



Physician-Diagnosed Respiratory Conditions and Mental Health Symptoms in FDNY Rescue/Recovery Workers 7-9 Years Following the World Trade Center Disaster

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Background

- The traumatic events that took place on 9/11/2001, and during the 10-month rescue/recovery effort, took a physical and psychological toll on New York City Fire Department (FDNY) rescue workers
- FDNY has performed health evaluations every 12-18 months on its workforce since 1997
- Since 9/11/2001, these evaluations also include self-administered, computer-based, physical and mental health questionnaires







Background

- This study describes:
 - Current burden of post-9/11 respiratory conditions
 - Self-Reported Diagnoses
 - FDNY Physician Diagnoses
 - Current burden of post-9/11 mental health conditions
 - Probable PTSD
 - Probable Depression
 - Co-Morbidity
 - Between probable PTSD and depression
 - Between physical and mental health







Background

Time of first arrival to WTC site:

- **Group 1**: Morning of 9/11/2001
- Group 2: Afternoon of 9/11/2001
- Group 3: Day of 9/12/2001
- Group 4: Any day between 9/13/2001 -9/24/2001







Methods – Population

10,943 firefighters and EMS workers in final analytic cohort

Inclusion Criteria:

- Study Period: 9/11/2007 9/10/2010
- Arrived at the WTC site before September 25, 2001
- Male firefighters and EMS workers
- Spirometry within 90 days of physical health survey
- Mental health survey within 90 days of physical health survey







Methods - Physical Health

- Pulmonary Function Test (PFT)
 - Quintiles of FEV1 %Predicted
- Self-Reported Respiratory Diagnoses
 - Based on self-administered questionnaire
- FDNY Physician Diagnoses
 - From the FDNY electronic medical record







FDNY Physician Diagnoses

- Sinusitis, Asthma, Chronic Bronchitis, COPD/Emphysema
 - Asthma, Chronic Bronchitis, and COPD/Emphysema were combined to create obstructive airway disease (OAD)
- Case definition for diagnoses:
 - Multiple visits in the same month were counted once
 - Patients must have had three visits with the same diagnosis since 9/11
 - One diagnosis had to be within the study period (9/11/2007-9/10/2010)







- 9,715 male firefighters
- 1,228 male EMS workers
- Median age on 9/11 = 40 years
- 75% arrived on 9/11

