

VERBAL TESTIMONY CT HB5347

Good afternoon. My name is Mary Catherine Gennaro, DO. I am a board certified physician from Plymouth, NH. I am here to testify on behalf of the proposed legislation (HB 5347) to ban the use of latex gloves and utensils from food service.

Because we think of latex as a thing, a glove, a ball many people believe that natural rubber latex is an inert product. It is not. Natural rubber latex is an organic substance that runs as sap in the Hevea Brasiliensis tree. It is a plant based, organic, protein that, in addition to being a natural allergen for many people, also cross reacts with a variety of foods. Two of the most common are bananas and avocados.

About 4% of the general population have food allergies. According to the NIOSH (National Institute of Occupational Safety and Health – a branch of the CDC) 1-6 percent of the general population are allergic to latex. 17% of health and dental workers have the allergy, over 60% of children with Spina Bifida have it as do people who have had multiple surgeries with exposure to latex gloves via mucous membranes.

The latex protein transfers to any surface it touches including food. This means that any time someone touches food wearing latex gloves they cross contaminate the food with the latex protein. (See the study done by Beezhold). When we eat that food, we eat the latex protein. We become inoculated through our mucous membranes with this allergen. People who have had multiple surgeries with latex exposure to their mucous membranes are at a very high risk to develop a latex allergy. Ironically, we think nothing of exposing ourselves to latex via our most absorbent mucous membrane, our entire GI tract, designed to absorb.

Latex allergy is often progressive. It can start as a rash then progress to feeling like food poisoning, the next time may bring anaphylaxis, shock and even death. No one knows what the next time will bring. My reaction began in 1991 as a rash on my hands, then hives on my hands, then hives all over my body. Every night after work the same pattern occurred until eventually I developed much more severe symptoms – racing shortness of breath, flushing, severe abdominal cramping. This reaction occurs whenever I am exposed to latex now. I can protect myself by avoiding latex risks that I can see i.e. balloons, sporting goods stores. Unfortunately, avoid because I cannot see them, those in restaurants.

The only way to prevent latex allergy is to avoid the product. The only way to treat latex allergy is to avoid the product.

NIOSH issued an alert more than a decade ago stating under #1: "Use nonlatex gloves for activities that are not likely to involve contact with infectious materials (food preparation, routine housekeeping, maintenance, etc.)"

The FDA Food Code written in 2009 defines a "safe material" on page 21 as "an article manufactured from or composed of materials that may not reasonably be expected to result, directly or indirectly, in their becoming a component or otherwise affecting the characteristics of any FOOD."

Latex gloves and utensils do not meet this FDA standard. Latex is known to contaminate food 100% of the time. It stays on the surface for 24 hours regardless of washing. It becomes a part of that food and it alters it. Touching my food with latex is similar to spreading a thin film of peanut butter on a sandwich of a peanut allergic patron. The difference is you can see and smell the peanut butter. You can taste it. Latex film is invisible, odorless and tasteless on food. I am not allergic to cheese. I am allergic to latex. If you hand me cheese with latex gloves I will begin to have a severe reaction in about 20 minutes. This alters the cheese from a safe product to a deadly poison for me, and at least 3 million people like me.

The CDC/NIOSH recommends against the use of latex in food preparation. Latex is so toxic that Johns Hopkins Hospital banned it in 2008. This facility is where the use of latex gloves was "born" and yet they were one of the first to ban it- see article "Rubber Gloves: "Born" and Now Banished- At Johns Hopkins Hospital- 01/14/2008" published in Johns Hopkins Medicine. I sincerely hope that you will follow the NIOSH recommendations and Johns Hopkins lead and protect all of us, those of us who already have the allergy and those of us who will develop it through exposure, especially since there are many credible, less expensive alternatives that do not alter our food. Please look favorably on this bill and ban the use of all latex in food service.

Thank you for your listening.

Testimony to support Proposed Bill HB 5347

The following are only a fraction of the total anaphylactic reactions I have suffered to food handled with latex gloves. I have had over 100 anaphylactic reactions since 2010 due to latex exposures and used over 50 epis. Many of the reactions are from food handled with latex and from balloons in use at restaurants, advertising sales or parties nearby. Some of the other exposures with serious reactions requiring epi include medical offices where latex gloves are in use or other medical items with latex rubber parts, from medical personnel who had used latex gloves elsewhere so that I reacted to it on their clothing, from contractors working on the house who used latex gloves before arriving at our house, from rubber mulch in parks and from other sources.

I have been allergic to latex for 25 years, starting as a mostly contact allergy. In 2003 I began to have more severe reactions.

2006: Anaphylaxis in restaurant from latex gloves, paramedics treated and released.

2008: Received diagnosis that latex allergy had progressed to the point where my allergist determined I had "zero tolerance" for any exposure to natural rubber latex and was to avoid all exposures to NRL. He issued epi pens and rescue meds. After this I began to inquire about latex glove use before eating in restaurants or other food service venues.

2010: Restaurant said used latex free gloves but I went into anaphylaxis from mint in a cocktail. Throat closed completely, epi and other rescue meds. The staff agreed that the supplier must have handled produce with latex gloves.

2011: Inquired at restaurant about latex gloves. Hostess brought out box of latex gloves to show me. Voice dropped to low register as throat swelled and anaphylaxis followed. Epi and other rescue meds

2011: Restaurant used vinyl gloves on food. After a couple bites of the bread, went into anaphylaxis, used epi and other rescue meds. Was going to need a second epi, so went to ER. Was treated with IV and oral anaphylaxis meds. Called next day and found out where bread was made. That bakery used latex gloves.

2014: Was told that restaurant used only latex free gloves. Waiter came to table and stepped close to recommend a menu item. Immediately reacted with throat swelling and asthma from latex on his clothes. Used epi and other rescue meds. Manager confirmed that latex gloves were in use in the kitchen. Reaction developed quickly to full anaphylaxis, requiring 2nd epi before ambulance could arrive. Transported to hospital for treatment.

2014: Severe anaphylactic reaction to latex gloves in use at Whole Foods in seafood counter. Fish handler showed me box and pulled one out for me. Used epi and other rescue meds. Transported by ambulance immediately to ER for treatment, treated en route with nebulizers, o2, IV benedryl. Treated at ER w additional IV meds, O2, 2nd epi injection.

