



# Gulf War Review

Information for Veterans Who Served in Desert Shield/Storm and Their Families

Vol. 13, No. 1

October 2004

## Two-Year Rule Helps Recent Combat Theater Veterans

Military personnel who recently served in a combat zone or in an area of hostilities comparable to that seen during combat are now eligible for 2 years of free medical care from VA for many conditions.

In the past, veterans have had to prove that a medical problem is connected to their military service to receive free VA care for that condition, or they must have relatively low incomes. Since November 11, 1998, however, VA has been authorized to provide free medical care for veterans serving in a combat theater within 2 years after they leave active duty. Eligible veterans must have served in a combat zone or in an area and during a period of comparable hostilities. They do not have to prove either a service-connection for their health care problems or that they have low incomes.

“The wounds of military conflicts are not always obvious,” said VA Secretary Anthony J. Principi. “We must be ready to assist combat veterans who have medical problems that are unexplained or difficult to diagnose.”

The benefit does not cover treatment for medical problems clearly unrelated to military service, such as care for common colds, injuries from accidents that happened after discharge from active duty, and disorders that existed before the person joined the military.

## New Sarin Health Effects Update: VA Officials Expect Little Effect on Veterans

The 1991 Gulf War (Operations Desert Storm and Desert Shield) ended more than 13 years ago.

*(Continued on page 2)*

### Also in This Issue

- New Research: Operations Iraqi Freedom/Enduring Freedom Veterans Face “Significant” Risk of Mental Health Problems, Barriers to Care .....3
- VA Vet Centers Break Down Barriers to Care for Veterans with Readjustment Problems .....3
- Annual Report to Congress Documents Gulf War Health Research Advances .....5
- Postwar Hospitalization of Gulf War Veterans Analyzed...5
- Operations Iraqi Freedom/Enduring Freedom Review Newsletter Published.....6
- Report Released on VA Health Care Use By Iraqi Freedom Veterans.....6
- Q’s & A’s.....7
- About the “Review” .....7
- Gulf War Research Summary & Gulf War Veterans’ Illnesses: Q’s & A’s Now Available in Spanish.....8
- Research Advisory Committee Update .....8
- Gulf War Coordinators Can Help Gulf War Veterans .....9
- VA Gulf War Information Online .....9
- Gulf War Programs Recognized for Outstanding Service.....10
- How to Get Disability Compensation.....11
- Benefits & Services for U.S. Veterans Living Outside the U.S.....12
- Gulf War Health Registry Examination Statistics ...12
- Women Are Veterans Too; Are Eligible for the Same Benefits as Men.....12
- Address Changes & Duplicates.....13
- Where to Get Help.....14

## ***New Sarin Health Effects Update: VA Officials Expect Little Effect on Veterans***

*(Continued from page 1)*

Based upon concerns by veterans and their families, by Congress and by VA that the health of Gulf War veterans might have been affected by exposure to a wide variety of environmental hazards during the Gulf War, Congress passed two laws, Public Law 105-277 and Public Law 105-368, to establish a formal process to review the scientific and medical literature on these health issues.

The two laws directed the Department of Veterans Affairs (VA) to enter into an agreement with the National Academy of Sciences, Institute of Medicine (IOM) to perform a comprehensive evaluation of scientific and medical literature on the health effects of exposure to more than 30 Gulf War-related environmental hazards.

The laws directed IOM to “identify the biological, chemical, or other toxic agents, environmental or wartime hazards, or preventive medicines or vaccines to which members of the Armed Forces who served in the Southwest Asia theater of operations during the Persian Gulf War may have been exposed by reason of such service.” The IOM reports are intended to help VA develop scientifically based compensation policies, and to support health care and outreach to veterans and their families.

The first IOM report completed in 2000, reviewed health effects from exposure to sarin, depleted uranium, pyridostigmine bromide, and certain vaccines. IOM concluded that there was “inadequate/insufficient evidence to determine whether an association does or does not exist between exposure to sarin at low doses.

Based upon that finding, the Secretary of Veterans Affairs determined that there was not a sound scientific basis to support establishing a presumptive service connection for long-term health problem resulting from low-level sarin exposure. Since the 2000 IOM report, several new reviews on sarin effects in laboratory animals were published that were not available to the IOM when they conducted their initial review, and which some saw as requiring a new look by IOM.

