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Escondido, California 92029

To: Dr. Hartenbaum & ACOEM Directors
Fax number: 1-847-818-9266

From: Sharon Kramer
Fax number: 760-746-7540
Business phone: 760-822-8026
Home phone: 760-746-8026

Date & Time: 11/28/2010 7:28:39 AM
Pages: 9
Re: Request to add public & physician comment to Mold Policy Revisions

Dear Dr. Hartenbaum and ACOEM Directors,

The public is concerned of what ACOEM is proposing as new physician directive in health policy regarding illnesses from water damaged building exposures and would like the opportunity to review and comment prior to finalization of the revisions.

For ease of sharing this fax with all directors of ACOEM, this document made be read online at:
<http://freepdfhosting.com/2ee5f821ee.pdf>

Please confirm receipt of this fax by response email, fax or letter to Sharon Kramer at addresses provided.

Thank you for your attention to this very serious matter.

November 28, 2010

FROM: Ninety Concerned Scientists,
Physicians, Hygienists, Attorneys, Injured
Workers, Employers, Citizens & Taxpayers

CONTACT: Sharon Kramer, Snk1955@aol.com
Tele 760-746-8026 Fax 760-746-7540

TO: The Officers, Delegates and Directors,
American College of Occupational and Environmental Medicine (ACOEM)
25 Northwest Point Blvd., Suite 700
Elk Grove Village, Illinois, 60007-1030 Fax: 847-818-9266

RE: Request for a two week public and ACOEM general member comment period prior to finalization
of proposed revisions to the ACOEM health policy statement, "*Adverse Human Health Effects
Associated with Molds in the Indoor Environment*" Copyright © 2002

ACOEM Officers, Delegates and Directors:

President Natalie P. Hartenbaum,
MD, MPH, FACOEM;
OccuMedix

Vice President Karl Auerbach,
MD, MBA, MS, FACOEM
University of Rochester

Past President Pamela A. Hymel,
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Disney Parks and Resorts

Speaker Alan Engelberg,
MD, MPH, FACOEM;
Sloan-Kettering Cancer Ctr
Employee Health Service

Barry Eisenberg
Executive Director, ACOEM

Anthony D. Burton,
MD, FACOEM;
General Motors

R. Loeppke,
MD, MPH, FACOEM;
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Marianne Cloeren,
MD, MPH, FACOEM;
Managed Care Advisors, Inc

Michael G. Holland,
MD, FACOEM;
Center for Occupational Health

William G. Buchta,
MD, MPH, MS, FACOEM;
Mayo Clinic

Brian C. Svazas,
MD, MPH, FACOEM;
Fermi National Accelerator Laboratory

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DO, FACOEM;
Conventry Workers Comp Services

Speaker-Elect Daniel M. Janiga,
MD, MPH, FACOEM;
Occupational Health Consultants of
Minnesota, Inc

Marianne Dreger
Director of Communications, ACOEM

Marilyn V. Howarth,
MD, FACOEM;
Univ of Pennsylvania School of Medicine Ronald

Mark A. Roberts,
MD, MPH, PhD, FACOEM;
Exponent, Inc.

Michael L. Fischman,
MD, MPH, FACOEM;
Fischman Occ & Env Medicine Group

James A. Tacci,
MD, JD, MPH, FACOEM;
Xerox Corporation

James P. Seward,
MD, MPP, MMM, FACOEM;
Lawrence Livermore National Laboratory

Charles M. Yarborough III,
MD, MPH, FACOEM;
Lockheed Martin Corporation

Dear Dr. Hartenbaum, Officers and Directors of ACOEM,

It has recently come to our attention that ACOEM is drafting revisions to their 2002 health policy statement on water damaged building induced illnesses; and that these revisions will be shared with occupational medicine practitioners and other medical specialties at the upcoming March 2011, American Occupational Health Conference in Washington, DC, Session #2207.

The policies and guidelines that ACOEM writes establish treatment protocols that ACOEM and other physicians use when examining workers who have been exposed to microbial contaminants (mold, etc) that are found in water damaged work environments. They are used to establish US public health policy and US teaching hospital protocols and practices.