In addition to these food service incidents, I have had allergic reactions varying from swollen throat to throat closing, to stomach cramps and diarrhea from following brands (that have since been found to use latex gloves): BelVita, Triscuit, Wheat Thins, Toblerone, and Stoned Wheat Thins. Also had throat swelling, asthma and other symptoms from lettuce from Trader Joes. Found out that Monrovia plant used latex gloves.

Please support the bill to ban latex from food establishments.

Thank you.

Debra Scott

Representative Bill Aman
RE: Proposal HB5347
CT General Assembly Committee Meeting 2/03/15

Dear Mr. Aman and Connecticut legislators,

I would like the opportunity to have my opinion heard regarding the use of latex gloves in CT restaurants.

My husband and I have been friends with Carolyn Mirek and her husband Ron for several years. During this time, we have shared many moments of distress with Carolyn over her allergy to latex.

Frequently our plans have been changed due to food being handled with latex gloves during preparation. Aside from the inconvenience, there is also the embarrassment of conveying the issue every time you go anywhere for food. Carolyn always carries an EpiPen everywhere she goes because unknowingly she could come in contact with latex. Imagine the threat of an allergen that can be hidden through preparation?

I find it a small alteration for restaurants to use a different material during food preparation other than latex. With many other products on the market that are more cost effective than latex, it seems a minor adjustment to make. There is nothing else for Carolyn to do but to avoid it all together. I believe when something so prevalent can impact so many people's lives, it is time for a change.

I support this bill with the hope of simplifying many people's lives that suffer from this allergy and some who may not be aware they have it.

Nancy Williams
325 Oakland Road
South Windsor, CT 06074

Aloha Representative Aman and the General Law Committee of Connecticut,

My name is Anne Marie Owens Jacintho; I am a resident from Kula Maui, Hawaii.

This testimony is in regards to

HB5347: AN ACT PROHIBITING THE USE OF LATEX GLOVES AT FOOD BUSINESSES

I strongly support HB5347

I am a mother of a 15-year old daughter that has a severe latex allergy. Latex is an airborne pathogen and, like dust, its residue floats in the air and remains on surfaces. She has had reactions from food touched with latex gloves. Upon digesting food that has been touched or exposed to latex her reactions start with a "funny feeling" in her throat and progresses to tongue and lip swelling requiring Benadryl.

My daughter's latex allergy was diagnosed at 2 years of age after a dental appointment; the dentist gloved hand imprint was left on my daughters face in the form of hives wherever the dentist had touched her. There is no cure for a latex allergy, only prevention of future reactions by avoidance of latex. With each latex exposure the person's reaction may increase to the next level. There are over 40,000 latex products in our environment; the American Latex Allergy Association has provided a guide to help a person with a latex allergy to help maneuver through the many latex obstacles in everyday life. <http://latexallergyresources.org/consumer-products>

Latex gloves are a product that is currently very difficult to avoid in restaurants and other food entities such as grocery stores. We've had to leave even a grocery store immediately due to my daughter starting to have a reaction. Once we got to the produce aisle when my daughter's throat started to "feel funny" and her eyes started to itch. Upon looking around we saw that the produce clerk was wearing latex gloves while putting the vegetables in the display bins. We immediately left and administered Benadryl.

Traveling is also difficult. In 2012, my daughter's school went on a national park adventure traveling by plane, car and train throughout the western United States to Yellowstone, Grand Tetons and Yosemite. At that time, the airlines could not guarantee that latex gloves would not be used in the cabin. The airlines instructed me that I could bring latex-free gloves for the flight crew to use while we were on board. They could not guarantee that the food that they were serving would be latex-free, so we took our own. With the TSA restrictions of what you are allowed to carry on board we were limited to dry crackers. Most snacks, energy bars and treats available in vending machines have a latex-based adhesive seal. In order for the adhesive to not to touch the treat, a scissors is required to open the package, which was not allowed in our carry-on bag. Being that we traveled from Hawaii we had several stops and connections on different airlines requiring an overnight stop over. The hotel was able to provide a latex-safe room but advised us that the kitchen did use latex gloves. We were unable to eat at the airport as the food vendors also used latex gloves. It was two days before my daughter was able to eat a latex-safe meal at Olive Garden that has a corporate "No latex Glove Use" policy.

One of the stops was to a Six Flags amusement park. It was nice to see the food concessions all used latex free gloves. However, my daughter had a prepackaged Ice cream treat and developed an allergic reaction. My daughter could smell the latex in the wrapper when she took a bite of the ice cream with the open wrapper still attached to the ice cream stick. Her throat started to get tight and her lips and tongue tingled. She required 50 mg of Benadryl and had residual reactions for remaining 3 days of the vacation.

I belong to a latex allergy support group with over 300 members. Daily we hear of a member's story recounting their reactions that they have had from food handled with latex gloves. Even though precautions are taken by screening restaurants carefully on their latex glove use, it is not enough. Food maybe outsourced, or farmers in the field may have used latex gloves while harvesting.

Our family is fortunate that we have a farmer that produces CSA Baskets (produce). He has changed his harvesting practice to accommodate our needs, and has extended it to all his customers. He stopped using latex gloves and rubber bands and only uses twist ties when bundling the vegetables. He said it was a no brainer for him as the safety and wellbeing of his customers always come first. There was no increase in cost of his operating expense; it was just a matter of changing his ordering practice.

The passing of HB5347 is very important. Removing latex gloves and utensils from food service and other food entities will help to remove a substantial risk to a latex allergy sufferer. It will also remove the risk of employees being exposed to the over use of latex and putting them at risk of developing a latex allergy increasing. After all, 1 in every 1000 has a latex allergy.

These are the current latex allergy statistics from the American Latex Allergy Association: it is estimated that...

- 18-73% of people with Spina Bifida
- 38% of dental care workers
- 34% of children who have three or more surgical procedures
- 10-17% of Health care workers
- 11% of rubber industry workers
- 6.8 % of atopic (allergies) individuals
- 8.3% of the general population
- Also recently it was noted that 11% of the elderly also have a latex allergy

<http://www.immunityageing.com/content/11/1/7>

Thank you for this opportunity to share my family's personal experience and encourage your support of HB5347.