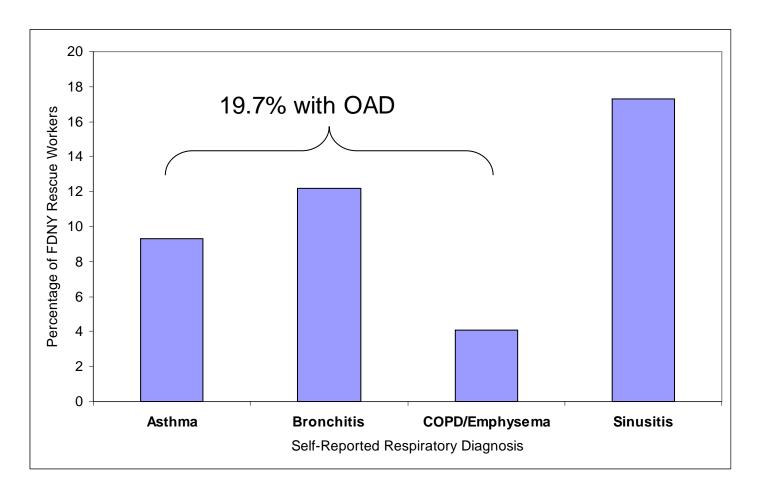






Results Self-Reported Respiratory Diagnoses

Firefighters and EMS Workers



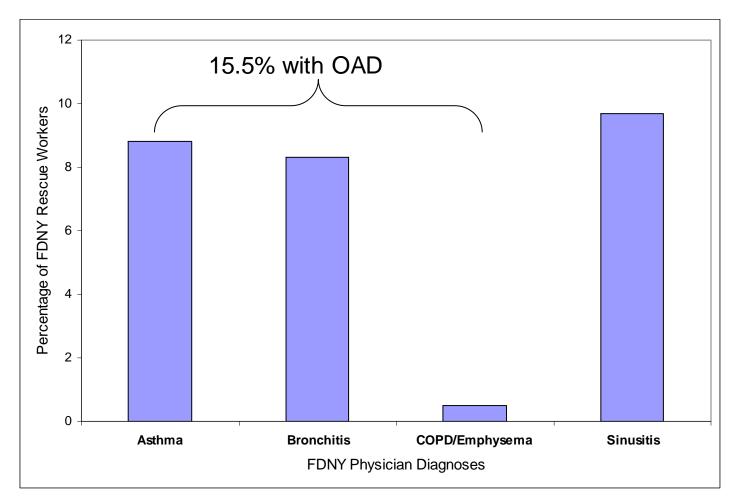






Results FDNY Physician Diagnoses

Firefighters and EMS Workers



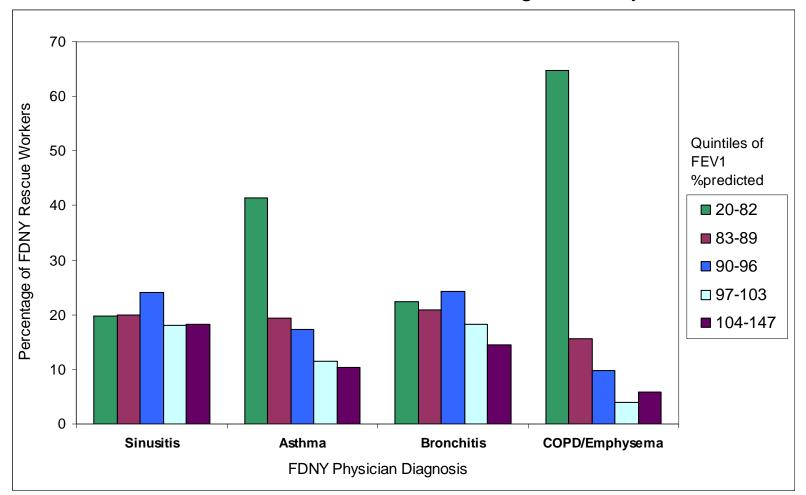






Results FDNY Physician Diagnoses

Based on Quintiles of FEV1 %Predicted in Firefighters Only









Methods - Mental Health

 Probable PTSD was defined by the PTSD Checklist (PCL)-Civilian Version

 Probable depression was defined using the Centers for Epidemiologic Studies Depression Scale (CES-D)







Results Mental Health

- 10,867 (99.3%) took the mental health questionnaire during our study period
- 752 (6.9%) with probable PTSD
- 2,106 (19.4%) with probable depression
- 715 (6.6%) with probable PTSD and probable depression







Results Mental Health

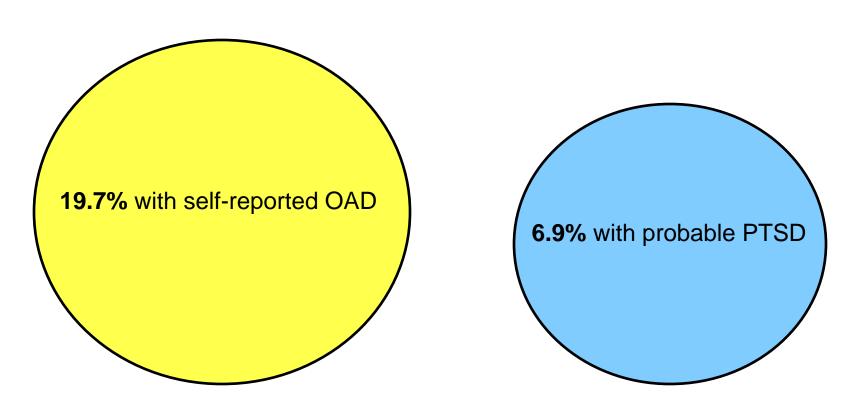
 Those who arrived in the morning of 9/11 were 3 times more likely to report probable PTSD than those who arrived after day 3