Additionally, they are used to establish or deny workers compensation insurance benefits for those workers claiming injury from water damaged workplaces; and to direct employers, building owners and others of the potential need to remediate the damaged buildings. These directives given for remediation also potentially impact the health and safety of employees and other occupants of water damaged buildings before, during and after a remediation.

As such, the revisions ACOEM is drafting today will impact the physical well being of employees and all types of occupants of water damaged buildings tomorrow. The revisions will financially affect employers, property managers, builders, building owners and their workers comp, property casualty & health insurers. They will impact how US physicians address symptoms in workers and occupants who are exposed to the damaged building contaminants after a water loss; and exposed before, during and after remediation.

Because of the large number of US citizens, US workers and US businesses that have been impacted by ACOEM's mold policy and guidelines in the past with many more to be impacted by the revisions in the future; we are requesting that ACOEM display their newly proposed revisions to their 2002 mold position statement on the ACOEM web site, www.acoem.org, for the purpose of a two week public, ACOEM member, and general scientific & medical community comment period *prior to finalization*.

Please let us know if and when the leadership of the largest US occupational physician association, ACOEM, will make the proposed revisions publicly available for review and comment; so the general public, ACOEM members and other physicians may assist the leaders of ACOEM to establish policy by which we all can live. Thank you in advance for allowing those affected by the guidelines that ACOEM directors endorse today; to have a voice in the health policies that ACOEM establishes for us all tomorrow.

Sincerely,
Ninety, Issue Educated and Concerned

Copied: US Federal Interagency Committee on Indoor Air Quality, EPA; CIAQ@epa.gov
Executive Director, Phillip Jalbert
US Congressional Education, Labor Committee fx: 202-226-5398
Chair: George Miller, D-CA Ranking Member: John Kline, R-MN
US Senate Health, Education, Labor & Pension Committee fx: 202-224-5128
Chair: Tom Harkin, D-IA Ranking Member: Michael Enzi, R-WY
US Department of Health and Human Services fx: 202-690-7203
Secretary Kathleen Sebelius
US Department of Justice fx: 202-307-6777
Attorney General Eric Holder
US White House fx: 202-456-2461
President Barack Obama

Asterik (*) by the names of the below signers means their comment to follow. Contact information available upon request

Jennifer Aspelund Seattle, WA	Vicki J. Corr, Esq Madison Heights, MI	Janette Hope, MD Santa Barbara, CA
James Baker, Ph D* Nampa, ID	Deborah Daniels* Baton Rouge, LA	Mr. & Mrs. Marshall L. Hovey Lake Mary, FL
Kellie Barnes Portland, OR	Lee Daniels Palm Coast, FL	Christi Howarth* Roseville, CA
Don Berman Wilmington, DL	Sabrina Desrosiers* Jackson, SC	H. Kenneth Hudnell, Ph D Chapel Hill, NC
Shelly Bobbins, RN, L.Ac Los Angeles, CA	Mary Lou Fin[ley] San Diego, CA	Mark Hudson Oakville, ON
Charles Brandt Lewes, DL	Dodd Fisher, Esq* Grosse Point, MI	Matthew Hudson* Rapidan, VA
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Mr. & Mrs. Thomas Brooks* Martinez, GA	Jay Frye Stillwater Lake, Nova Scotia	Robin Huhn, MD Henderson, NV
Curtis Bunce Las Vegas, NV	Julie Galaski Portland, OR	Harold Hyams, Esq* Tuscon, AZ
Susan Bunce Las Vegas, NV	Kelton Lee Gibson Ventura, CA	Susan Johnston* Rochester, MI
Lynn Butzko Phoenix, AZ	E Gooding Annadale, VA	Jamie Jameson* Pleasant Hill, CA
Kevin Carstens* Cornelia, GA	Michael Gray, MD, MPH, CIME* Benson, AZ	Reginald Jensen San Jose, CA
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Timothy R. Corr, Esq Madison Heights, MI	Douglas R. Haney, CCJP* Roseville, CA	John E. Keys Marion, NC
		Kaye H. Kilburn, MD* Los Angeles, CA

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Estes Park, CO

Victoria Ward
Santa Barbara, CA

Michael Roland
Williams
Dallas, TX

C. T. Weber, State Chair
Peace & Freedom Party
Sacramento, California

Donald Weekes, CIH,
CSP
Ottawa, ON

Chin S. Yang, Ph D*
Voorhees, NJ

COMMENTS:

“Each case is important. Open the process.”