Anne Marie Owens Jacintho

880 Naalae Road

PO Box 473, Kula Maui, Hawaii 96790

January 27, 2015

To Whom It May Concern:

My name is Trish Malone and I have a severe allergy to latex. Specifically Type I (immediate-type) hypersensitivity Natural Rubber Latex Allergy (NRL). - See more at: <http://latexallergyresources.org/definition#sthash.0ALUopOW.dpuf>. There is no cure for latex allergy, which affects me along with approximately 3,000,000 people in the United States, and in fact symptoms generally get worse with repeated exposure. That means it can change from an annoying allergy one day to a life threatening one the next. Somebody who today gets an itchy rash from a Band-Aid might be fighting for their life tomorrow after having been in the same room as a balloon. For those of us with this allergy, our bodies cannot handle being exposed to latex. Our bodies see latex as a foreign invader that it must fight off and our bodies go haywire in doing so. For me that used to mean if I came into contact with latex I would get a skin reaction, a red rash and blisters, but with repeated exposure it now means when I come into contact with latex, my body reacts with anaphylactic shock. In my case along with other symptoms, my tongue swells and my throat closes which, if not immediately treated, can be fatal. I take daily antihistamines to try to dull my body's automatic reaction. I also must keep multiple Epi-pens and more antihistamines on me at all times. Every minute of every day is spent trying to keep myself safe from an often invisible invader.

I am hyper-vigilant in buying only latex-free items for my family. From erasers and shoes to toothbrushes and exercise equipment latex is everywhere, but I research like crazy and protect myself and my family as much as humanly possible. Where I have had my most severe reactions however is somewhere I cannot control, in restaurants.

Dining out for a latex allergy sufferer is like playing Russian roulette. I always call ahead before eating anywhere, but the front of the house staff does not always understand what goes on in their kitchen. I have had MANY reactions when the host and/or server told me no gloves were used in their kitchen only to find out that gloves are used when cutting meat or other preparation work. Even speaking with the kitchen manager or Chef doesn't guarantee I will be safe. I have had reactions because someone on the morning prep line handled my food with latex gloves hours before and the Chef thought it was safe for me to eat because he/she cooked my food without wearing gloves. Just having latex gloves in a kitchen at all puts us latex allergy sufferers at risk. If one particle gets on our food we can die.

There is currently little to no legislation in most states protecting latex allergy sufferers like myself from being exposed unknowingly to a potentially deadly allergen by contact with food by food services workers wearing latex gloves. In addition, the workers are being placed at risk of becoming allergic themselves by repeated exposure to latex gloves. This risk can be mitigated very easily and inexpensively by banning the use of latex gloves in food preparation. Alternate gloves such as vinyl, nitrile or polyvinylchloride are readily available for purchase and at a similar cost to latex without any of the risk.

I appreciate your time and am available at Trish.malone@yahoo.com or by phone at 619-916-3722 if I can answer any questions you may have.

Sincerely,



Trish Malone

My Name is Debra A. Whitemaine, I live in Pennsylvania and I have a severe latex allergy. I react to air bourn, contact and food crosses.

On October 10, 2014 I accompanied my family to a local Long Horn Steakhouse. I brought my own food due to my severe food allergies. I normally don't even go to restaurants but I had family here from out of town. I called the restaurant and asked if they used latex gloves and I was told they used vinyl.

We were in the bar area waiting for our table. Within 10 minutes of being there I started to feel a reaction starting. I wasn't sure of the cause but it felt latex related. I was experiencing chest tightness, raspy voice and funny feeling in my head. The waitress seated us and I asked if latex gloves were used in the kitchen. I explained my latex allergy to her and that I was having a reaction. She returned and said they used latex and vinyl gloves. I immediately left the building and sat in my car while everyone else enjoyed their meal. I took Zyrtec, used my rescue inhaler and performed acupressure message points to reduce the symptoms. When my family members got into my vehicle to go home I was triggered again because the particles were on their clothing. I took a Pepcid AC once I arrived home for my ongoing symptoms.

I give permission for my story to be used in promoting latex change laws.

3 January 2015

RE: Latex Allergy and Latex Anaphylaxis

To Whom It May Concern:

If I may introduce myself: I am Coryne Wong, a registered nurse who practiced for 20 years as a pediatric acute care and pediatric transplant nurse. We knew that patients, such as spina bifidas, needed extra care regarding using latex, as they had hundreds of exposure to latex, including multiple surgeries and catheter usage.

This is not merely a cause, but rather a plea from someone who suffers the repercussions of the exposures, as well as someone who lost dear friends, fellow nurses, due to this environmental hazard.

The current statistics for people sensitized to natural rubber latex are broken down by risk groups and are as follows:

- **8-17% if health care workers**
- **Up to 68% of children with spina bifida (related to frequent surgeries - anyone who has multiple surgeries is at risk)**
- **Less than 1% of the general population in the U.S. (about 3 million people) (1)**

- ✓ **Latex gloves have proved effective in preventing transmission of many infectious diseases to health care workers. But for some workers, exposures to latex may result in allergic reactions. Reports of such reactions have increased in recent years--especially among health care workers.**
- ✓ **NIOSH Publication No. 97-135 (June 1997)**
Detailed description of latex allergy including presentation of existing data and description of six case reports of workers who developed latex allergy. The document also presents NIOSH recommendations for minimizing latex-related health problems in workers while protecting them from infectious materials. (2)

Unfortunately, as an RN, I first developed sensitivity to latex; I now have anaphylactic reaction to this substance. If I may detail just a few of my experiences regarding the above noted subject matter:

- A friend, a pediatric ICU nurse, had "sensitivity" to latex, as later pegged, related to her hospital exposure. She was painting her bathroom; it was latex paint. She died; she was only 33 years old!
- When I went to the dentist, I related many, many times, my anaphylactic reaction to latex. I don't know why they had nitrite and latex gloves, in that nitrite is an effective substitute
 - Twice!!! They used latex, although I asked, questioned, warned, had warnings put in my chart!!! Both times they had to use epinephrine on me, in that I stopped breathing. Interestingly, both times they, the doctors, did not know how to use an epi-pen! While gasping for breath, I had to administer it myself!

- Another time my dentist placed a device in my mouth. Before that I asked, again, if it had latex. He stated no. I could not breathe, and once again, I administered my own epi-pen, in that they didn't know what to do. As I was turning blue, the doctor, from what he said, was looking up the device on-line to see if it contained latex!
- During a root canal, again, begged, asked, looked at their gloves, I stopped breathing! After, once again, administering epi to myself, the "assistant" stated that she didn't touch me, she only handed the instruments and devices over to the dentist; she was wearing latex gloves!
- Airborne latex particles are potentially life-threatening!

