



Testimony
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World Trade Center Health Effects

Statement of

Julie L. Gerberding, M.D., M.P.H.

Director

Centers for Disease Control and Prevention

U.S. Department of Health and Human Services



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Good morning, Chairman Pallone and other distinguished Members of the Subcommittee. My name is Dr. Julie Gerberding, and I am the Director of the Centers for Disease Control and Prevention (CDC) within the Department of Health and Human Services (HHS). Mr. Chairman, I would like to express my appreciation to you and to the Members of the Subcommittee for holding this hearing and for your support of our efforts to assist those who are at risk or have experienced adverse health outcomes from their 9/11 exposures. I am pleased to appear before you today to report on the progress we have made in addressing the health needs of those who served in the response effort after the World Trade Center (WTC) attack on 9/11 and those in the affected communities. HHS would like to note that the Administration is currently reviewing H.R. 6594, the James Zadroga 9/11 Health and Compensation Act of 2008, and HHS cannot offer a view or position on the bill at this time.

WTC Responder Health Program – Monitoring and Treatment

Since 2002, agencies and offices within HHS have been dedicated to tracking and screening WTC rescue, recovery and clean up workers and volunteers (responders). HHS has allocated \$925 million for WTC-related efforts since September 11, 2001.

In 2004, CDC's National Institute for Occupational Safety and Health (NIOSH) established the national WTC Worker and Volunteer Medical Monitoring Program to continue baseline screening (initiated in 2002), and provide long-term medical

monitoring for WTC responders. In FY 2006, Congress appropriated \$75 million to CDC to further support existing HHS WTC programs and provide screening, monitoring and medical treatment for responders. Since these funds were appropriated, NIOSH has established a coordinated WTC Responder Health Program to provide periodic screenings, as well as diagnosis and treatment for WTC-related conditions (e.g. aerodigestive, musculoskeletal, and mental health) identified during monitoring exams. Current spending rates indicate that there are sufficient resources to continue supporting health care treatment and monitoring for World Trade Center responders through FY 2009 and potentially longer (as of April 30, 2008, \$185 million of the \$323 million appropriated from FY2003 through FY2008 remains unexpended). The WTC Responder Health Program consists of a consortium of clinical centers and data and coordination centers that provide patient tracking, standardized clinical and mental health screening, treatment, and patient data management.

As of April 30, 2008, more than 51,000 responders from across the country have enrolled in the WTC Responder Health Program from the estimated 91,469 responders who were involved in the rescue, recovery and cleanup.

Approximately 41,000 responders have had an initial medical screening via the New York City Fire Department (FDNY), the Mt. Sinai clinical consortium, or the national network of clinics outside the NYC-NJ metropolitan area.

FDNY manages the clinical center that serves FDNY firefighters and emergency medical service personnel enrolled in the program. As of April 30, 2008, FDNY had conducted 14,816 initial examinations and 20,376 follow-up examinations.

The Mt. Sinai School of Medicine's Center for Occupational and Environmental Medicine coordinates a consortium of clinics that serve other response workers and volunteers who were active in the WTC rescue and recovery efforts.

According to data provided by the grantee in April 2008, these clinics have conducted 23,780 initial examinations and 13,021 follow-up examinations.

Of the 38,596 responders that have received an initial screening via a clinical center in the New York City-New Jersey metropolitan area, 10,545 have received treatment for aerodigestive conditions, such as asthma, interstitial lung disease, chronic cough, and gastro-esophageal reflux, and 5,502 have been treated for mental health conditions.

In conjunction with these activities, CDC/NIOSH has funded the NYC Police Foundation's Project COPE and the Police Organization Providing Peer Assistance to continue providing mental health services to the police responder population. The availability of treatment for both physical and mental WTC-related health conditions has encouraged more responders to enroll and continue participating in the WTC Responder Health Program, which will enable us to better understand and treat the long-term effects of their WTC exposures.

Nationwide Scope

Many rescue and recovery workers traveled from other states to New York City to participate in the response efforts and following their service, and have since returned to their states of residency. HHS is working with its partners to ensure that the benefits of all federally-funded programs are available to eligible responders across the nation. As of April 30, 2008, approximately 4,000 responders residing outside the NYC-NJ metropolitan area have enrolled in the WTC Responder Health Program and 2,393 have had an initial medical screening. These responders, including current and former Federal employees, receive monitoring and treatment services via a national network of clinics.

