

# **Misc Correspondence**

**Jan to Aug 2006**

Subj: **Fwd: from Tim**  
 Date: 06/08/2006 7:10:27 P.M. Atlantic Daylight Time  
 From: AmerRescue  
 To: Paelcopp, AmerRescue, sklawfirm@yahoo.com

In a message dated 06/08/2006 3:37:36 P.M. Atlantic Standard Time, drsmith@renewalresearch.com writes:

Hi Doug:

I am writing to tell you that I hope you got the prescription for Cipro and that you are now taking it.

To keep other bad bugs from getting a start in your intestinal tract, be sure to take acidophilus—lots of it—two hours away from the antibiotic twice a day.

In further reflection after our phone conversation last week, I am thinking that you might also need another antibiotic, one that reaches bugs that Cipro can't address. So if you are still having the intestinal symptoms you described after the Cipro is completed, please let me know and I will prescribe another type of antibiotic that has a different spectrum of activity.

I have to say it is frustrating to me to offer these stop gap measures rather than being able to focus more on the deeper, causative issues in your health picture. You need that detox program in Texas, and we need to focus even more aggressively on the neurotoxin/biotoxin removal program that you are now embarking on.

Best,

Tim

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Forwarded Message:

Subj: **from Tim**  
 Date: 06/08/2006 3:37:36 P.M. Atlantic Daylight Time  
 From: drsmith@renewalresearch.com  
 To: amerrescue@aol.com  
*Sent from the Internet (Details)*

Hi Doug:

I am writing to tell you that I hope you got the prescription for Cipro and that you are now taking it.

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Best,

Tim

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Forwarded Message:

Subj: corrections Re: Doug Copp v. NBC won't translate corrections  
Date: 24/01/2006 4:29:42 P.M. Atlantic Standard Time  
From: AmerRescue  
To: drsmith@renewalresearch.com, sklawfirm@yahoo.com, AmerRescue

Dear Tim :

see below for XXXXX info and change years of working at major disasters from '16' to '16 years before WTC' in other words; since, 1985 Mexico City Earthquake..

Also, you might want to report my bizarre behavior..like:1) opening the cap to the water tank to put diesel fuel in water tank, 2) putting engine antifreeze into windshield washer tank (last week) or 3) paying a 'worker' \$800 ( I was old last week that I had paid \$800 not \$500) for 16 minutes of work and \$3 of material. He 'tookoff' in a hurry and I never got a receipt. People who were there didn't realise what had happened til the guy fled with my money or 4) I signed a telephone service contract without any knowledge that I had done it.

Also, you mention K-Mart. It was actually Walmart. I have had 5 attacks there.

XXXXinfo.....Earthquake & Landslide El Salvador 2001, Earthquake Taiwan 1999, Earthquake Turkey 1999, Floods & mudslides Venezuela 2000 , Earthquake Peru 2001

In a message dated 24/01/2006 2:49:32 PM Atlantic Standard Time, drsmith@renewalresearch.com writes:

**TIMOTHY J. SMITH, M.D.**  
**2635 REGENT STREET**  
**BERKELEY, CA 94704**  
**Voice: (510) 548-8022**  
**Fax: (707) 824-0111**

January 23, 2006

**Karasic and Associates**  
**28 West 36th Street**  
**N.Y., N.Y. 10018**

**Re: Doug Copp**

**Dear Mr. Karacic:**

FAX TRANSMITTAL

To: Tim Smith

Fax: 707-824-0111

From: DOOB COPD

Date: Jan/9/2004

RE: ~~MEDIA~~ ARTICLE RE: Detective's Death

# of pages including this one 2.

sent  
@ 5:40 pm

Please see attached.

Doug has an appointment w/you tomorrow afternoon.

We ~~are~~ need the medical reports Pre-9/11 fixed. (we only received 3 pgs).

Thank - you.

Paulina

Subj: **Re: Times Article for Dr. Smith**  
Date: 09/01/2006 12:53:27 P.M. Atlantic Standard Time  
From: [sklawfirm@yahoo.com](mailto:sklawfirm@yahoo.com)  
To: [AmerRescue@aol.com](mailto:AmerRescue@aol.com)

Hello Doug,

Below is a copy of the the New York Times article on James Zadroga. Forward this over to Dr. Smith and ask him to add something to his letter about your medical condition comparing your condition to that of Zadroga.