I am pleased with the progress made regarding having epi-pens in the schools, in that I am also a District Nurse. However, I request:

1. Latex, as feasible, should be banned from medical institutions
2. Education regarding an anaphylactic reaction

I thank you for your time and consideration. Unfortunately, in this ever changing world, inundated by chemicals and other man-made or otherwise overused substances, more and more immune diseases and reactions are becoming apparent and a true health concern. I don't want to lose my life; I don't want anyone else, like my fellow nurse Kelly, to lose theirs.

Sincerely,

Coryne Wong

Coryne Wong, RN, PHN, CSN, DE, PN

(1) <http://latexallergyresources>

(2) [Latex Allergy: A Prevention Guide](#)

NIOSH Publication No. 98-113

Questions and Answers about identifying and preventing latex allergy.

I am writing to you in support of the Connecticut No Latex Bill HB 5347 with regards to latex regulations. I was diagnosed with a latex allergy when I was about 4 years old and over the course of my life I have watched it grow and progress from a reaction as simple as a rash to something as complex as temporary paralysis, tachycardia, anaphylaxis, potential kidney damage and so, so much more. This is, unfortunately, a progressive disease that has no cure and very few, very risky, treatments. I am not writing to you for sympathy, but contrarily to raise awareness so that you can make sure that nobody else has to go through what my family and I have been through.

Here is my story:

I was born premature and therefore, I had numerous health problems in infancy. Most likely, the combination of latex exposure (from latex gloves and equipment in the hospital) and my family history of latex allergies caused the onset of my allergy. Initially, I had simple contact dermatitis, so as long as I didn't touch a large amount of latex, then I wouldn't have a reaction. Unfortunately, when I was diagnosed, most doctors were not aware that latex was a progressive allergy, meaning that every exposure I had could potentially make my allergy worse. So as a result, I also did not have this information...

My allergy finally progressed to a new stage when I was 14; I began to have facial swelling. I noticed that I became ill when balloons were nearby and I was unable to use certain products that I then noticed contained latex. There was an incident where my dentist grabbed the wrong gloves (possibly due to her latex-glove-grabbing muscle memory) and I woke up the next morning with a swollen face and lips. I would get what seemed to be random bouts of food poisoning when eating at restaurants like Wendy's. Well, I now know that I was actually having gastro-anaphylaxis from the powdered and non-powdered latex gloves that they had been using. I learned very quickly what I reacted to and I adapted.

I had been semi-reaction-free for a few years until a hospital made a grave mistake. I was admitted to a hospital, about two years ago, because I had esophageal ulcers. Upon admittance, I was given a flu shot - a latex-laced flu shot (and yes, I had already warned them about my latex allergy). I spent the next few days in and out of consciousness with cycling bouts of heart palpitations, extreme fevers, and swelling that rendered one of my arms temporarily useless. I partially recovered (very slowly) and I thought that it was behind me, until my next hospitalization occurred in March of last year. I went in for a simple outpatient sinus surgery and wound up staying in the hospital for six days. I had been given the wrong IV (latex), had the wrong syringes used (latex), had been given medication that was housed in a latex container, and had many other unfortunate exposures. I woke up after the surgery just in time to save my own life. I felt liquid filling up my lungs, my legs, my arms, and my chest. I felt my whole body swelling up (ironically) like a balloon. Over the course of the next few days I had six doctors and countless nurses working around the clock trying to save my life. While I was fortunate enough to leave that hospital with my life, I also left with a great deal of irreparable damage.

Suddenly, at 22 years old, my life drastically changed. I had to be worried about doctor's offices (latex gloves), grocery stores (latex gloves and balloons -a

double whammy), the way my food was prepared and packaged (latex gloves, adhesives, and other things), the clothes I wore, and so much more.

I now have to call ahead to any restaurant that I want to eat at, even if the company has a No Latex Glove policy (which some large chain establishments do have). Why must I do this? Well, I think that this is best explained with an example: I wanted to go out to eat for my anniversary and I called ahead to a restaurant whose corporation has a No Latex glove policy (as a matter of fact, they even removed latex gloves from their purchasing availability). Guess what? Somehow, boxes and boxes and boxes of latex gloves had made their way into the restaurant's kitchen. I do not even want to think about what would have happened if I had trusted the corporate policy and just eaten there. (I later was able to speak to the Vice President of purchasing for this establishment, and they explained to me that allergic reactions were the number one reason why over 5 years ago they stopped allowing their restaurants to purchase latex gloves. However, they were not able to find out how this specific establishment had gotten these banned gloves.) Additionally, I have also had some gastro-anaphylaxis after eating food that was produced in a factory where latex gloves were used. Unfortunately, due to the lack of latex food handling regulations, finding out what products are made in facilities with latex gloves and finding safe products to eat is an incredibly difficult task.

Socially, this has been debilitating because I do not have the freedom to do something as simple as go out to lunch with my coworkers for one of their birthdays or eat at a wedding that has been catered by a restaurant that I have never heard of. These things, while seemingly insignificant, are pieces of our humanity that make us feel normal. This allergy has taught me that normalcy makes us feel safe, and so, when these pieces of our humanity are taken away from us we start to lose our sense of security both in a social context as well as with respect to our own health.