## **Periodic Updates Needed**

Public Laws 105-277 and 105-368 anticipated the need for periodic updates by IOM as new scientific studies became available. These laws specify that IOM “shall conduct on a periodic and ongoing basis additional reviews of the evidence...that became available since the last review of such information... and make determinations...on the basis of the results of such review and all other reviews previously conducted...”

In February 2003, VA requested IOM to update their initial 2000 review on long-term health effects from exposure to the chemical warfare agent sarin. The IOM agreed, and their 100-page update, entitled “Gulf War & Health: Institute of Medicine Updated Literature Review on Sarin Long Term Health Effects,” was formally submitted to VA on August 20, 2004. For their update, IOM examined all new scientific literature published since their 2000 report, including animal and human studies, concerning the long-term health effects from exposure to low levels of sarin.

The conclusion in the IOM’s update reiterates the finding contained in their initial report, that there is “inadequate/insufficient evidence to determine whether an association does or does not exist between exposure to sarin at low doses insufficient to cause acute cholinergic signs and symptoms and subsequent long-term adverse neurological health effects.”

The conclusions of the August 2004 IOM update on long-term health effects from exposure to low levels of sarin are basically the same as the conclusions contained in the earlier report, and thus support VA’s earlier policy decision on this issue. VA officials indicated that they expect that this finding will have little to no effect on veterans benefits. In particular, veterans with difficult-to-diagnose illnesses, including chronic fatigue syndrome, fibromyalgia, or irritable bowel syndrome have special access to VA disability compensation without having to prove service-connection through a special law passed by Congress in 1994.

A second IOM report, completed in 2002, reviewed health effects of insecticides and solvents used in 1991 Gulf War, and the third report, to be released later this year, focuses on health effects of oil well

fire combustion products and certain other chemicals associated with the 1991 Gulf War.

Copies of this report are available from the National Academy Press, 500 Fifth Street, N.W., Lockbox 285, Washington, DC 20055; (800) 624-6242 or (202) 334-3313 (in the Washington metropolitan area). The Internet site is [www.nap.edu](http://www.nap.edu).

## **New Research: Operation Iraqi Freedom/Operation Enduring Freedom Face “Significant” Risk of Mental Health Problems, Barriers to Care**

A Walter Reed Army Institute of Research study on the mental health of members of the Operation Iraqi Freedom and Operation Enduring Freedom reveals that these returning service members have a high risk of mental health problems. Those in need of mental health care also had concerns about the stigma associated with mental health problems, which make them less willing to seek the care they need. These findings are documented in the July 1, 2004, issue of the *New England Journal of Medicine* in a 10-page article entitled “Combat Duty in Iraq and Afghanistan, Mental Health Problems, and Barriers to Care.”

The study used a survey of four U.S. combat infantry divisions (three Army divisions and one Marine Corps division). The anonymous survey evaluated subjects either before their deployment to Iraq or after their return from Iraq or Afghanistan.

The Walter Reed study looked at mental health problems of members of the U.S. armed services that were recruited from similar combat units before or after being stationed in Iraq or Afghanistan. Specifically, the study focused on major depression, generalized anxiety, and post-traumatic stress disorder (PTSD). Two definitions were used for each disorder, a broad screening definition and a strict screening definition. The strict definition had to meet certain requirements, which includes evidence of impairment in work, home, or in interpersonal functioning classified as “very difficult” level by the patient health survey.

There was a considerable difference between

soldiers who returned from Iraq compared to those from Afghanistan. The percentage of subjects with PTSD was significantly higher after duty in Iraq (15.6 to 17.1 percent) than after duty in Afghanistan (11.2 percent) or prior to being stationed in Iraq (9.3 percent).

Of the soldiers stationed in Afghanistan, only 31 percent were involved in a fire fight, where as soldiers and Marines in Iraq had 71 to 86 percent involvement. The rates of PTSD were closely related to having been wounded or injured.

For subjects who met the screening standards for a mental disorder according to the strict case definition, only 38 to 45 percent indicated an interest in receiving help and 23 to 40 percent reported having received professional help in the past year. Most examinations on the effects of combat on mental health were based on veterans’ years after the end of their military service. Rarely have studies examined a wide range of mental health effects near to the time of subjects’ deployment.

