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SURFSIDE

A year later, town still discussing sand site

BY CRYSTAL CHEW
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About this time last year, Surfside residents were displeased to find a significant amount of new sand from a construction site dumped on their beach. Since then, the sand has been a hot topic and has yet to be removed.

Last March, Fort Capital, a real estate investment management company based in Miami, dug up sand from underneath the construction site on 9011 Collins Ave., the site of a hotel and condominium called the Surf Club.

Florida law says excavated sand must be placed near the site from which it came. As such, the developer spread the sand over Surfside's public beach.

The state's law also says the sand must be compatible with the existing sand, but residents believed the

sand was completely different, even calling it dirt. They voiced their concerns about the toxicity of the sand during various town hall meetings and claim that they find debris like metal nails and concrete boulders on a daily basis, even after numerous sand sifting activities.

Town officials convened a committee last June to address the residents' concerns. After four months of meetings, the committee recommended to the town commission that the sand be removed and placed in the dunes. The commission approved the measure unanimously in September.

By the beginning of this year, no action has been taken to remove the sand. Surfside officials and the town manager say the conditions to remove the sand have changed, showing reports of no health hazards and a dis-



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FOCUS OF COMPLAINTS: A 15-year resident of Surfside claims this photo shows metal debris found in dry sand and in the water at low tide. She thinks the sand should be moved into the dunes or off-site.

crepancy in estimated costs to relocate it.

In February, the town held a special meeting de-

voted to discussing the sand. They unanimously approved an ordinance to urge the Florida Legislature and

state Department of Environmental Protection to establish chemical testing standards prior to issuing a permit that authorizes the transfer and placement of excavated sand onto a public beach.

Then they addressed amendments for the town's standards on sand placed on their beach for future purposes, preventing a repeat of this issue.

"The purpose of this ordinance is to protect the health of the residence of Surfside and visitors by propagating regulations that are more comprehensive than the requirements of DEP for sand placed on the beach as a result of coastal construction," said Jane Graham, the assistant town attorney.

Currently in Florida, there are few regulations on the composition of sand placed on beaches and no

chemical testing requirements. The town decided to amend their own standards to create stricter rules for their beach.

With the exception of certain wording and a disagreement over what color the sand should be, residents in Surfside were pleased.

"Let me commend you on being probably the first community in the state to actually have something in this nature," said David Raymond, a Surfside resident who worries about lead in the sand and the size of the dunes. "I think you've come up with a great ordinance for first reading."

But the majority of the meeting was spent discussing sand relocation. Some residents felt that too much time has already been spent discussing the sand.

•TURN TO SAND, 15NE

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"There wasn't one word of negative comment from any citizen then," he said. "We've made a big to-do, maybe out of something we should make a big to-do out of, but it's been overblown."

Others grow increasingly frustrated as the days pass, and the sand continues to sit on the beach.

Deborah Cimadevilla, a 15-year resident of Surfside, hired attorneys.

"I wanted to have legal representation to hold the town accountable," said the mother of two young children.

In hopes to help the town solve this ongoing issue, attorney Alexander Tachnes of Fort Capital Management, representing the Surf Club, offered \$250,000 to purchase new sand under two conditions:

- The existing sand not be removed from the beach, since the beach is already

depleted.

- Cimadevilla and her attorneys enter into a settlement agreement and drop their objections with regards to the sand issue.

"There's nothing wrong with the sand, and there has been no evidence to prove otherwise," said Tachnes, who noted that Surf Club is not legally obligated to do anything. "We would not want to be selling multimillion-dollar condos to residents who will be living there with a beach that has a million problems."

However, some residents disagreed with that solution.

"The safe option is to completely remove it," said Cimadevilla, who has gone out to the beach with a metal detector and found numerous items she considers dangerous. "We want the best beach, and that will do it."

The discussion on sand placement continued on March 11, when both Vice Mayor Eli Tourgeman and Commissioner Barry Cohen urged the developers to remove the sand.

"We can't face our resi-

dents anymore with this,"

said Cohen, who recalls a time early last year when representatives from the development company stated that they would fix the problem. "I think it's their responsibility to correct the situation that they've created."

Michael Kashtan, general counsel for Fort Capital, noted that the company has responded to all the issues presented over the last year and believed the sand to be problem-free.

"We were told the beach was clean," Kashtan said. "We

are with you. We want a clean beach. There's no question about it. We want a pristine beach for the residents of Surfside and those who visit."

Kastan requested some time for the development company to investigate and come up with a solution that works for everybody.

"The residents have waited a year," Tourgeman said.