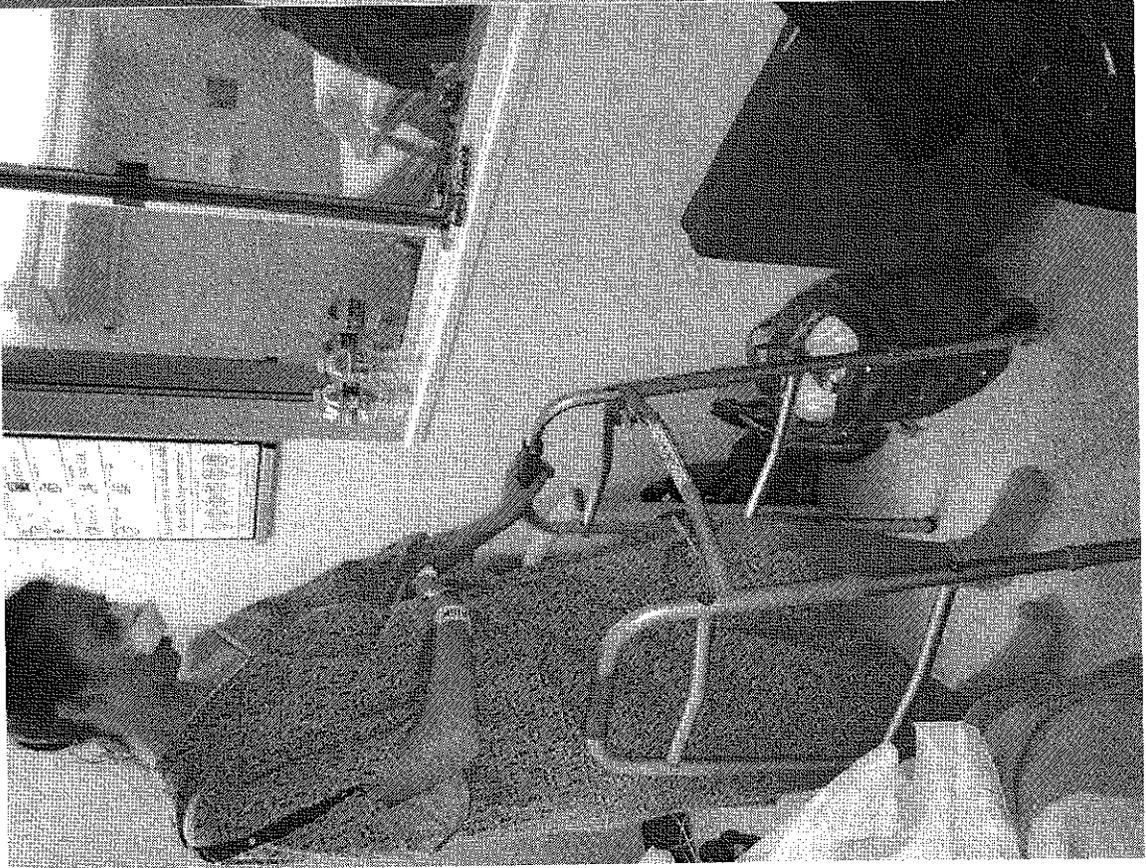
To make matters worse, if I am ever in need of emergency assistance, I will not be able to get it. Police officers, firefighters, and most importantly EMTs often times use latex gloves. My Medical ID bracelet doesn't do much good if they check it while wearing their latex gloves. In one year, I graduated college, temporarily became a quadriplegic, learned how to pee in a bedpan, had a crash cart called on me, and almost lost my life to my illness (which will most likely happen if things do not change). People like me are in great need of some help and are desperately looking for some hope.

Please do not read my case and think that this was a 1 in a million type of situation. It's not. If it was, then this bill would not have been put forward. If you do not believe me, then look on the American Latex Allergy Association's website under "Latex Allergy Stories." Or, if you search on Google, then you will see numerous testimonies just like mine. There have been too many of us whose lives have been risked or lost because of the unnecessary use of this allergen. Please, please, help us put a stop to it.

Thank you for your time,

Jillian LeMaster-Dwyer





TESTIMONY RE: HB5347
AN ACT PROHIBITING THE USE OF LATEX GLOVES IN FOOD BUSINESSES

Connecticut House of Representatives
February 2, 2015

Thank you for the opportunity to present written testimony regarding HB 5346 which would ban the use of latex gloves and utensils from food service. My name is Cindy Hesse and I am a hospital pharmacist who became allergic to natural rubber latex through exposure to latex gloves at work and through medical and dental procedures.

Banning the use of natural rubber latex gloves, utensils and other latex products in the food industry will provide the following benefits:

- 1) allow individuals with a latex allergy to safely purchase food;
- 2) prevent unnecessary exposure to latex to individuals required to wear gloves in their work; and
- 3) prevent unaware patrons from the inoculation and potential development of latex allergy.

A secondary outcome will be to decrease Workers' Compensation claims as well as potential law suits against restaurants.

Statistics vary by resource because latex allergy is not reported consistently and testing is unreliable. However, the CDC and American Latex Allergy Association (ALAA) estimate that 1-6% of the general population, up to 17% of health care workers, 38% of dental workers, and up to 68% of people with Spina Bifida have latex allergy. (1,2) A study published in 2014 indicates that 11.4% of elderly have latex allergy. (3) There is evidence that food industry workers' latex allergy rate is similar to health care workers.(4)

People at risk of developing latex allergy include:

- Health care workers
- Food service employees
- Rubber industry workers
- Patients with "atopic" conditions such as asthma, eczema, hay fever
- Patients who have undergone multiple procedures
- Workers in any environment with chronic latex exposure such as: restaurant/food industry, day care staff, hair salons, green house/agriculture workers, balloon and tattoo artists, security personnel, painters/artists, emergency response (police, fire fighters, EMTs), mortuary/funeral home staff, construction

Latex allergy ranges from mild (rash, runny nose) to severe (anaphylaxis/death). There is no cure for a latex allergy. The only treatment is avoidance of latex.(5) Medication is used for managing anaphylaxis or allergy symptoms, but cannot prevent reactions. Latex allergy has been proven to be progressive with repeated exposure. The person with contact latex allergy can transition to full anaphylaxis with a single exposure.

Latex allergy extends beyond latex gloves. According to the ALAA, there are over 40,000 consumer products that contain natural rubber latex. And the latex particles of many products become airborne which can lead to "occupational asthma." Approximately half of sensitized hospital workers develop latex asthma.(1)

Anecdotal reports of reactions to packaging commonly occur in the USA, but a report in the United Kingdom found 1/3 of food packaging contained natural rubber latex.(6)

Currently, the use of latex gloves is prohibited in food preparation in three states: Arizona, Oregon and Rhode Island. One significant consideration in Rhode Island's law was the reduction of Workers' Comp claims. According to allergist Anthony Ricci, MD, in a communication with the American Latex Allergy Association:

“... I was instrumental in convincing the administrators and medical directors of our community hospital (Kent Hospital) to clean the entire hospital and make it the only latex-safe hospital in Rhode Island. Our workers compensation cases went from approximately 80 prior to the change to zero since. This has resulted in significant cost savings. Many nurses and other health care professionals with latex allergy have returned to work at Kent Hospital....”

