Asbestos Disease Awareness Organization
"The Voice of the Victims"
www.asbestosdiseaseawareness.org

Reflections

ADAO Applauds U.S. Senate for Passage of Resolution to Establish National Asbestos Awareness Day

Washington, DC ... March 18, 2005 — The Asbestos Disease Awareness Organization (ADAO), an organization dedicated to serving as the voice of asbestos victims, today applauds **Senator Harry Reid (D-NV) and Senator Bill Frist (R-TN)** for their leadership in designating April 1st as "National Asbestos Awareness Day." This resolution, proposed by the Asbestos Disease Awareness Organization and passed by the Senate today, will raise public awareness about the dangers of asbestos exposure and asbestos related diseases.

"ADAO praises Senator Reid for his leadership in helping to secure the passage of the Senate Asbestos Awareness Day Resolution, the first bill to truly embrace the rights of current and future asbestos victims," said Alan Reinstein, President, Asbestos Disease Awareness Organization. "This landmark resolution will spring a global tide of awareness that may help put an end to the needless suffering caused by asbestos – by fueling earlier detection, expanded research and better treatment options."

ADAO is calling for participation in the first National Asbestos Awareness Day on April 1, 2005 through numerous targeted activities including "Reflections", an online publication, reviewing the tragic history of asbestos and providing information about preventing exposure and early disease detection featuring an article from Dr. Richard Lemen, retired Assistant Surgeon General. Interested parties can learn more by visiting the ADAO website at: www.asbestosdiseaseawareness.org.

April 1, 2005 to Serve as First National Asbestos Awareness Day

"This landmark resolution will spring a global tide of awareness that may help put an end to the needless suffering caused by asbestos – by fueling earlier detection, expanded research and better treatment options."
-Alan Reinstein
President, ADAO

Transcript of Senate Resolution 43 on Page 5.

"Reflections is dedicated to the tens and thousands, named and unnamed, victims of asbestos disease."

Introduction
by
Paul A. Brodeur

Thanks to the efforts of Linda Reinstein and her colleagues in the Asbestos Disease Awareness Organization, April 1, 2005 has been declared National Asbestos Awareness Day by unanimous vote of the United States Senate.

This is an opportune time for such an observance to be held. Today, President Bush, Republican members of the Senate, and various industries and insurers who face lawsuits brought by sick and dying asbestos victims, are urging passage of a compensation trust fund act that cannot possibly satisfy all present and future asbestos claims. The reason is simple: new categories of asbestos victims are coming to light all the time, so no one has any idea how many future victims there will be, or how many of them will bring claims.

Forty years ago, the renowned epidemiologist Dr. Irving J. Selikoff was known to say that studying asbestos disease was like throwing a rock into a pond and seeing how far the ripples extended outward.
In pioneering studies conducted in the 1960s, Selikoff and his colleagues demonstrated the horrific extent of asbestos lung disease in heavily exposed asbestos insulators. He then showed that asbestos disease was also striking less-exposed workers who toiled alongside the insulators in shipyards and on building construction sites. At the same time, he and other scientists found that the wives and children of asbestos workers were dying through exposure to the relatively small amounts of asbestos dust their husbands and fathers were bringing home on their work clothes.

Small wonder that asbestos is considered to be the leading industrial cause of cancer in the world! Or that the risk of falling victim to its depredations has by now extended far into the general population to include people living and working in tens of millions of homes and buildings containing asbestos insulation, near such buildings when they are demolished, and in the vicinity of asbestos mines and mills!

Instead of extending a helping hand to industries that for decades concealed the asbestos hazard from unsuspecting workers and members of the general population, Americans should remember the plight of tens of thousands of past victims of asbestos disease, and consider the suffering and economic burden of the tens of thousands of their fellow citizens who will develop asbestos disease in the years to come.

This is precisely what the Asbestos Disease Awareness Organization is calling upon everyone to do on April l, 2005.

The following are the reflections and observations of a number of physicians and others who have been involved in the asbestos health crisis over the years:

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Senate Resolution 43

Designating the first day of April 2005 as `National Asbestos Awareness Day'.

IN THE SENATE OF THE UNITED STATES

109th CONGRESS

1st Session

Designating the first day of April 2005 as 'National Asbestos Awareness Day'.

Whereas dangerous asbestos fibers are invisible and cannot be smelled or tasted;

Whereas the inhalation of airborne asbestos fibers can cause significant damage;

Whereas these fibers can cause mesothelioma, asbestosis and other health problems;

Whereas asbestos-related diseases can take 10 to 50 years to present themselves;

Whereas the expected survival time for those diagnosed with mesothelioma is between 6 and 24 months;

Whereas generally little is known about late stage treatment and there is no cure for asbestos-related diseases;

Whereas early detection of asbestos-related diseases may give some patients increased treatment options and might improve their prognosis;

Whereas the United States has substantially reduced its consumption of asbestos yet continues to consume almost 7,000 metric tons of the fibrous mineral for use in certain products throughout the Nation;

Whereas asbestos-related diseases have killed thousands of people in the United States;

Whereas asbestos exposures continue and safety and prevention will reduce and has reduced significantly asbestos exposure and asbestos-related diseases;

Whereas asbestos has been a cause of occupational cancer;

Whereas approximately 1,300,000 workers in the United States face significant asbestos exposure;

Whereas asbestos-related deaths have greatly increased over the past 20 years;

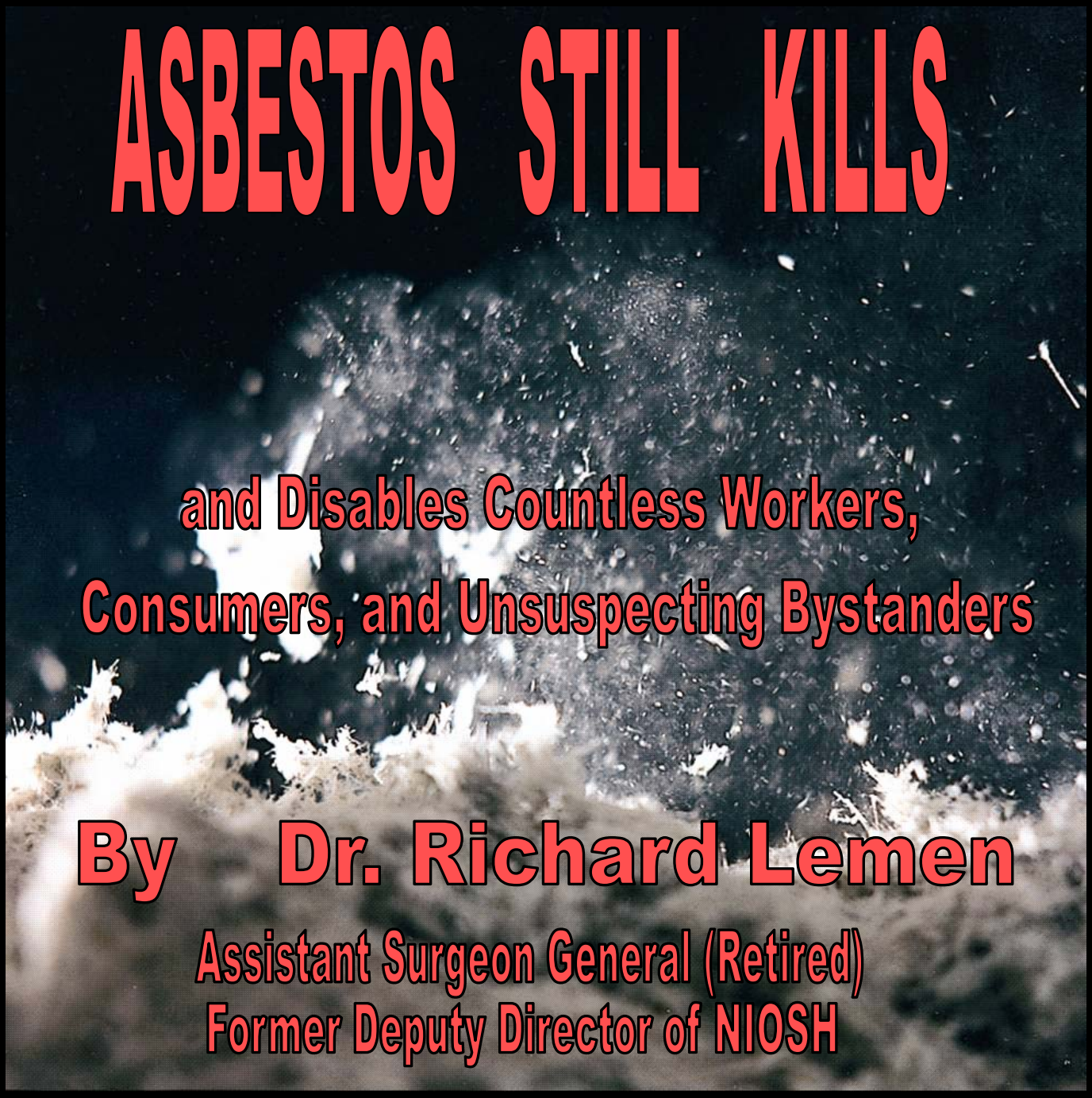
Whereas a significant percentage of all asbestos-related disease victims were exposed to asbestos on naval ships and in ship-yards;

Whereas asbestos was used in the construction of a significant number of office buildings and public facilities built before 1975; and

Whereas the establishment of a ''National Asbestos Awareness Day'' would raise public awareness about the prevalence of asbestos-related diseases and the dangers of asbestos exposure:

Now, therefore, be it Resolved, That the Senate designates the first day of 1 April 2005 as ''National Asbestos Awareness Day''.

ASBESTOS STILL KILLS



and Disables Countless Workers, Consumers, and Unsuspecting Bystanders

By Dr. Richard Lemen

Assistant Surgeon General (Retired)
Former Deputy Director of NIOSH

There is an epidemic of asbestos-related diseases in the United States. At least ten thousand Americans die each year from diseases caused by asbestos. Asbestos-related diseases are responsible for the death of one out of every 125 American men over the age of fifty. Even more disturbing, deaths from asbestos in the United States appear to be increasing. Asbestos diseases generally have a 20 to 50 year latency period, meaning that a substantial portion of individuals exposed in the 1960s and 1970s are only now showing up in disease or mortality statistics. Asbestosis and cancer deaths from asbestos are often dramatically underreported, even in worker populations where asbestos exposure is well established.

(Continued on page 7)

It is projected that in the next decade, four asbestos-related diseases – mesothelioma, asbestosis, lung cancer and gastrointestinal cancers will claim the lives of over 100,000 Americans.

The epidemic is national in scope, affecting every state and also has become one of international scope. Increasing regulation has reduced exposure within the United States and many industrialized countries but has not prohibited companies that mine and manufacture asbestos-containing products to move this hazardous substance into countries without such regulations. A world-wide epidemic of asbestos-related disease is now in process and rapidly expanding.

The Occupational Safety and Health Administration estimate that 1.3 million Americans currently are exposed to asbestos on the job.

Documents showing the complicity of major asbestos defendants and their insurers in the American asbestos epidemic are disturbing. For more than 50 years, many employers were willing to distort the hazards of asbestos to their workers, mislead regulators, and delay worker safeguards.

"The controlled use of asbestos proposed by various mining and manufacturing companies is a myth."

For these very reasons, government intervention was necessary. However, while there are employers who do protect their workers, those that haven't have lead to the government Interventions so many people despise. Worker safety is the responsibility of the employer not the government and until employers accept this responsibility, the only options are for government action and judicial solutions to hold them responsible for their lack of actions. Eliminating either of these two options will remove the necessity of some unscrupulous employers to take the actions necessary to protect workers, consumers, and exposed bystanders.

Unfortunately, few asbestos workers ever step forward to seek restitution. Most die from their disabilities and diseases, often unrecognized as work-related, leaving their families bearing the brunt of medical costs as well as the emotional strain of a prolonged and preventable illness.

The fact that asbestos-related diseases could easily kill 100,000 Americans, 80% of them men, over the coming decade is ample cause for strong public health actions. While regulations have reduced exposures, we in public health and industry have failed in our efforts to educate both the workers and the public about the continued presence of asbestos in the workplaces and our environment. Education of both industry and regulations must continue and be adapted and enforced by business, federal and state agencies in order to protect workers and consumers. Employers should refuse to use asbestos and to medically monitor their employees and retirees previously exposed, to asbestos, for potential development of asbestos-related diseases, including cancer, in order to assure early detection, a time when treatment interventions can not only save lives but prevent undue suffering.

(Continued on page 8)

"The Occupational Safety and Health Administration estimates that 1.3 million Americans currently are exposed to asbestos on the job."

The controlled use of asbestos proposed by various mining and manufacturing companies is a myth. The idea of a safe form of asbestos is another myth. All types of asbestos are killers. Therefore, with all of the scientific data and knowledge about asbestos, it is incomprehensible that it is still permitted in commercial products meant for general consumer use, such as brakes, lawn products and cement pipes. We have seen the toil on the workers who mine asbestos, manufacturing asbestos, and using asbestos containing products. What will be the toil on the American consumer if asbestos continues to be allowed in commercially available products and American workplaces? Now is the time for the United States to join the growing list of nations that have banned the further importation and use of asbestos.

Asbestos related diseases are a result of human exploitation, and only through stopping such exploitation can we halt the epidemic. Many responsible industries have taken action, while others have not. Unfortunately, because some industries are unwilling to take such action, it is up to the federal government to act. Asbestos is a deadly substance. We have known of its dangers for over 100 years and we know that suppression of the asbestos containing dust will not work. No thresholds for cancer can be established, and that even at the lowest standards to date, excessive disease and death will continue to occur. The safest and most desirable course of action, is to ban asbestos from commercial use altogether, if we are to stop this continuing epidemic of disease and death. In the United States alone it is estimated that between 189,000 and 231,000 deaths have

(Continued on page 9)

occurred since 1980 due to workplace exposure to asbestos. Another 270,000 to 330,000 deaths are expected to occur over the next 30 years. For those workers exposed over a working lifetime, to the current Occupational Safety and Health Administration (OSHA) standard of 0.1 fibers/cc, over 3 of every 1000 workers will die as a result of asbestos related diseases.

If the deaths of workers exposed to asbestos in the United States at the current occupational standard are anywhere near this magnitude, what then would be the magnitude of disease and death to the countless number of unsuspecting consumers using asbestos containing products? These products include such things found in the home as lamp sockets, floors, cat box litter, the braking mechanism in washing machines, furnaces, dishwashers, and other products.

The only way to eliminate asbestos related disease is to eliminate any exposure to asbestos and to ban its continued usage, as recommended by the agency I retired from, the National Institute for Occupational Safety and Health. It recommended this step as early as 1976; a step now taken by many industrially developed nations, including the European Community, but not the United States.

It is clearly the time to heed the advice of the very eminent British public health statistician Sir Bradford Hill who said in 1965: *"All scientific work is incomplete - whether it be observational or experimental. All scientific work is liable to be upset or modified by advancing knowledge. That does not confer upon us a freedom to ignore the knowledge we already have, or to postpone action that it appears to demand at a given time."*

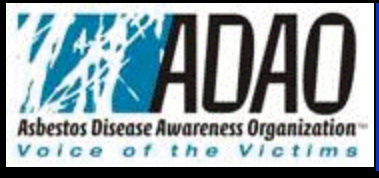
A worldwide public health crisis exists. We must take action. Each of us has a role – to accept the challenge and stop the continued uses of asbestos.