James P. Baker Ph D

“Still fighting to survive mycotoxicosis. Errors in past ACOEM policies brought devastation to many seriously ill persons by promoting the fallacy that the toxins in water damaged buildings do no harm to human health. Accuracy of revisions should have a major impact of how patients are treated in the future. We've worked with Governor of Ga., ATSDR official, and other state legislatures to help create a public awareness of environmental illness. www.toxicmoldtruth.com.”
Mr. & Mrs. Thomas Brooks, Mold Injured US Citizens and Advocates for Others

“I am the IICRC ANSI Consultant, all of our documents are Public Reviewed for industry Consensus. Please allow the industry to comment on you updated document.”

Larry Cooper

“I am the owner and moderator of an Internet support group for those who have been severely injured by the contaminants found in water damaged buildings. I have volunteered my time and have done this for over a decade. Each year the membership increases. I now have over 2500 members in the support group looking for answers of where to go for medical help, etc. ACOEM’s mold guidelines of 2002 have been a major cause of the increase of people seeking help from the Internet; as US physicians are being misled that the situation does not cause severe illnesses. I urge you to please open up the revision process for your mold policy to public and physician comment before you finalize them. ACOEM’s prior guidelines have served to be a disaster to the lives of many. No one wants to see that mistake made again.”

Kevin Carstens, Owner and Moderator of the Yahoo Support Group, Sickbuildings.

“Am tired of seeing the foxes being set to guard the henhouses.”

Deborah Daniels

“I saw my mother and step father have their health and lives destroyed by toxic mold. Most doctors turned them away. It's important to get the information correct this time around.”

Sabrina Desrosiers

“The 2002 Guidelines are an insult in the manner they have been utilized in the U.S. legal system and to humanity as a whole.”

Dodd Fisher, Esq.

“ACOEM failed to include disclosures of blatant conflicts of interest in the preparation of your 2002 Mold document. You also promulgated inappropriate extrapolations from the sited Rao study without sharing the fact that the minimal observed effects of the stachybotrys spores was related to washing the spores with methanol before they were inhaled by the test animals.”

Michael Gray, MD, MPH, CIME

"As a mold injured workers, I knew I was in for a long haul when I received my medical evaluation back from the ACOEM member/physician who was hired by the workers comp insurer to evaluate me and several of my co-workers. He was given a mold report from the building inspector that clearly showed a sick damp building with a lot of mold that we were all breathing daily. His report is very similar to the ones he did for the Ca State Board of Equalization, where workers there were exposed to the same things we were and having been complaining of the same type of symptoms. A fellow employee of mine was recently diagnosed with 90 percent sinus blockage from industrial exposure. His diagnosis came after nine months of suffering and no workers comp insurance to cover his medical needs. We have all been forced to use social

services in order to survive while ACOEM physicians have helped the insurer and our employer avoid their obligation to us as workers made ill in our place of employment. What my co-workers and I are experiencing appears to be the norm in workers comp claim handling practices over the mold issue. I spoke before the CA Insurance Fraud Assessment Commission last week to try and do something about this situation. Mold inspection reports, pictures and video of my moldy workplace may be viewed at www.MOLDTRUTH.wordpress.com"
Tim Hack, Injured Worker turned Advocate for other injured workers.

