

INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS



STATEMENT OF

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BEFORE THE COMMITTEE ON ENERGY AND COMMERCE

OF THE

UNITED STATES HOUSE OF REPRESENTATIVES

ON

**FIREFIGHTER CANCER REGISTRY REAUTHORIZATION
ACT OF 2023 (H.R. 3821)**

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WASHINGTON, DC**

Chairman Guthrie, Ranking Member Eshoo, and members of the Health Subcommittee, thank you for the opportunity to testify today about the dangers that fire fighters face from occupational cancer exposures and the importance of maintaining the National Firefighter Cancer Registry as a means of bolstering our cancer prevention, detection, and treatment methods. My name is Kevin O'Connor, and I am honored to serve at the International Association of Fire Fighters as the Assistant to General President Edward A. Kelly for Government Affairs, Political Action, and Strategic Campaigns. I started my fire service career as a fire fighter in Baltimore County, MD, and am proud to have served as President of the Baltimore County Professional Fire Fighters Association and the Maryland Professional Fire Fighters Association before joining the IAFF staff. I am also honored to serve as a Commissioner on the Baltimore City Board of Fire Commissioners. As a retired fire fighter and cancer survivor, I look forward to talking with you about how Congress can help protect our fire fighters from the scourge of cancer.

The IAFF represents more than 336,000 fire fighters, emergency medical, and rescue workers in local, state, and federal fire departments. Our members serve communities in all 50 states and protect 70% of the United States population.¹ Professional fire departments protect nearly all communities with populations of more than 50,000.²

Without question, firefighting is a dangerous occupation, and our members face life-threatening hazards every day. That said, the greatest threat facing fire fighters is cancer. Sadly, most fire fighters confront the reality of not if, but when, they will develop some form of cancer. To improve our cancer prevention, detection, and treatment methods, we must develop a robust data source to help identify key trends, risk factors, and other details about cancer occurrences among fire fighters. In 2018, the IAFF was proud to endorse the Firefighter Cancer Registry Act (P.L. 115-194), which was passed on suspension of the rules in the House and by unanimous consent in the Senate. This strong, bipartisan support from Congress clearly speaks to the commonsense nature of our need to protect fire fighters from cancer. Five years ago, Congress put fire fighters above politics and established the National Firefighter Cancer Registry (Registry). The IAFF calls on Congress again to set us aside politics and focus on the need to protect our protectors. You cannot allow this vital program to expire.

Overview of the American Fire Service

Today's fire service provides an all-hazards response role and serves communities of all sizes throughout the nation. The IAFF's 336,000 members represent 34% of the nearly 1.1 million fire fighters in the United States.³ These men and women stand ready to protect their communities from various emergencies, including structure fires, wildfires, medical emergencies, motor vehicle accidents, hazardous materials incidents, technical rescue situations, natural disasters, terrorism, and more. In 2020, American fire departments responded to more than 36.4 million

¹ National Fire Protection Association. *US Fire Department Profile 2020 - Table 12*. <https://www.nfpa.org/-/media/Files/News-and-Research/Fire-statistics-and-reports/Emergency-responders/osFDProfileTables.pdf>

² Ibid. Table 14.

³ U.S. Fire Administration. *National Fire Department Registry Overview*. <https://apps.usfa.fema.gov/registry/summary>

calls for service.⁴ Of these calls, more than 23.8 million (roughly 65%) were for medical emergencies, 1.4 million were for fires, and 422,000 were for hazardous materials releases.⁵ Fire fighters cross-trained as EMS personnel continue to serve as the backbone of America's prehospital EMS system. Fire departments are the largest providers of EMS care and are the providers of EMS care in more than 90% of communities with populations over 50,000. On a national level, 65% of communities receive EMS services from their fire department.⁶

Fire fighters not only provide these services in their home communities, but also frequently assist neighboring jurisdictions through the use of mutual aid agreements. These pre-existing agreements play a critical role in the continuation of emergency services when one community is overwhelmed by demand or is otherwise unable to respond to calls for service. These agreements may be invoked during "routine" emergencies in which multiple calls for service are received and when major natural disasters or acts of terrorism exceed response capabilities.