-Dr. Richard A. Lemen

Assistant Surgeon General of the United States, USPHS (Retired), Deputy Director and Acting Director of the National Institute for Occupational Safety and Health (Retired), Centers for Disease Control and Prevention (CDC)

Dr. Lemen has testified in asbestos litigation on behalf of asbestos victims since his retirement for U.S. Government service .

"Asbestos related diseases are a result of human exploitation, and only through stopping such exploitation can we halt the epidemic."



Asbestos Disease Awareness Organization
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Call for an International Ban on Asbestos

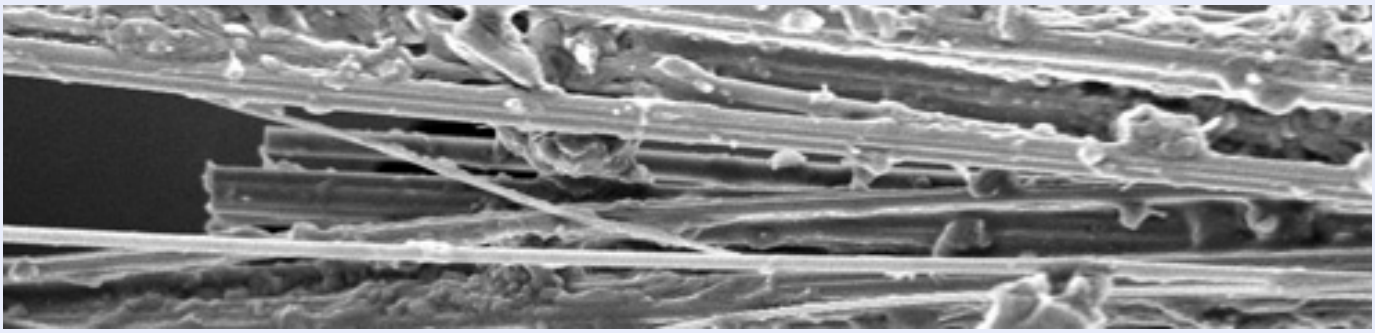
By

Philip J. Landrigan, MD, MSc

Chair of the Department of Community and Preventive Medicine and Director of the Center for Children's Health and the Environment at Mount Sinai School of Medicine

The following article, submitted by Dr. Landrigan, calls for an International Ban of Asbestos. The article was compiled by the Collegium Ramazzini, an international community of scholars, formed in order to advance the study of occupational and environmental health issues around the world. Dr. Landrigan currently serves as President of the Collegium Ramazzini.

AMERICAN JOURNAL OF INDUSTRIAL MEDICINE 36:227-229 (1999)



The Editorial Board of the American Journal of Industrial Medicine *strongly supports the "Call for an International Ban on Asbestos". We concur with the Collegium Ramazzini that a ban is necessary, overdue and essential for public health.*

To eliminate the burden of disease and death that is caused worldwide by exposure to asbestos, the Collegium Ramazzini calls for an immediate ban on all mining and use of asbestos. To be effective, the ban must be international in scope and must be enforced in every country in the world.

Asbestos is an occupational and environmental hazard of catastrophic proportion. Asbestos has been responsible for over 200,000 deaths in the United States, and it will cause millions more deaths worldwide. The profound tragedy of the asbestos epidemic is that all illnesses and deaths related to asbestos are entirely preventable.

Safer substitutes for asbestos exist, and they have been introduced successfully in many nations. The grave hazards of exposure to asbestos and the availability of some safer substitute materials have led a growing number of countries to eliminate all import and use of asbestos. In the United States, there has occurred drastic reduction of asbestos usage. Asbestos has been banned by Sweden, Norway, Denmark, The Netherlands, Finland, Germany, Italy, Belgium, France, Austria, Poland, and Saudi Arabia.

The Collegium Ramazzini

The Collegium Ramazzini is an international academic society that examines critical issues in occupational and environmental medicine. The Collegium is dedicated to the prevention of disease and the promotion of health. The Collegium derives its name from Bernardino Ramazzini, the father of occupational medicine, a professor of medicine of the Universities of Modena and Padua in the late 1600s and the early 1700s. The Collegium is comprised of 180 physicians and scientists from 30 countries, each of whom is elected to membership. The Collegium is independent of commercial Interests.

Background

The health consequences of the use of asbestos in contemporary industrial society have been amply documented in the world scientific literature. The toll of illnesses and deaths among asbestos workers in mining, construction, and heavy industry is well known. The pioneering work of British, South African, and Italian investigators [Doll, 1995; Wagner et al., 1960; Vigliani et al., 1964] laid the foundation for the definitive investigations by Irving Selikoff and his colleagues of insulation workers in the United States. Selikoff's monumental studies showed, first, the greatly increased mortality experience of insulation workers [Selikoff et al., 1964], and later, the synergistic relationship between tobacco smoking and asbestos work [Selikoff et al., 1969]. Men who were followed more than 20 years from first onset of exposure sustained excessive risks of lung cancer and mesothelioma, as well as risks of other neoplasias [Selikoff and Seidman, 1991]. These risks affect not only asbestos workers, but their families and neighbors (from material on clothing or plant emissions), users of products that contain asbestos, and the public at large.

Asbestos is a general term applied to certain fibrous minerals long popular for their thermal resistance, tensile strength, and acoustic insulation. Asbestos minerals are divided into two large groups: serpentine and amphibole. There is only one type of asbestos derived from serpentine minerals, chrysotile, also known as white asbestos. Amphilbole minerals include five asbestos species: amosite, crocidolite, tremolite, anthophyllite, and actinolite. Two of these are the most commercially valuable forms: amosite, or brown asbestos, and crocidolite, or blue asbestos. The other amphibole minerals are of little commercial importance.

All forms of asbestos cause asbestosis, a progressive fibrotic disease of the lungs. All can cause lung cancer and malignant mesothelioma [International Program on Chemical Safety, 1988; Dement et al., 1994]. Asbestos has been declared a proven human carcinogen by the U.S. Environmental Protection Agency (EPA) and by the International Agency for Research on Cancer of the World Health Organization [Environmental Protection Agency, June 1986; International Agency for Research on Cancer, 1987]. Early indications that chrysotile might be less dangerous than other forms of asbestos have not held up [UNEP, ILO, WHO, 1988]. The preponderance of scientific evidence to date demonstrates that chrysotile too causes cancer, including lung cancer and mesothelioma [Smith and Wright, 1996; Stayner et al., 1996]. Canadian chrysotile that is amphibole-free still is associated with mesotheliomas [Frank et al., 1998].

A leading asbestos researcher, Julian Peto, and his colleagues predict that deaths from mesothelioma among men in Western Europe will increase from just over 5,000 in 1998 to about 9,000 by the year 2018. In Western Europe alone, past asbestos exposure will cause a quarter of a million deaths from mesothelioma over the next 35 years. The number of lung cancer deaths caused by asbestos is at least equal to the number of mesotheliomas, suggesting that there will be more than half million asbestos cancer deaths in Western Europe over the next 35 years [Peto et al., 1999]. In Sweden, Jarvholm has reported that the number of deaths caused each year by malignant mesothelioma is greater than the number of deaths caused in that country by all workplace injuries [Jarvholm et al., 1990].

The Need for a Ban

An immediate international ban on the mining and use of asbestos is necessary because the risks cannot be controlled by technology or by regulation of work practices. The strictest occupational exposure limits in the world for chrysotile asbestos (0.1 f/cc) are estimated to be associated with lifetime risks of 5/1,000 for lung cancer and 2/1,000 for asbestosis [Stayner et al., 1997]. These exposure limits can be technically achieved in the United States and in a few other highly industrialized countries, but the residual risks still are too high to be acceptable. In newly industrializing countries engaged in mining, manufacturing, and construction, asbestos exposures are often much higher, and the potential for epidemics of asbestos disease is greatly increased [Giannasi and Thebaud-Mony, 1997; Izmerov et al., 1998].

Scientists and responsible authorities in countries still allowing the use of asbestos should have no illusions that "controlled use" of asbestos is a realistic alternative to a ban. Moreover, even the best workplace controls canot prevent occupational and environmental exposures to products in use or to waste. Environmental exposure from the continued use of asbestos still is a serious problem. A recent study of women residing in communities in Canadian asbestos mining areas found a sevenfold increase in the mortality rate from pleural cancer [Camus et al., 1998]. Large quantities of asbestos remain as a legacy of past construction practices in many thousands of schools, homes, and commercial buildings in developed countries, and are now accumulating in thousands of communities in developing countries.

An international ban on mining and use of asbestos is necessary because country-by-country actions have shifted rather than eliminated the health risks of asbestos. The asbestos industry has a powerful influence over many countries. Even in the United States, the asbestos industry succeeded in 1991 in overturning the EPA's recommended ban and phase-out of asbestos by a technical ruling in the courts. Canada, Russia, and other asbestos-exporting countries have developed major markets in the newly industrializing nations. Conditions of current asbestos use in developing countries now resenble those that existed in the industrialized countries before the dangers of asbestos were widely recognized.

The commercial tactics of the asbestos industry are very similar to those of the tobacco industry. In the absence of international sanctions, losses resulting from reduced cigarette consumption in the developed countries are offset by heavy selling to the Third World. In similar fashion, the developed world has responded to the asbestos health catastrophe with a progressive ban on the use of asbestos. In response, the asbestos industry is progressively transferring its commercial activities and the health hazards to the Third World.

Multinational asbestos corporations present a deplorable history of international exploitation. These firms opened large and profitable internal and export markets in Brazil, elsewhere in South America, and in India, Thailand, Nigeria, Angola, Mexico, Uruguay, and Argentina. Brazil is now the fifth largest producer and consumer of asbestos in the world, after Russia, Canada, Kazakstan, and China [Harington and McGlashan, 1998]. While asbestos use in the United States amounts to less than 100 g per citizen per year, asbestos use in Brazil averages more than 1,000 g per citizen per year. In third-world countries, use of asbestos has been increasing at an annual rate of about 7 percent.

CONCLUSION

The grave health hazards of asbestos are entirely preventable. The health risks of asbestos exposure are not acceptable in either industrially developed or newly industrializing nations. Moreover, suitable, safer substitutes for asbestos are available. An immediate worldwide ban on the production and use of asbestos is long overdue, fully justified and absolutely necessary.

Collegium Ramazzini

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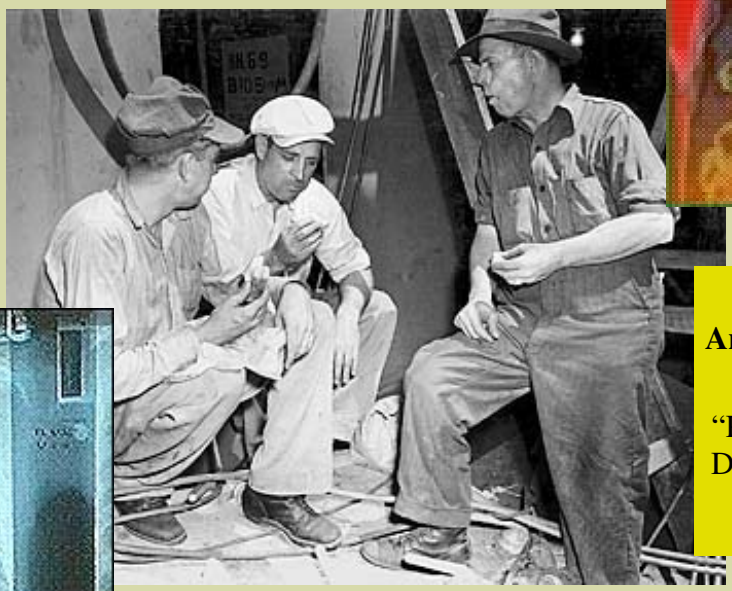
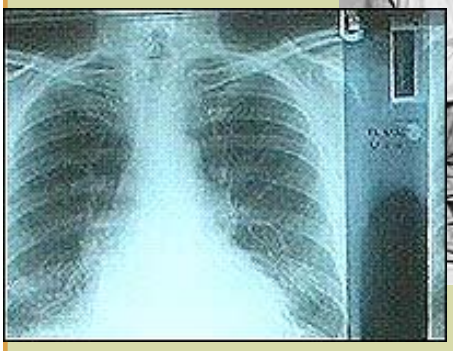
HISTORY of ASBESTOS DISEASES





by
Arthur L. Frank, MD, PhD

"Professor of Public Health, Drexel University School of Public Health"

The potential hazards of working with asbestos was known to the Romans, hundreds of years ago. Little was added to our knowledge until the beginning of the 20th century. In the closing decade of the 19th century, cases of asbestos disease became known to factory inspectors in England. In one setting, a man in his 30s died of respiratory failure, noting that he was the last of 10 workers in his work area to do so. They had all been involved with making asbestos textiles.

In 1924, an English physician, Cooke, coined the term "asbestosis" to describe the disease that had been seen for some years, and was noted to result from exposure to asbestos. This scaring of the lung, and the lining of the lung known as the pleura, was now well documented in the scientific literature.

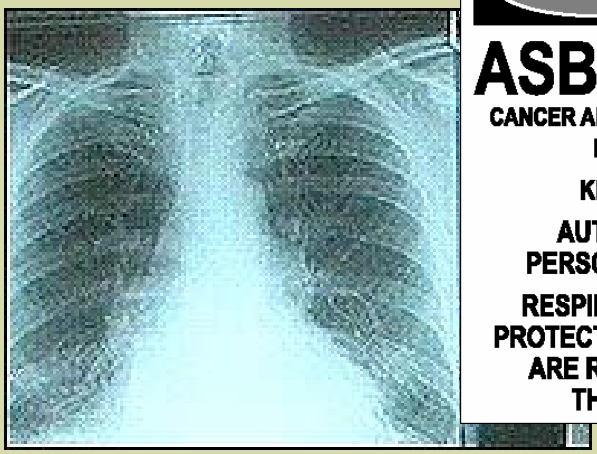
Landmark in the study of asbestos disease and its prevention was the work of Merewether and Price who in 1930 published on the problems of asbestos related disease. The noted that such disease could occur in both men and women, resulted from employment in several asbestos utilizing industries, and that preventive measures could be taken such as better ventilation or the use of respiratory protection to prevent the development of such disease.

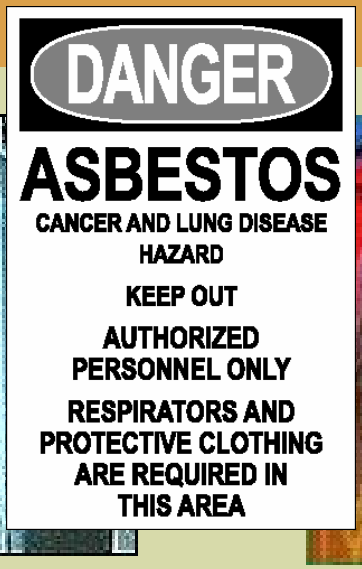
Soon thereafter, two American physicians in South Carolina, saw cases of asbestosis and what they thought was an excess number of cases of lung cancer. They suggested that working with asbestos might produce lung cancer. By 1942, the director of occupational cancer studies at the National Cancer Institute, Wilhelm Hueper, wrote in a textbook of the carcinogenic properties of asbestos. Before the 1940s were over, even the lay press was writing about the hazards of asbestos, and its ability to produce cancer.

