

ACOEM Takes Down Position Paper Commonly Used to Defend Against Mold Claims

by Ben Miller (Reporter)

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The American College of Occupational and Environmental Medicine appears to have retired a controversial position statement on mold that critics say has been used to deny workers' compensation claims for more than a decade.

The position paper, titled Adverse Human Health Effects Associated with Molds in the Indoor Environment, essentially stated that mold is not likely to cause many of the illnesses that employees mark down as job-related on workers' compensation forms, according to mold activist Sharon Kramer.

The paper no longer appears on the organization's website. A search for previous versions of ACOEM's policies and positions page using WayBack Machine – a website that takes snapshots of web pages and preserves them so users can compare changes later on – shows the paper appearing no later than Dec. 29.

ACOEM representatives did not respond to multiple requests for comment. But Kramer told WorkCompCentral in an interview last week that Michael Hodgson, medical director for the U.S. Occupational Safety and Health Administration, received a statement from ACOEM's publications director [Marianne Dreger] last year that the organization would sunset the position paper in early 2015.

Kramer said the sunsetting that appears to have occurred takes away any weight the paper might hold as a defense against workers' compensation claims where the claimant is seeking benefits for mold-related illness.

“It's sort of damning for anybody who tries to use that in court because they basically said, ‘Eh, this [is] no longer our understanding,’” Kramer said.

Kramer said the position statement was first published in 2002, then revised in 2011. Neither paper, she said, acknowledged mounting evidence supporting that mold can cause respiratory problems and inflammatory responses in the body.

“It was a litigation defense argument right from the get-go,” she said.

Ritchie Shoemaker, a mold researcher who has testified in more than 200 court cases related to mold illness, said the ACOEM paper was ubiquitous in litigation for many years.

“After 2003, there were no cases that I participated in where defense did not quote ACOEM,” he said.

Mold inhalation causes reactions of varying degrees, depending on the individual, Shoemaker said, and can present itself in an array of symptoms – confusion, memory problems, numbness and tingling, tremors, respiratory problems and even joint problems that look like rheumatoid arthritis at first glance.

“It’s fascinating to see the diversity of inflammatory responses that we have,” Shoemaker said. That position has been supported in literature from the World Health Organization as well as the National Institute of Occupational Safety and Health.

Shoemaker said there are several ways to show that a patient has been exposed to the inhalation of mycotoxins, which mold produces. Blood samples, brain imaging and soon genetic tests can all be used to show a “fingerprint” that only mycotoxin inhalation produces, he said.

He said he has submitted a journal article for publication on genetic testing. That paper shows that a person’s messenger ribonucleic acid can be analyzed to see which genes have been activated and which have been suppressed by mold inhalation.

“If all we look at is just a genomic sample, we can take it as a blind without knowing anything about the patient and tell you with 93% accuracy whether we’re dealing with a mold patient,” he said. Further evaluation can bring the accuracy of diagnosing a person as suffering from mold inhalation up to 99%, he said.

Other workers’ compensation treatment guidelines don’t have much to say about mold. The medical treatment guidelines available on the Washington state Department of Labor and Industries website make no specific mention of mold. Colorado’s guidelines, which were among the first for workers’ compensation adopted in the country, also make no mention of mold.

“We can’t cover everything and what we focus on are really the nine highest frequency and highest cost conditions in Colorado, and (mold) is actually not on the list,” said Daniel Sung, manager of medical policy for Colorado’s Division of Workers’ Compensation.

In mold cases, he said, Colorado stakeholders will have to instead look for the best evidence-based medicine they can find.

The online portal for the Official Disability Guidelines offers no entry in its “UR Advisor” tool and points users to MedLineConnect, a government-run website which simply states that

“inhaling or touching mold or mold spores may cause allergic reactions or asthma attacks in sensitive people.”

Shoemaker said that even though the ACOEM paper appears to have been sunset, he expects it to continue cropping up in court because ACOEM was the last organization to hold the position that mold inhalation wasn't likely to cause medical problems.

“They don't have anything else,” Shoemaker said. “The British were throwing rocks at Washington as he crossed the Delaware River because the Hessians were too drunk to fire their muskets.”

<https://ww3.workcompcentral.com/.../365fb293e6c28f3644229d743...>

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