Cancer Rates in the Fire Service

When looking at our tens of millions of calls for service, it is important to note that each response exposes fire fighters to hazardous carcinogens. Repeated studies have shown that diesel exhaust and smoke contain many common chemical compounds, such as benzene and cadmium, which are proven to cause multiple forms of cancer. Even our own PPE, also called turnout gear or bunker gear, is intentionally made with PFAS – a class of chemicals proven to cause cancer and other illnesses. Under the leadership of General President Kelly, the IAFF works every day to reduce exposure to carcinogens, but at this point, the fact is that we are surrounded by poisons every day we go to work. Our membership dons cancer-causing PPE every time they respond to a call.

Many carcinogens also follow fire fighters back from the emergency scene to their fire stations. Asbestos is one of these pervasive carcinogens which fire fighters often encounter while responding to fires, building collapses, and other structural emergencies. Despite efforts to decontaminate fire fighters' turnout gear following emergencies, fire fighters can easily and unintentionally bring asbestos fibers back into their apparatus cabs and fire stations. PFAS chemicals also pose a similar secondary exposure threat as these chemicals can flake off turnout gear or track back from emergency scenes where legacy fluorinated firefighting foams were used. The ability of these carcinogens to harm fire fighters long after an emergency is further evidence for Congress' need to pass legislation that bans asbestos and forces jurisdictions to transition to fluorine-free firefighting foams.

Last year, the World Health Organization, through its International Agency for Research on Cancer (IARC), classified firefighting as a Group 1 carcinogen⁷, its most dangerous classification. This places our occupational exposures in the same category as smoking tobacco or

⁴ National Fire Protection Association. *US Fire Department Profile 2020*. P. 5. <https://www.nfpa.org/-/media/Files/News-and-Research/Fire-statistics-and-reports/Emergency-responders/osfdprofile.pdf>

⁵ National Fire Protection Association. *US Fire Department Profile 2020 -Table 12*.

⁶ Ibid. Table 21.

⁷ World Health Organization. IARC Monographs Evaluate the Carcinogenicity of Occupational Exposure as a Firefighter. https://www.iarc.who.int/wp-content/uploads/2022/07/pr317_E.pdf. July 1, 2022.

unprotected exposure to radiation. The IARC’s decision to classify firefighting as a Group 1 risk makes sense when considering that fire fighters have a nearly 10% higher chance of developing cancer when compared to the general public and almost a 15% greater risk of dying from cancer. In fact, fire fighters are up to 100% more likely to develop some forms of cancer, including testicular cancer⁸, mesothelioma⁹, and prostate cancer¹⁰.

One of the greatest challenges to protecting fire fighters from carcinogenic exposures is that our bunker gear is intentionally manufactured with PFAS chemicals. A recent National Institute for Standards and Technology (NIST) study shows that our gear is teeming with these toxins – even before additional PFAS applications are applied.¹¹ The application of PFAS to our turnout gear was initially an attempt to improve our protection from liquids. However, we now know that any benefit from these chemicals is far outweighed by the cancers and other medical conditions they cause.¹² Congress must continue its support for research to assess the dangers that PFAS pose to fire fighters and how we can protect fire fighters from exposure to these known toxins.

Need to Reauthorize the National Firefighter Cancer Registry

As we learn more about the causes and prevalence of cancer in the fire service, we also realize that the collection of more data is critical. Five years ago, the IAFF was proud to work with several members of Congress, including many members of this Committee, to develop the Firefighter Cancer Registry Act of 2018. This bipartisan legislation, P.L. 115-194, was aimed at helping fill in some of the data blind spots and authorized the creation of a registry within the Centers for Disease Control and Prevention (CDC) to improve data collection and coordination efforts targeting occurrences of cancer in the fire service. This legislation was passed on suspension of the rules in the House and via unanimous consent in the Senate. Given the state of politics in our nation, it is always impressive when legislation can advance through Congress without opposition. We were pleased to watch Congress put politics aside and focus exclusively on the needs of those fire fighters who are protecting our communities. Simply put, it was the right thing to do. It remains so today.