Lung cancer epidemiology continue to develop in the 1950s and 1960s and beyond with literally thousands of studies now having been published. Other cancers have been found to be related to exposure to asbestos, namely the "sentinel" tumor, mesothelioma, a rare cancer of the lining of the chest and abdominal cavities, caused almost exclusively by asbestos. Cases of mesothelioma were first noted in the 1920s in asbestos processing facilities but did not become written about in the scientific literature until the 1940s, and 50s. By 1960 it was entirely clear that mesothelioma would result from exposure to asbestos.

Throughout the 1960s and 70s, additional studies were done, in many places in the world, and other cancers related to asbestos exposure such as cancer of the larynx, kidney cancer and gastrointestinal tracts, have been related to exposure to asbestos. There continues to be some controversy about some of these cancers, and the relative abilities of different forms of asbestos to produce disease, but it is unquestionable that each and every form of asbestos has the ability to produce malignances.

The current state of knowledge and studies regarding asbestos have more to do with understanding some of the mechanism by which asbestos produces cancer, and the genetic changes that may take place leading to the development of such malignances. There is still much to be done with regard to learning about more successful treatments for asbestos related diseases, especially mesothelioma.





Protecting Fire Fighters from Asbestos Exposure

Detecting and Treating Asbestos Diseases

Michael R. Harbut, MD, MPH, FCCP
Chief, Center for Occupational and Environmental Medicine
Co-Director, National Center for Vermiculite and Asbestos-Related Cancers,
Karmanos Cancer Institute
Clinical Assistant Professor, Internal Medicine

Recently, the International Association of Fire Fighters (IAFF) published an article in its January - February issue of International Fire Fighter based on comprehensive information provided to the IAFF from ADAO, discussing the dangers of asbestos and describing early warning symptoms of disease. We are pleased to work with the IAFF, a leader in Asbestos Awareness.
January-February 2005 © International Association of Fire Fighters

Heroes come in different shapes and sizes, but fire fighters — known for putting their lives on the line every day — certainly top the list. In addition to the many obvious dangers fire fighters face, asbestos is an increasing concern. Approximately 4,500 cases of asbestos-relat-ed cancer are reported each year in the United States, with that number expected to increase significantly over the next 10 years.

Asbestos exposure is affecting more and more Americans — as many family members of those exposed contract asbestos-related diseases due to secondhand exposure.

Since materials containing asbestos have been used in insulation in older buildings, millions of homes and commercial struc-tures throughout the United States are still danger-ously contaminated with asbestos fibers. And despite more adequate fire fight-ing protection, fire fighters still face risks, some also having been exposed before the full impact of asbestos was understood.

Asbestos-contaminated materials are easily disturbed, not only during the fighting of a fire in a building built with the material, but also by simply moving boxes in an attic. Inhaling asbestos fibers can cause perma-nent and irreversible damage to vital organs. While it doesn't take a long expo-sure to cause damage, from the first exposure to the onset of disease is usually between 15 and 30 years, although lesser and greater intervals have been reported.

"Fire fighters have always faced the threat of asbestos," says IAFF Assistant to the Gen-eral President for Health and Safety Rich Duffy. "The fact that millions of homes are contaminated only underscores the importance of respiratory protection dur-ing suppression and overhaul activities, the need for decontamination and how crucial exposure reporting is when faced with chronic exposures to asbestos and other chemical hazards."

Preventing Asbestos Exposure and Detecting Asbestos Disease

The most important preventative safe-guard to asbestos exposure is to wear protective respiratory equipment. Although routine screening for asbestos-related diseases has never been clearly defined, the Asbestos Disease Awareness Organization (ADAO) — a group formed by asbestos vic-tims and their families — is working to educate the medical community and high-risk occupations about asbestos-related diseases and the danger of asbestos exposure. For more information, review "Early Warning Symptoms for Asbestos-Related Diseases" online at **http://www.asbestosdiseaseaware-ness.org/eLibrary/symptoms-web.pdf.** Remember to give your doctor a complete medical and occupational history and include respiratory ailments, new symp-toms and possible exposure to asbestos.

Early Warning Symptoms

Early detection of asbestos-related disease is often difficult — symptoms are generally vague and can be easily confused with other illnesses such as pneumonia. Only a doctor can properly diagnose asbestos-related diseases.

One early warning sign of non-cancerous disease is often shortness of breath — which can be caused by many different things, so it's important to see a doctor early on. For many middle-aged and older people, heart disease will first need to be ruled out.

Following is a list of general asbestos-related disease early warning symptoms.

- Persistent pain in the lower back, shoulder or chest wall
- Shortness of breath
- Appearance of lump or mass on chest wall
- New onset of persistent dry cough
- Coughing up blood
- Persisting loss of energy, fatigue or anemia
- Losing weight for no apparent reason
- Onset of hoarseness or a change in voice
- Persistent swelling of face and/or arms
- Muscle weakness
- Abdominal pain and or distention
- Nausea and or vomiting
- Fluid in the abdominal cavity or in the chest lining

Asbestos exposure does not automatically result in disease or cancer. Furthermore, individuals who develop these symptoms do not necessarily have asbestos-related dis-eases, but should consult a physician.

Other lung cancers are significantly increased in patients with asbestos expo-sure, even in the absence of"clinical asbesto-sis," as are colon cancers.

Treatment

The American Thoracic Society has pub-lished a 2004 guide to diagnosing non-can-cerous asbestos-caused diseases that is available to patients and physicians at http://www.thoracic.org/adobe/state-ments/asbestos.pdf, or in any medical library.

Diagnosis and treatment options require input from many different specialties in the health care team, including an experienced pathologist, a surgeon and a medical oncol-ogist who will put all of these specialists together to advise on what options are avail-able. In addition, medical advances are continually being made in treating this disease.

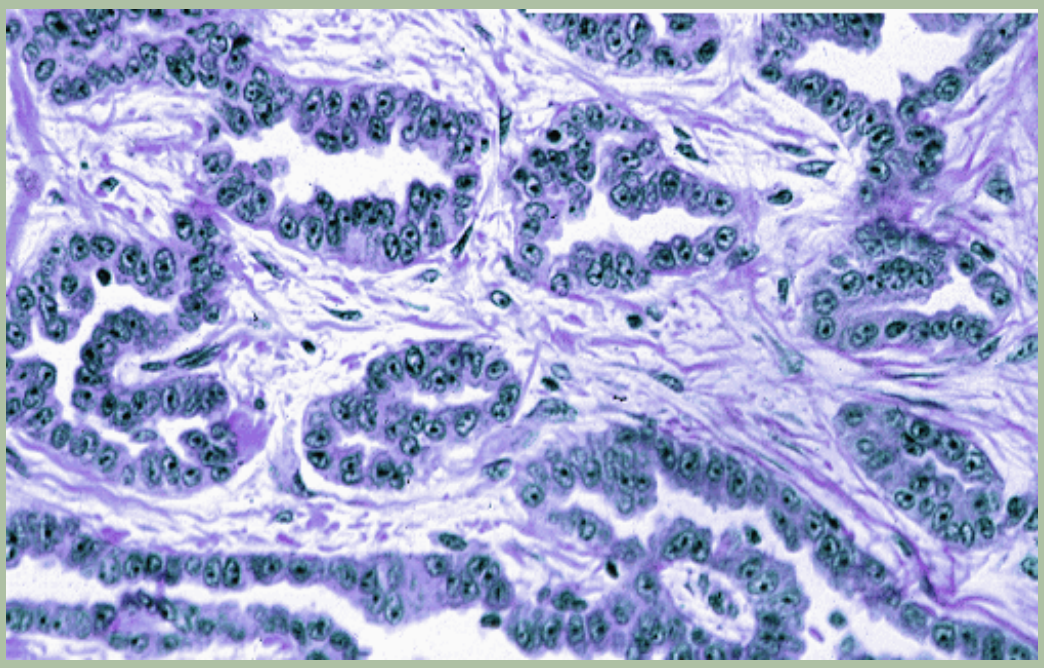
Asbestosis is incurable, but making the healthy tissue work much better improves the quality of life, and lengthens it.

The good news is that important strides are being made to improve awareness about asbestos-related diseases and to provide funding for treatment and find a cure.

MALIGNANT MESOTHELIOMA

Asbestos is a term that refers to certain kinds of bendable, fibrous rock that can be fashioned into tufts resembling cotton wool that will not burn. It has been used to make insulation and fireproof cloth for over 2000 years, and since about 1700, it has been used extensively in factories, schools, homes, ships, automobile brakes, ceiling, floor and roof tiles, and cement.

Since about 1930, however, our regard for environmental asbestos has shifted from admiration to terror. Disastrously, asbestos, especially older asbestos materials, breaks down and sheds deadly microscopic particles into the air, which are inhaled into the lungs. Asbestos exposure can cause various diseases such as severe lung scarring (asbestosis) and cancer. Those who served on Navy ships or who worked in the construction, shipbuilding, or related industries 20, 30 or even 60 years ago, are now at especial risk for developing a deadly form of cancer of the lining of the lung or abdominal cavity, termed **mesothelioma.**



This picture of pleura cells is of mesothelioma pleura cancer.

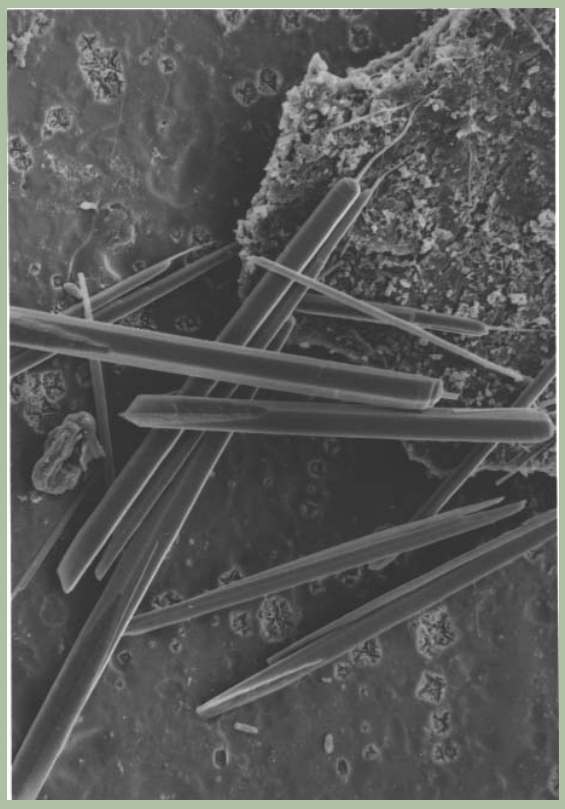
Mesothelioma kills more than 2500 people annually in the US, and the death toll increases yearly. Although it is dangerous to smoke, asbestos-exposed individuals who do smoke have a nearly 1 in 10 chance of developing inoperable lung cancer. Asbestos has also been linked, though not as strongly, to cancer of the larynx, stomach, colon, and kidney. Although asbestos importation and use in the US has

(Continued on page 19)

By Robert Taub, MD, PhD

Professor of Clinical Medicine at Columbia-Presbyterian Medical Center

been curtailed since the 1970's, the peak of asbestos-related cancer has not yet arrived. Fortunately, there has been gratifying progress made in our understanding of how asbestos fibers cause cancer. Much active research has been conducted with regard to methods of screening for lung cancer and mesothelioma, and preventing its development in high-risk individuals.

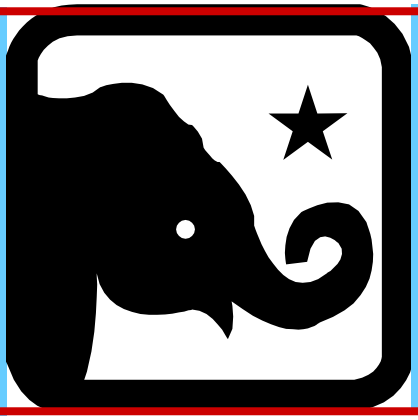


Maginfied Asbestos Fibers

It is timely and appropriate that new initiatives be sought to combat asbestos-related diseases, which are responsible for thousands of agonizing deaths each year. Many mesothelioma and lung cancers can be directly traced to asbestos exposure suffered over many decades by members of our Naval Forces, shipyard laborers, and construction workers. The incidence of mesothelioma is still rising and is not expected to peak until 2020. Right now, a large cohort of downtown New York City residents may be at risk after having been exposed to asbestos-laden air released from disintegrating buildings during the Sept 11, 2001 terrorist attack on the World Trade Center.

The Columbia University Mesothelioma Center is focused on developing new techniques for diagnosis and treatment. Using microarray gene expression analysis and histochemical markers, we can more accurately identify those with especially aggressive tumors that would require intensive multimodality or experimental therapy. Our clinical team of surgeons, radiotherapists and medical oncologists continues to carry out studies of the newest available agents to control the disease, taking a clue from the laboratory analysis of cultured cell samples obtained during operation. Preoperative chemotherapy is given to reduce the scope of needed surgery and to mitigate possible disease spread, and new techniques have been evolved for selectively irradiating involved pleura while sparing functioning lung tissue. In some patients, asbestos-related mesothelioma attacks the abdominal cavity and peritoneum rather than the lungs. We are especially concerned with these patients. Our intensive team-based program of surgery, intracavitary chemotherapy and immunotherapy followed by abdominal radiation have rendered many of our peritoneal mesothelioma patients verifiably disease-free, a very encouraging result. Looking toward the future, we are collaborating with the Ludwig Cancer Research Institute to identify antigenic patterns on mesothelial cells, which can be used to make a vaccine and to develop a blood test for early disease. New bench-to-bedside investigations of chemotherapy, immunotherapy, and gene-expression based treatments for this and other cancers are reasons for optimism that asbestos-related cancers will be conquerable in the foreseeable future.

EDUCATING PRESIDENT BUSH AND SENATE REPUBLICANS



by Paul Brodeur

In his State of the Union address, President George Bush declared that the justice system was being misused and that the economy was being held back by "frivolous asbestos claims." In the Senate, Majority Leader Bill Frist has said that he will make it a "personal priority" to deal with what he calls "the current asbestos litigation crisis." Frist has assigned this task to Senator Arlen Specter, who is trying to persuade his colleagues to enact Senator Orrin Hatch's Fairness in Asbestos Injury Resolution Act, known as the FAIR Act to its advocates, and as the asbestos bailout bill to its detractors. Under this Act, a $140 billion trust fund would be set up to compensate all present and future asbestos claims.

Apparently, neither the President nor Senator Frist and his Republican colleagues, who openly sympathize with asbestos companies that have been forced to declare bankruptcy as a result of claims brought against them by sick asbestos workers, know or care about the appallingly negligent record of the nation's asbestos manufacturers. For example, in a speech before the senate, Frist described the Johns-Manville Corporation and W. R. Grace & Company as "reputable companies" that had been driven into bankruptcy because of asbestos litigation. The fact is, however, that the "reputable" Johns-Manville Corporation had not only been aware since the early 1930s that incurable asbestos lung disease was disabling and killing its own workers, but also had instituted a corporate policy not to inform sick workers about X-ray findings showing that they had developed asbestos disease.

