

**Congress of the United States
House of Representatives
Committee on Energy and Commerce
Subcommittee on Commerce, Trade, and Consumer Protection
“Public Sales of Hurricane Katrina/Rita FEMA Trailers: Are they Safe or
Environmental Time Bombs?”
Rayburn House Office Building
Room 2322
Wednesday, April 28, 2010**

Good morning and thank you for allowing me speak to this esteemed group about such an emotionally charged and seemingly controversial issue. I say seemingly controversial because from my perspective as a well-respected physician and investigative reporter, it should not be controversial at all. The facts supporting halting the sale of FEMA trailers are very straightforward and easily understood.

Background:

I am currently Assistant Professor of Pediatrics at Tulane University Medical Center, where I serve as a Pediatrician and Pediatric Emergency Room physician. I have conducted over 75,000 office visits. I have completed over 60 clinical trials for many different companies and agencies. I am currently the Chief Medical Officer for Louisiana Recovery School District, which encompasses over 100 schools, as well as the Medical Director for Dillard University. I am the Chief Medical Editor for WDSU-TV, the NBC affiliate for the gulf coast, where I am on-air daily, reporting on health topics and presenting investigative reports on current health issues. I also am a contributor for the Discovery Channel. I have held many federal appointments including board member of the Executive Council of the National Health Service Corps.

I have many vocations in the New Orleans area and I was living there before, during and after Hurricane Katrina. In fact, my practice was only closed from August 26, 2005 through September 27, 2005. My 30 day closure seemed like a year to me. However, when we reopened, (we sustained no damage) myself and my partner were the only pediatricians practicing in New Orleans for many months. Therefore, I am one of very few people that possess the pure, untainted knowledge of the chronology of what actually happened to my very fragile community when exposed to the increased levels of formaldehyde in FEMA trailers.

Many of my patients who were placed in FEMA trailers initially reported the symptoms of nasal congestion and nasal burning, watery and stinging eyes. Some of these patients were atopic prior to placement, meaning that they were prone to allergic symptoms. However, I am referring to the patients who were not atopic prior to placement in the FEMA trailers. In these particular patients, symptoms usually progressed and worsened with more exposure to formaldehyde. The most important variable of this observation is

that all of the symptoms were novel in these patients. These patients NEVER had any symptoms of this type. Over time, prolonged exposure resulted in chronic conditions like bronchitis, pneumonia, asthma and neurological problems. Presence of the gas also affected the skin and resulted in rash or chronic skin irritation. I have had the aforementioned experience with over 500 patients.

Children are most at risk for this toxicity and may succumb sooner to effect of gas exposure due to many reasons as delineated below:

- Children have a greater surface to mass ratio in their lungs therefore absorb more toxin
- Children have a increased respiratory rate
- Children spend more time at home
- Children have primitive metabolic systems that may not enable them to clear absorbed formaldehyde efficiently
- Formaldehyde is a relatively heavy gas so it settles closer to the ground which is nearer to children's height.

Moreover, since this chemical is a known carcinogen, exposure on a regular basis poses risk for development of cancer. In fact, the Environmental Protection Agency presently classifies formaldehyde as Class B1-“...a probable human carcinogen...” The International Agency for Research on Cancer classifies formaldehyde as Group 1-“...sufficient evidence for carcinogenicity in humans...” In as much as this is compelling, it is a reality for many residents of the gulf coast of the United States. As Americans, we should not relegate the remainder of our citizens to this type of exposure. With the sale of FEMA trailers to citizens throughout the U.S., the problem changes from a regional one to a national issue.

The Centers for Disease Control released a very concise document on their findings gather over 3 years of research in June 2008. I have included the pertinent information below:

The testing of FEMA trailers was one of several actions CDC initiated in response to a request from FEMA to investigate concerns about formaldehyde in occupied FEMA trailers in Louisiana and Mississippi. CDC randomly selected 519 trailers for testing from FEMA's database of all existing occupied trailers. These results represent only that group. These 519 trailers represent a cross-section of the most frequently used trailer types and manufacturers. CDC has completed analysis of the data from the testing and released its final report, which includes those findings with significant implications for public health.

Key Findings

- In many trailers, mobile homes, and park models tested, formaldehyde levels were elevated relative to typical levels of US indoor exposure.
- Average levels of formaldehyde in all units was about 77 parts per billion (ppb). This level is higher than US background levels. Levels measured ranged from 3 ppb to 590 ppb.
- These measured levels are likely to under-represent long-term exposures since formaldehyde levels tend to be higher in newer travel trailers and mobile homes and during warmer weather.
- Indoor temperature was a significant factor for formaldehyde levels in this study independent of trailer make or model.

- Formaldehyde levels varied by model (mobile homes, park homes, and travel trailers), but all types of trailers tested had some high levels.
- At the levels seen in many trailers, health could be affected.
- Other factors – such as humidity, temperature, presence of more than 1 square foot of mold, and ventilation – are associated with formaldehyde levels.
- About 1/3 (29%) of the trailers did not have a working smoke detector.