When Congress passed P.L. 115-194, it authorized the Registry through the end of FY 2022 and at a funding level of \$2.5 million. America’s fire service was deeply grateful for Congress’ work to immediately fund the Registry at its full authorization level. In later years, Congress provided additional funds to the CDC as it became clear that cybersecurity upgrades were needed before

⁸ LeMasters GK, Genaidy AM, Succop P, Deddens J, Sobeih T, Barriera-Viruet H, et al. Cancer risk among firefighters: a review and meta-analysis of 32 studies. *J Occup Environ Med.* 2006 Nov;48(11):1189–202.

⁹ Daniels RD, Kubale TL, Yiin JH, et al. Mortality and cancer incidence in a pool cohort of US firefighters from San Francisco, Chicago, and Philadelphia (1950-2009). *Occup Environ Med.* Published Online First: [14 Oct 2013] doi:10.1136/oemed-2013-101662

¹⁰ Pukkala, E, et al. (2014). “Cancer Incidence among firefighters: 45 years of follow-up in five Nordic countries *J Pccup Environ Med* 71:398-404.

¹¹ NIST. *Per- and Polyfluoroalkyl Substances in New Firefighter Turnout Gear Textiles.*

<https://www.nist.gov/publications/and-polyfluoroalkyl-substances-new-firefighter-turnout-gear-textiles> . May 1, 2023.

¹² National Cancer Institute. *PFAS Exposure and Risk of Cancer.* <https://dceg.cancer.gov/research/what-we-study/pfas>

the Registry could launch. The IAFF thanks Congress for funding the Registry at the CDC's recommended level of \$5.5 million in FY 2023.

As you know, the Registry formally launched in April, and the CDC is now accepting new enrollments from fire fighters. The IAFF has been working closely with the CDC to inform the fire service about the opportunity to enroll in the Registry and the importance of every fire fighter's assistance in developing a comprehensive data set. Together, we have been rapidly increasing the number of registrants – including those without cancer, those currently battling cancer, and those who have recovered. The Registry currently has nearly 3,400 enrollees after just two months of operations. The CDC hopes to eventually grow this number to include 200,000 fire fighters. We anticipate that the data gathered by the Registry will help us identify important trends that will improve our efforts to prevent, detect, and treat cancer occurrences among fire fighters. The current data on cancer among fire fighters is troubling, and thus we must continue all efforts to fully understand the risks that our fire fighters undertake daily.

As the CDC continues to launch the Registry, we do urge the CDC to restore the Registry's name to the one intended by Congress: the National Firefighter *Cancer* Registry. The IAFF is concerned that removing the word "cancer" from the Registry's official name could cause confusion and impede efforts to increase enrollment.

Congress' continued support for the Registry is even more important now that the Registry is live and accepting new enrollments. Assuming Congress maintains at least the FY 2023 funding level into FY 2024, the Registry anticipates several exciting advancements in the coming year, including the development of public-facing dashboards to summarize statistics, implementation of a comprehensive industry education program, engagement in targeted enrollment outreach, linking the Registry with state cancer registries, and the development of voluntary follow-up questionnaires for current enrollees. The IAFF also supports expanding the funding level for the Registry to \$7.125 million in FY 2024. This increase of \$1.6 million would enable even greater progress, such as real-time trend analysis of protective equipment, development of external cooperative research agreements, and expanded data interfacing with the U.S. Fire Administration and other federal stakeholders.

None of these needed and potentially life-saving advancements will be possible if Congress allows the Registry's authorization to expire. When Congress passed P.L. 115-194 in 2018, it only authorized the Registry through FY 2022. The IAFF is pleased to endorse the Firefighter Cancer Registry Reauthorization Act of 2023 (H.R. 3821), extending the Registry's authorization through FY 2028, and increasing the authorization level to \$5.5 million. These changes to the underlying statute are critically important to ensure that the Registry will continue to function and be poised to grow and evolve to meet the needs of America's fire and emergency service personnel. The IAFF strongly urges the House to swiftly pass H.R. 3821, just as it did in 2018 when it first established the Registry.