"I am a Criminal Justice Professional/Environmental Health Research Psychologist with 26-years experience. In now, what is over 45 years of Molecular Sciences research and study involving medical, genetic, and environmental other disciplines, it is not only fact in every scientific faction involved but in nearly every molecular research study proposed and accepted for journal publication that microfungi, mycotoxins, and micro-particulates are highly influential in human cellular disease activity. Micro-fungi are long-realized as highly connected to such as breast and other cancers, cerebral aspergillosis, and various diseases of the lungs and gut. And, at this juncture in medical and scientific research to deny or minimize the health issues attributed to or associated with high level and/or chronic exposures to micro-fungi in unhealthy contaminated and infested living environments especially in infants and elderly would be totally inexcusable in the ACOEM prepared publication."
Douglas R. Haney, CCJP

"Tired of not receiving appropriate treatment due to politics on mold contaminants"
Christi Howarth

"Original work was deeply flawed as to process and content."
Professor Matthew Hudson

"Openness is the only way to benefit public health."
James Huff PhD, NIEHS

"If medicine is to be practiced as a science and not as an interest group motivated exercise, then the forthcoming position paper should be viewed and reviewed by the general electorate. This body is familiar with the criticisms about the 2002 paper and the skepticism surrounding its statements. Scientific pronouncements were based on unscientific calculations which on their own would never be admissible as being based on reputable science. There are a number of member physicians in your organization that have great expertise in the area of mold causing injuries especially in the respiratory arena. Our society is not benefited by back room politics and your organization should maintain the highest standards of integrity with respect to its statements. Obviously there are partisan sentiments for and against mold causing illness--it is associated with some and less so with others. May your organization have the courage and strength to publish a fair and open statement."
Harold Hyams, Esq.

"An allergist showed me a handout he received at a medical conference that quoted the ACOEM statement; he wanted to prescribe anxiety medication because he 'knew' mold couldn't be making me sick - the report said so! He truly believed the position statement and went so far as to send a letter of alarm to my primary care physician citing the report, and questioning my psychological state because I knew that molds were causing my illness. Meanwhile, I was getting sicker and presenting with many of the symptoms of anaphylactic shock. The ACOEM position statement is causing immense harm."
Susan Johnston

“Full Protection For Americans”

Jamie Jameson

“Comments are essential in the update.”

Kaye H. Kilburn, MD

“Transparency is important!”

Jeff LaFave, Esq.

Given that: A.) the 2002 ACOEM mold policy statement begins with the implication people have been falsely reporting they are sick and the media has hyped the seriousness of the matter, i.e., *‘So-called ‘toxic mold’ has become a prominent topic in the lay press and is increasingly the basis for litigation when individuals, families, or building occupants believe they have been harmed by exposure to indoor molds’*; and given that B.) the policy paper concludes *‘Except for persons with severely impaired immune systems, indoor mold is not a source of fungal infections. Current scientific evidence does not support the proposition that human health has been adversely affected by inhaled mycotoxins in home, school, or office environments.’* Yet, thousands of prior healthy people have been diagnosed with severe mold infections and various forms of toxicities from damp building exposure; and given that C.) ACOEM director, Dr. Holland, who will be teaching the revisions at the upcoming AOHC, has served as an expert defense witness in mold litigation and is a former affiliate of the corporation that authored the ACOEM 2002 mold policy; then D.) I am certain the BOD can understand why the public and medical communities are concerned if ACOEM’s revisions will be fair and balanced in the public’s best interest. Contrary to the concept marketed into US health policy by the 2002 ACOEM position; prior healthy people can also be susceptible to severe illness from the exposure and during the remediation process. As such and in the name of transparency, please allow public and physician comment before finalizing the revisions. (Disclosure: In litigation with the authors of the ACOEM and US Chamber of Commerce mold statements for over five years regarding my 2005 writing of the affiliation between ACOEM’s and US Chamber’s medico-legal mold policies of *“trial lawyers, media and Junk Science”* <http://freepdfhosting.com/b801845975.pdf>)
Sharon Kramer, BBA, Advocate for Integrity in Health Marketing and Health Policy

“I have personal knowledge of a large family suffering illness due to mold in their home and when out of the home, the symptoms decline.”

R. Max Morrison

“I was exposed to a water-damaged building and developed non-respiratory, non-allergic illnesses, including arthritis-like symptoms, peripherheral neuropathy and reactive airway disease.”