In an infamous 1949 memorandum, the medical director of Johns-Manville described his company's policy toward unimpaired workers with X-ray evidence of lung damage as follows: "The fibrosis of this disease is irreversible and permanent so that eventually compensation will be paid to each of these men. But as long as the man is not disabled it is felt that he should not be told of his condition so that he can live and work in peace and the Company can benefit by his many years of experience." Is it any wonder that when presented with such evidence in the form of internal company documents, jurors serving in what Senator Frist calls "the flawed tort system" began awarding punitive damages against Johns-Manville, which are meted out for outrageous and reckless misconduct? Or that rather than risk going to trial, Johns-Manville and several dozen other asbestos manufacturers, who had also known about and hidden the risk of disease from their workers, chose to settle the vast majority of claims brought against them out of court?

As for W. R. Grace & Company, against which punitive damages have also been awarded in asbestos litigation, Frist apparently did not think it important to inform his fellow senators that an asbestos-contaminated vermiculite mine and mill in Libby, Montana--a town in whose residents he acknowledged many cases of asbestos disease had been diagnosed--was owned by none other than W. R. Grace, whose officials had known about the asbestos hazard in Libby for decades

(Continued on page 21)

and done nothing about it. Nor did he tell them that in 2001 Grace settled a fine for $2.75 million that had been levied by a federal judge, who found that the company had unlawfully denied the Environmental Protection Agency access to the Libby mine. Or that in 2003, the same judge ordered Grace to pay more than $54 million for emergency asbestos cleanup work performed by the EPA in Libby, and for medical screening of Libby residents and mine workers.

Since Frist's speech, members of a federal grand jury in Missoula, Montana, have viewed the "reputable" W. R. Grace & Company in a somewhat different light. In February of this year, they brought a criminal indictment against Grace and seven current and former Grace officials for "knowingly endangering residents of Libby, Montana, and concealing information about the health effects of its asbestos mining operations." Equally inexcusable as his blatant mischaracterization of the asbestos manufacturers is the manner in which Frist, a physician, managed to mislead his fellow senators about the relationship between asbestos inhalation, cigarette smoking and the development of lung cancer. Twice in his speech, he warned against allowing the victims of lung cancer caused by smoking to make claims against the Fair Act's compensation trust fund, on the ground that such claims might jeopardize the solvency of the fund. To support this position, he declared that fully 90% of the Manville Trust's lung cancer claimants had been demonstrated to be current or former smokers. (When Johns-Manville filed for bankruptcy in the 1980s, the Manville Trust was set up to pay compensation to thousands of workers who had developed asbestos disease after being exposed to the company's products. However, the fund has run low on money because the number of asbestos victims was grossly underestimated, with the result that sick workers and the widows of dead workers are receiving only a pittance compared to what they were formerly awarded under the judicial system.

As for Frist's pronouncements about smoking, it is difficult to believe that a medical doctor could be so uninformed in this day and age as to speak of lung cancer among asbestos workers, who are current or former smokers, as a disease undeserving of compensation. In any event, he should now familiarize himself with the studies published in the peer-reviewed medical literature, which demonstrate the extraordinary synergism that exists between cigarette smoking, asbestos exposure and the development of lung cancer. These studies show that non-smoking asbestos workers develop lung cancer five times more often than non-smoking workers not exposed to asbestos, that cigarette-smoking workers not exposed to asbestos develop lung cancer ten times as often as non-smoking workers not exposed to asbestos, and that workers who both smoke and are exposed to asbestos develop lung cancer fifty to sixty times as readily as workers who neither smoke nor are exposed to asbestos.

As it happens, Frist's feigned or real ignorance about the combined effects of smoking, asbestos exposure and asbestos disease has been accompanied by misinformation put out by Senator Tom Coburn, R-Okla, also a physician, who claims "there is no scientific evidence" that asbestos inhalation causes stomach, colon and laryngeal cancers, and who is trying to bar claims for these diseases from being brought before the proposed asbestos trust fund. All physicians take the Hippocratic Oath that, first and foremost, enjoins them from doing harm, and Senator Coburn is clearly breaking this solemn oath when he chooses to ignore the many major epidemiological studies--both domestic and foreign--that have been published in the peer-reviewed medical literature, and that clearly demonstrate the exact opposite of what he contends regarding the ability of asbestos to cause stomach, colon and laryngeal cancers.

One of the earliest and perhaps the most famous of these studies was conducted in 1962 and 1963, by the renowned epidemiologist, Dr. Irving J. Selikoff, of the Mount Sinai School of Medicine, in New York

(Continued on page 22)

"The fact is, however, that the "reputable" Johns-Manville Corporation had not only been aware since the early 1930s that incurable asbestos lung disease was disabling and killing its own workers, but also had Instituted a corporate policy not to inform sick workers about X-ray findings showing that they had developed asbestos disease."

City, and Dr. E. Cuyler Hammond, vice-president for epidemiology and statistics of the American Cancer Society. Selikoff and Hammond examined 632 asbestos insulators with at least twenty years of working experience, and found that these men were dying of gastrointestinal cancer (i.e. stomach and colon cancer) at three times the expected rate. By 1976, Selikoff and his colleagues had demonstrated that 19% of the asbestos insulators were succumbing to gastrointestinal cancer. Since the vast majority of heavily exposed asbestos workers were dying of various lung diseases, the findings regarding gastrointestinal cancer were all the more important.

In any event, the results of the mortality studies conducted by Selikoff and his colleagues were published in the Annals of the New York Academy of Sciences, and are widely considered to provide powerful evidence of the potential of asbestos to cause stomach and colon cancer. Indeed, in1977, the International Agency for Research in Cancer (IARC), of the World Health Organization, wrote that "An excess risk of gastrointestinal tract cancers has been demonstrated in groups exposed occupationally" to the three leading types of asbestos. The IARC went on to declare that "An excess of cancers of the larynx was also observed in exposed workers." The organization re-emphasized the finding about the relationship between asbestos exposure and laryngeal cancer in 1987.

So much for the medical reliability of Physician/Senator Coburn.

All of which should serve as a warning to Frist's and Coburn's colleagues on both sides of the aisle that they should do their own homework about the nature of asbestos disease, and make sure that the trust fund will have sufficient money to compensate the hundreds of thousands of future asbestos disease victims who will be eligible to bring claims against it.

As things stand, the $140 billion fund with which the Republicans in Congress, the asbestos industry and its insurers propose to satisfy all asbestos claims present and future constitutes a cruel hoax. This is because the $140 billion was not arrived at through consideration of how many people may develop asbestos disease, or how much compensation they may deserve, but by asking industry and its insurers how much they would be willing to pay to eliminate their liability. Since no one knows how many asbestos victims will bring claims, whether the trust fund has any chance of remaining solvent is questionable.

Finally, members of Congress and the American people ought to reject President Bush's attempt to convince them that the asbestos public health crisis should be viewed as a litigation crisis, and not allow themselves to be swayed by shrill and inaccurate criticism of the tort system. After all, it is this system and this system alone that exposed the misdeeds of the asbestos manufacturers to begin with, and provided the only true measure of justice and compensation for tens of thousands of sick asbestos workers and the families of dead asbestos workers, who had been betrayed for decades by their "reputable" employers.

Paul Brodeur was a staff writer at The New Yorker for many years, and is the author of four books on the asbestos hazard.

On the Wings of a Seagull

"Where in the world are we going," thought my future husband Doug silently as we embarked down a dark wooded road to "Dandy" to visit my Mom and future stepfather, Bill. It was Christmas – our first together and we were both a little nervous. The road continued to snake its way towards the York River, and we were increasingly surrounded by marshy wildlife preserves and fewer and fewer houses. And then I saw the marker I always looked for before slowing to turn – the glowing white boards of the small beloved Dandy Baptist Church – a cheerful greeter and directional star in the night. I motioned to Doug to slow and turn left and we continued around an even darker, smaller patch of road, flanked by tall Southern pines that formed an evergreen archway towards our destination. We emerged into a small opening with several houses on either side and after a few blocks, headed straight for a gravel path, made a sharp left and continued a short distance to our destination. Doug later confessed he was a little uncertain about whether I was taking him to my family's house for Christmas or out in the middle of nowhere never to be seen again…

But all of these fears were immediately eased when we stepped out of the car and Doug got his first glimpse of the little cottage on the river. It sat, shining brightly with sparkling Christmas lights – not only of its own accord – but from the barges and tugboats that were guarding it down the river, and the many thousands of stars reflected on the serene water. And when we walked in, fears were gone forever as Doug reached out his hand to greet my Mom and the man who would soon become his best friend and mentor – someone I already considered my second father.

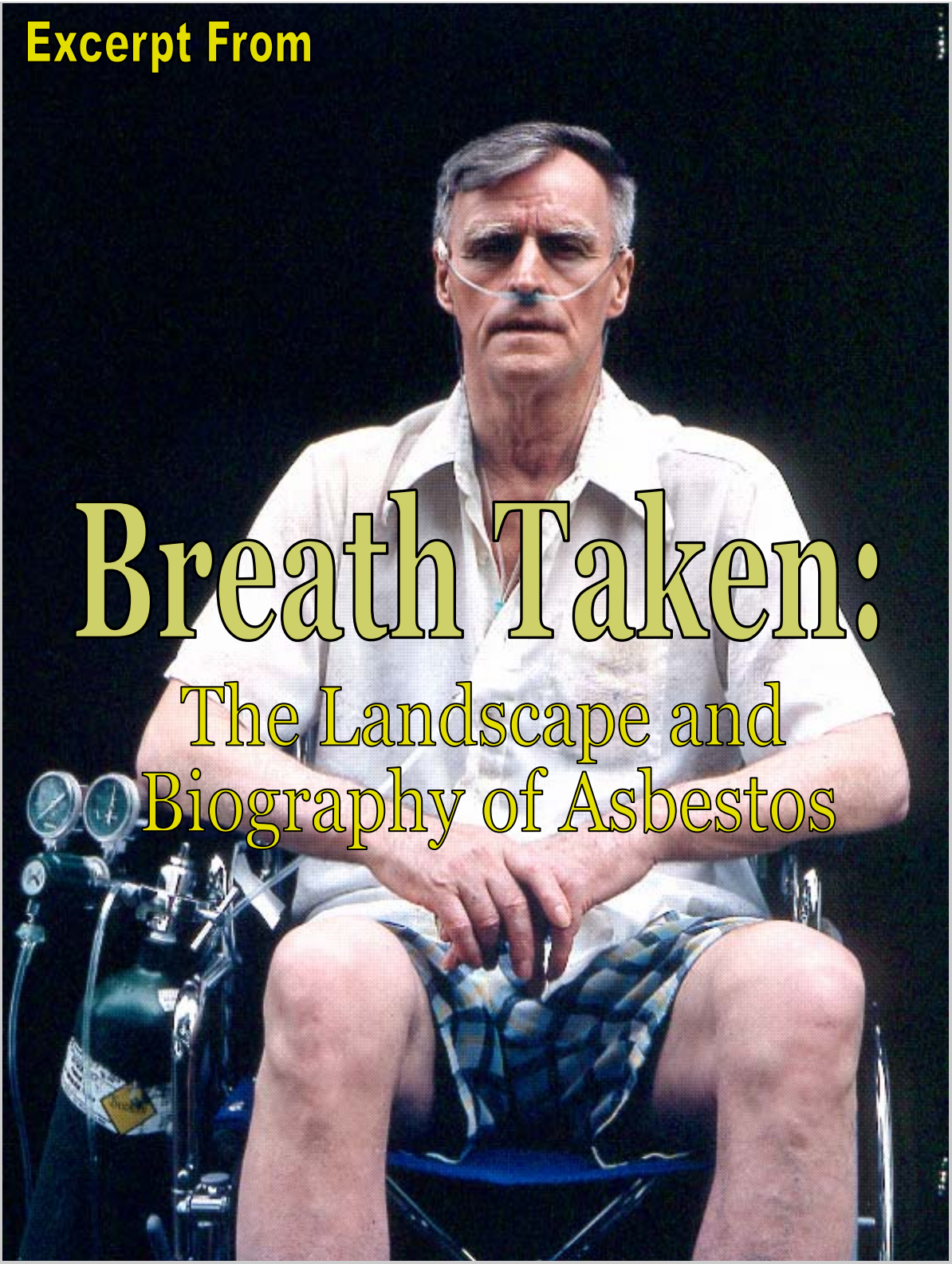
Bill – or "Billy" as he was called by many – was a gentle man who was known throughout Dandy for not only his handy workmanship and ability to make just about anything out of nothing, but for his love of the river, his passion for people, his unending grace and his faith in his family and friends. I can't count the number of days we were blessed to have with Bill in that special place on the river. It was truly a second home for us - one where my husband honed his fishing skills, learned how to maneuver a boat through the channels with ease, and shared special soul-filled moments with a great friend who can never be replaced – who could comfort you with just a word, a simple nod or a pat on the back. My sister and I have lost someone who gave us much love and support, advice (whether asked for or not!) and the compassionate understanding we never got from our own father. His children have lost an amazing parent who loved them with all his heart and soul - and for whom they still yearn with the ache of loss that never quite goes away. And my Mom has lost her soul mate, period. He was for her the most important person in her life – and I can say that without jealousy. He was her one true sweetheart – who gave her the gift of life through love, and that love will always remain.

Bill was taken from all of us – his family and countless friends – by asbestos. And a year before his death, his beloved Dandy was nearly taken as well, by Isabel – the great hurricane that raged across the Southeast. I am no longer angry with her however, for without Bill, the little house on the river could never exist as it did before, with or without her intervention.

Sometimes though, when you sit outside on what's left of the small patio and gaze out at the mighty York, if you listen intently, you can hear Bill's spirit dancing in the wind, riding swiftly and gracefully on the wings of a seagull.

- Kim

Excerpt From



Breath Taken:

The Landscape and Biography of Asbestos

an exhibition by

Bill Ravanesi

In the autumn of 1980, I was informed that my father had malignant mesothelioma. At that time, neither my father nor I had ever heard of this disease. We would soon learn that my father had only months to live, and this fatal cancer was caused by his past exposure to asbestos as a shipyard worker in Boston during World War II.

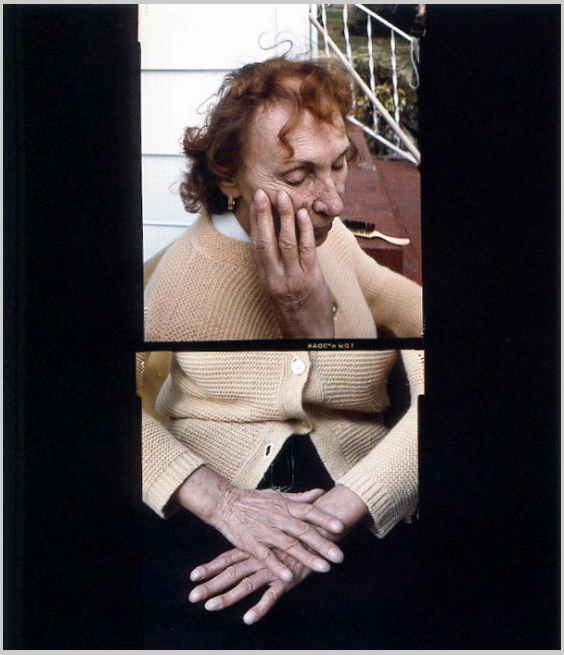
A few years later, I came across ***Expendable Americans***, written by Paul Brodeur. This book revealed to me an incredible story of how thousands and thousands of American men and women die each year of preventable disease caused by exposure to asbestos. My own agonizing encounter with asbestos together with my newfound awareness from Brodeur's book, led me to asbestos as the subject of my next project.

