

Ministerial Inquiry into the Management of Aldehydes and Solvents in the Workplace.

Submission by Brigit-Rose Bell 11/02/2003

I worked at Big Fresh Supermarket, Hamilton as a Ticket & Sign writer from October 1995 – August 1996 that resulted in Acute & Chronic Solvent Induced Neurotoxicity.

My work area was an unventilated, 3m x 2m “storage room” with a door. The company supplied industrial printers inks, paints, sprays, chinks and solvent & alcohol based permanent marker pens for this job. I worked 40 hours a week and over time, including many weekends in the first 6 months of the job.

Adverse Health effects began within the first three months with symptoms such as headaches, skin rashes, sore and sensitive eyes, dry cough, wheezy chest, sore throat & chest, thirsty, nasal irritations and redness on the face. “Some of these symptoms” improved over the weekend when away from the job.

My eyes were being affected and I went to an Optometrist who found that I had become photosensitive and the cause was an irritant but was unable to localise the source of the problem.

My symptoms as above, worsened and nothing I used remedied the problems. Other symptoms began to appear such as weight loss, nausea, bleeding noses & blood in my urine, pain localized in lower back and abdomen, skin began to change colour to a muddy yellow, chest infections and most profoundly was my personality and mood changes.

I saw the company Doctor who was unable to definitively diagnose any problems.

Due to the location of my work room the heat was unbearable and I sought from the company, ventilation and a charcoal filter mask.

The company doctor then put me off work following “unspecific neck problem” for 1-2 weeks. I was referred to physiotherapy and the physiotherapist recognised symptoms of solvent poisoning and advised me to contact OSH.

My Union delegate had already contacted OSH because of mine and the previous ticket writer’s problems and history. OSH had recommended taking 20 minutes breaks from the work area. This did not remedy the situation and OSH refused to visit or inspect the work site on two occasions during this period.

I returned to work and my health continued to deteriorate. The Employer and some Team Leaders were harassing and bullying me on my return. My workload was doubled and so did the products supplied to me.

Due to cost cutting, the industrial inks and the pens being supplied to the job changed to cheaper and more toxic products.

My symptoms became more acute and the pain was horrendously intolerable. Two months later my mouth and gums/teeth began to bleed and a putrid metal taste was all I could taste.

The company referred me to a dentist who found I required major dental surgery, which he performed. I knew I was in a critical condition and I demanded that OSH inspect the work site. I demanded ventilation for my work area and I requested that management arrange air monitoring of my environment and began to order non-toxic products. The company insisted I phase out the old stock first.

OSH said the following over the phone 29th July 1996:

1. Come out of the work area every 20 mins.
2. Discontinue mask after 10 minutes if breathing is obstructive.
3. Obtain MSDS for the products I was using from the suppliers.

OSH advised the Employer that the worksite was to be inspected on the 1st August 1996 at 1:30pm.

My Employer and the 2IC approached me in my workroom about my request for air monitoring and my complaints with OSH. My Employer measured my room with a fluorescent light bulb carton and informed me that my room was roughly 3m x 2 metres. Air monitoring was now done and then he told the 2IC to take care of me and left the country and her as acting manager.

On the 31st July 1996 The Acting Manager acting on instructions from OSH moved me to the mezzanine floor, above my old work area. This area was approved by OSH without inspection as a safe alternative.

OSH changed their appointment to Friday 2nd August

Management removed 90% of the industrial inks, paints and pens prior to the OSH inspection.

On Monday 5th August 1996 I collapsed unconscious on the mezzanine floor. Management moved me from the mezzanine floor and dropped me down the ten-foot ladder to the ground floor causing further injuries.

OSH medical specialist has since accepted that another unreported incident and injury occurred that day, based upon the medical evidence.

I briefly recovered consciousness at the base of the ladder and again in the sick bay where I could hear my Union delegate being denied access to me because he was being informed that I had been taken to the emergency clinic and Management would "take care of it". OSH refused the request from my Union Delegate for assistance at this time.