Best regards,

Andy

January 8, 2006

## Retired Detective's Death Attributed to 9/11 Duty

By **KAREEM FAHIM**

A detective who retired from the New York Police Department in 2004 because of illness related to Sept. 11 died last week, a union official said yesterday.

The detective, James Zadroga, 34, who ended his career with an elite Manhattan homicide unit, died of pulmonary disease on Thursday at his parents' home in New Jersey, said Michael J. Palladino, president of the Detectives' Endowment Association.

Other detectives have retired from the department because of disabilities resulting from the terrorist attacks of Sept. 11, 2001, but Mr. Zadroga is the first emergency responder to die of a related illness, Mr. Palladino said. The Police Department could not immediately provide the number of officers who have retired because of 9/11-related injuries.

"He was in Building 7 when it collapsed, and he narrowly escaped death," Mr. Palladino said. "For the next month, he worked 12 or 13 hours a day, a total of more than 450 hours, in the rescue and recovery effort."

Soon afterward, Detective Zadroga complained of shortness of breath and was found to have fiberglass in his lungs, Mr. Palladino said.

Detective Zadroga suffered from other health problems, including mercury in his brain, Mr. Palladino said, adding that autopsy results were expected tomorrow. Mr. Zadroga's death was reported yesterday in The Daily News and The New York Post.

In July 2004, Detective Zadroga retired with a disability pension as a result of pulmonary disease related to Sept. 11, a tax-free benefit equivalent to three-quarters of his salary, the police said.

His wife died of brain cancer in 2004, Mr. Palladino said, and they had a 4-year-old daughter.

With 31 medals for excellence and seven others for meritorious duty, Detective Zadroga was considered an exceptional officer, a department spokesman said. His funeral is to be held on Tuesday

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January 9, 2006 AOL: Guest

**Report included in  
VCF 2004 application**

TIMOTHY J. SMITH, M.D.  
2635 REGENT STREET  
BERKELEY, CALIFORNIA 94704  
TELEPHONE (510) 548-8022

**Kip Purcell, Attorney-at-Law  
Rodey, Dickason, Sloan, Akin, & Robb, P.A.  
Counselors and Attorneys at Law  
201 Third Street NW, Suite 2200  
Albuquerque, New Mexico 87102**

August 10, 2003

Re: Mr. Douglas Copp

Dear Mr. Purcell:

Mr. Douglas Copp is 51 year old patient under my care who was permanently disabled as a result of multiple injuries sustained while functioning as a rescue worker at the World Trade Center collapse on September 11, 2001.

As founder and executive director of American Rescue Team International, Doug Copp has worked at every major world disaster in the past 15 years. With experience in hundreds of building collapses (the WTC were buildings numbers 893 and 894) Mr. Copp is the most experienced rescue worker in the world.

Mr. Copp was flown by private jet to Ground Zero on September 12, 2001, where he began searching for trapped victims in the six floors below Ground Zero. Because fires were raging above, and the entire subterranean area was considered extremely unstable, other less experienced teams were not allowed there. These areas were even more toxic than the areas above because of the lack of ventilation, molds, and toxic chemicals being flushed by water from the fire hoses into this space.

For a week Mr. Copp spent 20 hours a day working in this extremely toxic area, directing his team and searching for trapped individuals. During this time he was exposed to an toxic array of poisonous



chemicals of unprecedented proportions--even by the new standards being set six floors above him.

Despite the dangerous nature of his work, Mr. Copp had always been healthy, robust, and athletic prior to 9/11/01. He was under treatment for no medical condition, and took no medications. Although he had risked his life countless times, crawling into partially collapsed buildings, he had never sustained an injury.

### About Doug Copp

Prior to 9/11, Mr. Copp enjoyed worldwide fame as the world's most experienced rescue worker. In 1985, having saved the life of a 9 day old baby from a maternity ward in a collapsed hospital in Mexico City, he decided to devote his life to rescue. He points with pride to the over 125,000 lives he has saved throughout an illustrious career. He has been awarded dozens of medals and keys to cities by grateful diplomats around the world. He has made over 800 TV appearances, usually as the most experienced rescue worker on over one hundred major disaster scenes. He has been featured in 8 documentaries, and has appeared on BBC several times. Also an inventor, Mr. Copp has developed several advanced technological devices designed to make saving lives easier for rescue workers, and has 32 inventions to his credit. His organization, American Rescue Team International, has members in 59 countries. Mr. Copp has been instrumental in training over ten thousand rescue workers through lectures and training seminars he gives at every disaster and training videos published in North America and Australia.

