



1996. Lori Bosarge

Lori Bosarge and her husband Dennis intended to make the house where Dennis grew up in Coden, Alabama, a quarter mile from Portsville Bay, their forever home. After Hurricane Katrina, they rebuilt the hurricane shutters, repainted, enclosed the roof eaves, and replaced the roof. The satsuma tree bore over 200 fruit annually—it died in 2010 after the BP disaster.

“Never compare resilience from a storm with an oil disaster. I can rebuild after a storm, but life after toxins is an everyday life sentence for the rest of my life.” ~ Lori Bosarge



1997. Courtesy Lori Bosarge

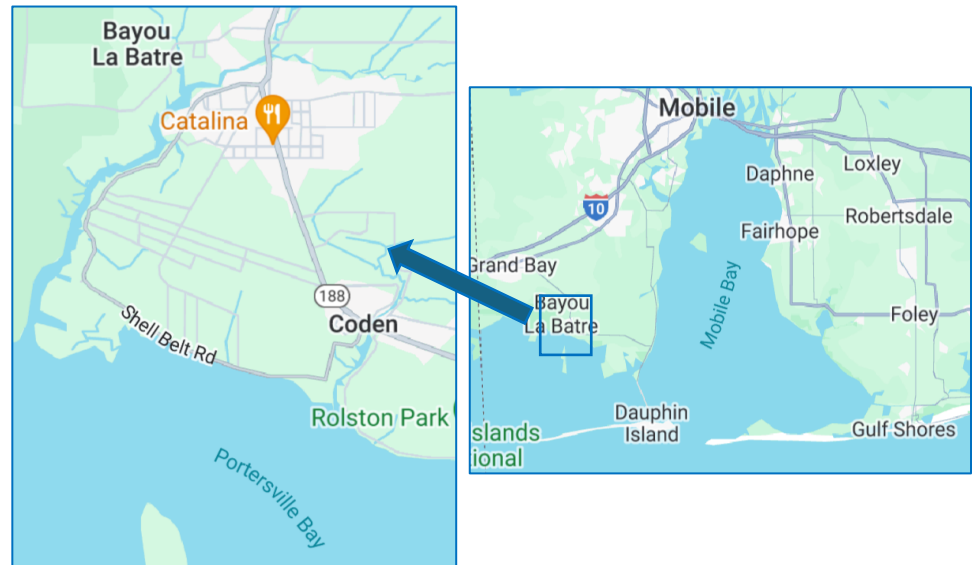


2006. Lori Bosarge

From May to August 2010, there were five airboats with dispersant tanks that ran up and down the bay from Bayou La Batre to Dauphin Island, Alabama, daily. Lori could hear the boats from their home. Sometimes she and Dennis went down to the coast to watch as the boats sprayed in Portersville Bay, but they stopped because they would both get sore throats.



When the prevailing southwest wind blew from the Gulf coast, Lori could tell when BP oil spill response crews were spraying Corexit dispersants because the sweet citronella chemical smell penetrated her home, despite all the closed windows and doors. That smell always made her throat start to close.



Health issues include reoccurring itchy skin rashes, hair loss, permanent scarring, asthma, bronchitis, blurry vision, nose bleeds, inflammation of the kidneys, feeling sick and fatigued, upset stomach, bad headaches, memory loss, vertigo, dizziness, seizures, and blackouts.



In mid-July 2011, her left leg and arms felt like “reptile skin.” A small blister on her leg turned into a large, draining lesion and her arms were blistering and raw. The rash spread across her shoulders and back. The Mayo Clinic could not determine the cause. In September, worried she might lose her leg—or life—she visited a medical doctor trained in chemically-caused illnesses. He tested her for oil chemicals and began an immediate chemical detoxification treatment. After four weeks, the swelling in her leg was greatly reduced and the lesion was slowly healing, the rashes had settled down, and she was sleeping at night.



Top: Back and right shoulder.
Left: Legs below the knees, ankles, feet, and toes.

