



Are you affected by helicopter fumes?

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STUDIES NOT CONCLUSIVE BUT HSA MEMBERS REPORT VARIETY OF SYMPTOMS

BY MARTY LOVICK

EVERY DAY, HELICOPTERS TAKE OFF AND LAND at worksites staffed by HSA members. The helicopters are a vital means of transport for the most critically sick and injured, but they are also a source of fumes which may be making staff themselves sick.

In early 2011, HSA members at 11 sites with functioning helicopter pads were surveyed about the effects of these fumes. Over 400 people responded, the vast majority of whom work at Vancouver General Hospital, Womens and Childrens Hospital, Royal Columbian Hospital and the Royal Jubilee/Victoria Cancer agency complex.

Here are the highlights of their responses.

- The majority experienced fumes in their workplace and more than a third had been experiencing them for more than five years.
- 30% reported experiencing fumes on a weekly basis, and 35% on a monthly basis.
- Respiratory symptoms, headaches and nausea are the most common symptoms reported. Over 100 people reported these symptoms.
- Symptoms can last from a few minutes up to more than a day.
- Only 46% of these members reported the symptoms to their supervisor or safety committee and the reports were mainly verbal. Only two people had seen their physician and one lost time.
- 75% of those reporting said nothing was done about the situation. To date, WorkSafeBC has not focused on this issue because the medical literature is inconclusive about any lasting negative health risks caused by exposure to jet fuel fumes. Employers either tell staff to "just put up with it" or argue that the landing pads are not their responsibility.


WHAT SHOULD YOU DO?

Exposure to fumes which produce symptoms should be reported to supervisors. Health Authorities have an exposure reporting process and WorkSafeBC is introducing one. HSA strongly encourages members to report such incidents. If time off is necessary, workers should attend their physician and file a WorkSafeBC claim.

Although there is no literature available to dispute the contention that there are no long-lasting effects from fumes, the fact that people are temporarily affected and even disabled must be acknowledged. Outside of BC, healthcare sites have tried a number of approaches to minimize the fumes: shutting down air intakes when helicopters are scheduled, notifying staff so they can leave the building on a break and even relocation of pads. Interestingly, there has been no concerted effort to canvass patients as to the effect of fumes on them.

WHAT HSA IS DOING

HSA will continue to monitor the issue and has asked that the affected sites keep a regular tally of the number of exposures. This data will support remediation efforts. As well, the union will continue to review any literature which might provide support for stronger action.

For further information or discussion, contact Marty Lovick at mlovick@hsabc.org or 604-439-0994. 

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180 East Columbia
New Westminster, BC V3L 0G7

Website
www.hsabc.org

Telephone 604-517-0994
1-800-663-2017