Mr. Copp has generated great admiration, respect and appreciation from many world leaders who--having been trapped in the throes of a disaster without preparedness or a workable plan--found themselves dependent upon, and extremely grateful for, Doug's expertise. Among these are President Fujimori of Peru and President Duarte of El Salvador.

Mr. Copp has been an invited lecturer at dozens of institutions of higher education, and has given hundreds of lectures. Three of these were recently televised live throughout all of South America.

The chancellor of the National University of Peru recently presented a medal to Mr. Copp honoring him as the year's most noteworthy individual. The ceremony was carried on Peruvian national television.

### Medical Review

I first saw Doug Copp in my office on September 23, 2002. At that time, because of dyspnea, he was barely able to climb the steps to my second floor office. He was extremely short of breath even while sitting. He related to me, with frequent pauses to get air, the story of his involvement in the World Trade Center rescue operation. He related his fourteen day experience, probing his way in the darkness through a toxic brew of chemicals, mold, and water in an attempt to locate and rescue survivors who might still be trapped.

Immediately following the World Trade Center collapse, Mr. Copp's most debilitating symptoms related to his back and respiratory system. He had slipped and injured his lumbar spine while four stories below the WTC, causing low back pain, groin pain, and numbness in the left leg.

On the third day of rescue, he began noticing changes in his voice and respiration, caused by the ongoing exposure to toxic fumes and molds. This had persisted and worsened in the year that had passed since the end of the rescue effort. He complained that "I get out of breath doing just about anything, even eating." He experienced a constant pain in his chest, and an ongoing feeling that with the next breath his lungs would go into spasm. He was taking Xopenex and Albuterol. Indeed he had already been hospitalized twice for acute reactive airway disease with life threatening bronchospasm, and had been put on oral prednisone to reduce the respiratory allergic hyperreactivity.

In addition to shortness of breath and frequent asthmatic attacks, he had a variety of other complaints, all of which began during or shortly after September 11, 2001. Since 9/11 Mr. Copp had become edematous and had gained 50 pounds, presumably due to side effects of the prednisone. He had developed hypertension, and was taking Tiazac 120

## General

- Inability to walk farther than 30 to 40 ft without resting
- Low thyroid
- Heartburn and Gastro-Esophageal Reflux Disease
- Absence of sex drive
- Frequent urination
- Water retention and bloating
- Distended abdomen
- Weight increase
- Feels lousy...and "just plain sick"

## Neurological and Neuropsychiatric

- Disorientation
- Memory problems
- Difficulty concentrating
- Difficulty sleeping
- Cerebral edema, causing
  - Dementia
  - Glaucoma
  - Blurred vision
  - Optic nerve cupping
  - Constant headache
  - Earaches
  - Reduced hearing

## • Respiratory

- Constant pain in chest
- Difficulty speaking without prolonged breaks for breath
- Hyperventilation
- Constant sense of chest spasm
- Frequent chest and upper left arm pain

## Immunological

- Extreme reactions to cigarette smoke, air pollution, ambient volatile chemicals
- Extreme reactions to heat and stillness of air
- Irritability
- Sinus blockage
- Dry eyes

## Overview of Injuries

mg. daily . Whereas prior to 9/11 he could "eat anything," he now had developed a sensitive stomach, and experienced heartburn and indigestion on a regular basis. He had developed a chronic allergic nasosinusitis.

In terms of neurological symptomatology, he complained that ever since 9/11 he was having episodes of disorientation, memory problems, difficulty concentrating, poor sleep, and blurred vision. A constant headache, fluctuating in intensity, made it "very difficult to do anything."

He told me that he had become very reactive to everyday odors that previously had never been a problem. Now gasoline fumes, solvents, glue, perfumes, smoke, dust, mold, and other common airborne chemicals elicit powerful respiratory attacks. "Now I look at someone with a cigarette as if they are aiming a gun at me."

In subsequent months he developed cerebral allergic reactions in which exposure to any of these allergens triggered an exacerbation of his cerebral edema (swollen brain) with consequent heightened headache and dementia. These have become his most chronic and debilitating problems, and will be discussed below.