Management then paraded as drunk at work and forced to walk unaided around the supermarket where I collapsed several times. I was escorted out the public exit to walk to the medical clinic. The clinic was informed by a Management Team member that my condition was not work related.

I saw two GP's and walked unaided to OSH to be assessed for Solvent poisoning the same day.

The Company Doctor and OSH requested copies of the MSDS's from my Employer.

The next day at my home (6th August 1996) the company obtained from me the original MSDS's and the company then provided to OSH and the GP falsified MSDS's.

They also informed OSH that I was the only Ticket & Sign writer to have suffered these problems or symptoms. To obstruct the natural course of Justice the Company slandered my name by informing and accusing me of being an alcoholic.

Research has shown that my Employers were of the "**top two companies for gross negligence**". *Massey University Study 1999. Injuries in the workplace – Margaret Sainty.*

The Company GP disregarded the MSDS's based on the fact that he had previous experience with Occupational medicine and he had been treating the previous jobholder for the same condition. The Diagnosis from the Company GP for the ACC claim was, "**Occupational exposure to toxic fumes with systemic side effects as result of confined space injury**".

OSH placed me on the National Occupational Disease Register for Asthma and CSNT.

The Employee for OSH, heading the investigation, colluded with the Company in order to minimize my injury and my exposure. The company supplied false data and statements to OSH in order to avoid prosecution. The company deliberately concealed the solvent poisoning in the first instance and the fact that untrained staff had dropped the worker when rendering first aid causing serious harm after the fact.

OSH altered their documentation and assisted the company by minimizing the incident and exposure.

ACC finally accepted the claim for industrial solvent poisoning 5 months later.

The stress that was placed on me to research and provide the proof of my injury was extremely beyond comprehension, especially whilst suffering acute solvent poisoning. The mental abuse that I have been subjected too, not only from my Employer but also ACC in their attempts to discredit my name, claim and condition is beyond repair.

The list includes, "lost files", destruction of files, dissemination of files, falsifying information supplied to medical and rehabilitation assessors and providers, many incompetent and unknowlegdable ACC case managers, abuse of their positions of power by forcing me to undertake medical tests that were contra-indicated by my true medical history, and deliberately feathering my GP's medical notes and history to cause serious harm and a full loss of recovery.

The stress and psychological damage placed upon my children and myself in the last 6 years cannot be measured. My family disowned me, my two young children (10 and 7 years) were left to look after and care for me during my acute recovery period. It was frightening to "wake up" one day, two years later and see your own children two years older.

Recovery was a very slow and gradual process and I am lucky that my children and friends are aware and supportive of me today.

I received no help from ACC in any manner or entitlement for care and recovery. The ACC files reflect this.

Today my symptoms and condition are described on a daily basis as mild to acute. I wear a Medic Alert bracelet for **Multiple Chemical Sensitivities, Allergy Solvents – Toxicity-Iodine / Iodine Media Contrast & Penicillin Anaphylaxis. NZ 109457.**

I have motor skill impairments, cognitive impairments, visual problems, Skin changes, dental and gum problems resulting from a suppressed immune system and petrochemical poisoning, organ site damage, mild asthma and serious neck and back problems.

No orthodox treatment is able to be used in treating my condition and if required it is in the lowest possible dose, short term. ACC does not support the use of alternative therapies or medicine.

I have been in the ACC review system since 1998 –2003 for my injury. This fact has caused me great financial loss including my house and partner. This fact alone portrays that ACC have abused their position of power and the ACC Review Process in order to keep this claim out of the Justice system.

I have finally been able to lodge an appeal with the district court. Yet I am extremely fearful of being returned to the ACC system and losing the recovery that I have personally made to date since being off their books.

I have subsisted on the WINZ Invalids benefit since March 2000. I have nothing but praise for my WINZ case manager since 2000. She has provided understanding and support although WINZ are fully aware that my condition is a result of a work injury and should be covered by ACC. WINZ fully support my continuing struggles to obtain justice.