Charles W. Hoge, M.D., and five associates conducted the study. The citation for the report is *N Engl J Med* 2004;351:13-22. Reprint requests should be addressed to Dr. Hoge at the Department of Psychiatry and Behavioral Sciences, Walter Reed Army Institute of Research, 503 Robert Grant Avenue, Silver Spring, MD 20910, at [charles.hoge@na.amedd.army.mil](mailto:charles.hoge@na.amedd.army.mil).

Matthew J. Friedman, M.D., Ph. D., wrote in an accompanying editorial, entitled “Acknowledging the Psychiatric Cost of War,” that the report “force us to acknowledge the psychiatric cost of sending young men and women to war.” Friedman said the report was unprecedented for its early assessment of mental health while the fighting continues, for having predeployment data, and for providing important data on the perception of stigma. He added, “It is now time to ... provide effective treatment to distressed men and women along with credible safeguards of confidentiality.”

## **VA Vet Centers Break Down Barriers to Care for Veterans With Readjustment Problems**

For many, **war is hell!!** No man or woman returns from war the same as when they left. And yet they are expected to pick up where they left off,

to go on as if little has changed. As the study, above describes, many veterans need a little -- some need a lot -- of help readjusting to civilian life. For many, asking for help may be seen as a sign of weakness, instead of a recognition that a problem exists, and the commitment to do something about it. Getting help requires strength.

Since 1979, VA's Vet Centers have been providing counseling to combat veterans and their families. The program now has 206 locations extending across the Nation and in, Guam, Puerto Rico, and the U.S. Virgin Islands.

Originally set up to assist Vietnam-era veterans with their transition from combat to civilian life, the program's scope has expanded and currently serves veterans of the Korean War, World War II, Lebanon, Grenada, Panama, Persian Gulf, Somalia, Kazoo/Bosnia, veterans of Operations Enduring Freedom (OEF), Iraqi Freedom (OIF) and operations within the Global War on Terrorism (GWOT).

As the scope expanded, so did the number of sites where veterans could get help. In 1980, only a year after the centers first opened, there were 91 vet centers. Ten years later, in 1990, there were a total of 201 vet centers. Five additional locations subsequently were added. VA Vet Center officials indicate that the program has helped more than 1.1 million veterans since October 1992.

### **PTSD and Military Service**

The Vet Centers' priority is readjustment counseling, not only to veterans but also families of veterans. Readjustment counseling is aimed to support veterans adjust to feelings of anger, unfamiliarity, or isolation that they might experience returning from military service. Readjustment problems also can include post-traumatic stress disorder (PTSD).

PTSD is a normal reaction that usually comes after a person experiences or witnesses a trauma such as war or sexual assault. Loneliness, isolation, and change in environment while in combat can also cause PTSD. When not dealt with, an individual with PTSD can experience a range of sometimes disabling emotions and experiences such as grief, anxiety, paranoia, and

difficulty trusting others. About 25 percent of soldiers involved in combat and 15 percent of soldiers who were not directly involved in combat experience PTSD or PTSD-like problems.

Although it is not known when or if an individual will overcome problems associated with PTSD, the Vet Centers make sure that some healing is achieved, "We may not cure people but **we make a lot of people's lives better**," said Dr. Jerry Clark, Team Leader of the Vet Center in Alexandria, VA.

### **Veterans Helping Veterans**

About 80 percent of the Vet Center counselors working with veterans are former veterans themselves, and 60 percent of them have been in combat. According to Dr. Clark, a Vietnam veteran himself, veterans feel more comfortable knowing that they are talking with someone who knows of the ordeals and distress that sometimes comes with being involved in combat. "That counts to them," said Dr. Clark.

As the Center's Team Leader, Dr. Clark has the responsibility of meeting with veterans and seeing that they are placed with counselors that are suited to help them adjust. The matching may be based on who the veteran feels more comfortable with, which may be based on gender, race, or similar experience in combat. Centers stress the importance of veterans feeling comfortable with the atmosphere and people they are with. If that's accomplished then veterans are more likely to continue with their counseling. Dr. Clark has been counseling in Vet Centers for 10 years; he spent 8 years in Des Moines, IA, and has been working 2 years in Alexandria, VA. Dr. Clark said that the centers are good areas for social work and that his "respect for the VA population" influenced him to work at the centers.