Breath Taken: The Landscape and Biography of Asbestos, which began in January of 1984, took me first to many research libraries, then to the home of hundred of victims and their families. As well, I visited the primary sites of at he asbestos industry in the United Sates and Canada. I did all of this in an attempt to use my art to document this avoidable human disaster, and to come to grips with my outrage.

During the early phase of the asbestos project, while I was concentrating on oral history work, it became clear to me that the visual disposition of many of my subjects was very different from my preconceived notion. Of course, images of my father's suffering were still fresh in my minds' eye. I had expected that the victims I would meet would have a similar fate. Although almost all of the victims had scarred lungs, and many were in different stages of various asbestos-caused cancers, many had an outward appearance of health.

How does one photograph a victim, who for the most part, looks healthy, but is wasting away from the inside out? In the process of trying to deal with this reality I got frustrated. Near the end of the first year of the project, I decided to select a small group of victims and to photograph and re-photograph them over a long period of time, creating sequences in which I also included their family snapshots, wedding pictures, and vintage images made earlier in their work careers by company photographers. Some of these sequences stretch over a 40-year period and document the progression of their diseases.

"Although almost all of the victims had scarred lungs, and many were in different stages of various asbestos-caused cancers, many had an outward appearance of health."



Amid the controversies over liability for the past exposures and preventions of future instances, the victims of asbestos-caused diseases were and still are strangely missing from our sight. To the degree that we see them at all, it is usually as objects rather than as subjects – statistics to be recorded, cases to be diagnosed, or plaintiffs to be deposed.

Our knowledge of asbestos as a major medical, legal, and social problem has tended ironically to obscure the fact of asbestos as a profound human tragedy that many families have lived and continue to live through. Breath Taken, through its inclusion of both contemporary and vintage images, narrative, industry advertisements, objects, and voice will give the viewer a landscape of awareness of this human tragedy.

Dedicated To
Anthony Ravanesi
Shipyard worker/auto mechanic
Mesothelioma victim

THE IMPACT OF 9/11 on ASBESTOS EXPOSURE

By Jonathan Bennett
New York Committee
for Occupational Safety and Health

The collapse of the World Trade Center and the fires that burned in the wreckage for the next four months put tons of potentially toxic particulate matter and gases into the air that was breathed by many hundreds of thousands of people in the area.

A minimum of six thousand people inhaled enough contaminated air to give them ongoing symptoms of respiratory illness, and hundreds of them are so disabled that they cannot work.

What does this signify to advocates for asbestos victims? No one knows exactly how much asbestos those who are sick inhaled, but it is known that some asbestos was present in the majority of air samples that were taken in Lower Manhattan after 9/11. So it is safe to assume that anyone who took in enough dust to cause illness also took in a significant amount of asbestos.

We know that asbestos is biologically inert. As far as is known, once it reaches the narrow passages of the lungs it remains there throughout the person's life.

But asbestos does not cause illness in the short-term after exposure. For most people, it is at least ten years, and often 30 years, before any symptoms of asbestos disease appear.

We also know that there is no "safe" level of asbestos exposure. The more a person is exposed to, and the younger the person is when exposure takes place, the more likely he or she is to develop asbestos disease, but no exposure is too small to be regarded as assuredly harmless.

The people who are already sick as a result of their exposure to the toxic post-9/11 atmosphere are certainly at some risk of asbestos disease, but we do not know the magnitude of that risk. We do not know with any precision how much asbestos they were exposed to, nor do we know what synergistic effects may occur between the asbestos and the other materials in what was described as the "toxic soup" that hung over part of New York City for months.

But the people who are now sick make up only a small part of those who are at risk, because anyone who breathed that air probably took in asbestos along with other toxic materials. Those who did not get a dose heavy enough to cause acute symptoms nevertheless inhaled enough asbestos (and other materials with unknown synergistic effects) to pose the potential for

(Continued on page 28)

eventually causing disease.

As for the number of people with that level of exposure we can only guess. Certainly everyone who was caught in the cloud thrown up by the collapsing towers, and everyone who lived or worked in Lower Manhattan before the end of 2001 was exposed to airborne asbestos. People living or working in Brooklyn, downwind from the World Trade Center, were also exposed. Tens of thousands more have been exposed more recently to 9/11 indoor contamination that was never properly cleaned up, and which becomes re-entrained in the air by human activity.

What the future holds for all those exposed is unknown. We can expect that the vast majority of those with light exposure will never develop asbestos-related disease, but if only one per cent of them, or one-tenth of one percent of them do become sick, that will be thousands of people. Nor do we know whether any of those more heavily exposed will develop asbestos-related disease, but we can be certain that the risk is not zero.

The collapse of the World Trade Center was an enormous tragedy from the very beginning, but it is a tragedy that continues to unfold, as respiratory illnesses disable larger and larger numbers of rescue and recovery workers.

The possibility that hundreds or even more people will develop asbestos-related disease over the decades is a potential tragedy, but it is one that we can work to avert by acquiring a better understanding of the biological mechanisms that produce asbestos disease, thereby finding ways to prevent or cure it, before the latency period ends for those with 9/11 exposure.

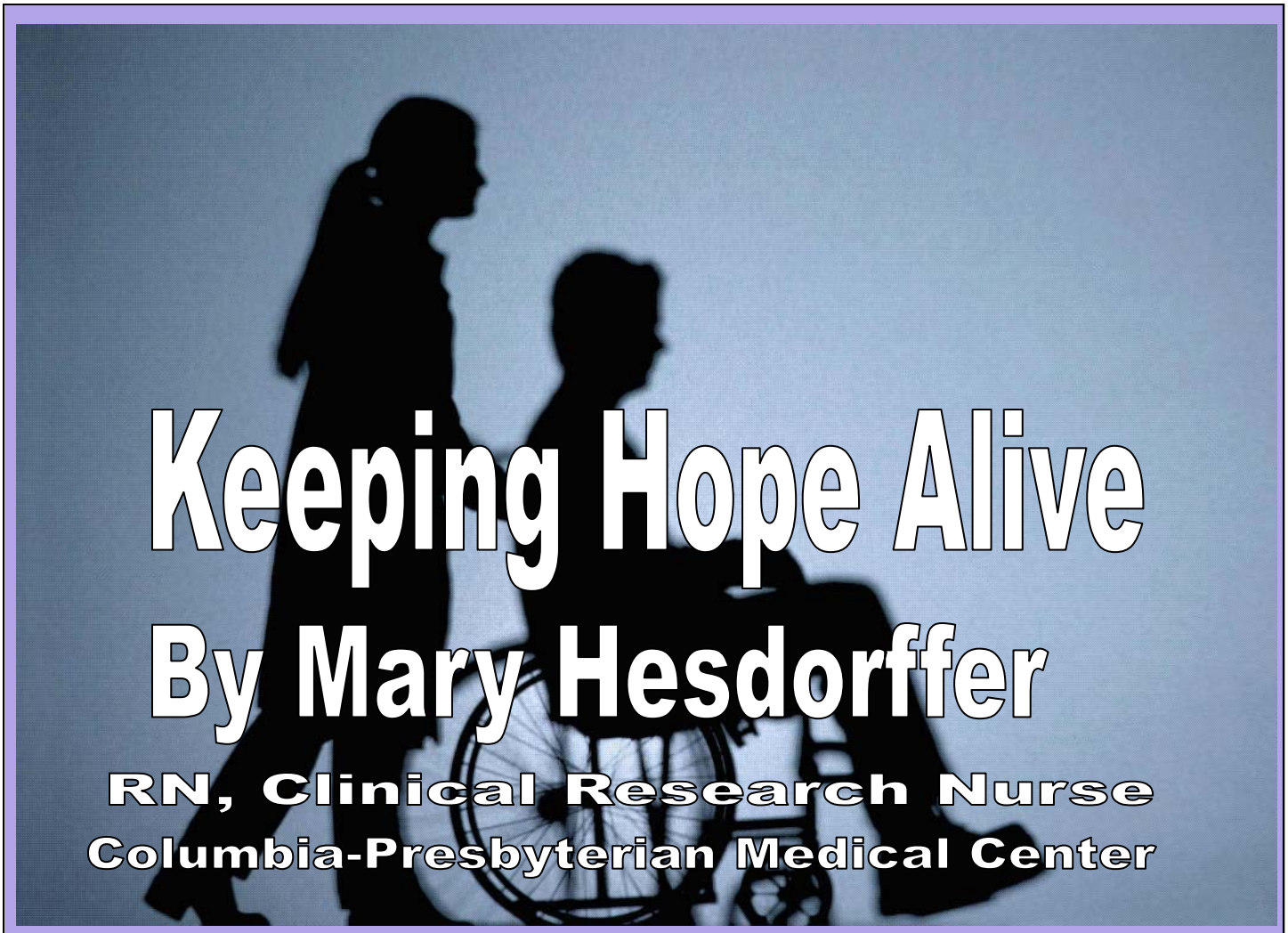
It is also important that we draw the appropriate lessons about identifying and responding to asbestos and other respiratory hazards in the event of a similar large-scale catastrophe, which would not necessarily be the result of terrorism. If the rescue and recovery workers must work in a potentially toxic atmosphere, they must be trained and equipped so they do not become victims themselves.

We can also avert a tragedy by ensuring that anyone who does develop asbestos disease because of 9/11 is compensated for their injuries. Just as workers and others who have occupational or environmental exposure to asbestos should be compensated by the companies that made and sold asbestos-containing products when they know how dangerous asbestos was, people who were exposed to the asbestos that was released by the World Trade Center collapse should be included in any attempt by Congress to set up a new asbestos compensation system.

"A minimum of six thousand people inhaled enough contaminated air to give them ongoing symptoms of respiratory illness, and hundreds of them are so disabled that they cannot work."

About Asbestos Disease Awareness Organization

Asbestos Disease Awareness Organization (ADAO) was founded by asbestos victims and their families. ADAO seeks to give asbestos victims and concerned citizens a united voice to help ensure that their rights are fairly represented and protected, while raising public awareness about the dangers of asbestos exposure and often deadly asbestos related diseases. ADAO is an independent organization funded through voluntary contributions and staffed by volunteers. For more information visit www.asbestosdiseaseawareness.org



Keeping Hope Alive

By Mary Hesdorffer

RN, Clinical Research Nurse
Columbia-Presbyterian Medical Center

What is hope? It is the ability to realize that there is power in this community of people who have suffered the affects of asbestos exposure. Hope is shared by the incredible brave souls who are battling asbestos- related diseases on a daily basis and are willing to share their stories with others. Hope is the ability to look beyond the statistics and make up one's mind to be here to change those dire predictions.

We are a community of patients, family members, friends and scientists who have banded together to effect powerful change from within. Hope is the ability to have faith and trust that if we all continue to work hard together as a community, we will have the power to change the face of this disease. We hope that our work will impact nations and effect stronger legislation to eliminate commercial use of asbestos. With each passing year, the voices have become louder, and we are making great progress in fighting this disease on all fronts.

When I meet new patients with this disease, we form an immediate and intense bond. There are no words to describe the sharing of emotion that takes place. It is so important to come to a site where mesothelioma is not a rare disease, but one that is seen and treated on a daily basis.

(Continued on page 30)

Hope is knowing that you are not alone.
Hope is encouraging others to share their stories with the newly diagnosed.

Hope is having faith that your medical team is not complacent and understands the urgency of searching for new agents and treatment modalities to change the statistics.
Hope is knowing that there is life with cancer.

Hope is believing that you are not a case, but a real person attempting to experience all that life has to offer, despite having an asbestos-related disease.

And finally, hope is knowing that there are long-term survivors of this disease who live normal and productive lives.

My hope is that I will continue to work with so many brave and wonderful people and that together we will have much to celebrate.

About Asbestos Disease Awareness Organization

Asbestos Disease Awareness Organization (ADAO) was founded by asbestos victims and their families. ADAO seeks to give asbestos victims and concerned citizens a united voice to help ensure that their rights are fairly represented and protected, while raising public awareness about the dangers of asbestos exposure and often deadly asbestos related diseases. ADAO is an independent organization funded through voluntary contributions and staffed by volunteers. For more information visit www.asbestosdiseaseawareness.org

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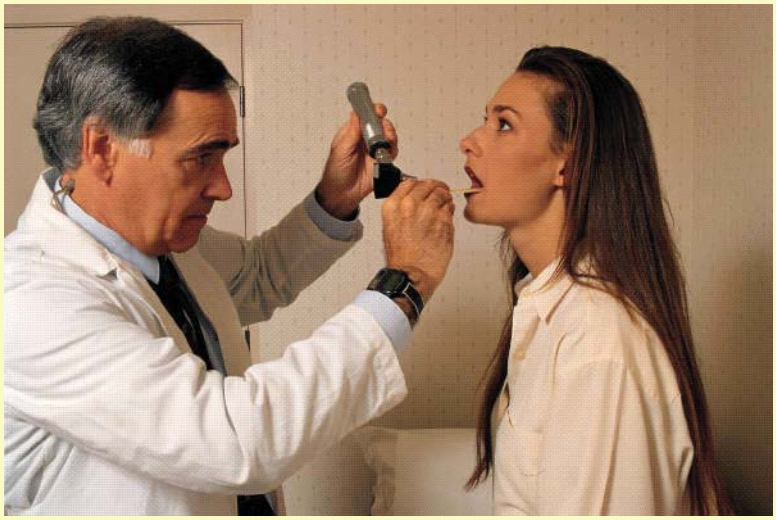
ADVOCACY IN HEALTH CARE



Recommendations for Patients and Caregivers

by
Freddi Segal-Gidan, PA, PhD
Freddi@AsbestosDiseaseAwareness.org

The US health care system is the most highly sophisticated, technologically advanced and expensive health care system in the world. It is also complex, fragmented and extremely difficult to navigate, even for those who work in the system. It should be a place of nurturing and care, but unfortunately too often it is not. For patients, and their families, it can be intimidating and frustrating experience at a time when people are least able to cope with this. That is the reason that I strongly encourage everyone to be their own health advocate, and when ill identify someone else to assist them in dealing with the health care system.

When anyone is sick, the ability to process information is not optimal. If you are ill it's good to have someone else with you when information is provided about your diagnosis or treatment. At minimum, bring someone along to hear the information with you. If this is an appointment to receive information about diagnosis or treatment be prepared to take notes, or have someone accompanying you prepared to do so. If there is sufficient time, ask if you can tape record the conversation so that you can review it, or refer to it, later. Always get the name of the health care provider (ask for their card) and ask how you can contact them (phone, email, letter) if you have subsequent questions.

(Continued on page 32)

ADVOCACY IN HEALTH CARE

Asbestos disease often occurs 10 - 50 years after exposure. Each patient must stop and think about occupational or environmental asbestos exposure when answering medical history questions. Providers may not ask, or think about, occupational exposure, so this is something the patient may have to bring to their attention. Asbestos exposure isn't always obvious or known about by many when they become ill or are initially diagnosed.

