## Miller, Diane M. (CDC/NIOSH/EID)

From:

Pfefferblit, Noah <npfefferblit@cb.nyc.gov>

Sent:

Monday, January 16, 2012 4:36 PM

To:

NIOSH Docket Office (CDC)

Subject:

FW: Comments for 1/24/12 meeting of WTCHP STAC

Attachments:

image002.jpg; WTC 1.12.docx

Attached please find comments from Manhattan Community Board 1 for the January 24, 2012 meeting of the World Trade Center Health Program Scientific/Technical Advisory Committee (WTCHP STAC), National Institute for Occupational Safety and Health (NIOSH). These comments were approved as a resolution by a unanimous vote of the WTC Redevelopment Committee of Community Board 1 on January 9, 2012.

Please let me know if you need any additional information from us and thank you for the opportunity to comment.

Regards,

Noah Pfefferblit District Manager Community Board 1 npfefferblit@cb.nyc.gov Tel: 212-442-5050

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## COMMUNITY BOARD #1 – MANHATTAN RESOLUTION

DATE: JANUARY 24, 2011

COMMITTEE OF ORIGIN: WTC REDEVELOPMENT

COMMITTEE VOTE: 7 In Favor 0 Opposed 0 Abstained 0 Recused PUBLIC MEMBER: 0 In Favor 0 Opposed 0 Abstained 0 Recused BOARD VOTE: 0 In Favor 0 Opposed 0 Abstained 0 Recused

Re: Request to Add Four Key Survivor Population Medical Studies to the

WTC Health Program Research Priorities to be funded under The James

Zadroga 9/11 Health and Compensation Act

WHEREAS: The James Zadroga 9/11 Health and Compensation Act of 2010, includes

funding for medical studies on the survivor population; and

WHEREAS: There have been many more medical studies on the responder population

than the survivor population over the past decade and children have been

understudied; and

WHEREAS: The WTC Health Program at the World Trade Center Environmental

Health Center of Excellence (WTC EHC) at Bellevue has submitted proposals for funding for the following four studies of the survivor

population:

1. **Pediatric Studies -** In depth evaluation of pediatric effects of exposure, including lung function, mental health or developmental and endocrine effects. Effects of exposures during the vulnerable growth period are completely unknown.

2. **Blood Bank** -Ability to save blood for DNA, RNA and protein analyses for future studies of susceptibility to diseases including lung and other cancers. These samples could be used by multiple investigators in pediatric and adult studies now and in the future.

3. **Disease Mechanisms -** We need more studies to understand the mechanisms producing the symptoms reported by patients in the WTC Health Program.

4. Data Center Analytic Funding - The Data Centers need additional funding for center-specific analyses that may be required quickly. Two examples of this are the question that has arisen about latency of symptom onset and a case series of cancers in programs with continued cohort recruitment, now

**THEREFORE** 

BE IT

RESOLVED

THAT: CB1 strongly supports the funding of these studies by the WTC EHC at

Bellevue so that the environmental 9/11 health impact on children and adults who lived, attended school or worked in the area can be better

understood.