Christopher Reed, Veterans Service Representative of VA's Central Office in Washington DC, is another example of a veteran extending his services to help other veterans. Reed makes regular trips to Walter Reed Army Medical Center in Washington, DC, where he spends time with veterans. As a "mentor," he informs veterans about the various counseling services of the Vet Centers. A veteran from the 1993 War in Somalia, Reed is aware of the difficulties that sometimes come

with adjusting to everyday life. Upon his discharge, Reed was unaware of the services of Vet Centers. Today he believes that if he had known to take advantage of the program it “would have changed my life in several aspects.” That’s why he makes sure to recommend vet centers to those he feels may need the assistance.

The Centers also provide bereavement counseling, which offers services to spouses, parents, and children of Armed Forces personnel who died while serving in combat. The counseling services for families consist of extensive transition services, such as outreach and referral services to family members. Like readjusting counseling, bereavement counseling is provided free of charge.

The Vet Center’s programs for veterans include trauma counseling, special populations, networking, wellness, leadership, management, and transitional assistance. These are managed through individual, group or marital and family counseling, medical referrals, assistance in applying for VA benefits, employment counseling, guidance and referral, alcohol/drug evaluations, information and referral to community resources, sexual trauma counseling and referral, and community education. Participants in Vet Centers often receive additional assistance from VA medical centers or regional offices. For additional information regarding this program and the nearest Vet Center, call toll-free **1-800-827-1000** or go to [www.VA.gov/rcs](http://www.VA.gov/rcs).

## **Annual Report Congress Documents Gulf War Health Research Advances**

VA’s Office of Research and Development recently released their latest report of research on the health consequences of military service in the Gulf War. The report, entitled *Annual Report to Congress-Federally Sponsored Research on Gulf War Veterans’ Illnesses for 2002*, carries an April 2004 date, is available online at [www.va.gov/GulfWar](http://www.va.gov/GulfWar). As of December 31, 2002, according to the report’s authors, VA, the Department of Defense, and the Department of Health and Human Services have sponsored a total of 239 Federal research Gulf War-related projects during the past decade.

From Fiscal Years 1994 through 2002, the Federal Government funding for the direct costs of Gulf War

research exceeded \$227 million. This amount excludes indirect costs of managing the research such as facility, administrative, and operational costs. These indirect costs estimate at about \$70 million. As of September 30, 2002, 152 projects were completed and 87 projects were ongoing.

The federal research program covers many different areas. It ranges from small pilot studies to large-scale epidemiology studies concerning large populations and major research center programs. The overall emphasis of research has been greatest on symptoms and general health status and brain and nervous system function of veterans. Thirteen large studies published in 2002 focused on symptoms and general health and five focused on brain and nervous system function.

VA is required by Section 707 of Public Law 102-585, as amended by Public Law 105-368, to annually report to Congress on the results, status, and priorities of research activities related to the health consequences of military service in the Gulf War. The Research Subcommittee of the Deployment Health Working Group (DHWG), an interagency organization, prepared the recent report.

With five sections and three appendixes, the 169-page publication describes a range of research initiatives. Section I is the introduction; Section II provides short summaries of research progress from the last report; Section III analyzes the Federal Government’s portfolio of research on Gulf War veterans’ illnesses; Section IV describes the research priorities for the following years: 1995, 1996, and 1998, and indicates recent improvements. The final 31 pages of the document are made up of the three appendixes that describe the research projects by 1) Department, 2) research focus area, and 3) funding.

Questions about the report or requests for hard copies can be directed to VA’s Office of Research and Development (12), VA Central Office, 810 Vermont Avenue, N.W., Washington, DC 20420.

## **Postwar Hospitalization Experience of Gulf War Registry Participants Analyzed**

In response to concerns about environmental and occupational health issues during the 1990-91 Gulf War, VA initiated the Gulf War Health Examination

Registry and the Department of Defense (DoD) started the Comprehensive Clinical Evaluation Program.

Authors of a recent 12-page article entitled “The Postwar Hospitalization Experience of Gulf War Veterans Participating in U.S. Health Registries” compared the health problems of these veterans with data from all DoD hospitals to approximate the likelihood of hospitalization resulting from any cause, from a diagnosis in a major diagnostic category, and from a specific diagnosis of interest.

The authors say that both VA and DoD health registries presented a complete medical evaluation, basic laboratory tests and additional sophisticated diagnostics, to Gulf War veterans who chose to participate. In September 1999, 70,385 participants had registered in the VA registry and 32,876 participants had enrolled in the DoD registry. Hospitalizations among participants in the two registries were evaluated from August 1, 1991, to June 6, 1994.

