Monsanto

Dept. of Medicine & Environmental Health D. L. Coleman, M.D.-G2WP-8805

DATE February 10, 1981

cc J. Craddock - A2SA
G. Roush

SUBJECT

REFERENCE

TO File

Dr. Meyer, Executive of the General Hospital Binghamton, New York, called. They had a transformer fire Wednesday - February 4, 1981, fought by 25 to 30 firemen who generally all were exposed to liquid PCB from the explosion of the transformer which spread the pyranol material around the area that it was contained in. They all had pyranol soaked gloves and some had it on their skin from splashing. The only injuries suffered by the firemen were some first-degree burns of the hands from the heat of the pyranol fluid going through the gloves.

Dr. Meyer was reassured that single exposures of this nature seldom will produce any measurable PCB level in the individual and we have no record of illness from single exposure of this type. He was advised that the heated PCB's can produce PCDF's that PCDF's have been linked to the chloracne and liver disease seen in the Yuschel incident. However, this particular exposure, apparently the PCB material involved was not exposed to the flames for a long period. It was spread by an overheated transformer that exploded.

He was advised that long-term effects of PCB's are limited to chloracne and some liver changes in those who are exposed chronically to excessive doses and that triglycerides had been noted by some researchers. He related that upon admission all of the individuals that serum drawn and split so that a smack 20 was done and some of the serum was frozen for future reference. He is more interested in the difficulties of defending the fire department against future Workers' Compensation claims than he is in acute illness. I explained to him that the literature available did not point out any illness to be expected from a single, acute exposure such as this. I referenced silicous studies of the General Electric Capacitor Workers and the NIOSH Criteria Document as background information. He was grateful for the information and felt reassured that there is no immediate difficulty or prospect of long-term disease in these individuals.

He was advised also that disposal of the contaminated clothing should be done in accordance with the EPA Guidelines which requires an approved landfill for toxic substances and he should contact his local contamination control office for the recommendations in the local area.

Donald L. Coleman, M.D.

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