

Letters to the Editor

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Potential Exposures to the Chemical, Diacetyl, in Connecticut Workplaces

Letter to the Editor: Exposure to the butter flavoring chemical, diacetyl, may put people at risk of developing *bronchiolitis obliterans*. Clusters of patients with bronchiolitis obliterans have been found among workers exposed to this chemical in two industries, microwave popcorn factories and flavoring plants. Occupational health experts are concerned that there may be exposures in other industries that use diacetyl, such as those dealing with cookies/snack foods, frozen foods, dairy products, beverages, and candies/confections.

Bronchiolitis obliterans, a rare and debilitating disease, results from destruction of the small airways in the lung, leading to respiratory insufficiency. Pulmonary function tests reveal fixed obstructive lung disease, while the diffusing capacity is often normal. The disease is irreversible.

The occurrence of this debilitating respiratory illness in these workers far exceeds that which would be expected. According to Dr. Richard Kanwal, a physician with the National Institute of Occupational Health and Safety (NIOSH), "The rate of disease is striking ... that's enough to say this exposure is really bad."

Employees in Connecticut are at risk of exposure to diacetyl. Over 50 workplaces in the state are on a diacetyl alert list compiled by NIOSH. Yet, the state has taken no action on this issue.

Connecticut physicians, therefore, may be the first line of defense in protecting workers at risk in the state. Since the presenting symptoms and signs mimic many common respiratory diseases, such as asthma, the treating physician needs to consider workplace exposures when evaluating patients presenting with respiratory complaints.

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Dr. Moss is a retired Yale occupational medicine physician. She has begun to pursue an interest in writing about health-related issues.

Relative Importance of Gender in Patients' Selection of an Obstetrics and Gynecology Provider

Letter to the Editor: With interest we read the article by Guile et al [*Conn Med* 2007; 71:325-32.] on the influence of physician gender in women's selection of obstetricians and gynecologists.¹ While the authors further refined the patient's choice based on such qualities as physician appearance, age, experience, empathy, etc., it would have been informative to know what effect patient education and income had in her preference for a male or female physician. We sense such factors do influence a woman's choice as a result of our research into the changing ratio of male and female physicians.

Six years ago, when writing our master's thesis on the Feminine Transformation of American Medicine, we noted that new female physicians had already "packed" training programs in certain subspecialties, especially Ob/Gyn. While not our intent to study doctor gender and patient choice, it did appear from our interviews that better educated and more affluent women seemed more likely to prefer female Ob/Gyn physicians. Ironically, hospital nurses seemed less influenced by physician gender. (Incidentally, we noted a male corollary on the issue of physician gender; the more educated man seemed less likely influenced by the gender of his urologist.)

We would like to know if Dr. Guile and his group recognized any effect of education and income on a woman's selection of an Ob/Gyn doctor.

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REFERENCE:

1. Guile MW, Schnatz PF, O'Sullivan DM: Relative importance of gender in patients' selection of an obstetrics and gynecology provider. *Conn Med* 2007; 71:325-32.

Re-energizing Our House of Delegates Meetings

Letter to the Editor: Like many delegates I look forward to the CSMS-HOD meetings. It's satisfying to see doctors from around the state and listen to their concerns.

Like some delegates I enjoy writing up a resolution and presenting it. Even when one of my resolutions is rejected the counter arguments and discussions are always enlightening. What is disappointing is how few resolutions