Personal and deployment data were available for 546,522 active-duty Gulf War veterans. 69,189 (12.7%) of these veterans registered in either the DoD or VA health registries. Sixty-four percent of the population were considered to be potentially exposed to the oil well fire smoke plumes from the Kuwaiti oil well fires, and more than 13% were considered possibly exposed to exposure areas produced by the destruction of rockets that could have contained nerve agents at Khamisiyah.

The study found that women were significantly more likely to have postwar hospitalization. Participating personnel in the occupational category of craftsmen were slightly more likely to be hospitalized compared with the combat specialist category.

Six additional analyses indicated that participants in the health registries were more likely to have been hospitalized for mononeuritis, asthma, fibromyalgia, and malignant neoplasms than their nonregistry participant peers.

During the 3-year postwar follow-up period, 19.2% of registry participants were hospitalized compared with 12.6% of registry nonparticipants. The study concluded that personnel with a prewar hospitalization were 1.66

times more likely to have postwar hospitalization, which was consistent with previous reports and could imply patterns of healthcare utilization.

After media coverage and extensive outreach programs, approximately 1 in 7 veterans had volunteered to participate in either registry by September 1999.

At present, more than 100,000 of the 697,000 U.S. military personnel who served in the first Gulf War have registered in the VA and/or the DoD health registries.

The article was published in the *Journal of Occupational and Environmental Medicine*. The citation is *J Occup Environ Med*. 2004;46:386-397).

## **Operation Iraqi Freedom/Enduring Freedom Review Newsletter Published**

In December 2003, the Environmental Agents Service, Office of Public Health and Environmental Hazards, released the premiere issue of the Operations Iraqi Freedom/Enduring Freedom Review newsletter. The second issue has been prepared and the editor anticipates release in early 2005.

The intended audience is those recent veterans of the 2003-04 War in Iraq and the veterans of the Afghanistan War against Terrorism. The initial 12-page newsletter was widely distributed to VA medical centers, VA regional offices, VA vet centers, and other interested parties. The second issue was sent to all those places plus approximately 180,000 veterans of these military conflicts. Both issues are available on the Internet. Veterans are encouraged to read it at [www.va.gov/GulfWar](http://www.va.gov/GulfWar). It can be found under Gulf War Reviews.

## **Report on VA Health Care Use by Iraqi Freedom Veterans**

This article summarizes a recent VA report on VA health care provided to Operation Iraqi Freedom veterans who have separated from military service.

Among 139,778 veterans of Operation Iraqi Freedom who have separated from active military

duty, 15% (21,021) have sought health care from VA since they were deployed. Approximately 13,683 health care visits were made by Iraqi Freedom veterans, which represents an average workload of about 87 medical visits for each of the VA's 158 hospitals. About 58 percent of Iraqi Freedom veterans who received VA health care have been members of the Reserve or National Guard.

Veterans of Operation Iraqi Freedom have presented to VA with a wide range of both medical and psychological conditions, covering a broad range of medical diagnoses. The most common health problems of those veterans have been musculoskeletal problems, mostly joint and back disorders and dental problems.

The type of diagnoses of these 21,021 veterans has not changed much since earlier analyses of Iraqi Freedom veterans who had received VA health care. No particular health problem stands out among Iraqi Freedom veterans at present. Consequently, recommendations cannot be provided for particular testing or evaluation; these war veterans should be assessed individually to identify all outstanding health problems.

It is important to note that these data includes only those veterans who received care from VA. Many veterans obtain their medical care elsewhere. Those who have been diagnosed by VA are not necessarily representative of all OIF or OEF veterans. Only carefully designed and well executed scientific studies can reveal if these veterans are at increased risk for illnesses or diseases and, if so, what these conditions are.

The Veterans Health Administration (VHA), the health care part of VA, will continue to monitor the health status of recent Iraqi war veterans using updated deployment lists provided by the Department of Defense to ensure that VA tailors its health care and disability programs to meet the needs of this newest generation of war veterans.

## Questions & Answers

The "Review" occasionally includes a questions-and-answers section in which VA officials respond to inquires from readers regarding possible health problems and concerns of Gulf War veterans and

(Continued on page 8)

## About the "Review"

The "Gulf War Review" is written by VA's Environmental Agents Service (EAS). The "Review" is published to provide information about the concerns of Gulf War veterans, their families, and others interested in possible long-term health consequences of military service in the Gulf War. The "Review" describes actions by VA and others to respond to these concerns. For past and current issues of the "Review" and additional information, see our Web site at [www.va.gov/gulfwar](http://www.va.gov/gulfwar).