Those who arrived in the morning of 9/11
were <u>2 times more likely</u> to report probable
depression than those who arrived after day 3





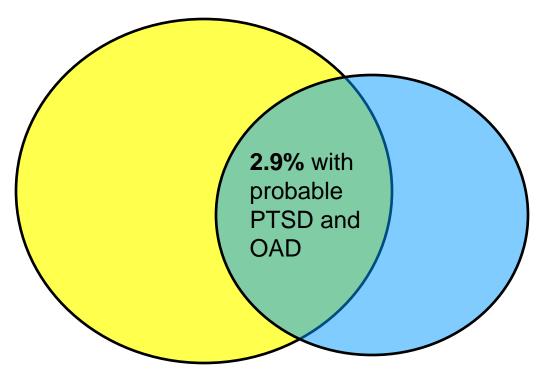
Comorbidity between Physical and Mental Health







Comorbidity between Physical and Mental Health



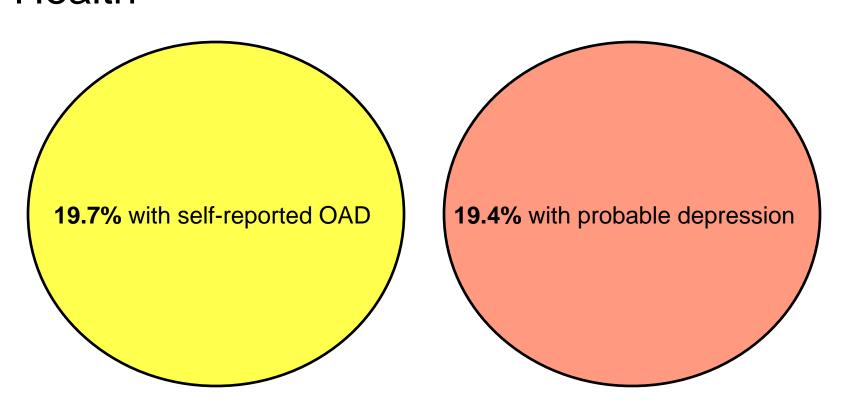
19.7% with self-reported OAD

6.9% with probable PTSD





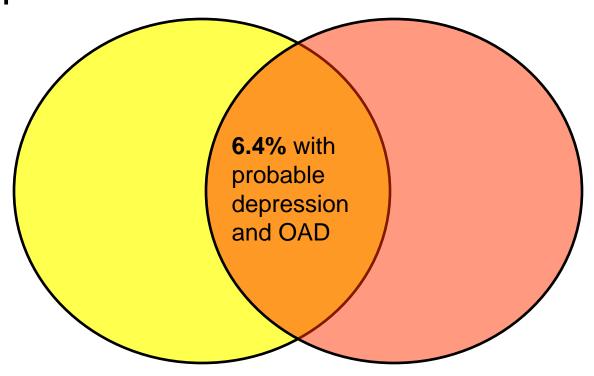
Comorbidity between Physical and Mental Health







Comorbidity between Physical and Mental Health



19.7% with self-reported OAD

19.4% with probable depression







Limitations

- No treatment analysis so cannot look at treatment effects
- All questionnaires are given at the same time so we cannot see the temporal association between physical and mental health outcomes







Conclusion

- First study to describe the elevated prevalence of respiratory diagnoses by an assessment of medical records
- Co-morbidity
 - 95% of those with probable PTSD also screened positive for probable depression
 - Co-morbidity between self-reported respiratory diagnoses and both probable PTSD and depression







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