With respect to restaurants and other businesses, latex-free gloves and utensils are no longer more expensive than latex products and are frequently less expensive to purchase.

While use of latex gloves and balloons in health care environments has declined (but not eliminated), the use in other environments has increased. Today everyone has access to disposable latex gloves and the vast majority have no idea the gloves put them at risk of developing a life changing, irreversible allergy. These gloves are used by plumbers, hair stylists, restaurant workers, tattoo artists, house cleaners, day care staff, travel industry staff, police/fire /military staff, and more. Latex balloons provide cheap decoration for parties, fundraisers, charity events, and celebrations. These all are causing the next wave of new – and often preventable—patient groups with latex allergy.

As I mentioned, three states (AZ, OR and RI) have laws or regulations that ban latex use in restaurants / food industry. RI also mandates that all (non-food) businesses post warning if latex products are in use. Grass roots efforts are being organized to get legislation introduced. I am working with my local senator in California. Legislation has been introduced in 2015 in Hawaii in both senate and house (SB911 - Senator Suzanne Chun Oakland; HB1238 – Rep. Mele Carroll) and in Connecticut (HB 5347-Aman) to ban latex use in food industry. At this time, the Hawaii bills also include prohibition of the use of latex gloves in dental health facilities, health care facilities, by personnel providing ambulance services or emergency medical services as well as in food establishments.

MY PERSONAL STORY:

I graduated from pharmacy school in 1981 right as the AIDS frenzy began. I obtained latex allergy by wearing latex gloves as a hospital pharmacist and as a patient treated by dentists and physicians wearing latex gloves. I had risk factors: eczema, seasonal allergies and exposure to natural rubber latex gloves and medical/dental products. This is a progressive allergy: In 2003, I transitioned from a mild latex allergy (contact allergy with a rash on my hands) to full anaphylaxis from 2 bites of a restaurant meal that was prepared with latex gloves. I have had 3 episodes of life-threatening anaphylaxis from eating restaurant food prepared with latex gloves. The last episode happened after quizzing restaurant staff about latex use in their kitchen. Staff assured me that no latex gloves were used, but the next day the manager admitted that latex gloves were indeed used in chopping in the prep kitchen, just not in the final plating of my meal. I have also had two episodes of life-threatening anaphylaxis from a meal using pre-packaged ground turkey (cooked at home) and another occasion using jarred, pre-chopped garlic which I later verified with the manufacturers that latex gloves were used in processing.

As a person with latex allergy, I buy special latex-free underwear, clothing, socks, and shoes. I have removed as much latex as possible from our home: toys, grips on tools and utensils, mouse pads and computer supplies, Band-Aids and ACE wraps, latex-backed rugs, and much, much more. I struggle to find latex-safe and latex-allergy-knowledgeable dentists, physicians, labs, physical therapists, and retail pharmacies. I had a surgery cancelled in 2013 because my community hospital was not prepared to care for a patient like me. The anesthesiologist told me he had no idea which medications and equipment contained latex. (Surgery was successfully completed 3 months later at a university hospital; however, a delay in care could have been life-threatening.) I have struggled to find latex-safe work environments and have been discriminated against purely on my allergy and in violation of the ADA. I could not attend my state professional conference recently for continuing education due to latex use (food prep and room cleaning) at the hotel.

We plan family vacations to states where I can find safe hotels and restaurants. I call manufacturers of medications and pre-packaged food products to make sure they have not been produced, processed, or packaged with latex gloves or equipment – neither are required to be labeled by the manufacturer. I have to leave any store that has latex balloons on display and at one point could not shop in any local market due to balloons in all major grocery stores until one small market has accommodated my allergy.

Elimination of latex gloves, utensils and balloons in the food industry – farm to fork – by legislation would improve safety for those of us who have a latex allergy and could prevent development of latex allergy in others, including food service workers. Please support the proposed HB 5347 to ban natural rubber latex from food establishments.

Cynthia Hespe, RPh, FCSHP
5610 Marden Drive
Davis CA 95618
530/564-4647

References:

- 1) <http://www.cdc.gov/healthcommunication/ToolsTemplates/EntertainmentEd/Tips/LatexAllergy.html>
- 2) American Latex Association www.latexallergyresources.org
- 3) <http://www.immunityageing.com/content/11/1/7>
- 4) Journal of Food Protection, Vol 71, No. 11, 2008 Page 2336, Latex Glove Use by Food Handlers: The Case for Non-latex Gloves
- 5) <http://acaai.org/allergies/types/skin-allergies/latex-allergy>
- 6) <http://www.foodproductiondaily.com/Safety-Regulation/Latex-used-in-one-third-of-food-packaging-study-finds>

State regulation/law references:

RI: <http://law.justia.com/codes/rhode-island/2013/title-23/chapter-23-73>

AZ: see slide 24

<http://www.azdhs.gov/phs/och/fses/pdf/az-food-safety-food-code-requirements.pdf>

OR: see 3-304.15(E) <http://public.health.oregon.gov/HealthyEnvironments/FoodSafety/Documents/foodsantitationrulesweb.pdf>

Hawaii:

http://www.capitol.hawaii.gov/measure_indiv.aspx?billtype=SB&billnumber=911

http://www.capitol.hawaii.gov/measure_indiv.aspx?billtype=HB&billnumber=1238

Connecticut:

<http://www.cga.ct.gov/2015/TOB/H/2015HB-05347-R00-HB.htm>

Resources:

American Latex Allergy Association www.latexallergyresources.org

American Academy of Allergy Asthma & Immunology www.aaaai.org

American College of Asthma, Allergy and Immunology www.acaai.org

OSHA www.osha.gov/SLTC/lattexallergy/index.html

CDC/NIOSH Alert: Preventing Latex Allergic Reactions to Natural Rubber Latex in the Workplace

Smile

"We'll get you a Fresh Start"

RONALD J. ALBERT D.M.D.

February 2, 2015

Re: Proposed Bill HB 5347; An Act Prohibiting the Use of Latex Gloves in Food Businesses

To Whom It May Concern:

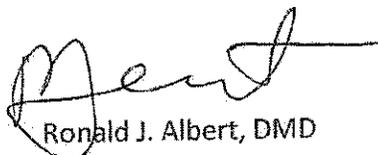
This letter is to support this proposed bill to prohibit the use of latex gloves in food businesses. Since we face similar situations when treating patients in dental offices, I was invited to write a testimony in favor of the proposed bill.