The most recent issues of the newsletter are dated March 2003 and November 2004. Additional issues will be prepared when warranted by significant developments. EAS anticipates publication of the "Review" two or three times annually. Four were issued in Calendar Year 2001, three were released in 2002, and two came out in 2003. This issue was completed in late August 2004, and does not include developments that occurred after that time.

Comments or questions concerning the content of the "Review" are encouraged. Suggestions and ideas for future issues of the newsletter should be sent to the Gulf War Review, c/o Donald J. Rosenblum, Deputy Director, Environmental Agents Service (131), VA Central Office, 810 Vermont Avenue, N.W., Washington, DC 20420.

We are indebted to **Connie Torres**, Summer Intern in the National Hispanic Internship Program of the Hispanic Association of Colleges and Universities for her work on the newsletter and many other projects. Ms. Torres, a full-time Senior at San Angelo State in San Angelo, TX, majoring in print journalism, drafted many of the articles that appear in this newsletter. She spent 10 weeks in VA's Environmental Agents Service.

Please do **not** send comments or questions to the Austin Automation Center. Officials there routinely send the questions/comments to the Environmental Agents Service in Washington, DC. Writing to Austin will unnecessarily delay a response.

Requests for additional copies of this and/or future issues should also be sent to Mr. Rosenblum. A limited supply of the prior issues is available. Please specify the quantity and issue date requested.

*Questions about the Gulf War Registry examination should be directed to the Environmental Health Coordinator or Environmental Health Clinician at the nearest VA medical facility. The telephone number can be found in the local telephone directory under the "U.S. Government" listings. Assistance is also available from the toll-free VA Gulf War Helpline: 1-800-749-8387.*

*VA benefit offices also have a great deal of information about VA benefit programs. The national toll-free telephone number is 1-800-827-1000.*

## **Questions & Answers**

*(Continued from page 7)*

their families and about programs initiated by VA and other Federal departments and agencies to help these veterans.

**Q.** Does VA still offer medical examinations for the spouses and children of Gulf War veterans in the Gulf War Registry?

**A.** Yes on no. More than 1,400 spouses and children have participated in this examination program. However, it may be stopped in the near future because Congress has not renewed VA special authority to provide this service.

Question should be sent as follows:

**Mr. Donald J Rosenblum**

Deputy Director, Environmental Agents Service (131)  
ATTN: GW REV - Q's & A's  
Department of Veterans Affairs  
810 Vermont Avenue, N.W.  
Washington, DC 20420

We will answer as many questions as possible and will not identify the questioner. Questions about personal medical problems are not generally considered appropriate for inclusion in the newsletter.

## **Gulf War Research Summary and Gulf War Veterans' Illnesses Questions and-Answers Now Available in Spanish**

Last year the Environmental Agents Service produced an eight-panel brochure entitled "Gulf War Veterans' Illnesses – Questions & Answers" (dated August 2003, and identified as Information Bulletin 10-41) plus a four-page fact sheet entitled "Gulf War Research: A Report to Veterans" (dated October 2003, and identified as Information Bulletin 10-42).

While all military personnel must speak and understand English, that is not the case for their families, friends, and others concerned about their health and welfare. Furthermore, some veterans are more comfortable reading their native language and/or are better at understanding

their first language. By far the largest group of veterans of these veterans are Hispanic.

To accommodate these veterans and their families, we have had these two documents translated into Spanish. They should be available at all VA medical centers, VA regional offices, and VA vet centers. Individuals and organizations can also obtain copies from the Environmental Agents Service (131), ATTN: GW Spanish Publications, VA Central Office, 810 Vermont Avenue, N.W., Washington, DC 20420. They are available online at [www.va.gov/GulfWar](http://www.va.gov/GulfWar).

The Spanish publications, both dated March 2004, can be identified as Information Bulletin 10-41S, for the Questions & Answers brochure, and Information Bulletin 10-42S for the Research report.

## **Research Advisory Committee Update**

The Research Advisory Committee on Gulf War Veterans' Illnesses met on February 23-24, 2004, in Washington, DC, and on June 28-29, 2004, in East Orange, NJ, and to discuss information regarding past studies, get an update on current examinations, and talk about potential research.

