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I. GULF OIL SPILL HEALTH HAZARDS (One Page Directory to data from Sciencecorps)

A. http://www.sciencecorps.org/gulf_oil_spill_health_hazards.html

1. Although the Macondo well was capped, crude oil and dispersants persist in parts of Gulf region, so the health information in the reports below remains relevant.
2. Technical information for medical care providers and researchers
 - a. Report on Gulf Oil Spill Health Hazards summarizing the toxicological and epidemiological information on crude oil and dispersants.
 - (1) View online at:
 - (a) <http://www.sciencecorps.org/crudeoilhazards.htm>
 - (2) pdf format at:
 - (a) http://www.sciencecorps.org/Gulf_Spill_Chemical_Hazards_Report.pdf
3. Clinical Health Evaluation Summary (1 page) of the approach used at an occupational health clinic, by Dr. Michael Harbut, Professor of Medicine, Wayne State University:
 - a. <http://www.sciencecorps.org/crudeoilhazards/ClinicalHealthEvaluation.pdf>
4. "Curbside Consult" explaining some clinical issues in more detail:
 - a. Audio (mp3) (22 minutes, 10 MB)
 - (1) http://www.sciencecorps.org/Harbut_consult/DrHarbut.mp3
 - b. Video (wmv) (22 minutes, 170 MB, no visual training aids)
 - (1) http://www.sciencecorps.org/Harbut_consult/DrHarbut.wmv

II. FACT SHEET- Karmano's environmental cancer expert outlines health dangers of crude oil exposure

A. <http://lists.unc.edu/read/archive?id=5567302>

B. The following was prepared in response to physician and community inquiries of our colleague Dr. Kathy Burns and me. It is essentially a precis of what many of us have been doing for years, but apparently neither BP or the appropriate fed agencies have broadly distributed any uniform evidence-based guidelines to an occ/env clinical approach to dx/tx.

1. **Fact sheet: A clinical approach to initial evaluation for disease processes caused by exposure to crude oil, organic solvents, petroleum distillate, dispersants & related agents.**

2. Target audience: Medical care providers presented with patients exhibiting symptoms and/or signs consistent with processes caused by exposure to Gulf oil spill chemicals in crude oil and dispersants.

Background: Many medical care providers have seen only a limited number of persons with disease processes attributable to exposure to chemicals generated by the current Gulf of Mexico oil spill. The following does not constitute comprehensive medical advice and should not be construed to be patient care in any individual presentation. It does offer an approach to evaluation of this patient population and does constitute the initial steps which clinicians may wish to adopt in their care of patients in the non-emergency room setting.

- An exposure history directed toward times and places of exposure and a characterization of exposures should be obtained. The guide to Taking an Exposure History by ATSDR/CDC can be very helpful: http://www.atsdr.cdc.gov/csem/exp/history/ehexposure_form.html.

- A complete history and physical should be performed.

- Testing should, of course, depend on the individual clinical presentation, but often includes special attention to the respiratory apparatus, the skin, the central nervous system, neuropsychological changes and establishing a baseline to which future hematologic and other possibly mutagenic and/or carcinogenic indicators may be compared.

In the Environmental Cancer Program at the Karmanos Cancer Institute in Detroit*, persons presenting with applicable signs or symptoms of exposures would, at a minimum, receive the following:

complete pulmonary function testing, including diffusion capacity

gamma-glutamyltransferase

beta-2 microglobulin

a complete blood count

serum protein electrophoresis with immunofixation

urinalysis

antihistamine antibody

a mental status examination

a minimum of a chest x-ray and if pertinent abnormalities are found on the radiographs

or other applicable studies, a high-resolution CT on the 64 slice unit

Pregnancy presents additional concerns not only to the mother; the fetus may be at even greater risk of birth abnormality or for the development of the consequences of mutagenic and carcinogenic exposures.

Treatment decisions should be based on clinical presentation and objective evidence and usually do not vary from non-toxin induced presentations of the same condition, with the exception of cancer surveillance.

At present there is no readily available clinical blood test proven to be broadly reliable for measurement of organic solvent level. Furthermore, obtaining these levels is of unclear clinical significance. Additionally, air sample or water levels should generally not be used to make individual patient treatment decisions.

Questions regarding diagnosis and treatment may be directed to Dr. Harbut at noraianc@karmanos.org

Report on health hazards of crude oil & dispersants: <http://www.sciencecorps.org/crudeoilhazards.htm>

Michael R. Harbut, M.D., M.P.H. is a Clinical Professor of Internal Medicine at Wayne State University, Director of the Karmanos Cancer Institute's Environmental Cancer Program & Past Chair of the Occupational & Environmental Medicine section of the American College of Chest Physicians. He is Chief at the Center for Occupational and Environmental Medicine, P.C. and has treated many patients with solvents and petroleum exposures.

*<http://www.karmanos.org/app.asp?id=1264&ssec=7>
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III. Crude Oil and Your Health

A. <http://www.sciencecorps.org/crudeoilhazards-public.pdf>

B. One Page flyer for public

IV. Crude Oil and Your Health

A. <http://www.sciencecorps.org/crudeoilhazards-workers.pdf>

B. One page flyer for workers

V. Gulf Oil Spill Health Hazards

A. <http://tetradyn.com/bottomseal/chem-bio-med-health-docmts/crudeoilhazards.htm>

B. Four Page Fact Sheet

C. **Dr. Michael Harbut, Karmanos Cancer Institute**

Dr. Kathleen Burns, Sciencecorps

VI. Gulf Oil Spill Health Hazards

A. <http://www.sciencecorps.org/crudeoilhazards.htm>

B. 51 page article

C. Harbut & Burns

VII. Karmano's environmental cancer expert outlines health dangers of crude oil exposure

A. <http://www.karmanos.org/News/crude-oil-exposure-risks>

1. Thursday, May 06, 2010

Michael Harbut, M.D., MPH, FCCP, co-director of the National Center for Vermiculite and Asbestos-Related Cancers at Karmanos Cancer Institute, has collaborated with Waterkeeper Alliance in developing a fact sheet that details the impact to human health from exposure to crude oil, specifically pertaining to the recent BP disaster on the Gulf Coast.