### Symptoms and Health Problems Secondary to WTC exposure

Please note that prior to his World Trade Center exposure, Mr. Copp was perfectly healthy.

#### Primary health problems

- Toxic encephalopathy with dementia
- Cerebral allergic hypersensitivity reaction
- Cerebral edema with optic nerve cupping
- World Trade Center cough and syndrome (WTCS)
- Reactive airway disease with chronic immune activation, bronchial edema, and bronchospasm
- Hypertension

#### Other Symptoms, Signs, and Complaints

The complex and unique mixture of toxins presented by the WTC collapse is unprecedented in human history. The environment to which Mr. Copp was exposed was a mixture of vapor, smoke, and very fine particles that originally made up the materials of the WTC, its contents, and the aircraft that struck it. A complete listing would include tens of thousands of chemicals: cement, glass, asbestos, superheated volatilized polyvinylidene chloride (PVC), polyethylene, acrylonitrile-butadiene-styrene (ABS), reinforced thermosetting resin pipes (RTRP), vinyl coated wiring, carpet, office furniture, hydraulic oil, fuel oil, diesel fuel, jet fuel, cement and drywall dust, organic particulates from burning plastic such as polyvinyl chloride, polychlorinated biphenyls (PCBs), dioxins and other polynuclear aromatic hydrocarbons, thousands of combustion product chemicals, airplane components, burning human bodies, and vaporized toxic metals such as lead, copper, cadmium, tin, iron, steel, mercury.

Mr. Copp's WTC-induced health problems were caused by inhaled and dermatologically absorbed components of these dust and smoke borne toxins. The combined effect of these toxins is impossible to assess, but it is safe to say that all organs and tissues would be adversely affected. In this patient, the immune system, respiratory system, and central nervous system were most profoundly affected. Although the CNS symptoms are most disabling, the most profound symptoms and problems disabling Mr. Copp actually stem from immune dysfunction with multisystem repercussions, so I will address that first.

### Immune System Sensitization, Activation, and Hyperreactivity

For six days, Mr. Copp waded in a toxic soup, breathed toxic air, and had toxins smeared on his body surface. It is unlikely that anyone has ever in human history been exposed to as concentrated or complex a mixture of dangerous chemicals. This mixture placed an overwhelming burden on his immune system, which generated, in response, many hundreds or perhaps thousands of types of antibody molecules (at least one for each toxic chemical). Mr. Copp now, following this overwhelming exposure, experiences ongoing allergic hypersensitivity reactions caused by reexposure to similar molecules in the environment.

Sensitized mast cells in Mr. Copp's brain, lungs, and elsewhere cause ongoing allergic reactions. Because his immune cells were "sensitized" by the WTC overload of toxins and fungal allergens, they are now on "hair trigger." His entire immune system now overreacts to even very small exposures to similar chemicals. Immunological testing has revealed elevated antibodies to an array of fungal microorganisms, including *Alternaria Tenuis*, *Aspergillus fumigatum*, *Candida species*, *Cladosporium herbarium*, *Epicoccum nigrum*, *Geotrichum candidum*, *Pullularia pullulans*, and *Rhodotorula glutinis*.

In effect, this patient's immune memory cells are hypervigilant and overreact. The ambient pollution to which we are all exposed has become a great danger to Mr. Copp because his damaged immune system now massively overreacts. The sustained immune reactivity in his brain and bronchioles causes ongoing symptoms. Lung symptoms are limited to recurrent asthmatic (reactive airway disease) type reactions. The consequences in the brain, however are far more severe and disabling: cerebral edema, dementia, and chronic headache. Allergic hypersensitivity reactions like these in brain and lung are also accompanied by ongoing local tissue damage, which perpetuates the process.

Although the prognosis is different from one person to the next, once an individual's immune system has been damaged this way, there is little likelihood that it will return to normal. These patients live out their lives with environmental illness, always on the verge of another acute exacerbation of their extreme allergic hypersensitivity. Before the WTC exposure, when Mr. Copp was exposed to smoke, it did not bother him. Now, because of immune sensitization, even a small amount of secondhand cigarette smoke causes a violent immune overreaction, and he experiences a classic severe asthmatic reaction. This has occurred many times and has sent him to the hospital on more than one occasion.