The WINZ medical Assessors agree I am incapable of working due to my condition and the potential danger that many environments will present with Employment.

ACC's medical Specialists and Occupational assessors insist that I am fit to work regardless of environments for 30 hours a week, based upon ACC's supplied paperwork.

OSH Specialists say I am not fit to work for 30 hours due to my condition unless the environment is safe.

The NZ Rehabilitation and Brain Injury Specialist ridicules ACC for their failure to provide any support, rehabilitation or treatment based on ACC's files and paperwork.

I have just returned from the United States of America, where the American & the WHO Specialists were horrified by the OSH/ACC files and abuse inflicted on me on all levels. That my **condition of CSNT & MCS** is now well recognised worldwide. They are also aware they have no jurisdiction to assist me but have noted my medical case for reference and medical research.

Please note that all documentation-supporting allegations of corruption and malfeasance can be supplied when requested.

“Is there Justice in any system in this country or do I have to seek political asylum in order to obtain safety and recognition?”

My concerns now lie with the availability of many solvent products such as stationary items that are used by the worker at work and at home but most of all the children and in the schools. OSH also needs to monitor closely the 'Sign-writing Industry' to ensure workers have proper work place standards and protection from the chemicals and solvent based products used in their employment.

Suppliers and outlets for the “solvent & alcohol based stationary products” need to stop importing via Australia the dangerous and health damaging products. (Australia is a jumping point of trade for many other countries to supply to NZ).

I have personally found that products I used in 1996 are still in use or that the manufacturers have simply changed the packaging or name of the product thus leaving the unsuspecting parent, child or teacher not knowing it is dangerous.

Some of the cheaper imported products are not labelled in English and often have no health warnings that by law should be displayed on the packaging or product.

I put this to the test in a large stationary outlet and found a product that was extremely dangerous for use. I requested the MSDS from the store and recommended the product be discontinued. Nothing was done and no MSDS was ever supplied.

My research has shown that children are aware that 'sniffing' "Vivid permanent markers/other pens and whiteboard markers can get them high".

Also of concern is the availability of scented "Aromatherapy" pens which encourage sniffing! These products contain aromatic chemicals and are not safe.

The abuse or continual inhalation of these products can lead to addiction or worse Brain damage and induce neurotoxicity.

Teachers are supplied and required to use "Sharpie" pens, containing high levels of aromatics. Whiteboard markers are a big concern. My own children complain about the smell in the classrooms and that it makes them ill. For some children or Teachers with sensitivities or asthma, this will worsen their health.

I would like to see non-toxic whiteboard markers made and supplied to schools, or a return to blackboards could be considered the alternative for health & safety.

As a chalk artist, this is far safer than toxic pens on whiteboards. To eliminate the dust problem from blackboards one only has to use a damp sponge to clean and you eliminate a dust problem. A duster with a disposable sponge attachment could be made. Wet blackboards are far easier to use in my experience to clean and write upon.

I would like to see children be made aware in campaign's or class projects at primary level. "What's in your Pencil case". This would educate the parents because as the purchaser they would be made aware of what they are actually purchasing. Many parents go for the cheaper products without realising they are more toxic.

My daughter's teacher tried such a class project of awareness and the dangers of poisons in their pencil cases. It was a great success to the point that some children no longer had some of the disruptive and behavioural problems they previously were displaying in the class. It was a class of ten year olds.

I would like to see the laws changed and enforced on suppliers to the public and work sectors for such products. They should be held responsible for supplying dangerous products. At the present if a person purchases a toxic product whether there is a warning displayed or not, for the work place or at home who is held accountable if a child for example gets hold of that toxic pen and becomes ill or worse is fatally injured?

The supplier won't take responsibility or liability, neither will the manufacturer and the parent will be blamed and carry an unbearable guilt.

The children must be protected at school and at home, they are our future, not chemical cartels.

Brigit-Rose Bell