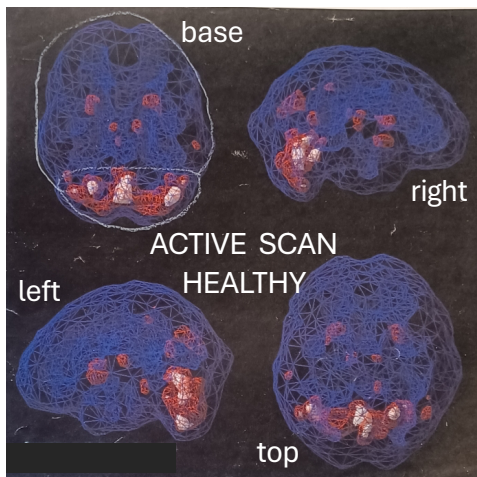
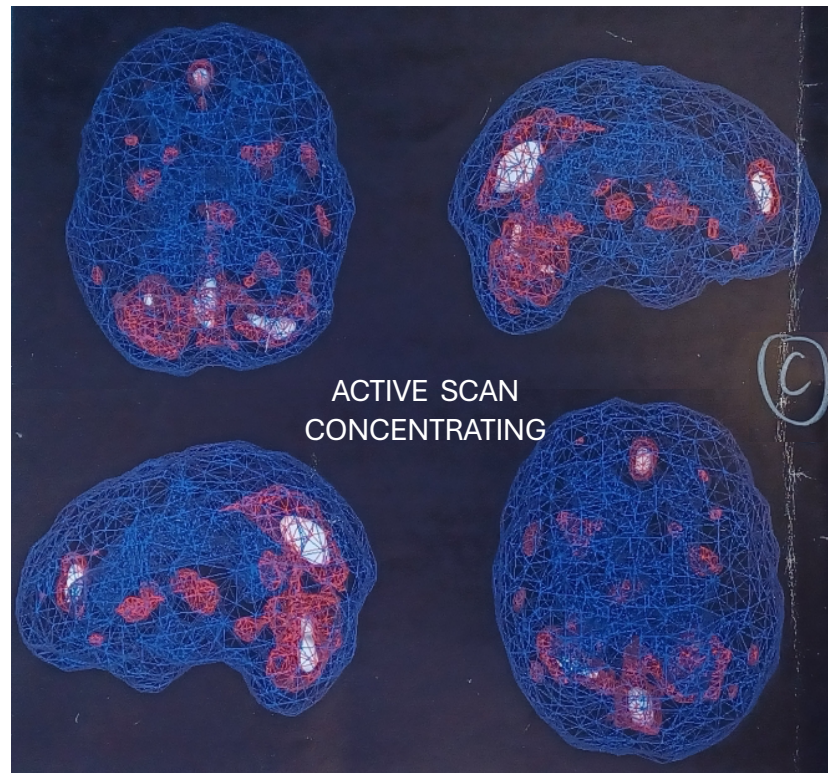
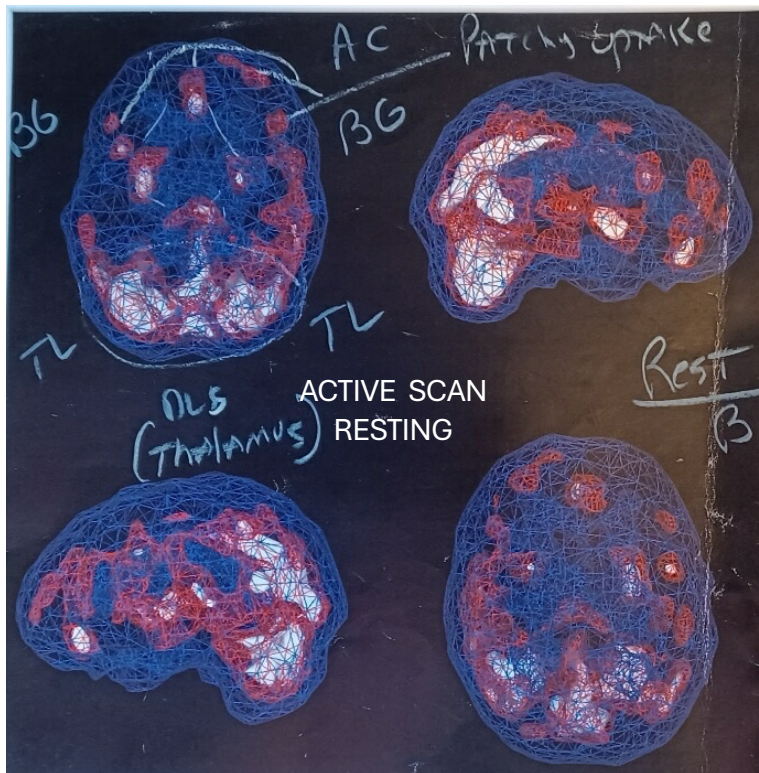


July 2011. Photos courtesy Lori Bosarge



Top: Left forearm.
Left: Left leg lesion the day Lori went to the hospital (July 18, 2011).

