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Deepwater Horizon Oil Spill

HHS Efforts Fact Sheet

August 12, 2010

The U.S. Department of Health and Human Services is taking actions to prevent injury, illness and exposure to hazardous substances among response personnel and the general public, monitor the short- and long-term potential health impacts of oil and dispersants, and ensure the safety of seafood from areas affected by the oil disaster.

As part of our continuing efforts to address the many health impacts of the oil spill, HHS is addressing the mental health issues that may arise after this type of disaster. On Wednesday, August 4, Surgeon General Regina Benjamin released a television public service announcement (PSA) for distribution in Gulf States to encourage Gulf-state residents to seek help for mental health and behavioral problems stemming from the Deepwater Horizon oil spill. The PSAs are also available online at <http://www.hhs.gov/gulfoilspill/mentalhealth.html>.

SAMHSA is coordinating with disaster relief officials, public health authorities, and behavioral health service providers in each of the impacted states, providing technical assistance and other support to help assess and meet the mental health needs of affected communities. Mental health experts from SAMHSA will continue to support these states and communities as they provide programs, services, and consultation to mitigate the behavioral health impact and restore the Gulf. To assist, SAMHSA developed public education messages to raise awareness about recognizing signs and symptoms of emotional health problems and where to go for help, and developed six "tip sheets" on topics such as grief, managing stress and help for response workers. The sheets include the National Domestic Violence Hotline Toll-Free (1-800-799-SAFE (7233) TTY: 1-800-787-3224) and have been translated into six languages. SAMHSA is distributing these translated documents to state mental health contacts and communities in the Gulf States and has posted the tip sheets online, <http://www.samhsa.gov/Disaster/traumaticevents.aspx>.

The National Institute of Environmental Health Science (NIEHS), part of the National Institutes of Health, will host a webinar on August 17, 2010 to obtain input from the Gulf region community and research stakeholders on the design of the proposed Gulf Worker's Study following the recent Deepwater Horizon Oil Spill. NIEHS will also take the lead in designing a large prospective health study of oil spill clean-up workers and volunteers. The study will focus on exposure to oil and dispersant products and potential health consequences such as respiratory, neurobehavioral, carcinogenic, and immunological conditions. The study will also evaluate mental health concerns and other oil spill-related stressors such as job loss, family disruption, and financial uncertainties. Beginning this October, the NIEHS will invite 70,000 Gulf community members who completed the worker safety training to participate in the study. Additionally, members of the Coast Guard and National Guard who were called to respond will also participate. Others who were involved in clean-up efforts through national or local community response efforts can also volunteer for the study. NIEHS has also been providing safety training for emergency responders for nearly 24 years through its Worker Education and Training Program (WETP). To date, more than 100,000 people throughout the Gulf Coast have completed a NIEHS training program. NIEHS has distributed more than 8,000 "Safety and Health Awareness for Oil Spill Cleanup Workers" guides to front-line responders, instructors and safety officials.

CDC's National Institute of Occupational Safety and Health (NIOSH) is collaborating with BP Safety and U.S. Occupational Safety and Health Administration compliance personnel to coordinate the collection and analysis of injury and illness data BP is reporting to OSHA. NIOSH is also conducting a voluntary survey (roster) of workers participating in the response to create a record and a mechanism to contact these workers about spill-related symptoms of illness or injury, if it becomes necessary. More than 52,000 responders (BP-trained, volunteer, vessel of opportunity operators, and federal workers) have been rostered. Rostering by NIOSH staff at the staging areas has now concluded, and any further rostering will be done by the BP training group at training sites. CDC is also conducting a Health Hazard Evaluation (HHE) Program to investigate the decontamination of boom and other materials used in the cleanup response. Once conducted, the findings from this HHE will be posted to the NIOSH website. Three interim reports have already been posted from earlier phases of the Health Hazard Evaluation, in which other response operations were examined.