There are some simple things one should always do when you see a health care provider, whether for diagnosis or treatment:

Don't be afraid to ask questions. It is your body and you have the right to understand what is being done and what the options are. Write down your questions so you don't forget them. If the provider is especially busy you might want to focus on the most pressing question or two, then ask if you could make another appointment to specifically discuss your other questions.

Carry a list of all medications, prescription and non-prescription (over-the-counter, vitamins, supplements, etc) you take with names, dosages and the frequency taken.

Make sure you understand what the doctor or other health care provider tells you. Say, "Let me make sure I understand. You said …." This gives the provider a chance then to clarify if you have not understood them correctly.

Get copies of your health care records, especially hospitalizations, laboratory test results, scan results. Keep these in a file that you can then provide for photocopying to other providers you see at a later date.

Don't be afraid to seek a second opinion. Medical care is a combination of science and art, and there are often (too often) no simple, easy answers. Opinions differ based on different interpretations of the science mixed with training, personal experience and other influences.

The internet/world wide web holds a wealth of information, but there is no quality control on its content. Don't accept everything you read as truth. Question what you read. Check out references and look for sites published by reputable organizations.

If You or Your Family Member has Mesothelioma.....

By Stephanie Todak

How do you differ from Christopher Reeves, Lance Armstrong or Dotha Wall (my 82++ year old mother diagnosed with Sarcoma)?

How do you differ from Al Todak, James Firbank, Jill (jillypoo), or so many others diagnosed with Mesothelioma?

How do you differ from me, an eight-year breast cancer survivor or Linda Reinstein, Cofounder of ADAO-and both with spouses diagnosed with Mesothelioma?

YOU DO NOT if you are fighting to live or help a family member to live.

YOU DO NOT if you do not accept that this diagnosis (though probably terminal) is not a license or a prescription for death.

YOU DO NOT if you use your energy to live (or help your family member) and to live, not to die.

YOU DO NOT if you gain knowledge of this disease, new treatments, and effective treatment for side effects and pain.

YOU DO NOT if you use your energy and resources to educate the medical community, public, and politicians about this preventable disease.

YOU HAVE the control to NOT accept a death sentence.

YOU HAVE the control to find the best and newest treatment.

YOU HAVE the control to be in charge of what is done to and for you.

YOU HAVE the control to live to your optimum, and live, love and laugh often.

YOU HAVE the control to live each day to the fullest.

YOU HAVE the control to be able to share this experience with those you love.

YOU HAVE the control to leave the petty stuff behind.

YOU HAVE the control to forage new relationships with those you love for the things that really matter in your life.

Al and I did. I bless every second I had with him for those three years. Those years were the most important of our 30+ years together. We lived, loved and laughed often.

Go the distance....together.

Dedicated to AJ Todak
Dx: 4/01, Died 1/04

You went the distance and forged new territory.
My partner in life, my love.
I miss you daily, but carry you always in my heart
~ Stephanie Todak
Everything changes and we must change with it

Many innocent people have been occupationally or environmentally exposed to asbestos and know little about the early warning symptoms of asbestos related diseases. Diagnosing disease is often difficult; asbestos related disease symptoms are generally vague and can be easily confused with other illnesses such as pneumonia. Only a doctor can properly diagnose asbestos related diseases.

Asbestos exposure is linked numerous disease such as **asbestosis**, **lung & gastrointestinal cancers**, and an aggressive cancer called **mesothelioma**. Inhaling asbestos fibers can cause permanent and irreversible damage to vital organs. Disease occurs 10 - 50 years after exposure.

The undiagnosed need to **STOP AND THINK** about possible occupational or environmental asbestos exposure when asked by their doctors.

Early detection is often difficult; asbestos related disease symptoms are generally vague and can be easily confused with other illnesses such as pneumonia. Only a doctor can properly diagnose asbestos related diseases.

Below is a list of general asbestos related disease early warning symptoms.

- Persistent pain in the lower back, shoulder or chest wall
- Shortness of breath
- Appearance of lump or mass on chest wall
- New onset of persistent dry cough
- Coughing up blood
- Persisting loss of energy, fatigue or anemia
- Losing weight for no apparent reason
- Onset of hoarseness or a change in voice
- Persistent swelling of face and/or arms
- Muscle weakness
- Abdominal pain and or distention
- Nausea and or vomiting
- Fluid in the abdominal cavity or in the chest cavity

Heavy industrial asbestos exposure occurred prior to 1980 in the following industries:

For information regarding early warning symptoms – refer to

http://www.asbestosdiseaseawareness.org/eLibrary/highrisk.doc

ADAO
Asbestos Disease Awareness Organization™
Voice of the Victims

Asbestos Disease Awareness Organization
"The Voice of the Victims"
www.asbestosdiseaseawareness.org

High Risk Occupations

Occupations with a high risk of asbestos exposure include, but are not limited to, the following:

Workers involved in the manufacture of asbestos products

Asbestos mining and milling

Construction trades

(including insulators, sheet metal workers, electricians, plumbers, pipe fitters, construction laborers and carpenters)

Power plant workers

Auto Mechanics

Boilermakers

Shipyard workers

Firefighters

Navy Veterans

Inhalation of asbestos fibers may lead to the following malignant and nonmalignant diseases, such as, but not limited to:

Mesothelioma

Lung Cancer

Asbestosis

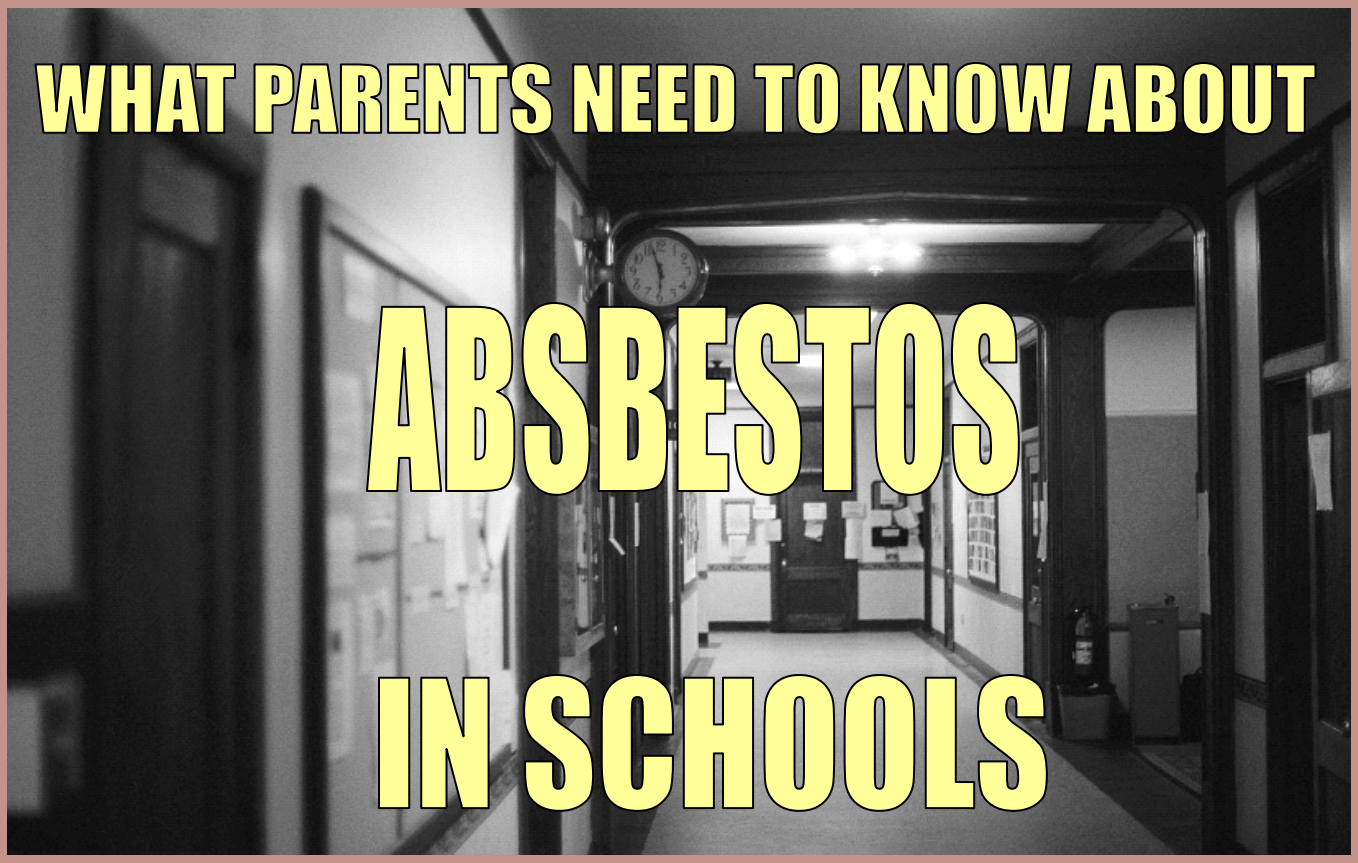
Larynx, Esophagus, Stomach Cancer

Kidney and Bowel Problems

Chronic Pulmonary Respiratory Disorders

For information regarding early warning symptoms – refer to

http://www.asbestosdiseaseawareness.org/eLibrary/symptoms.doc



Asbestos is a naturally occurring fiber that was mined from mostly open pit mines, similar to open pit coalmines. The fiber had many useful properties such as resistance to heat, fire, chemicals, etc. Because it was easy to work with, it was used for many different products in all types of buildings, including schools. It was called the "miracle fiber". ASBESTOS was used in floor tiles, pipe insulation, ceiling tiles, sprayed-on fireproofing and plaster, to name just a few of the uses.

The "miracle fiber" turned out to be a human health disaster because ASBESTOS caused two types of deadly diseases. Asbestos-related diseases have a long latency period, meaning that it takes a long time for the diseases to develop before the symptoms appear. The exposure to asbestos occurs when the fibers are inhaled. There is no known safe level of exposure, so every effort must be made to prevent exposure.

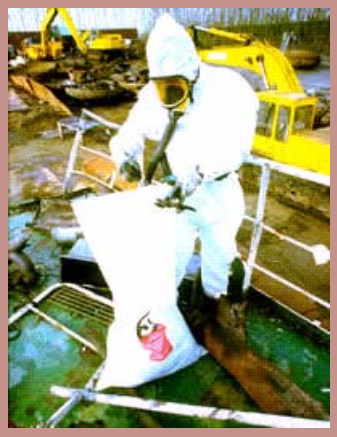
The first is ***ASBESTOSIS***, a scarring of the lung tissues that makes the lungs stiff and unable to contract and expand as the normal lung does. It is not a cancer, but rather a fibrosis. The disease may stop its progress if the person stops working with ASBESTOS, or it may progress until the person dies of suffocation and/or heart failure.

The second is ***CANCER***: lung cancer, mesothelioma, and digestive system cancers. The lung cancer is similar to that caused by smoking. Mesothelioma is a cancer that develops in the lining of the lung cavity (pleural mesothelioma) or in the lining of the abdominal cavity (peritoneal mesothelioma). The mesothelioma is usually diagnosed very late in their development and are fatal as a result.

In 1986 President Reagan signed into law the Asbestos Hazard Emergency Response Act (AHERA). This law and the regulations that took effect on December 14, 1987 were designed to prevent children or staff from being exposed to asbestos in the schools. The AHERA rules have not been revised since this date.

The AHERA rules required schools to use specially trained persons to inspect the school buildings (schools, administration buildings, bus garages, boiler plants, portable classrooms, etc.) to locate any asbestos-containing materials. Once the materials were located, the school had to develop a plan to manage the ASBESTOS so as to protect human health and the environment. This management plan was not a removal plan, but rather a plan to manage the materials to protect persons in the schools from exposure to the fibers. Sometimes this did involve removing materials that could not be repaired and maintained in good condition.

The AHERA rules apply to public schools, religious schools, charter schools, and private schools. It does not apply to for-profit schools or home schools. Colleges are not covered by the rules. In most states, K-12 grades are covered by AHERA. In a few states, this may include preschool grades and nursery school.



The schools had many tasks and responsibilities under AHERA:

Place a copy of the management plan in each school and keep a copy at the school system's headquarters. This plan must be current. The public, including parents, have the right to review the plan during normal business hours. They may make copies, for which the schools are allowed to make a reasonable charge.

Parents, teachers, and staff must receive an annual notification about the location of the management plan, the name and address of the designated person, and any updates on asbestos activities in the schools. The schools could make this notification many ways, but their job was to make their best effort to notify the parents, staff, and teachers.

Every school and school system is required to have a designated person responsible for ensuring that the notifications; updates to management plans, training needs, etc. are carried out. This person has oversight of the asbestos activities in the school. One very important function of this position is to make sure that repairpersons such as plumbers are made aware of where the asbestos is located so they do not disturb it**.** The designated person can answer any parent's questions.

(Continued on page 38)

Any time that a school removes any **ASBESTOS**, repairs damaged asbestos-containing materials, etc. the school must keep detailed records and place these in the management plan. The persons involved in these abatement activities must have special training that protects themselves as well as keeping **ASBESTOS** fibers from escaping their work area.

If a school leases space for classrooms, then these are subject to all of the AHERA rules.

AHERA took effect in 1987 and applies to any facilities used as schools any time after 1987. This includes newly built facilities that in most cases do not need to have an inspection or management plan. The latter still have requirements to meet under AHERA, including the annual notification and having a designated person.

If the school has any asbestos-containing materials, the management plans must be updated both every 6 months and every 3 years. Every 6 months, the condition of the material must be checked for changes in condition. Every 3 years, the school must have an inspector conduct a reinspection. This reinspection report is given to a management planner to review and make any necessary changes. These records, too, become part of the management plans located in each school and at administrative headquarters.

The school may not use students to conduct any asbestos activities. If the school wishes to use any staff for asbestos activities, these persons must have special training, use special gear, have an asbestos physical, etc. In most states the school would also need a contractor's license in order to do this work.

Even after all asbestos-containing materials are removed from a school, the parents staff, and teachers must receive the annual notification.

Preventing Exposure to Asbestos Fibers

By Andrew F. Oberta, MPH, CIH
The Environmental Consultancy
www.asbestosguru-oberta.com

An ounce of prevention, the saying goes, is worth a pound of cure – and asbestos-related diseases are largely incurable. It is not possible to completely avoid inhaling asbestos fibers, which are in the air from natural deposits of the mineral and are emitted from sources such as vehicle brakes. But you can prevent exposure to yourself and others from activities over which you have some control.

Your approach to preventing exposure to asbestos fibers can be summed up in three words that you have seen many times if you travel: DO NOT DISTURB. Imagine one of the signs that hang on hotel room doorknobs to remind you that leaving asbestos-containing materials (ACM) alone is your best approach. "Disturbance" is considered any activity that releases asbestos fibers into the air, such as cutting pipe insulation, scraping plaster off a ceiling, or sanding floor tile. Avoiding disturbance does not require a total absence of contact with ACM, however. You can wipe the dust off asbestos-insulated pipes as long as the covering remains intact, and you can walk on and maintain asbestos floor tile with a protective wax coating. Asbestos siding can be painted unless its surface is dusty from deterioration, but you should not drill holes in it or remove it yourself .

At home....

