

WEST JEFFERSON COUNTY COMMUNITY TASK FORCE
MEETING MINUTES

January 21, 2003

**The NIA Center
Second Floor Conference Room
2900 West Broadway
Louisville, Kentucky**

Arnita Gadson, Presiding

ATTENDEES

Bobby Hickey, Portland/ Bd member
Jonathan Miller, DuPont Dow Elastomers/Bd member
Dennis Minks, Metro Louisville
Suzanne Ildstad, UofL
Linda Thomas, Shively
Patricia Germany, California
Dan Hicks, Rohm and Haas
Tom Herman, Zeon Chemicals
Art Williams, APCD
Stephen W. Franklin , Medical Sickle Cell Project - MSSCP
Tanya K. Franklin, MSSCP
Chrishana L.Ogilvie, MSSCP
Norman Robinson, MSD/Shawnee/ Bd member
Leslie Barras, River Fields/Bd member
Suzy Szasz Palmer, UofL
Larry Palmer, UofL
Russell Barnett, UofL
Peggy J. Bolton, Shawnee/Bd member
LaLetta Jenkins, Shawnee

I. Sickle Cell Presentation – Suzanne Ildstand, MD – Univ of Louisville

Project vision: to apply what was already known to cure the disease. Pairing students with patients and family initiated an expanded mentoring program. A long term goal is to establish a Sickle Cell Center of Excellence, a real need in this community. One in every two hundred African-Americans has Sickle Cell. The patient support group meets monthly and is funded through a NIESH grant.

These meetings are beneficial in discussing nutrition, patients rights, ie, missing school, absenteeism on the job, emergency room visits. They are especially important due to physicians' lack of experience with sickle cell patients, their inability to recognize symptoms, ie., pain, stroke, red blood cell disorder. A standard blood test can be misdiagnosed because doctors cannot recognize the symptoms.

Sickle Cell is caused by two genes that were originally nature's way to protect from malaria. If there is only one of these genes, nothing happens. Two keeps you from dying from Malaria, however if a child gets the one bad gene from both mother and father, it causes Sickle Cell. A genetic trait does not mean it will be passed down if only one parent has it. There is no upper limit on age. The type of bone-marrow transplant currently being done is done on an out-patient basis. Research data findings states there is a 90% chance of cure. Once cured it doesn't return. From donor red cells, it shuts down the bad production of red cells. Universal donors for bone marrow are not available. Family members are still the best donors. 17% of people have a perfectly matched sibling. Donors match at 50%

It is important that parents always inform new doctors of the presence of Sickle Cell. Medical records get lost or misplaced. Newborn screening started in 1995.

Medical Students under the direction of Dr. Ildstand have formed The Medical Student Sickle Cell Project (MSSCP). This project was developed in conjunction with the Student National Medical Association (SNMA) for the purpose of sickle cell disease research and education. This organization was founded to focus on the needs of ethnic medical students with community service being its major thrust.

The Purpose of the sickle cell disease project is to broaden community awareness and education concerning sickle cell disease, to educate medical students in a specific area of research concerning the African-American community and to establish an atmosphere in which the continuum of research can lead to a potential cure.

Concerns:

How does pollution affect people who have MS, SC, Lupus, Diabetes, etc., ailments that heavily affect the black community, because of the compromised immune system? Something to be researched.

What is being done to educate Doctors? One of the goals of the organization is to educate physicians. Sickle Cell or other diseases is never mentioned in industry meetings.

There is a real need to educate the HR (Human Resources) professionals to understand patients' rights.

HOTLINE NUMBER for questions or concerns regarding Sickle Cell is: **(502) 852-2071**

II. NEJAC Conference Report – N. Robinson, P. Bolton, A. Gadson

Moved to the February meeting.

III. Risk Assessment/ Risk Management Update – A. Gadson

We are on the fourth revision of the Risk Management report. We have received the first draft for approval of the risk assessment report from Sciences, Int'l. The date for the meeting of both committees is January 30, 2003 at APCD, 2:00 p.m. for the Risk Assessment sub-committee and 3:30 for the Risk Mgt. Sub-committee.

IV. Comments from the Community

Tom Herman reported there is an airport web page that shows runway traffic. Planes are going north and swinging southwest coming down over Cane Run and all over W. Louisville. The flights were all UPS. Flights were going out every couple minutes, most of them from the west runway fanning out across west Louisville. The tightest turn went no further north than Algonquin Pkwy and was heading south by the time it crossed Cane Run at the Shawnee Expressway. Others crossed over Park DuValle, west Broadway, and Portland, one even turned east. Elevations were around 3,000 ft. as they entered W. Louisville, reaching 5,000 ft as they left the city. This has been a concern of the Task Force since the presentation was given by representatives from the Airport Authority who stated differently.

Pat told of black smoke being seen at around 6:00 p.m. at 33rd and Dumesnil. A probable source is Anderson Wood. Members of the task force will visit at this hour as a follow-up.

V. Comments from the Board

The following news articles were brought by Bobby:

- “Jefferson pays for changes in VET law”
- “Proposed brownfield rules dropped”
- “EPA will allow states water-pollution credits”
- “Financing change delays Riverport steel mill”
- “Shareholder group targets power companies' emissions”

These articles are located in the information center for your review.