Expansion of the PSOB Program to Assist Survivors of Fallen Fire Fighters

In addition to reauthorizing the Registry, Congress can assist fire fighters in the battle to extinguish cancer in several other important ways. The Public Safety Officers Benefits (PSOB)

program provides much-needed federal death benefits for public safety officers who are killed or permanently disabled in the line of duty. The PSOB program currently recognizes several medical deaths as eligible line-of-duty deaths, including 9/11-connected cancer, heart attacks, and COVID. “Routine” occupational cancer is currently not eligible for PSOB awards. This denial of benefits forces fire fighters’ survivors into an impossible position of trying to make ends meet without their partners’ income or other assistance. These financial challenges for survivors are especially daunting when considering that many fire fighters who die early from cancer may not have accrued sufficient time in service for their survivors to receive sufficient benefits from their pension or other retirement accounts.

This denial of benefits is rooted in the fact that fire fighters cannot conclusively identify the one fire out of their entire career which caused their cancer. This impossibly difficult standard was mirrored in federal workers’ compensation policies. Congress corrected this last year by including presumptive workers’ compensation benefits for federal fire fighters battling cancer as part of the FY 2023 National Defense Authorization Act (P.L. 117-263). In taking this action, Congress joined forty-nine states to recognize the undeniable link between cancer and firefighting and provide presumptive workers’ compensation benefits for fire fighters. It is a logical extension to include cancer in the PSOB program.

The IAFF is proud to endorse the Honoring Our Fallen Heroes Act (H.R. 1719) which would expand the PSOB program and ensure survivors of fire fighters who have died from occupational cancer are provided their earned benefits. This expansion of the PSOB program is structured almost identically to what was included in the FY 2023 NDAA when Congress established presumptive workers’ compensation benefits for fire fighters battling cancer. If passed, this legislation will properly recognize the sacrifices of scores of fire fighters each year and will ensure their loved ones are not left to struggle after their death. H.R. 1719 has also been endorsed by nearly all national fire service and law enforcement organizations.

Development of Next-Generation Turnout Gear

As mentioned earlier, the IAFF firmly believes that the intentional addition of PFAS to fire fighters’ gear is a leading contributor to the alarming cancer rates among fire fighters. Today’s protective gear has failed to evolve over the past few decades, and sadly, due to existing regulatory standards, no PFAS-free gear is available for fire fighters. If we are to tackle the issue of cancer in the fire service, we must develop next-generation gear that is PFAS-free and better protects fire fighters from all the dangers they face.

The IAFF is working with Rep. Debbie Dingell, Rep. Sam Graves, and others to develop legislation to create a competitive grant program to support the research and development of next-generation turnout gear. In addition to being free from PFAS toxins, we hope that this gear will be made from materials that are more resistant to absorbing toxins and carcinogens and utilize lighter-weight materials that allow fire fighters to have more dexterity and freedom of movement without sacrificing their protection. Additionally, this gear should be developed to better account for the body composition differences between male and female fire fighters.

In awarding grants to develop next-generation turnout gear, the IAFF believes Congress must ensure fire fighters lead this research. Fire fighters have suffered needless exposure to known carcinogens and toxins due to misleading and false claims from chemical manufacturers. This legislation will ensure that all research is conducted with the direct participation of fire fighters. This will ensure research transparency, conducted without any real or perceived bias, and allow a direct voice for the end-users of next-generation turnout gear. Only direct input from fire fighters will ensure that the product of this research will meet the real-world needs of fire fighters. Please support this legislation as soon as it is introduced and help us take critical steps in developing turnout gear that protects fire fighters rather than makes them sick.

Multi-Cancer Early Detection Tests

As with most diseases, early detection of cancer is critical to improving the patient's chances of a favorable outcome. Early detection of a cancer case can lead a patient to have an exponentially better chance of recovery and minimize the negative health impacts of the illness. The IAFF urges all fire fighters to strictly follow the recommended scheduling of procedures such as colonoscopies and mammograms. However, many types of cancer can be missed through these screenings. As a result, the IAFF strongly supports the Nancy Gardner Sewell Medicare Multi-Cancer Early Detection Screening Coverage Act (H.R. 2407), which would require Medicare to pay for the costs of early cancer blood and blood product-based screening tests once these tests have gained full FDA approval. These tests offer an exciting opportunity to diagnose many forms of cancer in their earliest stages, and while a patient may still be asymptomatic, rather than waiting for a patient to develop noticeable symptoms and progress into a more advanced stage of cancer.