The "Prevention" page of the ADAO website (http://www.asbestosdiseaseawareness.org) contains some good suggestions regarding ACM in the home. Any work that could release asbestos fibers into the air should be done by a contractor with the proper qualifications and experience, which the average plumber, carpenter or other tradesman lacks. "Don't try this at home" definitely applies to removal or repair of ACM. While a homeowner may be permitted by laws and regulations to do such work, the risk of exposing yourself and your family to asbestos fibers by doing it yourself instead of hiring a qualified asbestos contractor is not worth the money you would save.

If you think a material in your home might contain asbestos, you can have samples analyzed by a qualified laboratory. They can advise you on how to take the samples, or refer you to someone who can do it for you.

At work....

Most of the exposure to asbestos fibers, however, has occurred – and continues to happen – in our workplaces. The chain of exposure starts at the asbestos mine and the mill where the fiber is separated from the rock. Next, it continues into the plants where asbestos-containing building materials and other products are made, and then into the buildings and other locations where the products are installed and used. Exposure continues as these materials are disturbed when buildings are maintained and renovated, or as vehicle brakes are serviced, and even as buildings are demolished.

These activities take place in the context of employment, and your employer has legal responsibilities to protect you and your co-workers from exposure to asbestos fibers. The regulations are complex and vary among different state and federal agencies, but they are consistent in the essentials:

- You must be informed of the presence of ACM in your workplace
- You cannot be required to disturb or make contact with ACM unless you are properly trained for this purpose
- If you must disturb ACM, you must be provided with the right equipment and with personal protection that may include a respirator
- You must be trained and medically qualified to wear a respirator
- You must follow certain procedures, such as wetting any ACM that you remove or repair, putting the waste and contaminated materials in leak-proof containers, and disposing of the waste in special landfills.
- You may have to set up a negative pressure enclosure to contain the work, and a decontamination facility in which you shower and change clothes after performing the work
- Your employer must take air samples to show that you are not exposed to excessive levels of asbestos fibers.

These procedures and more are covered in courses that take from two hours to five days, depending on the extent to which you would be working around or with ACM, as required by OSHA, EPA and state regulations. These regulations are also meant to ensure that asbestos fibers are not released into the environment to contaminate entire communities, or are not carried home on workers' clothing and in their vehicles to expose their families to the risk of asbestos-related diseases.

Very few people are qualified to work with asbestos-containing materials, and unless you are – DO NOT DISTURB them!

There are few people today who have not heard of Agent Orange. It was one of the most intense cases of "friendly fire" ever to hit the US military. This defoliant was used to kill vegetation in the Vietnamese countryside, thus eliminating cover for those at which US military weapons were aimed. Thousands of soldiers, sailors and airmen were afflicted with a variety of health complaints just by using the defoliant. Millions of Vietnamese have suffered from its use.

Awful as the Agent Orange experience was, it pales beside the military use of asbestos.
This substance alone was responsible for more US deaths during World War II than all the German and Japanese armies.

The Veterans Plight

Asbestos was used in over three thousand products, including ammunition, which were in the military purchase chain. Raw fiber was shoveled as the military made their own preparations. Much of military construction, including airplane and ship construction was with asbestos boards, batts and plasters.

All branches of the military had individual exposures. The civilian population that made military items also suffered heavy exposure and disease. Most dramatic were the shipyards. In many of the shipyards a new vessel hit the water every day or two. It is estimated that almost five million workers suffered major exposure building ships in World War II and subsequent years.

# of Asbestos Disease

It is for this reason that many asbestos victims feel that the US government is responsible for much of the asbestos exposure. It appears that WE government health and safety officers made some of the most dreadful cover-ups of the dangers of asbestos. Asbestos disease is so widespread that it represents a health epidemic. Exposure still continues as government standards still allow a worker to breath 99,999 fibers an hour without any respiratory protection. These are just some of the reasons asbestos victims feel the US government, particularly the Veterans administration should be doing more to support those with asbestos disease.

By James Fite, National Secretary
The White Lung Association

Laurie Kazan-Allen

Tribute of Unity Honoree

Laurie Kazan-Allen was born in New York City and has lived in London for the past 30 years. She began her work on asbestos by starting the British Asbestos Newsletter in 1990. Over the years, Laurie became very well known to people in every walk of life involved in the struggles over asbestos: trade unionists, doctors, Members of Parliament, journalists, government officials, lawyers, scientists, environmental and human rights activists, and most of all the asbestos victims and their organizations in Britain and around the world. Her engaging manner and creativity facilitated a chain reaction of activism around the world, as more and more people in an ever-increasing number of countries came to know each other and work together. The common goals were to ban asbestos, protect workers who have to work around asbestos already in place, and help the workers disabled by asbestos diseases and their families to obtain compensation.

The methods included centrally raising awareness at every level, and Laurie was in the middle of innumerable efforts with the media. She also worked vigorously with political leaders introducing legislation and unionists pushing government departments to inform workers and regulate hazardous work around asbestos. She made her presence known at public hearings and conferences where conflicting views were aired, and she edited the publication of special issues on asbestos in the International Journal of Occupational and Environmental Health in 2003-2004.

In 1999, Laurie Kazan-Allen became the chief of the new International Ban Asbestos Secretariat (IBAS), at the urging of Fernanda Giannasi, Annie Thebaud-Mony, and Barry Castleman, and went on to organize a number of major international public health conferences on asbestos.

The conference in Osasco in September of 2000 came as the World Trade Organization decision supporting the French asbestos ban was announced. People from 32 countries were in attendance, including the leaders of asbestos victims' groups from Brazil, Chile, Peru, France, the U.S., Japan, New Zealand and Australia. There followed many other conferences in the European Parliament (2001), Argentina and Brazil (2001), Greece and England (2002), Slovenia and Canada (2003), Poland, Switzerland), and Tokyo (2004) which Laurie organized along with local activists, political leaders, unionists and doctors. The Tokyo conference was attended by people from 40 countries, and the record of presentations there compiled by IBAS is a valuable collection of current perspectives on the evolving struggle over asbestos in the world. These conferences and the organized activity that has flowed from them has helped create a climate in which national bans on asbestos have been adopted in Argentina and Chile, Australia, and other counties.

Today, the existence of national campaigns to ban asbestos in a growing number of countries all over the world is in no small part due to Laurie's networking, determination and dedication.

http://www.ibas.btinternet.co.uk

The Asbestos Disease Awareness Organization is pleased to award Laurie Kazan-Allen the Tribute of Unity award.

Gayla Benefield

Tribute of Unity Honoree

Written by **David McCumber**, Managing Editor of The Seattle Post-Intelligencer

Gayla Benefield is exactly as tough as she needs to be.

How did she get that way? She's a Montana miner's daughter, a former honkytonk singer and bartender, and she lost both of her parents to entirely preventable asbestosis.

It is largely thanks to her that the world knows about the unspeakable tragedy of Libby, Montana, where for six decades a vermiculite mine and a conspiracy of silence spread asbestos and asbestos-related disease throughout the tiny mountain town.

Gayla's father worked at the mine, for the Zonolite Corp. and then for W.R. Grace. He brought the deadly dust home on his work clothes and his body -- there were no showers or changing facilities for the workers at the mine -- and so Gayla's mother was one of the first cases of "non-occupational" exposure to be recognized. Not that it was recognized at the time by the doctors in Libby, who worked with Grace to keep the mine's awful secret.

But Gayla knew what had happened to her parents, and she would not be quiet about it, despite the admonitions of her neighbors that she was harming Libby by being outspoken.

The harm had already been done. By the time we at the Seattle Post-Intelligencer broke the story of Libby, following the leads Gayla gave us and finding independent confirmation of every single point she made, many of the very townspeople who wanted to keep the story under wraps were already doomed.

After the EPA reacted to our stories by sending an emergency response team into Libby, and that team confirmed our revelations, the federal government sent in another team to do a public-health screening. What they found shocked the town and the world -- a third of Libby's residents, nearly two thousand people, were found to have lung abnormalities that could presage asbestos-related disease. And the town has already lost hundreds to asbestosis, mesothelioma and asbestos-caused lung cancers.

Now, Gayla and her husband have themselves been diagnosed, and sixty-two members of their immediate family have either died of asbestos-related disease, been diagnosed, or are at high risk.

Throughout it all, Gayla has fought an uncompromising war -- in the courts, in the media and around the world with personal appearances warning of asbestos' scourge.

Early this year, she achieved a measure of satisfaction from watching W.R. Grace and seven of its current and former executives indicted on federal criminal charges. Defined by results, she may well be the most effective public-health activist in history.

Tough? Oh, my, yes.

I'm both proud of her and in awe of her. And I'm also proud to call her my friend.

Written by David McCumber, Managing Editor of The Seattle Post-Intelligencer

co-author (with Andrew Schneider) of An Air That Kills: How the asbestos poisoning of Libby, Montana uncovered a national scandal (G.P. Putnam's Sons, 2004; Berkley trade paperback, 2005.)

http://seattlepi.nwsource.com/uncivilaction/

The Asbestos Disease Awareness Organization is pleased to award Gayla Benefield the Tribute of Hope award.

Jill Vaughn

Tribute of Inspiration Honoree

Since 1973, Jill Vaughn, wife, mother and grandmother, has battled and survived Leiomyosarcoma (LMS), Ocular Melanoma and is now battling Pleural and Peritoneal Mesothelioma since 1996. Jill was exposed to asbestos through home remodeling, in her high school, college, dorms, and in the schools where she taught. She presently volunteers for MD Anderson Network and Bloc Cancer Center to give support to others that have these diseases. For years, Jill has consoled, encouraged and inspired victims, their family and friends to hold hope and faith close to their hearts.

Jill is one of those unique individuals who are able to balance all of the aspects of her life. She can maintain that balance through all types of adversity and stress. Her earthy sense of humor carries her through the ups and downs of life. Her vivid descriptions allow us to believe we are standing next to her...and we know we really are standing with her. However, when you start supporting her, you end up being supported by her.

Jill/Jillipoo, you are a joy to our lives. Al loved you...and I do also. **~ Stephanie Todak**

Jill has touched hearts around the world, below are congratulatory messages in her honor.

"Mrs. Vaughn you have been a part of my life for 20 years now and you have been a true light in my life. Every time I get to visit with you I am inspired. Love you and congratulations - an award much deserved."

"I silently read the postings in ACOR for several months after my husband died of Meso 11/02. While I only responded privately to someone if they asked for information that I could provide, I noticed that you were giving people every day a source of hope, humor, information, and friendship. May you be rewarded in this life for the help and friendship you have brought to others."

"I'm so glad to have rec'd this notification of your being an honoree. You truly are an inspiration and very blessed. I miss talking with you. Email me in your "spare" time.! LOL "

"You know that you are the most inspirational women I've had the pleasure of knowing. This could not be more fitting - You Go Girl! We love you and Live Strong. God Bless!"

"Your encouragement and up-beat spirit are a lift to all of us. Thanks for sharing of yourself."

"Jill-there cannot be enough ways for the rest of us to recognize what an inspiration and spirit of hope that you are for the victims and families of meso. You are always there with a word of hope but also remind us to laugh when we can. May God and the angels bless you for all of the blessings you have given to us."

"Congratulations on the tribute. I'll always remember how you responded to me after my husband, Hugh, died. As I now watch 'from the wings' of the meso list I continue to be touched by your concern for others. It doesn't matter what's going in your own life, you always manage to have time for the rest of us. Love and God's blessings to a very special lady. "

"You have been an inspiration to hundreds of grieving family members, putting your weakness aside and still finding time to write us....you helped me from the day I found ACOR....even after my dads death in August of 2003. You even would take your laptop to the hospital....What strength! Congratulations, I honor you...and you gave my father hope until the end when I would tell him things that you said."

The Asbestos Disease Awareness Organization is pleased to award Jill Vaughn the Tribute of Inspiration award.

www.ACOR.org

Dedication.

Reflections is dedicated to the tens and thousands of victims, named and unnamed, who have been or will be affected by asbestos disease, and for the families and friends who love them. In love and faith, we are together sharing in the tragedy. But between our tears, we understand that we can prevent this from happening in the future. We can ensure that no one else will have to suffer as we have. It is one of the greatest gifts we can give to the world, and to ourselves.

Asbestos disease is preventable, but only if everyone bands together. We know the facts. We know asbestos related diseases kill one out of every 125 men over the age of 50, and this is only a measurable death rate. The numbers are rising and aren't expected to peak for another twenty years. We know that the use of asbestos is still permitted in the United States. And we also know that there's no such thing as a safe level of asbestos.

While we can't reclaim the lives of our loved ones, we can make the world a better place for those who come after us. As long as we keep our hearts strong and our perspective clear, we will have the ability to reach our goal.

In order to reach our deadline, we were unable to print the Victims' Tribute List. We hope to print the list in August, as we must verify each name submitted. If you would like to forward a name, please send it to Action@AsbestosDiseaseAwareness.org. Thank you very much for your support and attention.

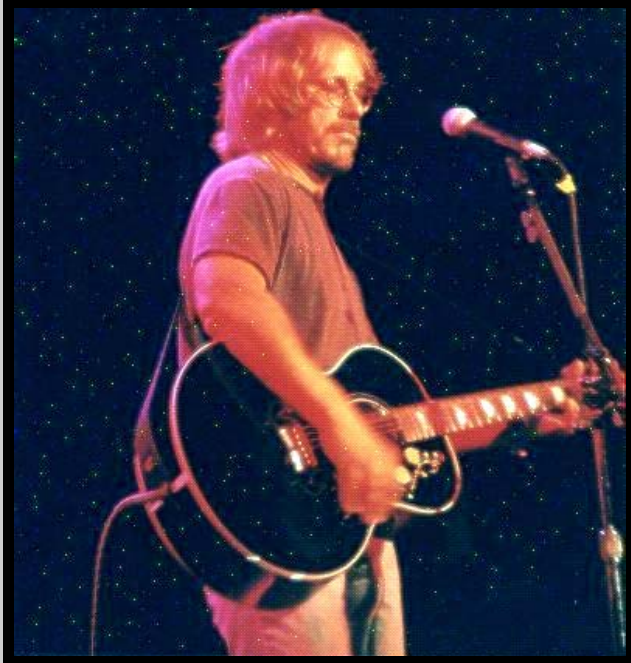
WARREN ZEVON

His Dirty Life And Times

Tribute by KT Lowe

You get in front of people and say 'here's this deal we all dread. But here's some laughs.' I don't see what harm it could do," said Warren in fall of 2002, shortly after he was diagnosed with mesothelioma. He was given three months to live – a death sentence in anyone's mind. But Warren's last album, The Wind, wasn't a document of death. It was the final portrayal of a creative, literate mind.

Born in 1947 to a Russian Jewish immigrant and a Scottish/Welsh Mormon, his early years were marked by genius. He was mentored by Robert Craft while studying the piano, and spent some time as a teenager in the parlor of Igor Stravinsky. He was said to have scored the highest IQ ever in the city of Fresno, California. But he dropped out of high school when he was 16. Before dropping out, however, he formed the psychedelic folk duo lyme and cybelle, who signed to White Whale Records and charted at #60 with "Follow Me" in 1965.