As of Monday, there have been no updates on a resolution. The Surf Club is preparing to release a statement on Thursday.

MIAMI BEACH PRIDE



EnVee of the Cabaret South Beach sings the national anthem Monday night before the rainbow flag is raised at the Miami Beach City Hall marking the start of Gay Pride Week. **PHOTOS BY NICK SWYTER/FOR THE MIAMI HERALD**

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KEEPING KIDS FIT

Determining if your child has food allergies

BY ELENA PEREZ
UHealthSystem.com

Most people know someone with food allergies. The frequency of food allergies in Western societies has been steadily increasing for the past decade, with around 8 percent of children now estimated to have them. Parents are often concerned about whether their child has a food allergy and schools are also recognizing the hazards of food allergies and how to manage the problem.

IS IT A FOOD ALLERGY?

Parents can be confused by what is an actual food allergy versus an intolerance. There are a number of nonallergic adverse food reactions that incorrectly get labeled as allergies, leading to a misconception about what constitutes a genuine allergy to food.

Food allergies are immune-mediated adverse reactions to food occurring 20 minutes to two hours

after ingestion of a certain food. They are triggered by an antibody called IgE and result in immediate allergic symptoms, including any combination of eczema, itchy/runny nose, cough, wheeze, rash, hives, vomiting, diarrhea or anaphylaxis (severe allergic reaction) and even death.

Another type of food allergy is food protein induced enterocolitis, a rare condition characterized by repeated bouts of severe projectile vomiting and diarrhea about two hours after eating milk or soy-based formula, and sometimes other foods. Non-immune-mediated adverse reactions to foods, which are not allergies, include things like lactose intolerance due to deficiency of the enzyme lactase.

Food allergies are triggered by the release of histamine from allergy cells.

About 90 percent of food allergies are due to milk, egg, soy, wheat, peanuts, tree nuts, fish and shellfish,

although any food can cause an allergic reaction. The severity of the allergic reaction to the offending food is unpredictable. It can be mild on one occasion, but severe the next.

HOW ARE FOOD ALLERGIES DIAGNOSED?

Your child's clinical history is the most important piece of information for the diagnosis of food allergy. History is aided by two forms of testing: the allergy "skin prick" test and a blood test.

Allergy skin prick testing is very sensitive. It is accomplished by introducing the allergen just under the skin, and takes about 20 minutes. Allergies are present if an itchy hive presents at the injection site. The test can be done safely in the allergist's office, usually on the forearm or back, but patients must refrain from taking antihistamines for several days prior to the test.

The other allergy test is a

blood test that detects the quantity of food-specific IgE in the blood stream. Another test, the supervised oral food challenge, can also be done, but to prevent unnecessary reactions, allergists tend to reserve this test for documenting that an allergy has been outgrown.

CAN FOOD ALLERGIES BE PREVENTED AND TREATED?

Once diagnosed and treated with strict dietary adjustments, children with food allergies have about an 80 percent chance of outgrowing most of their allergies. The exceptions are shellfish and peanut/tree nut allergies, which only have about a 20 percent chance.

The single most important factor leading to fatal outcomes with food allergies is failure to administer intramuscular epinephrine in a timely manner. Allergists recommend that patients carry an epinephrine auto injector in case of severe reactions. You should also

call 911 because anaphylaxis may need additional medications to be fully controlled. Antihistamines, like Benadryl, alone will not avert a severe reaction, so careful monitoring of the child is important to be sure the reaction is not progressing.

The recommendations for how to prevent food allergies are evolving due to recent landmark studies regarding peanut allergies. Recommendations on treatment are also changing as more research is being done. Studies recently published suggest that the use of probiotics and small doses of allergenic proteins may enhance the possibility of tolerance to allergenic foods. Likewise, the early introduction of allergenic foods, such as peanuts, in children without food allergy or mild food allergy may improve chances of not becoming allergic to foods in the long run.

Many questions remain, and generalized protocols are still in development to

help attain the best long-term outcomes safely for children affected with food allergies. In the meantime, your best strategy is to work closely with your allergist and learn how to avoid accidental exposures to allergenic foods. This involves special precautions when dining away from home, learning how to carefully read food labels, increasing awareness, having an anaphylaxis management plan in place for caregivers and schools, and epinephrine auto injectors accessible in every environment where accidental exposure to the allergenic food may happen. There are excellent resources available for parents at www.foodallergy.org, and with your local allergist.

Dr. Elena Perez is an allergist-immunologist and associate professor at UHealth - University of Miami Health System. For more information, visit UHealthSystem.com/patients/pediatrics.

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