The February meeting included presentations from the following people: Dr. John Concato, director of the Clinical Epidemiology Unit at West Haven VAMC; Preeti Hans, staff assistant of Gulf War illnesses in VA's Office of Research and Development; Joe Gough, Acting Director of Administration in VA's Office of Research and Development; Dr. Alan Magill, Science Director at the Walter Reed Army Institute of Research; Dr. YA Fang Liu, Assistant Research Professor of Pharmacology at Boston University; Dr. Mohan Sopori, Senior Scientist and Director of the Immunology Program at Lovelace Respiratory Research Institute; Dr. Ottenweller, Professor of Neurosciences at the University of Medicine and Dentistry of New Jersey; and Dr. Mark Peakman, Department of Immunobiology in the School of Medicine at King's College in London.

The June meeting was the first time the Committee met outside the Washington area. The meeting was held at East Orange Campus of the VA New Jersey Health Care System.



The meeting covered several research projects. Those extensively included were: the New Jersey Chronic Fatigue Syndrome (NJCFS) research, the NJ Environmental Hazards Center research on Gulf veterans and the War Related Illness and Injury Study Center (WRIISC) studies. WRIISC research was covered in four parts: 1) an overview of completed and pilot studies; 2) ongoing studies; 3) new research; and 4) planned studies. The first-day meeting covered both research and clinical evaluations.

The Committee, authorized by Congress in 1998, is required to make recommendations to the Secretary of Veterans Affairs on research relating to the health consequences of military service in the Southwest Asia theater of operations during the Gulf War.

Committee meetings are open to the public and include time reserved for public comments. The Committee welcomes and solicits information concerning medical research regarding Gulf War veterans' illnesses from physicians, scientists, veterans, members of the general public, and other interested parties.

Mr. James H. Binns, Jr., former Chairman, Parallel Design, Inc., Tempe, AZ, and former Principal Deputy Assistant Secretary of Defense, chairs the 10-member Committee.

These were the seventh and eight meetings since Secretary of Veterans Affairs Anthony J. Principi activated the Committee in early 2002. The next meeting is scheduled for October 25-26, 2004.

The Committee Web site is [www.va.gov/rac-gwvi](http://www.va.gov/rac-gwvi). The mailing address is RAC-Gulf War Veterans' Illness (T-GW), U.S. Department of Veterans Affairs, 2200 S.W. Gage Blvd., Topeka, KS 66622. The telephone number is (785) 350-4617. The fax number is (785) 350-4616.

## Gulf War Coordinators Help Gulf War Veterans

Veterans of the Gulf War can expect help from the Environmental Health Coordinator at their nearest VA medical center. These VA employees, previously

## VA Gulf War Information Online

VA Web sites provide a wide range of information about problems encountered by Gulf War veterans and available benefits and services. Start with VA's main Web site at [www.va.gov](http://www.va.gov), and see for yourself. If you do not have a personal computer, many libraries have them for public use. The librarians can assist you.

Veterans Benefits Information

[www.vba.va.gov](http://www.vba.va.gov)

Information for Iraqi Freedom Veterans

[www.va.gov/GulfWar/](http://www.va.gov/GulfWar/)

Post-Traumatic Stress Disorder and Iraq Veterans

[www.ncptsd.org/topics/war.htm](http://www.ncptsd.org/topics/war.htm)

VA Health Care Enrollment Information

[www.va.gov/elig/](http://www.va.gov/elig/)

Brochures and Publications, Including:

\*A summary of VA Benefits for National Guard and Reserve Personnel

\*Health Care and Assistance for U.S. Veterans of Operation Iraqi Freedom

[www.vethealth.cio.med.va.gov/Pubs/Index.htm](http://www.vethealth.cio.med.va.gov/Pubs/Index.htm)

Online Benefits Applications

[www.vabenefits.vba.va.gov/vonapp/](http://www.vabenefits.vba.va.gov/vonapp/)

Women Veterans Health and Benefits Information

[www.va.gov/wvhp/](http://www.va.gov/wvhp/)

[www.va.gov/womenvet/](http://www.va.gov/womenvet/)

[www.vba.va.gov/bln/21/Topics/Women/](http://www.vba.va.gov/bln/21/Topics/Women/)

(Continued on page 10)

## **Gulf War Coordinators Help Gulf War Veterans**

*(Continued from page 9)*

known as Veterans' Registry Coordinators or Gulf War Coordinators, are responsible for scheduling appointments (generally within 30 days of the requested date), monitoring field station compliance with VA regulations reviewing records for accuracy and completeness, and collecting certain data for reporting purposes.