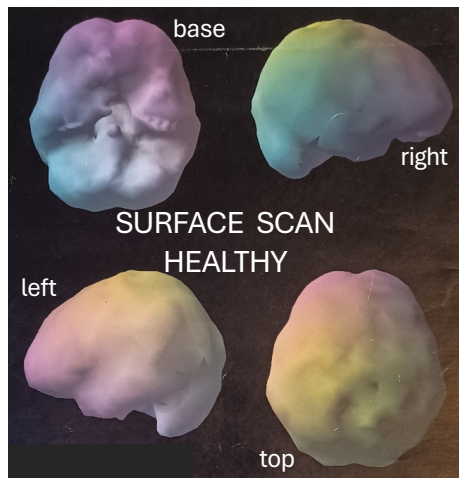
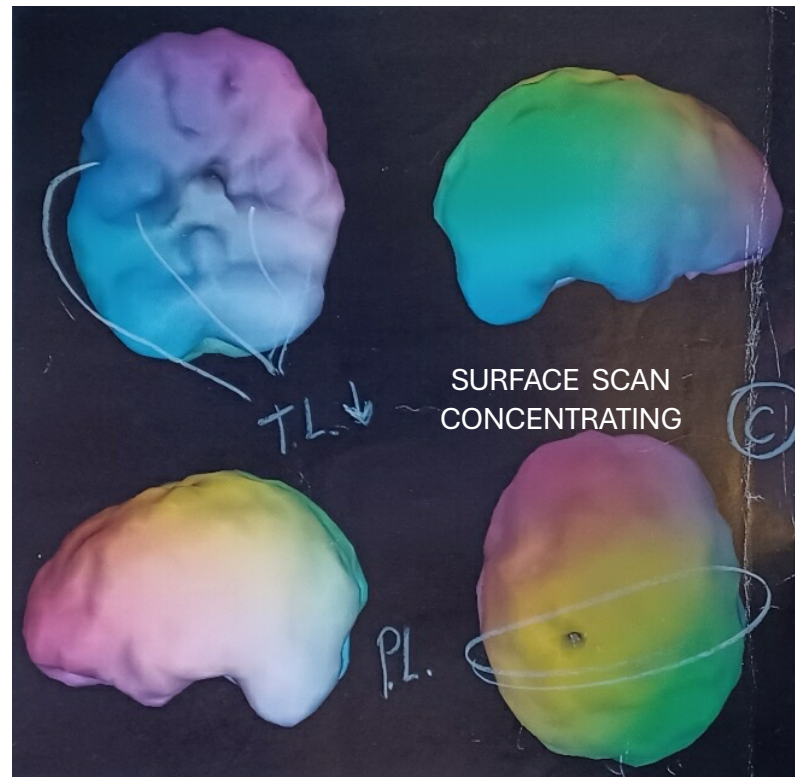
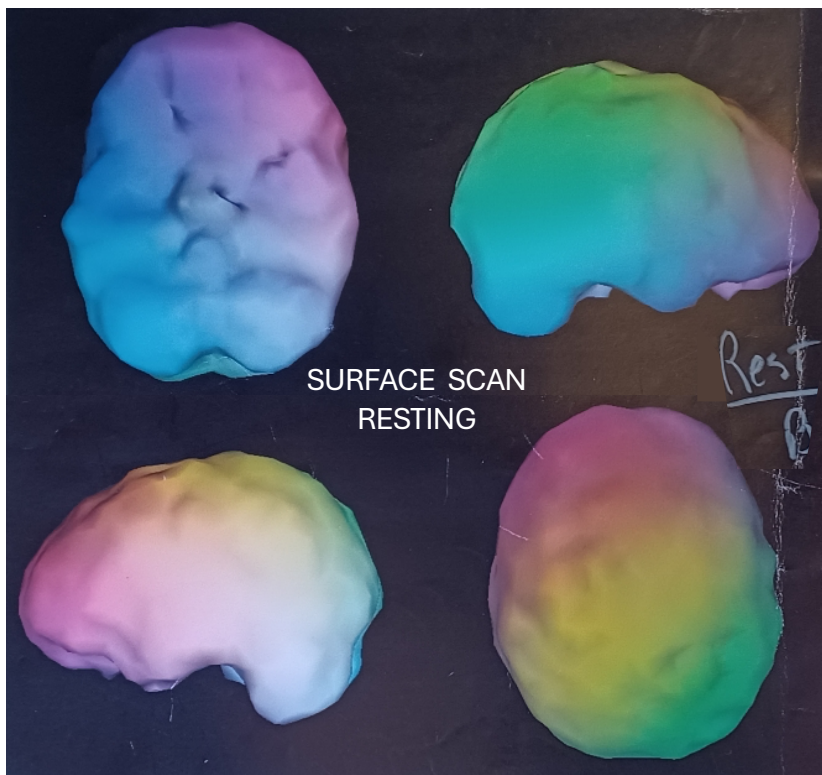




In 2016, when Lori started having seizures, her medical doctor requested brain SPECT scans to evaluate seizures, brain injury, inflammation, memory loss, chemical exposure, and more. These **active scans** show (lower left) **healthy** activity in a female brain, ages 51–70, compared to Lori’s brain scan **resting** (upper left) and **concentrating**, i.e., active (upper right). In each set of scans, images show clockwise from upper left: the base (bottom), right side, top, and left side of the brain. In the scans, blue is average activity and red (or red and white) are the most active parts of the brain. First, the areas of patchy increased activity of the Anterior Cingulate (AC, in both), the Basal Ganglia (BG, resting) and the Deep Limbic System (DLS or thalamus, resting) suggest prior emotional trauma or toxic exposure. Second, the diamond pattern in the base scan resting also may be associated with past emotional trauma or stress. Third, the decreased activity in the temporal lobes (TL) may be associated with problems with cyclical mood disorders, irritability, and memory loss.

