

FDNY WTC Health Program



ISSUE VIII

April 2014

Program Updates: Additional Cancers added as WTC covered Health Conditions

As of 2/18/14, due to a revision in the definition of "rare cancers," as defined by the WTC Health Program four additional cancers will be covered as WTC covered conditions: brain cancer, invasive cervical cancer, pancreatic cancer and testicular cancer. No cancers were excluded as a result of this revision.

The first step in getting your cancer treatment paid for by the WTC Health Program is getting the cancer certified. The certification process establishes a link between the cancer and your 9/11 exposure.

To inquire about cancer certification contact Nadia Jaber at 718-999-1223.

NIOSH will not reimburse for costs prior to the date of WTC cancer certification. You may be able to receive compensation through the September 11th Victim Compensation Fund (VCF) for past cancer treatment costs.

For information regarding the VCF, please visit www.vcf.gov or call the VCF toll free at 1-885-1555.

For general questions about cancer care please call Michelle or Lana at 718-999-7040.

Annual Low Dose Chest CT Screening for FDNY WTC Health Program Members

Many of us have read in the news about low-dose computed tomography (CT) screening to detect lung cancer. And questions have surfaced.

Does the FDNY World Trade Center (WTC) Health Program offer free lung cancer screening with appropriate follow-ups? The answer is a <u>YES</u>, if you are at significant risk for developing lung cancer.

Lung cancer is the leading cause of cancer death for both men and women in the United States, far greater than colon cancer, prostate cancer or breast cancer. The five-year survival rate for lung cancer patients is only 15 percent. Recent research from the National Cancer Institute National Lung Cancer Screening Trial (NLST) found that low-dose chest CT shows promise as a method for detecting early lung cancer in highest risk individuals, who have not yet shown symptoms. Only early detection before lung cancer has spread can save lives and for those at high risk for developing lung cancer, low dose chest CT scan has now been shown to reduce deaths by 20% compared to chest X-ray.

Who should be screened for lung cancer?

Recently, national recommendations for low dose chest CT screening in smokers at high risk for developing lung cancer have been issued by the United States Preventive Services Task Force. High risk rather than low risk individuals are chosen for screening because in high risk individuals you have the greatest chance of finding true cancers. In contrast, in low risk individuals, you have the greatest chance for false-positive findings and therefore the greatest chance for causing harm from radiation or unnecessary follow-up procedures.

How many patients in the FDNY WTC Health Program might qualify for lung cancer screening? Following national guidelines about 360 of the 16,000 members would qualify for screening. Additionally, several thousand members were present at WTC on day 1 when the exposure was highest and these members while not meeting national guidelines based on smoking alone, may be offered screening if they have other findings that might suggest increase risk. (continued on page 2)

ISSUE VIII

(low dose chest CT screening continued from page 1)

Are there any other proven methods for lung cancer screening? No. Only low dose chest CT scan without contrast is recommended for lung cancer screening. Chest-X-rays, chest-X-rays with sputum analysis and body scans are not recommended for lung cancer screening – the first two are not accurate enough for early detection and whole body scans do not provide any additional accuracy for finding lung cancer while exposing the patient to far greater and unnecessary radiation.

It is important that low dose chest CT scans be done only by those with experience in performing and interpreting test results. The FDNY WTC Health Program has already performed low dose chest CT scans in over 3,000 individuals. Scans are done at some of the best radiology facilities in the area. All results are then reviewed by Dr. Prezant (co-Director of the FDNY WTC Health Program and our senior lung specialist), so as to identify those in need for further action (follow-up chest CT scans, biopsy or curative resection).

What do the results mean? <u>A "negative" result</u> means that there were no abnormal findings at this time. It does not mean you absolutely do not have lung cancer. It does not mean that you will never get lung cancer. Despite a negative result, if your risk remains high, you will be scheduled for follow-up scans. <u>A "suspicious" result</u> means that the CT scan shows something is abnormal. This could mean lung cancer. It could also mean another lung condition. It could also mean there is no serious condition and the result is a "false positive". You may need to have additional procedures to find out exactly what is abnormal. This is why it is critical that low dose chest CT screening programs be done only by those with experience. If you do have lung cancer or some other serious condition, you will be referred to an expert team who will discuss all treatment options. Early detection dramatically increases the likelihood for cure and survival.

If you qualify, low dose chest CT screening is free. For those at high risk and enrolled in the FDNY WTC Health Program all costs are paid for through our federal funding (NIOSH WTC Health Program).

Remember <u>NOT</u> smoking is the best prevention. Not starting to smoke and quitting smoking remain the best way to prevent lung cancer. FDNY also offers a non-punitive, voluntary, free tobacco cessation program with some of the most successful quit rates in the nation. You can call 718-999-1942 for a tobacco cessation program appointment.

We have already saved lives through this program. If you are not already part of this program, you will be getting an invitation letter from us in the next 6 months. You can also discuss this program with your physician at your next FDNY WTC Monitoring or Treatment visit or of course with your own physician.