As of August 10th, the 5-person medical team from the National Disaster Medical System and U.S. Public Health Service staffing the mobile medical unit in Venice, La., had seen 577 patients, 38% for respiratory conditions (including acute respiratory conditions and exacerbations of chronic conditions), 16% for skin conditions, 12% for routine clinic visits, 8% for gastrointestinal conditions, and 5% for eye related injuries. 94% of the patients were seen for an illness and 6% for an injury. ASPR facilitated an interagency agreement to extend to the mobile medical unit in Louisiana for an additional month.

FDA investigators have inspected more than 300 primary seafood processors along the Gulf Coast to ensure that they are complying with the requirement that they have controls in place to guard against chemical contaminants in the seafood they process. The FDA has a toll-free number (888-INFO-FDA; 888-463-6332) for questions or concerns about seafood or to report any seafood suspected of being contaminated with oil.

On July 22, more than 26,300 square miles of Gulf waters reopened to commercial and recreational fishing using a protocol agreed upon by FDA and the National Oceanic and Atmospheric Administration and authorities in the Gulf States to determine when it is safe for the waters closed in response to the oil spill to be reopened to seafood harvesting. FDA and NOAA are actively monitoring fish caught just outside of closed federal areas and testing the fish for both petroleum compounds and dispersants, to ensure that closed areas are large enough to prevent harvesting of contaminated fish.

On August 7, FDA notified Alabama that the conditions were met to reopen some of their waters to commercial harvesting of finfish, shrimp, and oysters. On August 4 FDA notified Mississippi that the conditions for reopening state waters from the barrier islands south to the state/federal boundary for the commercial harvesting of finfish and shrimp were met. On July 30 FDA notified Florida that conditions for reopening state waters off the Pensacola coast to commercial harvesting of finfish were met. On July 30 FDA notified Mississippi that conditions for reopening state waters, between the mainland and the barrier islands, to commercial shrimping and finfish fishing were met. On July 29 FDA notified Louisiana that the conditions for reopening state harvest areas 1 and 2 to commercial shrimping and finfish fishing were met.

CDC's Environmental Health Team continues to review environmental data packages from the Gulf of Mexico in coordination with the Environmental Protection Agency. CDC is reviewing the sampling of data to determine whether exposure to oil, oil constituents, or dispersants might cause short term or long term health effects. These data include sampling results for air, water, soil/sediment, and waste oil samples (material actually reaching the beach or marsh).

The levels of some of the pollutants that have been reported may cause temporary eye, nose, or throat irritation, nausea, or headaches. At this time, scientists do not believe that the current levels are high enough to cause long-term harm. However, CDC is working closely with the EPA to analyze data and will quickly inform the public if harmful levels are detected. EPA and CDC will continue to monitor the air, water, and soil/sediment. If they begin to find levels that might be of health concern, they will update the public. For up-to-date information on air quality and monitoring data along the Gulf Coast, please see www.epa.gov/bpspill/air.html.

CDC, in coordination with state and local health departments, is conducting surveillance across the five Gulf States for health effects related to the oil spill. CDC is using two established national surveillance systems, the National Poison Data System (NPDS) and BioSense. These surveillance systems are being used to track symptoms related to the eyes, skin, respiratory, cardiovascular, gastrointestinal and neurological systems, including worsening of asthma, cough, chest pain, eye irritation, nausea, and headache. States and CDC are regularly sharing data and summaries with each other. A summary of state findings is posted online.

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Oil-spill related health information for coastal residents, responders, healthcare providers and the general public can be found at <http://www.hhs.gov/gulfoilspill/index.html> and HHS division websites. Information is available in multiple targeted languages to address human health concerns related to the Gulf Coast oil spill. The latest update is Gulf Coast Information for Parents translated into Spanish at: http://emergency.cdc.gov/gulfoilspill2010/espanol/info_for_parents_es.asp

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U.S. Department of Health & Human Services - 200 Independence Avenue, S.W. - Washington, D.C. 20201