

HUDSON VALLEY DIVISION of the MOUNT SINAI-IRVING J. SELIKOFF OCCUPATIONAL HEALTH CLINICAL CENTER



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Pheips Memorial Hospital Center 701 North Broadway North Tarrytown, New York 10391

July 27, 1993

Mr. Charles Lake Rural Route 1 Box 202A Earlton, NY 12050

Dear Mr. Lake:

I am writing to give you the results of your evaluation at the Hudson Valley Division of the Irving J. Selikoff Occupational Health Clinical Center on June 30, 1993.

You present with a history of an episode of exposure to unknown substances while working as a trucker unloading a truck for the MPC Trucking Company. The event occurred on April 6, 1992. You report having driven a trailer containing styrene meat packing trays and helping unload these for six and one half hours. You noticed a greenish material on the packages of trays which you thought was grass. You noted that the wooden floor which you state is solid oak and lacquared was crumbly beneath your feet and peeling up as you pushed against it with the toe of your shoe. You noted an overwhelming odor of what you thought was styrene. There was also a black soot over the containers. When you finished the unloading process you noticed black soot all over your arms, chest and face. You went into the diner to wash up and felt very itchy. You report speaking to a physician in an Emergency Room in a local hospital who told you take a baking soda bath and some Benadryl. You drove home several hours. Upon your arrival at home, your face and arms were swollen and cracked as was reported by yourself and your wife. Your wife reports helping wash your forearms, chest and face which were the areas that were exposed during the unloading period. She reports having itching and burning on her hands and forearms, the areas that were in the water when she was helping wash you down. You report burning eyes, burning in the sinuses and the worst sore throat you've ever had. The next morning when woke, you report that your eyes were swollen almost shut. You report going to an Emergency room where you were treated with an eye wash and Benadryl. You were told that you either had a chemical burn or a chemical reaction. The next morning you had some vomiting and the mucous you state contained black soot. You state you spoke to your boss who would not inform you of what was in the trailer.

He told you that it contained sugar. You state that knowing the serial numbers of the trailers and having kept that that trailer had been used to go to a chemical plant several weeks before and so you did not believe what you were told and was concerned about the contents of the truck. You called in the Occupational Safety & Health Administration.

You went to see Dr. Orgel at the Albany Medical Center on April 10, 1992. Your skin was still red. You had cracking and an extreme sore throat that wouldn't go away. You were having bleeding from your nose. You had pulmonary function tests, chest x-ray and blood work. You were told that your lead level was within normal limits. You saw an eye doctor. You went home and rested and felt very short of breath with extertion, tired and sleepy. On April 21, 1993 you returned to work. You checked out the trailer that you had been working in and took a sample. May 4, 1992 you quit your job out of concern and because you were feeling so tired and sleepy that you weren't able to complete your runs as a trucker. In May of 1992 you returned to Dr. Orgel with no increased nose bleeding and a persistent sore throat. You were diagnosed with sinusitis and treated. In May of 1992 you took another position in hauling bulk tank cement. You worked for seven days and quit because of increased congestion, sinus congestion and nose bleeds on that job. You returned to Dr. Orgel who sent you to Dr. Brando an ENT physician who cauterized your nose. One week later you had onset of bleeding again. In July of 1992 you went to Albany Medical Center and saw a Dr. Rabkin in the ENT clinic who stated that he was concerned about multiple ulcerations in your nose. You had a CT scan of the sinuses which showed irritation. You returned to work in September of 1992 to Ranger Transportation. You had to buy your own truck. You hauled aluminum siding and paper. You were seeing an allergy specialist who said that you were allergic to hay seed. You had RAST testing recently. You are presently awaiting results.

In November of 1992 you were carrying some steel and you weren't doing any physical labor for the unloading personally. You had an onset of left arm pain with tightness which improved with a nap. It then persisted and you went to the hospital and were told you had an abnormal EKG and that your chest pain responded to nitroglycerin. You were sent home with nitroglycerin and told to return if two of them did not relieve the pain. You saw a cardiologist several days later who told you to lose weight and to decrease your stress. You went to your private physician, Dr. Enriquez who performed an EKG when you were having some slight chest pain. You were diagnosed with gastrointestinal esphogeal reflex and treated with Kerafate. You were noted to have borderline hypertension. On December 24, 1992 you noted dizziness, chest pain and sweating. You took two nitorglycerin without much result. You went to the hospital and you had some elevated enzymes although on review on reveiw of these records the pattern is not consistent with a myocardial infarction. had a normal thallium stress test. In March of 1993 after some

recurrence of symptoms you were sent for cardiac catherization which was perfectly normal. You were previously on multiple cardiac medications all of which have been discontinued at this point. You returned to work and you had no long hauls only short hauling and you do not do any of the unloading yourself. Since your RASS testing you were placed on Histamine and you had one episode of chest pain with exertion.

You continue to have some throat irritation and sinus irritation. The nose bleeds have improved significantly. The tiredness is almost resolved.

There are several diseases that run in the family including diabetes, thyroid disease, hypertension and asthmas. You neither smoke nor drink alcohol.

On physical examination your blood pressure was 108/30 mmHg. Your conjunctive were injected. Your tympanic membranes were clear. There was a question of some increased fluid behind the tympanic membranes. Your naries were swollen and erythematous. Your throat was without injection. Your mouth was without lesion.

In summary, you are a thirty seven year old gentlemen with sudden onset of burning on the areas of exposed skin and mucous membrane after exposure to some unknown substance, dust or chemical that was in the trailer that you were hauling on April 6, 1992. This substance caused severe irritation of the skin of the hands and forearm and somewhat around the neck and on the face. You also had severe irritation of the eyes, nose the sinuses and the throat. Since that time over the course of time you have had some resolution of your symptoms. The skin on your forearms still remains somewhat despite local application of lubricants for the past year. Your nose and throat irritation has improved significantly but persists to a certain degree. The episodes of recurrent have resolved. Your tiredness and lethargy have improved significantly.

It is my opinion that you were exposed to an irritant chemical of unknown nature on April 6, 1992. You had subsequent irritation of the mucous membranes of the eyes, nose, throat and into the sinuses. You also had irritation of the skin from the elbows down to the hands. It was severe and significant and required many months for resolution of symptoms. I believe that these symptoms are related to your exposure to this unknown substance in the trailer. You presently have persistent sinus irritation. Whether this is the result of newly developed allergies or persistent irritation and alterations of the mucous membranes as a result of this irritant effect, it is difficult to determine.

I recommend that you continue to follow up with your private physician regarding your chest pain. We discussed the possibility of esophageal spasm or coronary artery spasm and the need for close follow up. I also suggested that you continue to

follow up with the allergist as you may benefit from desensitization or further manipulation of the antihistamines and perhaps steroid inhaler for acute episodes. I recommended that you install air conditioning in the cab of your truck when you are financially able as this will help with your allergic reactions to hay and hay seed.

Please call if you have any further questions or if I can be of any further assistance.

Sincerely,

Phy Nis Marino, M.D.