American Journal of Epidemiology*.²

While it is clear that a number of health problems have already arisen from this exposure, there are a number of important unanswered questions about cancers especially myeloma developing in 9/11 responders as a result of their exposure associated with the World Trade Center (WTC) clean-up efforts. A recently published study in *The Journal of Occupational and Environmental Medicine*, suggests a link between blood cancers like myeloma and exposure to the toxic dust at the WTC clean-up site. The heaviest exposures to airborne pollutants and carcinogens including asbestos, benzene, dioxins, and others occurred in the first days after the attacks. The 9/11 responders engulfed in the dust cloud that day sustained the most extreme exposures.³ A number of previous studies on myeloma have associated exposure to benzene, pesticides, metals, and other known carcinogens to increased rates of myeloma.

A recent study found eight confirmed cases of myeloma that have arisen in WTC responders since the September 11, 2001 terrorist attacks. At the time this study was published, the authors were in the process of verifying an additional eight cases of myeloma in WTC responders. According to the study's author, Dr. Jacqueline Moline, four of the eight confirmed cases occurred in responders younger than 45 years old. As noted above, myeloma is historically found in the elderly population. Three of the four arrived at the WTC on September 11, the day of heaviest exposure. According to the study, it would be prudent for physicians caring for WTC responders to be aware of emerging disease trends including myeloma in this population. Based on this recommendation and previous studies documenting the link between myeloma and environmental exposures, the IMF recommends that myeloma be added to the list of WTC health conditions that will be studied and monitored as a result of the *James Zadroga 9/11 Health and Compensation Act of 2010*.

Education and Outreach Program

As there was no attendance record of everyone that participated in the WTC clean-up, there could be WTC responders that may not know the resources available to them through the Fire Department of New York (FDNY), the National Institute for Occupational Safety and Health at the New York/New Jersey consortium, or the WTC Medical Monitoring and

¹ The International Myeloma Foundation Issues Prevention and Treatment Guidelines for Firefighters for High-Risk Cancer, Press Release, August 23, 2007.

² Howe GR, Burch JD. Fire fighters and risk of cancer: an assessment and overview of the epidemiologic evidence. *American Journal of Epidemiology*. 1990; 132: 1039-1050.

³ Moline JM, Herbert R, Crowley L, Troy K, Hodgman E, Shukla G, Udasin I, Luft B, Wallenstein S, Landrigan P, Savitz D. Multiple Myeloma in World Trade Center Responders: A Case Series. *Journal of Occupational and Environmental Medicine*, 2009;51; 896-902.

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Treatment Program (MMTP). In addition, New York and New Jersey residents unknowingly exposed to these carcinogens in and around the WTC may not be aware of, or have access to these resources.

IMF is pleased that an education and outreach program is included in the **James Zadroga 9/11 Health and Compensation Act of 2010**. Many of the WTC responders and residents of the area would clearly benefit from this type of program. IMF would like to propose that the agency put together an aggressive and targeted public awareness and educational campaign which would provide WTC responders and residents with detailed information about the resources available to them in the legislation. We also strongly advise the agency to provide information to them in a wide range of formats. IMF stands ready to work with you to promote this education and outreach program.

We thank you for the opportunity to provide comments on the implementation of the **James Zadroga 9/11 Health and Compensation Act of 2010** and look forward to working with you in the future on implementation. Should you have any questions or need more information, please contact us at 818-487-7455.

Sincerely,

Brian G.M. Durie, MD
Cedars-Sinai Samuel Oschin Cancer Center
Chairman-IMF Board of Directors

Sundar Jagannath, MD
The Mt Sinai Cancer Institute, NY
IMF Scientific Advisory Board