

The Westgate Case.

CRITIQUE OF THE RESPONSES OF BA AND CAA TO THE CORONER'S REPORT TO PREVENT FUTURE DEATHS.

*Frank Cannon - April 2015*

The first point of decision is whether the responses meet the terms of the Coroners Regulations.

The BA response states that the Response is under regulation 29 (3) (b). By definition that implies that BA propose to take no action, although they are too cowardly to say so explicitly. However under that paragraph of the regulations they must give reasons for their refusal to take action. Again not explicitly, BA simply recite the outcomes of the COT and Cranfield Reports, although why BA keeps thinking that COT and Cranfield were in any way exonerative of the industry defies belief. As we shall see when we come to criticize the CAA, there is absolutely no cause for complacency.

The real stunning admission by BA is when BA lectures the Coroner as to why he should not have issued his Report at all.

“The available evidence does not suggest that organophosphate chemicals are present in cabin air in sufficient quantities to pose a risk to health. The evidence with which you have been presented and which led to the issue of the Report unfortunately was selective and provided by only one Interested Party. We regard the future course of the investigation as an opportunity to provide you with a balanced and fully evidence-based view on the Matters of Concern.”

The first sentence is a crucial admission that the industry cannot now hide: that cabin air does contain organophosphates at all. To aircrew who breathe cabin air all the time, this is a terrifying thought. As Professor Abou-Donia, an eminent neurotoxicologist, says “every breath is a dose”. So the level of organophosphates, any level, is pretty important when you have to breathe it all the time. And since they do admit that cabin air is contaminated, should they not warn passengers and let them take the decision themselves as to whether they wish to be so exposed?

The remainder of this paragraph is critical of the Coroner for issuing his Report based solely on a “one-sided view.” However what the BA letter overlooks is that the evidence I submitted to the Coroner included details of the Cranfield report and the COT conclusions. I also included official material issued by BA and CAA themselves on the bleed-air issues. So it is difficult to see any validity underlying this assertion by BA.

Before leaving the BA response it is noteworthy that BA took the full 56 days as provided by the regulations to issue its response – a response which contains no substance or new thought and which could as easily have been issued weeks ago. That alone is cause for contempt.

While the BA response is derisory, the CAA response gets a full ten points for at least trying to “pad out” its response to look like the real thing.

Again, posted on the Friday, it arrived in the nick of time to make the deadline of 56 days.

The report is legally deficient as it does not state or imply that the CAA is, or is not, taking any action on the Coroner’s Report. On the one hand there is an implication that they propose to do nothing, while also stating that they will work with the new EASA campaign to measure the contamination of bleed-air. As they do not say whether the response is under paragraph 29 (3) (a) (to take action and say what action they will take) or under paragraph 29 (3) (b) (to take no action but say why) they make their response as “all things to all men.” You can read it both ways. And that is pretty cowardly, and an insult to the intelligence of anyone who reads this.

The first big event they seize on is, as expected, the newly proposed EASA cabin air study. This study is a waste of taxpayers money. There have been many studies of course and all of them have reported toxic contamination of bleed-air. So to order yet another study is an insult. But it could be argued that it buys the industry another 2 years and I suppose that is important to them.

I do not propose to go through all the matters mentioned in the Annexe. However there are a few “gems” which demonstrate either an arrogance or naivety depending upon which view you may care to take.

Take this statement at C Cabin Pressure

13. The pressurisation ensures that the oxygen level in the cabin air is adequate to meet the respiratory needs of healthy passengers and crew. The flow of air required to ventilate the cabin far exceeds that required to maintain an adequate level of oxygen.

One will be surprised to read that sufficient oxygen is supplied only to meet the needs of “healthy” passengers (which is actually a true statement). But when they sell tickets they do not state that only “healthy” passengers need apply. There is implied in this statement that basically a generally *insufficient* supply of oxygen is supplied. This is something we are currently working on. But what an admission!! The sick, and elderly and infants and babies, and pregnant mums all fly, and they would all require more oxygen than “healthy” passengers might require

The listing of all the Enquiries or Studies to date is worthy of criticism as follows.

18 Australian Senate. In response to the Senate, BAe redesigned the air circulation system in the BAe146. Does that show the industry in a good light?

19 House of Lords Committee. In response to concerns the Aviation Health Unit

was set up (which did absolutely “didley-do” about bleed-air), airlines were encouraged to collect data on cabin air quality (which they have failed to do), and that regulators consider requiring higher standards of cabin air (which they failed to do). Hardly a crumb of comfort for the Coroner here.

21 CAA report on Cabin Air Quality. *“Analysis of deposits from the cabin air supply ducts of two BAe 146 aircraft found compounds consistent with the pyrolysis products of engine oil.”* This devastating report was buried by the industry.

22 Aviation Health Working Group (AHWG) The only notable statement the CAA make here is that this Group passed the buck to the Department of Health, who in turn passed the buck to COT.

23 Committee on Toxicity (COT) This is stated to be an independent scientific committee. Members are appointed by the government, and asked to report to the government. How long would members remain as members if they provided advice that the government didn’t want to hear? Independent? Their preliminary look in 2007 included:

23.1 *It was not possible to confirm a causal relationship between cabin air exposures and ill-health, but there was evidence of a plausible association between smoke/fume contamination incidents and acute health symptoms.*

23.2 *In view of the uncertainty about the chemicals released in fume incidents, any exposure monitoring should address a full range of possible contaminants and not focus on any single chemical group or compound.*

23.3 *Further research was needed to obtain objective measures of exposure but should not focus on OPs.*

23.4 *Further epidemiological research on neuropsychological impairment in pilots was warranted, although the evidence to date did not support acute or chronic health effects due to cabin air contamination incidents.*

I cannot see anything there which may have dissuaded the Coroner from issuing his report, even although I summed up for him the COT 2007 position. However what the CAA has omitted, perhaps conveniently, from this summary, is that in 2007 COT advised the government to carry out monitoring of crew health, which they have singularly failed to implement.

They then make more detailed mention of the EASA monitoring study. This will be a random monitoring study again, like Cranfield and IOM. Since the monitoring never covers a whole flight from doors closed to doors open, one never knows whether the reading was a peak or trough of exposure. Readings that were never captured could have been higher or lower. We will never know.

What is significant about the responses is what they don’t say. They do not seek to address the findings of the Westgate Case-Study. This included devastating evidence of brain, heart and peripheral nerve damage.

The CAA does not attempt to address the sick and grounded aircrew.

In conclusion the Coroner is more likely to be reinforced in his concern than not when he reads this response, and especially more so if a proper trial of the evidence is allowed to take place.