This patient's history and symptom picture are diagnostic of environmental illness with multiple acquired chemical sensitivities. As a result of cerebral allergic reactions, he experiences an underlying chronic cerebral edema, an inflammatory swelling of the brain caused by allergic

hypersensitization, which causes constant low grade headaches, speech disorder, and dementia. He manifests grossly impaired memory and concentration. Acute exposures trigger an immediate exacerbation above his baseline symptomatology. An example of a cerebral reaction is that when Mr. Copp is exposed to the occasional transient fumes while refilling at a gas station, or a whiff of glue, or even ambient pollution, he now suffers an immediate and severe exacerbation of the chronic low grade headaches, confusion, and disorientation caused by this ongoing immune hyper-reactive state.

Ophthalmological examination of Mr. Copp by Dr. DeMonaco revealed optic nerve cupping, a retinal manifestation of the increased pressure (AKA cerebral edema) in his intracranial space.

### Central Nervous System

As a result of the multiple chemical exposures at the World Trade Center, Mr. Copp suffers from a toxic encephalopathy and environmental illness. He experiences cerebral hypersensitivity reactions causing cerebral inflammation and edema. This results in compromised cognitive functioning. Neuropsychological testing performed by Tony J. Kreuch, Psy.D., ABPN, on April 23, 2003 revealed significant cerebral impairment, including memory deficit, impaired concentration, decreased powers of reasoning, and significant impairment of problem solving ability. Dr. Kreuch finds that Mr. Copp suffers from "neuropsychological dysfunction, most likely related to a toxic exposure within a previously high functioning individual. Affected areas include attention, concentration, processing speed, working memory, and acquisition, storage, and retrieval, in addition to executive conceptualization and flexibility of cognition." Dr. Kreuch went on to recommend pharmacological management, and individual counseling with referrals to a psychiatrist, psychotherapist, and speech-language pathologist.

Mr. Copp now evidences organic brain syndrome with dementia, induced by exposure to organic solvents, heavy metals, and other chemicals. He has cerebral edema, with constant headaches, as a consequence of inflammatory changes in the brain caused by exposure

to an array of toxic chemicals.

He has lost the ability to focus his thoughts, and is often unable to remember what he was doing. "I am constantly losing things, locking my keys in the car. Can't remember things. It is a lot like Alzheimer's, I think. I have to stop and think, "What am I doing? And a lot of the time I can't remember what I was doing."

Toxins, autoantibodies, and/or toxin-mediated allergic sensitization of brain tissue are all present and responsible for the brain swelling or cerebral edema. Diamox (500 mg. three times a day) has afforded significant relief from the constant headaches, earaches, eye pain, and feelings that his head was swollen. This response confirms the hypothesis that these symptoms were caused by allergy-induced cerebral edema. The dementia remains unchanged, however. He has compromised concentration, memory, and reasoning capabilities.

According to Mr. Copp: "I've been at more than one major disaster where the president is thinking of quitting, the generals are running around tearing their hair out, needing to do something, but not knowing what to do--and this is when I'm at my best. I am extremely calm under stress. Stress actually relaxes me, and this is because I never felt so alive as when I was solving problems. This is what I was meant to do. Now, I am unable to think clearly. I have great difficulty solving problems, and thinking is actually painful. Now I have lost so much of my thinking and concentration and memory that there is no way I could manage a disaster scene like I used to--it would be impossible."

### Respiratory System

On September 15, 2001, having spent three days searching for people under Ground Zero, Mr. Copp first noticed, during a television interview, that his voice had changed, and that he had begun to cough. Over the next ten days he continued to experience increasingly severe respiratory symptoms, primarily cough and shortness of breath. These were accompanied by pain and tightness in the chest.

The severity of the cough, shortness of breath, and chest tightness



continued to increase, and on September 27, 2001, while in Santa Fe, New Mexico, Mr. Copp experienced a severe acute attack in which he felt unable to breathe. He went to the local Emergency Room where he was treated with steroids and bronchodilators.

Since that time, Mr. Copp has continued to experience severe ongoing respiratory distress, with ongoing dyspnea, cough, and chest pain. Unable to walk even short distances without exceeding his lung's ability to supply his tissues with sufficient oxygen, he has been rendered totally incapacitated.