Recommendations for Public Health Officials

- These conclusions affirm CDC's previous recommendation to move quickly to relocate trailer residents before the warmer weather of summer, placing highest priority on those who are symptomatic and/or especially vulnerable.
- Appropriate follow-up will require multi-agency collaboration including FEMA, HUD, CDC, and others, to achieve safe, healthy housing for people displaced by Hurricanes Katrina and Rita who continue to live in FEMA-supplied travel trailers and mobile homes.
- FEMA should consider necessary assistance to Louisiana and Mississippi Health Departments to ensure adequate follow-up, including medical needs, for trailer residents with health and medical concerns resulting from residence in FEMA-supplied travel trailers or mobile homes and formaldehyde exposure.
- FEMA should consider establishing a registry and long-term health monitoring of children and others who resided in FEMA-supplied travel trailers and mobile homes in the Gulf Coast Region.

Recommendations for Residents

- Families who live in FEMA-supplied travel trailers and mobile homes should spend as much time outdoors in fresh air as possible.
- Open windows as much as possible to let in fresh air.
- Try to maintain the temperature inside travel trailers and mobile homes at the lowest comfortable level.
- Do not smoke, and especially do not smoke indoors.
- If you have health concerns, see a doctor or another medical professional.
- Families that include children, the elderly, and those with chronic diseases such as asthma should make a special effort to get as much fresh air as possible, and these families should make relocating to permanent housing a priority.

Further CDC Action

- In February 2008, CDC notified participants in the study of these results, with personal visits and a hand-delivered letter.
- In February and March 2008, CDC conducted public availability sessions in both Louisiana and Mississippi to provide information to other concerned and interested individuals.
- CDC's 24-hour, toll-free hotline will continue to respond to health-related questions from residents.
- CDC is continuing several studies of unoccupied trailers to assess formaldehyde levels across different models and types and to identify factors that reduce or raise those levels. This also involves identifying cost-effective ways to reduce formaldehyde levels and concentrations in trailers.
- CDC is developing a protocol for a long-term study of children who resided in FEMA-supplied travel trailers and mobile homes in Mississippi and Louisiana.
- CDC is providing educational materials and information to trailer residents about their risk of exposure to formaldehyde and ways to improve indoor air quality and health.

Summary

When these trailers were constructed, vague government specifications were for all intents and purposes a blank check for the industry to produce units without regard to human health. There can be little doubt that after receiving government orders, manufacturers sped up production and widened their profit margins by using substandard materials and cutting corners on safety. But in a broader sense, the extremely high percentage of trailers found in tests to have excessive formaldehyde levels suggest that the toxicity in the FEMA units are more an industry rule than an exception.

Basically, the public health catastrophe now occurring among the post-Katrina population is an expression of the plight of the poorest sections of the working class throughout the country, who live in substandard housing, suffer higher exposure to pollutants and toxins in their home environments, and develop cancer at higher rates. This group is constantly disenfranchised by the courts, refused compensation and medical aid for illnesses, and die younger of preventable ailments. In many instances they are victims of industry and a government incapable or unwilling to regulate it.

On a very personal note one of my closest and dearest friends held a very coveted job as a jazz singer in New Orleans, Louisiana. She moved into her FEMA provided trailer and she was very happy to do so. However, after living in the trailer for approximately 6 months she was unable to carry a note. She had nosebleeds, watery eyes and signs of Chronic Obstructive Pulmonary Disease. She no longer has the ability to sing which has made her severely depressed but moreover has precluded her from earning a living. Furthermore she has gotten progressively more short of breath even though she vacated the trailer more than 2 yrs ago. One may call this anecdotal however it is the reality of far too many gulf coast residents.

It seems that at this time the prevailing issue is not if formaldehyde is dangerous but rather how much is too much. Also, is it irresponsible to sell these trailers to unsuspecting individuals that may not be able to afford any other form of housing? In my opinion, the answers are as follows: any level of formaldehyde greater than the United States background level is unsafe. Secondly, for the United States to KNOWINGLY sell an unsafe product to consumers is a travesty of justice of epic proportions that only our children will realize if the sale continues. Lastly, FEMA must continue to expand studies on the effects of formaldehyde on occupants of FEMA supplied trailers. The short term effects are important to ascertain, however the long term effects are the most important index in revealing the true medical conditions that will evolve from prolonged exposure to this toxic chemical.

References

Final Report on Formaldehyde Levels in FEMA Supplied Travel Trailers, Park Models, and Mobile Homes. Centers for Disease Control July 2, 2008

Flynn, Elizabeth, MD; Matz, Paul, MD; Woolf, Alan, MD; Indoor Air Pollutants Affecting Child Health, American College of Medical Toxicology, November 2000

An Update and Revision of ATSDR's February 2007 Health Consultation: Formaldehyde Sampling of FEMA Temporary Housing Trailers, Baton Rouge, Louisiana September-October, 2006 October 2007

Mendel, M.J., Indoor Residential Chemical Emissions as Risk Factors for Respiratory and Allergic Effects in Children: a review, *Indoor Air* 2007:17: 259-277