

Testimonials
Flight Attendants
Cases: 5 weeks both sides of 1/1/2018

Flight Attendant #1

I felt "great" going to work that morning. I was working C flight attendant at door, right side of A321 when a very strong odor entered the forward area of the cabin. Passengers also noticed the fumes. Lead flight attendant was aware; attendant in rear was not.

I did not feel too bad immediately after the fume event and did not go to the emergency room. Later I developed symptoms of fume related illness. I filed IOD and sought medical help after returning home. _____ denied my claim after the initial doctor visit leaving me and my husband to pay medical costs of about \$20,000.

A portion of the aircraft maintenance record states: *The investigation determined that the odor in question was from a spillage of oil in the APU from over servicing, and was not toxic. The aircraft was taken out of service and the matter corrected.*

Flight Attendant #2

I was lead flight attendant for the day, felt very well and excited to get to work on this January morning. Nothing of concern arose during preflight or cabin prep prior to enplaning passengers. The captain notes a logbook entry of fumes on the previous day's flights.

Climb and enroute was normal. On descent, odors of various descriptions from various cabin crew were noticed, anything from electric to acrid to dirty socks depending upon the various interpretations. Symptoms rapidly appeared among crew: burning eyes, nose, chest tightness, and disorientation nearly to the point of lost equilibrium. Fumes were worse in cockpit. The captain seemed to be impaired. He asked the same question of FA #2 six different times. I had to tell him his memory was not functioning and to "snap out of it".

The whole crew arrived in _____ very ill from cabin fumes. Flight attendants apparently were more affected than pilots. _____ authorities grounded the airplane pending maintenance clearance. A second aircraft was dispatched to carry on the trip's return schedule. That aircraft also arrived with cabin fumes. It, too, was grounded by local authorities. Crewmembers remained there for 3 days before adequate transportation was available.

I did not go to the hospital in _____ but other crew did go.

Back home, the company doctor diagnosed severe allergic reaction to toxic fumes. My blood pressure, which is usually very low was now very high after the fume

event. I was told to remain off duty until the he can make a complete diagnosis and treatment. Four days after fume event, a blood test for Carboxyhemoglobin (COHb) showed positive.

I still had vertigo and my lungs hurt many days after returning home. Since returning to work, my sinuses and nasal passages feel inflamed.

Sedgwick denied my claim because they candidly said that *management does not accept any fume event claims*. Therefore payments for medical services after the initial diagnosis would have to be paid by the claimant. I have no available sick leave.

Symptoms I have experienced from this and previous fume events – unable to form words, felt like a stroke. Trouble stringing proper words together in a sentence. My mind could see clearly the proper words and sequences but I was unable to express them.

Flight Attendant #3

I was delighted to come to work that beautiful day. Preparing for the ___ to ___ flight was “ops normal”. During climb it began when the crew tried to identify the strange odors starting to permeate the cabin. The odors remained while the cabin crew made plans to assess again at level-off. At level, the odor reduced so cabin services were initiated. Soon, a painful headache developed accompanied by aggressive nasal drip that required constant attention. I noticed many passengers sneezing and blowing noses. Lead also had a headache. We all pushed through the event to destination.

After landing and passengers departed, the captain told cabin crew that they had just suffered a fume event and that they should contact their union. He requested maintenance to check the aircraft during layover and if they could not fix the situation he would not fly it back next day.

Next morning I had not slept well, still felt unwell, and was exhausted. Maintenance changed the HEPA filter overnight so the crew accepted the aircraft. On climb the fumes came again, this time with a vengeance. Bad headache, sinus drain, weak, dizzy. I took a seat in first class. Lead felt very bad with similar symptoms.

Passengers in 1st class were suffering also.

After landing at ____, lead and I left the aircraft stating we could not work the next flight to _____. The supervisor tried to get us to continue saying the event was not serious or harmful. The captain supported us by intervening. Scheduling called out reserves to replace us.

The company doctor diagnosed Skydrol (hydraulic fluid)* in lead and my systems. By now I had tingling in my lips, swollen lymph nodes, drainage soaked my pillow at night; the sinus drainage had become bloody. (This had happened once before after washing glassware with nitric acid in a toxicology lab at the state agriculture lab.) I filmed the bloody nose drip this time.

I continued to work, dragging myself through each day to get my job done in the cabin. Although I've endured several more fume events, each one exacerbating my condition, I have never recovered from that first event. Workers compensation should have helped me with health services and lost time indemnity. They denied at every turn leaving me to recover at my own expense. I have had to forego necessary health services due to the cost and am now very close to insolvency

* Probably misdiagnosed as to the exact source of the fumes. Doctors probably cannot distinguish between hydraulic fluid and engine oil fumes. Engine oil fumes decidedly most likely.

Flight attendant #4

I've had three fume events in 8 years. I feel I've become more and more sensitized. More time now is needed to recover. During my first event in 2011, the whole crew spent 3 days in hospital. The attending doctor at the time had studied the airline problem and fume event medical conditions. He told the crew that once it is in the system it never leaves. The toxins are stored within the tissues.

My last event was in February and it was a bad one with strong acrid smell. All cabin crew became ill.

Company doctor visit records high blood pressure (104), which is too high. Problem with ears. Symptoms among crew – Red eyes which is a symptom of carbon monoxide, light headed, sore throat, dizzy plus more.

The captain disregarded everything. He would not listen to cabin crew. When told we were going to file fume event report, he said "go ahead" and left.