Staff Profiles: Sofia Bakradze

Sofia has worked at the FDNY WTCHP since May of 2006 initially doing billing work for the program until she shifted into her current role as the main Member Service Representative with WTCHP Prescription Plan alongside Phil Mouren.

Sofia takes anywhere from 20 to 40 phone calls a day, mostly from members. She is in touch with local pharmacies, and interfaces with WTCHP doctors as well. Among Sofia's WTC Prescription Plan duties is helping to resolve prescription issues / rejections, both at local pharmacies and at Walgreens Mail Service. Each issue resolution often requires multiple phone calls and/or e mails and a great deal of patience. She is very detail oriented and tracks all her communications so that she can be sure to follow through on all outstanding issues.



Sofia also takes great pride in explaining the WTC prescription process to our mem-

bers. She really enjoys speaking with the members and feels lucky to be serving in such a capacity. There are moments when Sofia wishes she could make things happen faster for members, but she has learned that sometimes she has to wait for another part of the system to catch up. Sofia is also responsible for pulling medical records along with another staff member. She applies her talent for details here as well, making sure that absolutely everything has been included before the record goes out.

Sofia is hopeful that she can continue to develop her career at the FDNY and is currently in school full time working toward her undergraduate degree in health service administration.

PTSD and Alcohol...the relationship

Alcohol problems and anxiety disorders such as PTSD can occur independently, but studies show that people who suffer with PTSD often have problems with alcohol. The daily chaos, stress, sleep deprivation, and traumas that you experience on the job as a firefighter or emergency service worker increase the risk for the development of both PTSD and alcohol problems.

In addition, there is research showing that heavy alcohol use can make it more difficult for an individual to recover from the experience of a traumatic event. This can turn into a destructive cycle where selfmedication (the use of drugs or alcohol to temporarily relieve a mental health symptom i.e. depression or anxiety) leads to further trauma, as resiliency declines.

PTSD can create problems falling asleep or staying asleep and drinking may seem like a solution, but it actually changes the quality of your sleep so you feel less refreshed upon waking.

PTSD can make you feel numb, irritable, angry or depressed and all of these feelings are made worse by alcohol.

Alcohol use can continue the cycle of avoidance that is part of PTSD. Avoiding memories of an event, dreams, people and places can actually prolong their impact and disrupt PTSD treatment.

Chronic exposure to alcohol can disrupt how our cognitive brain centers control our emotional brain centers. This makes it harder to distinguish a traumatic event from the past from ongoing life.

Alcohol creates a temporary distraction from your problems, but as alcohol dependence or addiction develops it disrupts concentration, productivity and the enjoyment of family and work life.

The most effective treatment for overlapping PTSD and alcohol problems is treatment for both issues. Removing the alcohol without treating the PTSD can cause a spike in symptoms and cause an individual to relapse.

FDNY WTC Health Program staff are experts on WTC related conditions and how to treat them.

For more information about confidential treatment call FDNY-CSU at (212) 570-1693

Cancer Services: Groups Forming Now

Cancer Support Groups will offer members with cancer an opportunity to share common concerns, receive support with difficulties, and learn ways to manage anxiety and depression. Members will be able to exchange valuable information and help others who may be earlier on in their treatment process.

Groups are currently forming at all five locations of FDNY-CSU based on need and interest: Brentwood, Ft. Totten, Manhattan, Orange Countly and Staten Island. Please call Jessica Metz at (212) 570 1693 or email metzj@fdny.nyc.gov for more information or to participate.

FDNY WTC HEALTH PROGRAM

9 MetroTech Center, Room 2E-13 Brooklyn, NY 11201

Phone: 718-999-1858 E-mail: wtcmed@fdny.nyc.gov Monitoring and Treatment



FDNY WTC HEALTH PROGRAM

When was the last time you came for your WTC Medical?

Call 718-999-1858 to make your appointment.

WTC Medicals

are available annually to active members in Brooklyn (Metrotech)

and retired members at all 5 locations.

Not all testing is done On-Site at every location.

Retirees, please use table below to find your location and testing information:

	Brooklyn HQ	Fort Totten	Orange County	Staten Island	Brentwood
Address	9 MetroTech Center Brooklyn, NY 11201	Building 413A Bayside, NY 11364	2279 Goshen Turn- pike Middletown, NY 10941	1688 Victory Blvd Staten Island, NY 10314	Suffolk County Community College 1001 Crooked Hill Rd. Brentwood, NY 11717
Days	Tuesday — Friday & Occasional Sundays	Monday — Thursday	Thursday, Friday Monday Treat- ment Only	Monday—- Wednesday Thursday Treat- ment Only	Monday & Friday Occasional Sundays Tuesday Treatment Only
Hours	8:00AM to 2:00PM	8:30AM to 3:30PM	9:00AM to 1:00PM	8:30AM to 3:30PM	8:00AM to 3:30 PM
Blood Tests	On-Site	On-Site	On-Site	Off-Site	Off-Site
X-Rays	On-Site	Off-Site	Off-Site	Off-Site	Off-Site

Referrals to nearby facilities for off-site tests will be given to you by a WTC nurse

on the day of your appointment.