Dr. Harbut developed the fact sheet with Dr. Kathleen Burns of Sciencecorps, which provides evaluation, communication, technology and other types of assistance in environmental and occupational health.

"It is incumbent upon scientists and physicians who know the diseases and suffering that poisons can cause to warn those in danger of exposure, yet political and economic pressures often prevent those in government from providing full and accurate health hazard information, even when lives are at stake," said Dr. Harbut.

Waterkeeper Alliance is a global environment organization based in Irvington, N.Y. The group is composed of almost 200 waterkeepers who patrol rivers, lakes and coastal waterways on six continents. Waterkeepers

strive to maintain a community's right to clean water.

Dr. Harbut, along with alliance groups, warn that the oil and its fumes are highly toxic and will have negative health impacts on those exposed to it – especially people with respiratory ailments, the elderly and children living the Gulf Coast area.

"We cannot sit idly by and let this happen," Dr. Harbut said. "In my work with people exposed to crude oil, I have seen cancers and other serious illnesses. Benzene can cause leukemia and many other chemicals have equally serious consequences."

Drs. Harbut and Burns outlined possible symptoms of crude oil exposure, including skin damage and headaches; cancer, nerve damage and liver and kidney damage; serious risks to pregnant women and their fetuses; extreme risks to children; and complications and worsening of those individuals with pre-existing medical conditions.

Those hazards can be found at the following link: <http://www.sciencecorps.org/crudeoilhazards.htm>.

"I hope that accurate information on the hazards of crude oil will improve protections for workers and the public, and avoid unnecessary suffering and death," Dr. Harbut said.

VIII. CURBSIDE CONSULT

A. In August of 2010, while the oil spill was still occurring, Dr. Michael Harbut prepared a video for physicians inquiring about the diagnosis and treatment of patients affected by the Deepwater Horizon oil spill.

1. http://www.sciencecorps.org/Harbut_consult/DrHarbut.mp3

a. Audio (mp3) (22 minutes, 10 MB)

(1) http://www.sciencecorps.org/Harbut_consult/DrHarbut.mp3

b. Video (wmv) (22 minutes, 170 MB, no visual training aids)

(1) http://www.sciencecorps.org/Harbut_consult/DrHarbut.wmv

B. Transcript of "Curbside Consult" of Dr. Michael Harbut

1. In August of 2010, Dr. Michael Harbut prepared a video for physicians inquiring about the diagnosis and treatment of patients affected by the Deepwater Horizon oil spill. Dr. Mike Robichaux transcribed the dialogue of this 22 minute video.

2. See drmikerobi.com

a. Search under 8-5-10 Dr. Michael Harbut DWH Video Transcript.pdf

IX. CHEMICAL HAZARDS IN FLOODS & DISASTERS - FUELS -

A. <http://www.sciencecorps.org/floods-fuels/>

B. 24 Pages

X. DECLARATION OF DR. MICHAEL HARBUT, M.D., M.P.H., F.C.C.P.

A. 8-13-12

B. SEE DATE OF DECLARATION OF ROBIN GREENWALD

XI. No Safe Harbor on Gulf Coast; Human Blood Tests Show Dangerous Levels of Toxic Exposure

A. <http://jerrycope.com/?tag=dr-riki-ott>

B. Jerry Cope interviews Dr. Michael Harbut

C. Dr. Harbut tells story of Dr. Victor Alexander, a toxicologist, who is fired by Ochsner Clinic for:

1. "all of the work he did for his patients as opposed to the petroleum companies.."
2. ***MH: First you have to remember the setting – this is New Orleans and the Gulf Coast; there is a history and a context in which things need to be placed. In my specialty, which is occupational and environmental medicine, there are not many of us who are board certified who actually take care of patients. The bulk of the physicians in our specialty are medical advisors or medical directors to large corporations, and many have never met a chemical they didn't like. Sort of like Will Rogers. Part of the context is there is a physician whose name is Victor Alexander who was a specialist in my field. He worked in New Orleans at the Oxner clinic and was seeing a lot of patients who worked for the petroleum companies and was reportedly fired for all of the work he did for his patients as opposed to the petroleum companies – what a doctor is supposed to do. So Victor Alexander then goes into private practice and the New Orleans police came and arrested him for robbing a bank.***

JC: Seriously?

MH: Yea, it gets way crazier. This is a guy who was doing very well personally, economically – it came out in trial that he had a half a million dollars in the bank and was making plenty of money. It is unlikely in terms of motive that he would rob a bank for 2,500 dollars. The video from the

*bank was analyzed by the retired chief of criminal identification for the FBI; he said there was no way it could have been Dr. Alexander robbing this bank. He went to trial twice, the judge threw out a lot of evidence that would have exonerated him and he was sent to prison for robbing a bank. **The Louisiana State Medical Society refused to take away his license. Many physicians who do work or potentially could do work or have knowledge of the area in New Orleans know the story about Victor Alexander. The message is quite clear: Don't mess around with the petroleum industry.***

XII. Courageous Stand to Ban Asbestos

- A. http://www.mesothel.com/asbestos-cancer/legislation/ban-asbestos/harbut_michael.htm
- B. **Dr. Michael Harbut work on banning Asbestos**