PLAINTIFF'S
EXHIBIT
BRK-174

The Industrial Commission
Of Ohio
Division Of Safety & Hygiene
246 N. High St., Col., O. 43215

June 29, 1983

Industrial Commission of Ohio
Legal Section
246 North High Street
Columbus, Ohio 43215

Attn: Judy Spencer

RE: OD 19980-22
Paul J. Czoka
Packard Electric Division
Warren, Ohio 44486

Dear Ms. Spencer:

At your request, this report has been prepared based on information provided in the facsimile file and on additional information obtained during a visit to the North River Road Complex of Packard Electric Division, GMC. In addition, two telephone conversations were held with the claimant in an attempt to learn if he could relate his condition, which has been diagnosed as chronic conjunctivitis, to specific operations. During these calls the claimant also corrected the date of the original diagnosis. As reported in the file, the original date of diagnosis by Dr. Gillette was January of 1976. The claimant states that this is incorrect, and that he was first treated by Dr. Gillette in November and December of 1978.

This claimant, who was first hired by Packard Electric in 1971, except for a few very brief periods, has worked entirely at the North River Road Complex. Five operating plants are situated at this location, all under one roof, with a total employment of approximately 5000 persons. Over the years, Mr. Czoka has been employed at several jobs in this complex, but mostly at Plant 12, in the assembly of automotive electrical harnesses. He has assembled harnesses, both individually and on a conveyor line, in several departments of Plant 12.

During a May 9, 1983, visit to the plant, harness building was observed in several departments where the claimant has worked. At this time management explained that no material, which could be considered an eye irritant, is used in the assembly of the harnesses. Black electrical tape is the only material used by these employees.

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Dip soldering was observed in Dept. 1233 as part of the harness building process, however each dip pot is supplied with local exhaust ventilation which appears to be doing an excellent job in removing any possible contaminants from this operation.

Personal monitoring, normally carried out in the investigation of an occupational disease claim of this type, was not performed because a specific contaminant could not be identified as being the cause of the claimant's problem. In the discussions with the claimant, he stated that he does not think that his eye problems have resulted from exposures to substances generated in his own work and that he does not know what is causing his problem. However, he added that when he is away from work, on layoff or vacation, he does not experience the problem. Shortly following each resumption of work, the eye irritation reoccurs. He claims that the irritation occurs with about the same severity regardless where he is working.

Inasmuch as complaints of eye irritation, such as that which the claimant alleges to be experiencing, are apparently not a common occurrence in this vast complex, it is not likely that any TLVs, for materials which act as eye irritants, are being exceeded. This writer, in several visits to the North River Road Complex has never experienced any eye irritation or noted any disagreeable odors from air contaminants. Also observed during these visits was the widespread use of local exhaust ventilation on processes which may emit irritating or toxic substances.

If information provided by the claimant, in regards to his condition is accurate, it appears that he may have become sensitized to a particular substance and is suffering an allergic response rather than suffering the irritant effects of a substance. Certain chemicals are recognized as sensitizing agents, materials which, following an initial exposure to an allergic individual, will result in an immune response or allergic reaction with any subsequent contact, no matter how small.

An Index of Signs and Symptoms of Industrial Diseases, prepared for NIOSH in 1980, lists nearly 100 chemicals which are considered general eye irritants. Many of these materials are also considered sensitizers and may be experienced in rubber and plastic extruding or molding operations. Because of the vast size of this plant and numerous materials being used, there is the possibility of the production of minute concentrations of a substance which may be of sufficient strength to set off an allergic reaction in a sensitized individual, although not of sufficient strength to be a general irritant to all the workers.

From an industrial hygiene standpoint, because of such a wide range of materials being used, it would be extremely difficult to identify the causative material or materials. If medical tests could provide probable cuases, industrial hygiene monitoring could possibly be used to determine the presence or absence of these materials in the plant atmosphere.

In summary, although local exhaust ventilation is provided and eye irritants do not seem to be a common problem, there is the possibility that this claimant has developed an allergic sensitivity to some substance present at low concentrations in the plant atmosphere. The Encyclopedia of Occupational Health and Safety, published by the International Labor Office, states that when persons are found to have allergic responses to substances used in their work, it may often be necessary to advise a change of occupation, if exposure cannot be avoided.

Sincerely yours,

Donald B. Meeker

Donald B. Meeker
Industrial Hygienist

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