Prior to seeing me, Mr. Copp's respiratory disorder had been treated as if it were asthma and bronchitis, using conventional medications such as Advair discus and Albuterol. He had been given inhalers, prednisone, and antibiotics, but with only marginal success in controlling the symptoms. Prednisone had been effective at suppressing the abnormal immune responses, but the price in terms of weight and water gain, bone mass and muscle loss, mental symptoms, immune system suppression, and adrenal atrophy had been detrimental to his overall health and decreased the probability of complete recovery, so he successfully weaned off of steroids several months ago.

It has been well established that exposure to xenobiotic (foreign to living systems) toxins causes immune dysfunction. In Mr. Copp's case, these foreign chemicals caused tissue damage, and immune dysfunction, as described above.

In the respiratory epithelium and elsewhere, xenobiotic exposure has altered protein molecules in his respiratory tree, causing subsequent autoimmune reactions in which the altered proteins are mistaken by his immune cells as foreign and then attacked by antibodies, natural killer cells, and macrophages. The resulting inflammatory reaction manifests in Mr. Copp as chronically inflamed respiratory tissue, shortness of breath, and chronic cough.

Exposure to xenobiotics (including the initial exposure, ongoing low level exposure, and exposure from xenobiotics later released from fatty tissue stores) also causes immunostimulation, which results in spurious immune attacks on normal body proteins. This further inflames the

respiratory cells, lowering the threshold for bronchospasm and cough. The autoimmune reactive symptoms and damage to normal protein activate complement cascades which cause more local tissue injury and further lower the threshold for bronchospasm and cough. the result is chronic asthma. This problem has been addressed by implementing a combination of symptom suppressive medications in conjunction with a broad based nutritional supplementation program designed to support and heal the respiratory and immune systems.

Hypertension Mr. Copp takes the blood pressure medication Tiazac 120 mg. daily for hypertension of unknown--but presumably WTC--origin. Toxin mediated neurological damage to the sympathetic nervous system can cause hypertension. Mr. Copp had no hypertension prior to 9/11/01.

Hypothyroidism He is in good control at 0.25 mg Synthroid daily.

Low back pain Mr. Copp was seen by Serena Hu, an orthopedist at the University of California, San Francisco who referred him to Neurosurgeon Philip R. Weinstein, M.D. also at UCSF medical Center, who referred Mr. Copp to a neurologist. He was also seen by Dr. Richard Radecki, physical medicine, but could not be fully worked up because an MRI could not be performed due to metal in his lungs.

#### Diagnoses:

1. World Trade Center cough and syndrome (WTCS)
2. Allergic respiratory hypersensitivity triggered by WTC smoke and dust, causing local immune cell damage with subsequent hypersensitivity to smoke, dusts, molds, heavy metals, volatile compounds and other ambient allergens previously not allergenic to this individual
3. Organic Brain Syndrome with dementia secondary to immune sensitization caused by 2
4. Cerebral edema secondary to 2
5. Chronic headaches secondary to 4
6. Optic nerve supping secondary to 4
7. Glaucoma secondary to 4
8. Environmental illness with multiple acquired chemical sensitivities
9. Reactive airways dysfunction syndrome (RADS) causing bronchial

- inflammation, swelling, and obstruction and resulting in asthma
10. Hypersensitivity pneumonitis
  11. Chronic nasosinusitis
  12. Immunotoxicity secondary to xenobiotic exposures
  13. Upper respiratory allergies, primarily allergic rhinosinusitis
  14. Asbestosis
  15. Low back pain
  16. Left lower extremity pain, numbness and paresthesias
  17. Hypertension
  18. Hypothyroidism

#### Current medications and treatments

- Provigil 75 mg. per day, an alertness medication which partially reverses the dementia-induced lethargy and memory disorder
- Diamox, a medication that removes excess or accumulated fluid, used to reduce cerebral edema
- Tiazac 240 mg. a day for hypertension
- Celluvisc eye drops as needed for chemical conjunctivitis
- Xopenex 1.25 mg with nebulizer as needed for acute bronchoconstrictive attacks.
- Albuterol inhaler for reactive airway disease
- Intal inhaler for reactive airway disease
- Advair discus as needed for reactive airway disease
- Synthroid 25 mcg daily for hypothyroidism
- Sporanox 100 mg. daily for multiple chronic systemic fungal infections
- A comprehensive nutritional supplement program designed to support and enhance healing of the immune, respiratory, and central nervous systems
- Ongoing psychiatric therapy for neuropsychiatric sequelae of WTC injuries
- Chelation Therapy, previously performed by Robert Friedman, M.D., currently per Dr. Kumar Biswas