On May 31, 2008, CDC contracted with Logistics Health, Inc. (LHI) to manage the WTC National Responder Health Program to monitor and treat responders outside of the NYC-NJ metropolitan area. These responders were previously served by Mt. Sinai, the Association of Occupational and Environmental Clinics, and Federal Occupational Health Services. LHI is working with each of these organizations to transition the responders into the new structure. During this transition period, responders who are currently receiving treatment are having their care continued without interruption.

Non-Responder Population

From September 11, 2001 to present, HHS/CDC has provided health care services solely to WTC responders. In the Consolidated Appropriations Act,

2008, Congress appropriated funding "to provide screening and treatment for first response emergency services personnel, residents, students, and others related to the September 11, 2001, terrorist attacks on the World Trade Center." In response, on July 24, 2008, CDC published a funding opportunity announcement (FOA) to provide access to screening, diagnosis and treatment services for residents, students, and others in the community (the non-responder population). Applications for this FOA will be received through August 25, 2008, and CDC anticipates making award decisions September 29, 2008. The NIOSH-administered competitive grants would provide up to \$10 million per year for three years for health screenings and assessments, health monitoring and tracking and improved access to health care services. The grant money would be used to help cover gaps when individuals' public or private insurance is insufficient to fully cover the costs associated with care or treatment.

WTC Health Registry

In addition to the WTC Responder Health Program, the Agency for Toxic Substances and Disease Registry (ATSDR) maintains the World Trade Center Health Registry. In 2003, ATSDR, in collaboration with the New York City Department of Health and Mental Hygiene (NYCDOHMH), established the WTC Health Registry to identify and track the long-term health effects of tens of thousands of residents, school children and workers (located in the vicinity of the WTC collapse, as well as those participating in the response effort), who were

the most directly exposed to smoke, dust, and debris resulting from the WTC collapse.

WTC Health Registry registrants will be interviewed periodically through the use of a comprehensive and confidential health survey to assess their physical and mental health. At the conclusion of baseline data collection in November 2004, 71,437 interviews had been completed, establishing the WTC Health Registry as the largest health registry of its kind in the United States. The NYCDOHMH launched the WTC Follow-up survey in November, 2006. As of August 31, 2007, 39,703 adult paper and web surveys had been completed for nearly a 60% response rate. NYCDOHMH has begun a third phase of the follow-up survey to reach the registrants through direct interviewing by telephone and has initiated a separate mailed survey of registrants who are younger than 18 (approximately 2,200).

The WTC Health Registry findings provide an important picture of the long-term health consequences of the events of September 11th. Registry data are used to identify trends in physical or mental health resulting from the exposure of nearby residents, school children and workers to WTC dust, smoke and debris. Last year, two journal articles published findings on 9/11-related asthma and post-traumatic stress disorder (PTSD) among rescue and recovery workers (*Environmental Health Perspectives*, 8/27/2007; and *American Journal of*

Psychiatry, 2007; 164:1385-1394). Newly diagnosed asthma after 9/11 was reported by 926 (3.1%) workers, a rate that is 12 times the norm among adults. Similarly, the overall prevalence of PTSD among rescue and recovery workers enrolled on the WTC Health Registry was 12.4%, a rate four times that of the general U.S. population. By spotting such trends among participants, we can provide valuable guidance to alert Registry participants and caregivers on what potential health effects might be associated with their exposures.

The WTC Health Registry also serves as a resource for future investigations, including epidemiological, population specific, and other research studies, concerning the health consequences of exposed persons. These studies will permit us to develop and disseminate important prevention and public policy information for use in the unfortunate event of future disasters. And the findings can assist those working in disaster planning who are proposing monitoring and treatment programs by focusing their attention on the adverse health effects of airborne exposures and the short- and long-term needs of those who are exposed.

Conclusion

Since 9/11, HHS has worked diligently with our partners to best serve those who served their country, as well as those in nearby communities affected by the tragic attack. We have had great success in expanding our monitoring program to include treatment, which has encouraged more responders to enroll and

receive needed services. We will continue to forge ahead in providing medical monitoring and treatment services to responders, regardless of their location, as well as to residents, students and others most directly affected by the WTC attack. Likewise, the WTC Health Registry continues to paint a picture of the overall health consequences of 9/11, including the effects experienced by the residents, school children and office workers located in the vicinity of the WTC.

Thank you for this opportunity to update you on our progress. I am happy to answer any questions you may have.