Providing full Medicare coverage of these tests also makes good sense from a fiscal perspective. Medicare currently covers a wide range of treatments and therapeutics for Medicare beneficiaries diagnosed with cancer. Detecting these cancer cases in early stages will undoubtedly lead to more effective and shorter treatments – thus protecting Medicare from the more significant costs associated with treating more advanced stages of cancer.

H.R. 2407 provides Congress with a unique opportunity to help individuals live longer, healthier lives and effect meaningful change that will shield the Medicare Trust Fund from more costly cancer treatments and therapeutics. I am proud to highlight the Georgetown (KY) Fire Department, home to IAFF Local 3681, as one of the more progressive fire departments in the nation that is providing these tests to their fire fighters. We hope to see more fire departments follow in the footsteps of Georgetown, KY.

Increased Cancer Screenings for Fire Fighters

Breast, colon, and prostate cancer are some of the most common forms of cancer fire fighters are afflicted with, both during and after their careers.¹³ Fortunately, we can now conduct non-invasive screenings for these forms of cancer that are also far less expensive than screenings for other medical conditions. The U.S. Department of Defense (DOD) currently employs more than

¹³ Pukkala, E, et al. (2014). "Cancer Incidence among firefighters: 45 years of follow-up in five Nordic countries *JPccup Environ Med* 71:398-404.

9,500 civilian federal fire fighters who protect DOD installations worldwide. These fire fighters are provided with health insurance benefits that cover breast, colon, and prostate cancer screenings at intervals recommended for the general public. However, fire fighters face much more serious exposures to carcinogens and are far more likely to develop cancer earlier than the average person. Early cancer detection is critical to successfully fighting the disease, and the DOD should be required to provide earlier access to these highly effective yet inexpensive screening opportunities.

The IAFF is proud to support the Federal Firefighter Cancer Detection and Prevention Act of 2023 (H.R. 2852) which was introduced by Representatives Elissa Slotkin (D-MI) and Don Bacon (R-NE). This legislation recognizes fire fighters' increased cancer risks, especially those serving on DOD installations, and are more likely to face primary and secondary exposures to PFAS-laden firefighting foams. If passed, this legislation would require DOD to provide these basic cancer screenings to DOD fire fighters earlier in their lives and thus increase their chances of identifying cancer occurrences before they spiral into more advanced stages of the disease.

Conclusion

On behalf of General President Edward Kelly, and all IAFF members across North America, I thank you, Chairman Guthrie, Ranking Member Eshoo, and the Health Subcommittee members for convening today's hearing to discuss the pressing need to reauthorize and continue growing the National Firefighter Cancer Registry. Fire fighters face many threats while serving their communities – flashovers, vehicle accidents, and building collapses have claimed the lives of far too many of our brothers and sisters. However, these incidents' death tolls pale in comparison to the number of fire fighters that cancer has stolen from us.

To close, I want to challenge your notion of what cancer in the fire service looks like. While many of our retired fire fighters do struggle with cancer, this disease is also killing younger fire fighters too:

- Chairman Guthrie, 46-year-old Johnnie Jacobs from the Georgetown (KY) Fire Department near your district, succumbed to lung cancer in 2020. Johnnie was a strong health advocate and led a fitness training program. Johnnie was survived by his loving wife and two young children.
- Ranking Member Eshoo, 41-year-old Jose Martinez of your district's San Jose Fire Department, passed away after a two-month battle with soft tissue cancer. Forty-nine fire fighters from San Jose recently filed suit against PFAS manufacturers for knowing the dangers of PFAS and continuing to infuse it in their turnout gear and firefighting foams.

Cancer affects all fire fighters. It is not a rural versus urban or volunteer versus career issue. Any individual who is selfless enough to put on a fire helmet will likely have to confront a cancer diagnosis at some point. The National Firefighter Cancer Registry is a critical tool for our success in developing more effective cancer prevention, detection, and treatment strategies. The data gathered from the Registry will help us develop custom-fit solutions for fire fighters. Congress was right to create this Registry on a near-unanimous basis in 2018, and we need

Congress to again set aside politics and ensure this program does not disappear. I urge every member of this subcommittee to support H.R. 3821 and help pass this critical legislation.