#### Required Treatments with Estimated Cost

- Comprehensive workup and ongoing treatment by William Rea, M.D., director of the Environmental Health Center, Dallas, the

world's leading expert on toxic exposure and environmental medicine. Treatment program including detoxification, skin testing, intravenous therapy, antigen therapy, oxygen therapy, living at environmentally controlled units, home treatment program; 6-8 weeks of treatment. Total for initial evaluation and followup therapy three times yearly, including cost of maintaining home treatment plan between visits =  $30,000/\text{year} \times 25 \text{ years} = \underline{\$750,000}$

- Estimated cost of travel to Dallas including hotels three times a year \$750 for 25 years = \$18,750
- Bottled water \$1200/year x 25 years = \$30,000
- Additional cost for organic food \$3000/year x 25 years = \$75,000
- Home renovation for environmental illness (includes allergy free carpeting and hardwood floors, formaldehyde-free cabinetry, home air system to remove mold contamination, air filters and conditioning, one-time cost: \$85,000
- Chelation therapy and intravenous nutritional medicine per Robert Friedman, M.D. and Dr. Kumar Biswas: currently owed \$11,000 for past treatment and estimates \$50,000 to complete all of the intravenous chelation and IV nutrient therapy injections
- Quarterly consultations by Timothy J. Smith, M.D. at \$300 x 25 years = \$30,000
- Drug Medications
  - Provigil 75 mg. daily; \$2263/yr
  - Thyroid 25 mcg daily; \$276/yr
  - Tiazac 240 mg. daily; \$564/yr
  - Sporanox 200 mg. daily; \$3179/yr
  - Diamox 1 500 TR q12h; \$1764/yr
  - Xopenex \$3096/yr
  - Albuterol Inhaler \$504/yr
  - Intal Inhaler \$948/yr =
  - Celluvisc Eye Drops \$1200/yr =
    - Total cost per year = \$14,994
    - Total cost for 25 years = \$374,850
- Non-prescription medications for detoxification, immune support, environmental illness: \$11,000 per year x 25 years = \$275,000
- Medical and immunological testing to determine medical status,

effectiveness of therapy and degree of immune dysfunction: \$2000 annually for immunological testing X 25 years = \$50,000

- SPECT Scan 3000 x 3 = \$9000
- Quarterly medical office visits at \$300 per visit to internist: \$1200 X 25 years = \$30,000
- Quarterly medical office visits at \$300 per visit to pulmonologist: \$1200 X 25 years = \$30,000
- Quarterly medical office visits to immunologist \$1200 X 25 years = \$30,000
- Neuropsychiatric therapy: \$300 per visit x average of 12 visits per year = \$3600/year X 25 years = \$90,000
- Ophthalmology for Glaucoma, optic nerve cupping, cerebral edema - Quarterly medical office visits: \$1600 X 25 years = \$40,000

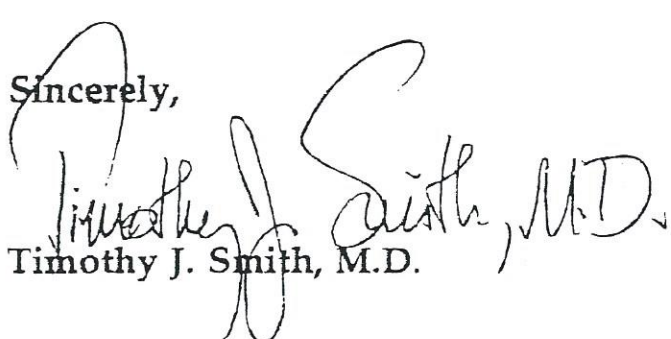
Grand Total for all Medical costs: \$1,967,600

### Summary, Prognosis, and Conclusion

In the week of September 12 to September 18, 2001, Mr. Copp experienced an overwhelming exposure to chemicals and fungi at the site of the World Trade Center terrorist attacks. Previously healthy, Mr. Copp has now been rendered totally disabled. Because of the nature of the damage to his immune, respiratory, and central nervous systems, there is little likelihood that his condition will improve to the point where he would be able to resume work. He is permanently disabled.

This gentleman deserves optimum medical care for the injuries he sustained by placing his own life at risk while selflessly attempting to save the lives of others.

Sincerely,

  
Timothy J. Smith, M.D.