My office has been latex free for quite a few years. From clinical experience and literature reviews it was clear that the general population has been developing latex sensitivities and allergies (including powders and surface additives to improve handling). Our office eliminated use of latex gloves and dental dams so there would not be a surprise one day with a patient who had a newly discovered latex allergy. Allergy development with individuals may first seem harmless with a mild rash, yet one day results in anaphylactic response with continued exposure. By eliminating latex from our office, we removed the risk to triggering a life threatening response if a patient was unaware of allergy or concealed their history.

Anaphylactic responses could happen with individuals through contact of the skin or mucosal membranes. It could happen even after a single mild rash episode. Since our body's mucosa is more sensitive to allergic response than normal skin, an individual eating food prepared with latex gloves could have an anaphylactic response if they eat the food. Anaphylactic response primarily closes an individual's airway, restricting breathing. This is even worse since the primary contact is in the pharynx and epiglottis. If the airway is not relieved of swelling and respirations not supported during the event, it will result in lack of oxygen leading to brain damage or death.

It appears inappropriate that in food establishments preparing meals for others would use latex, considering the increased allergy and sensitivity in our population. Certainly if latex were used, a medical history or warning may be indicated. With the supply of alternate gloves for medical procedures and food preparation in good abundance, the only contraindication to using alternate material gloves would be convenience, operator comfort and expense. Risk management to food businesses should advise avoiding latex. If common sense does not prevail, then legislation is indicated.

Sincerely,



Ronald J. Albert, DMD

Smile

"We'll get you a Fresh Start"

RONALD J. ALBERT D.M.D.

February 2, 2015

Re: Proposed Bill HB 5347; An Act Prohibiting the Use of Latex Gloves in Food Businesses

To Whom It May Concern:

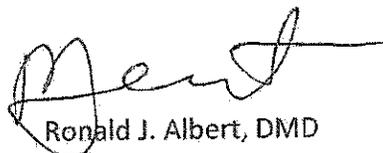
This letter is to support this proposed bill to prohibit the use of latex gloves in food businesses. Since we face similar situations when treating patients in dental offices, I was invited to write a testimony in favor of the proposed bill.

My office has been latex free for quite a few years. From clinical experience and literature reviews it was clear that the general population has been developing latex sensitivities and allergies (including powders and surface additives to improve handling). Our office eliminated use of latex gloves and dental dams so there would not be a surprise one day with a patient who had a newly discovered latex allergy. Allergy development with individuals may first seem harmless with a mild rash, yet one day results in anaphylactic response with continued exposure. By eliminating latex from our office, we removed the risk to triggering a life threatening response if a patient was unaware of allergy or concealed their history.

Anaphylactic responses could happen with individuals through contact of the skin or mucosal membranes. It could happen even after a single mild rash episode. Since our body's mucosa is more sensitive to allergic response than normal skin, an individual eating food prepared with latex gloves could have an anaphylactic response if they eat the food. Anaphylactic response primarily closes an individual's airway, restricting breathing. This is even worse since the primary contact is in the pharynx and epiglottis. If the airway is not relieved of swelling and respirations not supported during the event, it will result in lack of oxygen leading to brain damage or death.

It appears inappropriate that in food establishments preparing meals for others would use latex, considering the increased allergy and sensitivity in our population. Certainly if latex were used, a medical history or warning may be indicated. With the supply of alternate gloves for medical procedures and food preparation in good abundance, the only contraindication to using alternate material gloves would be convenience, operator comfort and expense. Risk management to food businesses should advise avoiding latex. If common sense does not prevail, then legislation is indicated.

Sincerely,



Ronald J. Albert, DMD

TESTIMONY RE: HB5347
AN ACT PROHIBITING THE USE OF LATEX GLOVES IN FOOD BUSINESSES

Connecticut House of Representatives
February 2, 2015

Thank you for the opportunity to present written testimony regarding HB 5346 which would ban the use of latex gloves and utensils from food service. My name is Cindy Hespe and I am a hospital pharmacist who became allergic to natural rubber latex through exposure to latex gloves at work and through medical and dental procedures.

Banning the use of natural rubber latex gloves, utensils and other latex products in the food industry will provide the following benefits:

- 1) allow individuals with a latex allergy to safely purchase food;
- 2) prevent unnecessary exposure to latex to individuals required to wear gloves in their work; and
- 3) prevent unaware patrons from the inoculation and potential development of latex allergy.

A secondary outcome will be to decrease Workers' Compensation claims as well as potential law suits against restaurants.

Statistics vary by resource because latex allergy is not reported consistently and testing is unreliable. However, the CDC and American Latex Allergy Association (ALAA) estimate that 1-6% of the general population, up to 17% of health care workers, 38% of dental workers, and up to 68% of people with Spina Bifida have latex allergy. (1,2) A study published in 2014 indicates that 11.4% of elderly have latex allergy. (3) There is evidence that food industry workers' latex allergy rate is similar to health care workers.(4)

People at risk of developing latex allergy include:

- Health care workers
- Food service employees
- Rubber industry workers
- Patients with "atopic" conditions such as asthma, eczema, hay fever
- Patients who have undergone multiple procedures
- Workers in any environment with chronic latex exposure such as: restaurant/food industry, day care staff, hair salons, green house/agriculture workers, balloon and tattoo artists, security personnel, painters/artists, emergency response (police, fire fighters, EMTs), mortuary/funeral home staff, construction

Latex allergy ranges from mild (rash, runny nose) to severe (anaphylaxis/death). There is no cure for a latex allergy. The only treatment is avoidance of latex.(5) Medication is used for managing anaphylaxis or allergy symptoms, but cannot prevent reactions. Latex allergy has been proven to be progressive with repeated exposure. The person with contact latex allergy can transition to full anaphylaxis with a single exposure.