John Murtaugh

"I am a panel member of the National Institute of Health Roundtable on Buildings and Health headed by [Mr.] Charles Blumberg of NIH. I would heartily recommend and our committee would be appreciative of this opportunity to obtain access to public and physician comment on the subject of this mold related environmental illness via the efforts of the Directors of ACOEM. We are considering focusing on mold and other contaminants found in water damaged buildings as a major determinant of environmentally induced ill health. Access to public and physician comment regarding mold and health policy being displayed on the ACOEM website would serve to provide us information to improve our efforts on behalf of the federal government. It would serve to assure ACOEM's revisions in policy and physician directives are consistent with that of the federal government". [added 11.29.10 "I also assisted in the writing of three recommendations for the National Conversation on Chemicals and Public Health which will be posted this month. The Scientific Understanding group approved the 4th recommendation which focuses on the need for more research and closer in section of the health effects of not

only molds, but also mycotoxins and their relationship to neuroendocrine immune, neurologic as well as psychiatric physiologic repercussions of living or working in a moldy environment."]
Lisa Nagy, MD, President Preventive and Environmental Health Alliance, Inc.

"Please do not let the same defense experts that work primarily for insurance companies dictate the terms of your new Guidelines."
Robert Strom, Esq.

"Public input is important. We as consultants see the moldy building people live in, but the physician in the office does not. You are only looking at one side of the issue."
Peter Sierck, Environmental Testing & Technology

"I witness and write of the devastation to lives caused by ACOEM's prior erred policy on illnesses caused by damp buildings. In the name of transparency and accuracy in future policy, please allow public and ACOEM physician member comment prior to finalizing its revisions."
Crystal Stuckey, Owner Katy's Exposure Blog

"A differential diagnosis for a patient reporting mold-related illness should include a consideration of neurogenic inflammation due to an acquired hypersensitivity. People become sensitized in water-damaged buildings. Neurogenic inflammation due to an acquired hypersensitivity has nothing to do with dose-response toxicology. It results from a neurologic cascade similar to the way allergic inflammation results from an immunologic cascade. Acquired hypersensitivity reactions must be ruled out before a physician can consider psychogenic causes of symptoms."
Steven Temes

"Please allow the people's voice to be heard."
J. Thornell

"Independent review by experts outside of ACOEM is a must."
Jack Dwayne Thrasher, Ph D, Toxicologist

"Please allow public comment."
Krsitina Townsend

"Workers who are exposed to microbial contaminants while on the job should be given full health coverage especially with regards to work-related illnesses."
Jean Wilson

"Transparency is paramount."
Chin S. Yang, Ph D, Microbiologist

The following names and comments were received 11.28.10 after the fax was sent to ACOEM and Washington, DC legislators.

April Hubbard
Newark, DE

Gerald Natzke DO
Flint, Mi. 48503

Karen H. Kahn, Esq.
Emeryville, California

Patricia Bunce
Las Vegas, NV

Denise Turner*
Seattle, WA.

Sean Abbott
Reno, NV

“As there has been much controversy regarding ACOEMs' publication especially concerning mold, public opinion should be allowed so those who have been directly impacted by the ACOEM findings can respond and tell of their experiences”

Denise Turner

"In 2001 I purchased a major transportation company that leased a commercial/terminal building from a municipality in the northeast. Unbeknownst to me this structure had extensive and ongoing water damage. The majority of my employees working in this building, including my new hires and myself, were / became seriously ill. It was a nightmare trying to get my workers comp insurer to take care of my injured workers. The first 3 of my employees (the others are waiting) have had to hire an attorney to take MEMIC through a long and drawn out proceeding (still no decision after 5 years) in which the only piece of evidence against them is the ACOEM “evidence based” statement and the testimony of witnesses who base their generic evidence on that fallacious statement. MEMIC had no problem cashing our checks for decades but when 12 of my employees had to travel out of state to find a physician capable of treating their illnesses I had to personally pay for the medical treatments to assure my employees were properly cared for. My workers comp insurer and their medical “examiners” cited the ACOEM mold statement when giving a reason to deny my employees' claims of work related injury. Some of my employees were forced to turn to state disability programs in order to survive. As such, transparency and accuracy in the medical policies ACOEM establishes is imperative for employee, employer and taxpayer protection. This ACOEM statement is not only fallacious but, as Marianne Dreger knows, was made to order for ACOEM’s then senior officers by known witnesses for the insurance industry."

Professor Matthew Hudson