Warren was dismissed from White Whale in 1967. Almost immediately after, he was signed to Imperial Records. *Wanted Dead or Alive*, his debut, was released in 1969. His son Jordan was born that year as well. *Wanted*, however, did poorly, and it would be another six years before he had an opportunity to record again. While he waited, he toured with the Everly Brothers, recorded jingles for Boone's Farm Wines and Camaro and lived in Spain with his wife, Crystal.

In 1976, Warren signed a contract with Asylum Records and released a self-titled album to massive critical acclaim. But most people were introduced to Warren's work when Linda Ronstadt covered four of its songs. One of those songs, "Poor Poor Pitiful Me", reached #26. Warren embarked on a tour to support the album and returned home for the birth of his daughter, Ariel.

On January 24, 1978, the album *Excitable Boy* was released. Shortly after, a novelty song, "Werewolves of London" spun its way up the charts, and

Warren Zevon

Warren was suddenly a very famous man. Critics lauded his sound and he was selling out arenas with his confrontational style.

Yet his success only exacerbated a problem he'd had since he was a teenager. He sought treatment for alcoholism in 1979 at the insistence of his wife and friends. But it wasn't enough: his marriage ended in 1980, and he was dropped from his label in 1982 after releasing three more albums. It wasn't until 1986 that Warren was able to permanently set aside his drinking and drug use.

The second half of Warren's career began in 1986, when "Werewolves" was used in the Martin Scorsese film *The Color of Money.* In 1987, he was signed to Virgin Records. *Hysterical Sentimental* was the first artist featured guest musicians such as REM, Bob Dylan, Neil Young and Don Henley. In the next eight years he would release one more album for Virgin and four albums for Giant Records.

Artemis Records signed Warren in late 1999 and released *Life'll Kill Ya* in 2000. For many fans, it was a strong return to form. A follow-up album, *My Ride's Here*, came out in 2002, which included collaborations with Hunter S. Thompson, Carl Hiaasen and Irish poet Paul Muldoon.

But that summer, just before performing at the Edmonton Folk Festival, Warren started feeling weak and dizzy and developed a chronic, persistent cough. He was diagnosed with mesothelioma and made a statement to the public on September 12, 2002.

No one is entirely sure how Warren developed mesothelioma. While Warren had been smoking for almost thirty years before quitting in 1996, the cause of mesothelioma is exposure to asbestos. After Warren died, his son Jordan discussed his theory as to how Warren contracted it. Warren's father owned a carpet store in Arizona, and when Warren was quite young, he used to play in the attic, which was loaded with asbestos. It is unclear whether or not his apartment building contained asbestos.

"You get in front of people and say 'here's this deal we all dread. But here's some laughs.' I don't see what harm it could do,"

-Warren Zevon

Almost immediately after his diagnosis, Warren began work on his final album, *The Wind*. VH1 filmed the making of *The Wind* for a documentary, *VH1 InsideOut: Keep Me In Your Heart*. . David Letterman set aside an entire show dedicated to Warren and his music on October 30, 2002. It was Warren's last public performance.

On June 11, 2003, his grandsons, Augustus Warren and Maximus Patrick Zevon-Powell, were born to his daughter, Ariel and her husband, Ben Powell. Warren was in attendance at the hospital for their arrival.

On August 24, 2003, The Wind was released to rave reviews and public adulation. It immediately charted at #16, going gold in five weeks. Warren passed away two weeks later, on September 7, 2003. He had lived a year with his diagnosis, months longer than his doctors' original estimate.

The 46th Grammy Awards were held shortly after Warren's death, in February 2004. He was nominated for five Grammys and won two - Best Rock Performance By A Duo Or Group With Vocal ("Disorder in the House", with Bruce Springsteen) and Best Contemporary Folk Album (*The Wind*, with Noah Scot Snyder and Jorge Calderon).

Www.warrenzevon.com

Victims- Their Own Words

Karen Grant – Age 30

MESOTHELIOMA VICTIM

"My name is Karen Grant. I am 30 years old, married and live in Methuen, MA."

Last January, I was diagnosed with pleural mesothelioma- a rare type of cancer related to asbestos. I am the youngest person known to be treated for this disease on both of my lungs. I have not worked around asbestos, haven't done drugs, not even smoked. I was a relatively healthy person.

On Christmas Eve 2003, I woke up with a cough. That cough led to 2 ear infections, which led to pneumonia, which led to me collapsing a lung. When I had surgery to repair the collapsed lung, the doctor found a tumor.

This disease kills in about a year from diagnoses. I had this disease for about 5 years and probably was exposed to it 15 years ago. Since January, I have had 4 surgeries plus a tracheotomy. I've had my spleen taken out, 2 ribs cracked, part of my diaphragm taken out while laser removed the other half.

The last surgery I had back in May took me over 100 days to come home. A little more than a month later, I started chemotherapy. I had 4 sessions of chemotherapy every 3 weeks. It was a tough battle for me.

At my last treatment on December 30th, I was told by my oncologist that I am cancer free. I beat this disease. I am looking into going back to work part time and helping people out that have this disease. Though my life has been changed forever, I live it 1 second, 1 minute, 1 hour, 1 day at a time.

Not many people are aware of mesothelioma. I have never even heard of this disease. Asbestos has been illegal since 1975, but is still used today. I have no idea how I got this.

Victims- Their Own Words

Stephanie Barr – Age 27

MOTHER OF TWO; MESOTHELIOMA VICTIM

"At the age of 23, when my youngest child was 6 months old, I had a sharp pain in my left side."

The doctor said, "You just had a baby, so it's probably just a round ligament" and scheduled a tubal ligation.

Two weeks later, in May of 2000, I went in for the routine surgery that was supposed to last for 30 minutes. One hour later, the doctor came out and told my husband what he suspected it to be PERITONEAL MESOTHELIOMA.

Some of my earliest memories are of my brothers and I playing with our father after he came home from work as an electrician. As soon as he walked in the door, we practically attacked him. Who would have ever guessed that would end up hurting one of us?

After a visit to a local oncologist, he said that my only option was surgery. I did not like his answer, (and still did not realize that I had cancer) so I went to see another doctor at MD Anderson (MDA). The doctor called me at work and said, "I want you here in two days. You do not have a choice." I stood there in front of everyone, and lost it. It was that moment that I realized...I HAVE CANCER. Once arriving at MDA, I was told, yet again, that my only option was surgery.

The tumors were growing so slow that chemotherapy would not work. "Tumor debulking" was the only option.

The surgery was successful at removing a lot of the tumors. There are some that they could not get, but for right now, they are slow growing.

A Letter From The Lung Cancer Alliance

THE
LUNG
CANCER
ALLIANCE
No more excuses.
No more lung cancer.

March 24, 2005

Linda Reinstein
Executive Director and Cofounder
Asbestos Disease Awareness Organization
1525 Aviation Boulevard, Suite 318
Redondo Beach, CA 90278

Dear Linda:

On behalf of The Lung Cancer Alliance, I extend enthusiastic congratulations to the Asbestos Disease Awareness Organization (ADAO) on the recent passage of Senate Resolution 43, designating April 1, 2005 as National Asbestos Awareness Day. ADAO serves as the voice for all victims of asbestos-caused diseases. The Lung Cancer Alliance supports ADAO's work to raise awareness about asbestos exposure, to promote research that leads to earlier detection, prevention, and a cure, and to ban the use of asbestos.

As the nation's only nonprofit advocating on behalf of lung cancer patients, survivors, families, and caregivers, The Lung Cancer Alliance recognizes the absolute necessity and importance of asbestos awareness. Each year, over 2,500 people die from lung cancer caused by asbestos exposure. Most patients are diagnosed at a very late stage and given little hope for survival. These needless deaths need to end.

The Lung Cancer Alliance is proud to join efforts with ADAO. We look forward to working collaboratively with your organization to help eradicate asbestos exposure-caused diseases, especially lung cancer.

Sincerely,

Laurie Fenton
President

888 16th Street, NW • Suite 800 • Washington, DC 20006
Tel. 202.463.2080 • Lung Cancer Hotline 800.298.2436 • lungcanceralliance.org

TOKYO DECLARATION

The Participants of the Global Asbestos Congress 2004 in Tokyo (GAC2004) gathering from 40 countries and regions all over the world from 19-21, November 2004, issue the following appeal to governments, organizations, groups and people in view of the devastating health effects of all forms of asbestos, a proven carcinogen. Highlighting international initiatives for eliminating asbestos risks, participants agree to take urgent action to intensify these initiatives.

Ban:
Ban on asbestos mining, use, trade and recycling should be adopted by all the countries. Safe removal and disposal of asbestos must be carried out according to established rules and procedures.

Protection of workers and the public:
Workers and the public who may be exposed to products containing asbestos must be protected by means of adequate risk management procedures developed with the active participation of these people. The rehabilitation of environmentally damaged areas should be a priority.

Alternatives:
Alternatives replacing asbestos should be used with due attention to their less harmful nature and feasibility of such alternatives.

Information exchange:
Ready-to-use information materials should be developed and disseminated by collaborative efforts of international agencies, concerned organizations and interested groups. Awareness raising campaigns must be undertaken continually and systematically

Just transition and preventing the transfer to countries in industrial development:
Every effort should be made to secure a just transition and social protection for workers and communities affected by asbestos bans. Any transfer of asbestos production and asbestos containing products and wastes to countries in industrial development must be prevented by joint efforts.

Compensation and treatment:
Asbestos victims and their families must have prompt medical treatment and equitable compensation. Empowerment of the victims and their families in participating in local campaigns and taking direct action should be given a high priority.

Cooperation of people:
International cooperation is essential! Active participation of victims, workers, the public, policy makers, academics, lawyers, trade unions, grassroots organizations, relevant agencies and interested groups is needed. Positive experiences of this cooperation should be exchanged through existing and innovative networks.

Continual and global monitoring of developments in all the categories above is vital for sustaining international action toward asbestos-free environment for all the human family. We can, must and WILL make a change working together for the future.

President George W. Bush
The White House
Washington DC 20500
VIA FACSIMILE: (202) 456-2461

January 3, 2005

Dear Mr. President,

Hi, I'm Joey! I'm 11 years old. My dad died 11 days after my 10th birthday from mesothelioma caused by asbestos. What happened to my dad is he started out with the terrible cancer, mesothelioma. Then he had it spread all over his body. He was so sick that we had a hospice person brush his teeth and help him go to the bathroom. My dad made a joke about brushing his teeth. When the person said she would help him brush his teeth, he said, "I don't have any teeth!" He died a few days later.

When my dad was about my age, he played on a hill full of terrible asbestos when he visited his dad who worked at a factory that used asbestos. He also got it from doing the laundry when his dad got home.

He got sick right after Christmas in January 2003. He was teaching my sister Julie and I how to do pushups. When he got side pains he thought it was nothing. Then he thought he pulled a muscle or broke a rib. In early March, he was trying to have a catch with me but he said, "Just a few more throws because my shoulder is starting to hurt."

My dad was my basketball coach too early when he was sick. He was supposed to be my baseball coach too but he had to sit on the bench. They put him as the head coach in the program book even though he was too sick to coach. He died after the season.

The week before he died, I was at Long Beach Island and I wanted to come home because I wanted to know if he was doing alright and I was crying on the phone with my mom. It was like I was crying buckets.

The morning he died there were two miracles. A person named Mrs. Cowman came over and the first miracle happened. There was nobody else downstairs in the house except Mrs. Cowman, my aunt and my sister and then there were blinking lights in the kitchen. Julie said, "The Angels and Jesus are coming for dadDY now". I was upstairs with my dad and mom.

The second miracle happened was when I was fast asleep right next to my dad. My dad called my name as clear as water even though we couldn't understand anything he said for a day or two before. That was his last word. He died a couple minutes later. My mom said it was his gift to me because he knew I was sad.

I miss my dad. He was a lot of fun. Please don't let the guys who killed my grandfather and my dad and all the other people who died from asbestos get away with it.

Sincerely,

Joey

Construction Forestry Mining Energy Union Wins Dispute with James Hardie

By Andrew Ferguson,
Construction Forestry Mining Energy Union (CFMEU) State Secretary

Since their formation in the 1850's, the building unions in have been in the forefront of campaigns to improve wages and working conditions. The Construction Forestry Mining Energy Union of Australia (CFMEU) is the largest construction union. We organized ourselves around the slogan 'Safety is Union Business'.

One of the most successful campaigns by Australia's building unions was the ban on asbestos. In the 1970's, strikes and bans were organized by the unions on building sites aimed toward prohibiting the use of asbestos in new construction. The bans were imposed despite assurances from politicians and manufacturers that asbestos was safe.

Most recently, the CFMEU and other unions in Australia campaigned with asbestos victims against the James Hardie Company, Australia's largest producer of products containing asbestos.

James Hardie knew of the dangers of asbestos for 50 years before stopping its production. In 2001, James Hardie restructured its business entity and moved its company assets out of Australia to the Netherlands, beyond the legal reach of asbestos victims. The company left behind thousands of existing asbestos victims and tens of thousands of future victims who had been exposed to deadly asbestos products with the prospect of no compensation for them and their families. There was an estimated $2 billion owing to these existing and future victims.

The CFMEU, other unions and asbestos victims organized bans and boycotts and won substantial community support. Tens of thousands of people marched against James Hardie demanding justice for the asbestos victims.

As a result, the ACTU and the union movement gave James Hardie an ultimatum to settle the dispute by Christmas 2004 or face an escalation of protests and boycotts in Australia and across the world.

After a year long campaign multinational James Hardie has surrendered and agreed to pay full compensation to all existing and future asbestos victims. The settlement negotiated by the ACTU represents the largest compensation settlement for victims in Australian history. It is estimated that the cost to James Hardie will be over $4 billion!

Dedicated victims, families, friends, doctors and environmentalists, among many others, have joined our crusade to fight for asbestos disease awareness. **The Asbestos Disease Awareness Organization sincerely thanks each of you** for unselfishly giving your time, support and contributions during the past year. Our office is the Internet, fueled not by large corporate donations, but by the power of the people. In the last twelve months, we have united more than 1000 people and have nearly 100 active volunteers. For a moment, close our office and imagine ADAO without Ellen, our Webmaster. Darkness would fall; support and awareness would cease. Thank you, one and all, for a year of endless support. ADAO is an independent and respected organization because of you.

Fear, despair and isolation are paralyzing, but knowledge is power. We sincerely hope Reflections will be a resource and comfort to those in need.

A special thank you to our Reflections volunteers from the Warren Zevon website. We wish to extend our gratitude to Scott Bradley, volunteer extraordinaire, whose patience, creativity and brilliance led to the format and design of Reflections; KT Lowe, who unleashed her gift of writing and editing; John and Terri Stevens, who worked hard compiling names for our Victims Tribute list; and Lucy Pfeffa, consistently bringing out the best in all of us and lending a positive approach to any task.

Jordan, what can we write or say about you? A man of great distinction, quietly humble, enormously gifted and possessed of kindness beyond belief. We are blessed that you are the National Spokesperson for ADAO.

"Asbestos Awareness Day offers a beacon of hope for hundreds of thousands of current and future victims of asbestos diseases. ADAO is elated that the United States Senate has seen fit to acknowledge the severity of the asbestos problem in the United States and around the world. We strongly encourage the Senate to build on the righteousness of this day, by promptly enacting a complete ban on asbestos. That is the only way we can hope to eliminate this insidious epidemic."

~ Alan Reinstein, ADAO President