2017. Brain SPECT scans courtesy Lori B.





Surface scans show (lower left) topography of a **healthy** brain surface (color not important) in a female brain, ages 54–58, compared to Lori’s brain **resting** (upper left) and **concentrating**, i.e., active (upper right). Again, the images show clockwise from upper left: the base, right side, top, and left side of the brain. The pits and holes in her temporal lobe (TL) and parietal lobe (PL) identified areas of atrophy or shrinking of previously injured brain tissue associated with hearing, sound, and the auditory pathway and with sensations like touch, pressure, and pain, consistent with Lori’s active SPECT scans. The temporal lobe plays a key role in using language and communicating, processing emotions, and accessing memories. The parietal lobe integrates sensory information, including touch, temperature, pressure and pain, visuo-spatial orientation, and ability to speak or write languages. Her doctor diagnosed her with “**T65-Toxic effect of other and unspecified substances**” and “**R94-Abnormal brain scan.**” He recommended many holistic ways to reduce stress, detoxify and balance her brain, and improve her quality of life.

2017. Brain SPECT scans courtesy Lori B.



The Lori Bosarge Story



Coden, AL. 2014



2012. Bayou La Batre, AL

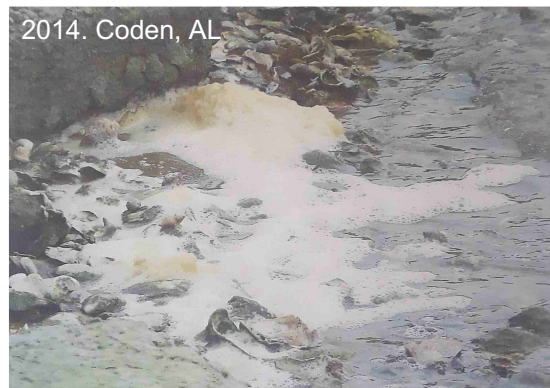


2013

Water bottle, tar ball
Bayou La Batre, AL



Coden, AL. 2015



2014. Coden, AL



Coden, AL. 2015

The foamy aftermath of dispersant spraying was photo-documented annually by Lori Bosarge. She collected samples in 2012 when the City of Bayou La Batre dug up the sand near the boat ramp where Lori had been sprayed. Chemical analysis detected weathered Macondo well oil—the oil that had spilled in 2010. A tar ball from the same area in 2013 was nearly as large as a water bottle. Lori called the Coden waterfront, where she and Dennis had watched the dispersant spraying operations in Portsville Bay, “Cesspool Shores.” She said, “People would drive out to the beach area and fish even though the stench of death was in the air. There were never any signs to warn people not to swim or fish. The land has now been swallowed by the sea.”





Other coastal residents also documented dispersant spraying in nearshore waters and staging operations in neighborhoods long after use in federal waters stopped in mid-July. Dispersant spraying operations in coastal waters created a unique health risk to workers and residents. Oil-dispersant mixtures were readily absorbed across skin. Extremely high levels of oil were found in exposed people's blood in summer and fall 2010.





In 2010 across the Gulf coast, hundreds of thousands of people encountered oil-dispersant mixtures by breathing air laden with aerosols, mists, and particulates, or by wading or swimming in contaminated seawater, or by walking or sitting on the white sand beaches, unaware that a thin film of oil-dispersant had coated grains of sand washed by the tide or dusted by aerial fallout. The medical community was largely complicit. The wife of one sick worker and resident testified, “My husband’s doctor had a frank and candid conversation... [The doctor] explained that he couldn’t write anything on paper to identify the cause of James’ illnesses, because legally he couldn’t prove that BP made him sick with the dispersants that they used on the oil spill. He explained, however, that something very similar happened to him 35 years ago when he was a medic in the Vietnam War. He was sprayed with Agent Orange, and he and several of the men he was caring for had similar symptoms, including respiratory problems and skin rashes. He explained that James and others were sprayed with a chemical that—like with Agent Orange—the government authorized, and there is no process to address it. He explained that BP and the government don’t want to diagnose and treat them because then they would in turn be admitting that they got us sick.” (Betsey Miller affidavit, 2015, Government Accountability Project, Deadly Dispersants Addendum)

