

## **Welcome to the meeting!**

August 8, 2007

Iron Range Resources

Eveleth, MN



## Agenda

1. Welcome and Introductions (All)
2. Project Overview (J. Finnegan)
3. Public Health Research Overview (J. Mandel)
4. Natural Resources Research Overview (Zanko)
5. Partnership Expectations, Assets (All)
6. Discussion, Next Steps (All)

## Overview

- I *Partnership purpose:* To lead, coordinate and communicate scientifically sound research about the causes and prevention of lung disease among Minnesota taconite industry workers and contractors; and to promote lung health among workers, families and citizens of the Iron Range.

## In short...

- I We are here to promote the best science and the best evidence-based prevention...

## Overview

### I Organization

- Partnership Board - stakeholders working group
- Investigative Team - the researchers
- Scientific Advisory Board - independent expert peer review panel
- Communication Team - information, resources, contacts
  - I WEB: <http://www.sph.umn.edu/lunghealth/home.html>

## Overview

- I The Five “Cs” - how we achieve our goals...
  - Coordination
  - Communication
  - Candor
  - Contacts
  - Community participation

# Public Health Research Overview

- I Jeff Mandel, Investigative Team

# NRRI Research Overview

- I Larry Zanko, Investigative Team



# Expectations, Assets, Challenges

- I Partnership members

## Next Steps, Discussion

- I All

### **Division of Environmental Health Sciences University of Minnesota School of Public Health**

Includes scientists with expertise in toxicology, epidemiology, biostatistics, medicine, nursing, industrial hygiene, nutrition

Involved in the investigation of health effects of exposures to various materials (man-made and naturally occurring) in the environment

Have conducted research programs in wide variety of topics including exposure assessment, injuries, cause of death investigations, cancer assessment, disease prevention and control

## Taconite Worker Health Evaluation

### Research Team Experience:

Worker studies (mortality, morbidity)

Clinical occupational lung disease

Exposure assessment

Medical screening

## Taconite Worker Health Evaluation

### Communication:

1. Working group (day to day work; led by U of MN SPH with MDH scientists and invited guests)
2. Stakeholder group (provide essential information for evaluations)

## Taconite Worker Health Evaluation

### Science Advisory Committee:

Three or four prominent scientists from around the country, in the various public health fields, who will provide independent advice on technical matters to assure quality and timeliness

## Taconite Worker Health Evaluation

Components of Comprehensive Health Evaluation:

1. Cohort mortality
2. Case-control approach for mesothelioma
3. Screening of current and former workers

## Taconite Worker Health Evaluation

### Cohort mortality:

- All causes of death determined for anyone working in the industry for one year or more
- Compared to rates of death for counties, state and U.S.
- Good measure for diseases that commonly result in death
- Tells us what diseases occur more or less commonly than expected



## Taconite Worker Health Evaluation

### Case-control:

- I Mesothelioma case group compared to control group (of same age and gender) in terms of factors of interest (eg. dust exposure, work history information)
- I Tells us which factors are associated with being a case

## Taconite Worker Health Evaluation

Cross-sectional:

- I Current and former workers screened with history, physical, breathing tests, chest x-ray
- I Tells us status of other health conditions in workers or families
- I Focus is respiratory disease

## Taconite Worker Health Evaluation

### Exposure assessment:

- I Detailed review of past and present exposures, including dust analysis, geography of minerals, concentrations
- I Done during next several months
- I Incorporated into other evaluations

## Taconite Worker Health Evaluation

### Safety steps:

- | Minimize dust exposure
- | Respirator use
- | Clothing
- | Smoking