Latex allergy extends beyond latex gloves. According to the ALAA, there are over 40,000 consumer products that contain natural rubber latex. And the latex particles of many products become airborne which can lead to "occupational asthma." Approximately half of sensitized hospital workers develop latex asthma.(1)

Anecdotal reports of reactions to packaging commonly occur in the USA, but a report in the United Kingdom found 1/3 of food packaging contained natural rubber latex.(6)

Currently, the use of latex gloves is prohibited in food preparation in three states: Arizona, Oregon and Rhode Island. One significant consideration in Rhode Island's law was the reduction of Workers' Comp claims. According to allergist Anthony Ricci, MD, in a communication with the American Latex Allergy Association:

“... I was instrumental in convincing the administrators and medical directors of our community hospital (Kent Hospital) to clean the entire hospital and make it the only latex-safe hospital in Rhode Island. Our workers compensation cases went from approximately 80 prior to the change to zero since. This has resulted in significant cost savings. Many nurses and other health care professionals with latex allergy have returned to work at Kent Hospital...”

With respect to restaurants and other businesses, latex-free gloves and utensils are no longer more expensive than latex products and are frequently less expensive to purchase.

While use of latex gloves and balloons in health care environments has declined (but not eliminated), the use in other environments has increased. Today everyone has access to disposable latex gloves and the vast majority have no idea the gloves put them at risk of developing a life changing, irreversible allergy. These gloves are used by plumbers, hair stylists, restaurant workers, tattoo artists, house cleaners, day care staff, travel industry staff, police/fire /military staff, and more. Latex balloons provide cheap decoration for parties, fundraisers, charity events, and celebrations. These all are causing the next wave of new – and often preventable—patient groups with latex allergy.

As I mentioned, three states (AZ, OR and RI) have laws or regulations that ban latex use in restaurants / food industry. RI also mandates that all (non-food) businesses post warning if latex products are in use. Grass roots efforts are being organized to get legislation introduced. I am working with my local senator in California. Legislation has been introduced in 2015 in Hawaii in both senate and house (SB911 - Senator Suzanne Chun Oakland; HB1238 – Rep. Mele Carroll) and in Connecticut (HB 5347-Aman) to ban latex use in food industry. At this time, the Hawaii bills also include prohibition of the use of latex gloves in dental health facilities, health care facilities, by personnel providing ambulance services or emergency medical services as well as in food establishments.

MY PERSONAL STORY:

I graduated from pharmacy school in 1981 right as the AIDS frenzy began. I obtained latex allergy by wearing latex gloves as a hospital pharmacist and as a patient treated by dentists and physicians wearing latex gloves. I had risk factors: eczema, seasonal allergies and exposure to natural rubber latex gloves and medical/dental products. This is a progressive allergy: In 2003, I transitioned from a mild latex allergy (contact allergy with a rash on my hands) to full anaphylaxis from 2 bites of a restaurant meal that was prepared with latex gloves. I have had 3 episodes of life-threatening anaphylaxis from eating restaurant food prepared with latex gloves. The last episode happened after quizzing restaurant staff about latex use in their kitchen. Staff assured me that no latex gloves were used, but the next day the manager admitted that latex gloves were indeed used in chopping in the prep kitchen, just not in the final plating of my meal. I have also had two episodes of life-threatening anaphylaxis from a meal using pre-packaged ground turkey (cooked at home) and another occasion using jarred, pre-chopped garlic which I later verified with the manufacturers that latex gloves were used in processing.

As a person with latex allergy, I buy special latex-free underwear, clothing, socks, and shoes. I have removed as much latex as possible from our home: toys, grips on tools and utensils, mouse pads and computer supplies, Band-Aids and ACE wraps, latex-backed rugs, and much, much more. I struggle to find latex-safe and latex-allergy-knowledgeable dentists, physicians, labs, physical therapists, and retail pharmacies. I had a surgery cancelled in 2013 because my community hospital was not prepared to care for a patient like me. The anesthesiologist told me he had no idea which medications and equipment contained latex. (Surgery was successfully completed 3 months later at a university hospital; however, a delay in care could have been life-threatening.) I have struggled to find latex-safe work environments and have been discriminated against purely on my allergy and in violation of the ADA. I could not attend my state professional conference recently for continuing education due to latex use (food prep and room cleaning) at the hotel.

We plan family vacations to states where I can find safe hotels and restaurants. I call manufacturers of medications and pre-packaged food products to make sure they have not been produced, processed, or packaged with latex gloves or equipment – neither are required to be labeled by the manufacturer. I have to leave any store that has latex balloons on display and at one point could not shop in any local market due to balloons in all major grocery stores until one small market has accommodated my allergy.

Elimination of latex gloves, utensils and balloons in the food industry – farm to fork – by legislation would improve safety for those of us who have a latex allergy and could prevent development of latex allergy in others, including food service workers. Please support the proposed HB 5347 to ban natural rubber latex from food establishments.

Cynthia Hespe, RPh, FCSHP
5610 Marden Drive
Davis CA 95618
530/564-4647

References:

- 1) <http://www.cdc.gov/healthcommunication/ToolsTemplates/EntertainmentEd/Tips/LatexAllergy.html>
- 2) American Latex Association www.latexallergyresources.org
- 3) <http://www.immunityageing.com/content/11/1/7>
- 4) Journal of Food Protection, Vol 71, No. 11, 2008 Page 2336, Latex Glove Use by Food Handlers: The Case for Non-latex Gloves
- 5) <http://acaai.org/allergies/types/skin-allergies/latex-allergy>
- 6) <http://www.foodproductiondaily.com/Safety-Regulation/Latex-used-in-one-third-of-food-packaging-study-finds>

State regulation/law references:

- RI: <http://law.justia.com/codes/rhode-island/2013/title-23/chapter-23-73>
AZ: see slide 24
<http://www.azdhs.gov/phs/oeh/fses/pdf/az-food-safety-food-code-requirements.pdf>
OR: see 3-304.15(E) <http://public.health.oregon.gov/HealthyEnvironments/FoodSafety/Documents/foodsantiationrulesweb.pdf>
Hawaii:
http://www.capitol.hawaii.gov/measure_indiv.aspx?billtype=SB&billnumber=911
http://www.capitol.hawaii.gov/measure_indiv.aspx?billtype=HB&billnumber=1238
Connecticut:
<http://www.cga.ct.gov/2015/TOB/H/2015HB-05347-R00-HB.htm>

Resources:

- American Latex Allergy Association www.latexallergyresources.org
American Academy of Allergy Asthma & Immunology www.aaaai.org
American College of Asthma, Allergy and Immunology www.acaai.org
OSHA www.osha.gov/SLTC/lattexallergy/index.html
CDC/NIOSH Alert: Preventing Latex Allergic Reactions to Natural Rubber Latex in the Workplace