I was very ill next day and went to "fast med". I Have no sick leave, little savings. Verbal denial was issued by _____ 19 days after the fume event.

Flight Attendant #5

Fume event - 2017.

Chest pains; troponin levels . Admitted to hospital.

Echocardiogram; heart catheter; tremors November 26.

Dr. diagnosed Angina caused by toxic fumes. CO not found; suspect TCP. #5 has this diagnosis in writing.

Had to take a taxi to the emergency room. Some passengers thought to have sought emergency assistance. Other flight attendants ill but did not immediately seek medical help.

Filed injured on duty report (I.O.D.) to local flight services manager at ____ after being up and awake for 36 hours. Stated tremors, heart palpitations, angina, chest pains, confusion, sense of smell off. (Also another source near this case told me she was unable to form words or word sentences as long as two weeks after exposure.) Employer representative at _____ changed my report to - headache, dizziness, and

nausea. (If true, this appears to me to be a falsification of the record. Several such cases at other airlines are on file.)

More tremors at home in December. Speech impaired; unable form and string words and sentences together. Memory bad; couldn't remember previous doctor visit. Months later in 2018, could not recall the attorney she had retained. Had to be reminded.

_____ workers comp claims adjuster not helpful.

Saw company doctor one time. Needed neurologist. Sedgwick required a second visit to doctor for neurologist approval. Was told that rules in _____ comp law say if second visit completed, that doctor becomes case manager. Did not agree to see company doctor a second time.

#5 called the industrial commission and learned that only one doctor visit should be required. She has not yet seen a neurologist. (Neurologist is familiar with TCP.)

Still very ill. Doctor prohibited flying and driving so she cannot work. Needs transportation assistance. Workers comp permanently denied. Bankruptcy filed based upon medical bills, loss of income due to uncompensated, work related injury/illness. One dependent at home.

From An Aerotoxic Syndrome Casualty.

This flight attendant became very ill after her first fume event in 2010 (not on 251). She has continued to work while ill for seven more years suffering more events. The most recent was early 2018 and it has about finished her off. I suspect there are quite a few like her, silently working along out of dedication, love for the job, comradery, and striving for support in retirement. She probably won't make it.

Hi All,

I just wanted to say "THANK YOU" to all of you who have been so supportive to me. I have truly appreciated all you have done and continue to do. This is a very lonely battle even when you have people like you all who know the struggle. It's daunting that Dr.s can't help and eventually they seem to feel as though your just a annoyance. The people you are close to feel helpless and get frustrated with you. I admit I'm more reclusive and hard to reach..... hence why I am alone. So many times I don't know what I would have done with out the support you all have given. You all have been my life savers. I have been so alone and you all and my dearly departed Gizmo are all I have had to lend support..... some times you just need some one there not to really say anything but just be. Again for that I Thank You All. For so many years since my 2010 exposure I have just survived in solitude. I have been loosing parts of myself and dying a slow agonizing death or so it feels. Now I'm put in the positions to have to bow out of my job with nothing. I knew this was coming but I wanted so desperately to at least get my full retirement. My attorney never talks to me. I don't know what they would advise because they hardly seem to care. I'm tired of this battle and I just want to leave and start my life

over. One thing I know is this fight takes money and it's something I don't have and I refuse to allow it to dip into my families pockets when they have their own struggles. I'm walking away. If anyone wants any of the data I have I will be happy to give it to you. Most of it is stuff you all have with exception of union business. I may opt to talk with a reporter and let them have all my info before I throw out and pack up stuff. I'm going to spend the next month clearing out my stuff and will destroy any emails, files, and pictures late June. I love you all and you will always be in debt to you. You will ALL be in my thoughts and prayers.

Sincerely,

██████████

From ██████████ answering my email:

I know I will always love flying and I will miss it. There is a huge whole in my heart.... but I have learned if you love something too much it can and often is used by the devil to destroy you. Once upon a time I was a great flight attendant and if no one ever knows it I do! I have the above and beyond to prove it. I have decided I will never throw those away as they remind me I once did something so well, loved it so much and derived such joy from it. It's a feeling I never want to forget just as one holds their family dear I too hold those memories dear.

Two of the above employees mentioned independently that since being employed for the airline (both over 20 years) their personalities have changed. Both were friendly, outgoing, confident, energetic, and happy to have such an exciting job. Now they cite lack of confidence, tendency to withdraw, not as friendly or energetic as before. They still love their job, however, and do not wish to leave.

My files have testimonials from other airline crewmembers that mirror the experiences at _____. Recently a captain called. He had a serious event at the gate that has permanently changed his life. He too was denied comp. The cause was engine oil from the APU in a section of ducting that was picked up and carried into the flight deck and cabin during an engine test run. (APU was MELed.) This captain was unable to communicate verbally for more than a month.

Another such case involved a flight attendant on crew rest alone in a hotel room after a flight. Quite suddenly she became disoriented and unstable. Collapsed onto the floor and unable to mentally process what was happening or what to do, she lay there until her cell phone rang. The call was from a cousin who was able to give her directions to help herself. She then called the hotel desk for emergency medical help.

Still another was a flight attendant deadheading to work from _____ to _____ in uniform. The aircraft had a serious event. All five assigned flight attendants either

collapsed or became otherwise unable to work so she rose to the occasion to finish the flight for them. The result was permanent disability. She tried to continue to work other flights but found she could not. The contract claim service representative denied her claim because she was not technically on duty, therefore the injury was not incurred on-the-job. Also, the claim manager said that her employer would not accept any fume event claims.