These coordinators are an important part of a team with the Environmental Health Clinicians at nearly every VA medical center. The coordinators may be the first and last person that the veteran has contact with during his or her outpatient visit, and can play a major role in determining whether veterans examined at a VA health care center leaves with a positive or negative image of VA.

Veterans looking for the Coordinator can request to see or talk with the Environmental Health Coordinator or Gulf War Coordinator at the nearest VA medical center.

## **Gulf War Program Recognized for Outstanding Service**

In March 2004, the Office of Public Health and Environmental Hazards in VA Central Office sent the first Environmental Health Center of Excellence Awards to 13 field facilities. The award, based on a nonscientific survey in August 2003, gave randomly selected veterans the opportunity to evaluate the Environmental Health Clinicians and Coordinators Registry staff at VA medical centers (VAMCs) and Outpatient Clinics (VAOPCs). This is the staff that provides registry examinations to eligible veterans. The veterans receiving the survey were those who had been involved in the Agent Orange, or Ionizing Radiation Registry programs.

According to Environmental Agents Service (EAS) Director, Dr. Mark Brown, the award was intended to recognize outstanding service to veterans. He also emphasized that the facilities that did not receive an award were not being criticized! Overall responses were positive, but only the top thirteen facilities were selected and those not chosen simply lacked sufficient positive feedback to receive recognition at the time.

The survey asked veterans to name a VA registry clinician or coordinator that has provided them with "outstanding customer service." However, respondents generally chose to acknowledge the facility rather than a particular individual.



Dr. Kurt Schlegemilch, Director, VA Medical Center, Grand Junction, CO, poses with award-winning registry team at Grand Junction. The individuals from left to right are Dr. Schlegemilch, Pat Crooks, Dennis McMahon, Raedelle Mundy, and Matt Dillon. Missing from the photo is Josh Holmes.

The facilities received the new "Environmental Hazard Center of Excellence Award," in recognition of the expertise, patience, and dedication displayed by the VA staff. The exceptional centers were: VAMC, Boise, ID; VAMC Cheyenne, WY; VAMC, Durham, NC; VAMC Fargo, ND; VAMC, Fresno, CA; VAMC, Grand Junction, CO; VAMC Manchester, NH; VAOPC, Oakland Park, FL; W.G. (Bill) Hefner VAMC, Salisbury, NC; VAMC, San Francisco, CA; VAMC White River Junction, VT; VA Community Based OPC, Williamsport, PA; and VAOPC, Winston-Salem, NC.

The award was established to recognize those involved in furnishing high quality services to Registry participants. We felt that it would not only be fair but also very appropriate for veterans to evaluate the center's services.

The significance of the award and the uniqueness by which the recipients were chosen makes the award much

more valuable. This was the first time veterans were given a survey that allowed them to evaluate the Registry services and staff of their medical center. Honorees were unaware of the survey and were overwhelmed to know that the award was based on the evaluation by veterans. "It makes the award much more meaningful," said Daniel Duffy, VAMC's clinical coordinator for Special Programs, in White River Junction, VT. For Cindy Force, Network Program Support Unit Manager/ Environmental Health Coordinator of the VAMC in Durham, NC, the veteran's input was a positive boost. "It makes you feel as though you've done your job well," said Force.

Despite the surprise of the award, facilities are aware of their capabilities, which they attribute to the staff's friendliness and knowledge. Jim Nelson, administrative officer of the VAOPC in Winston-Salem, NC, described the staff as "very personal and friendly with patients," two essential qualities other facilities also associated with their success.

The VAMC in Manchester, NH, takes great pride in positive feedback it has received. "We seldom have complaints, and that makes us stand out from other VA centers," said Timothy Dorgan, Eligibility Coordinator.

Recipients of the award also mentioned that because of their great staff, they feel confident that they will receive the award again. Program Assistant Marj Doescher, of the VAMC in Boise, ID, acknowledged the employee's impressive work, and offered advice for other facilities. Doescher stressed the importance of being aware of programs "knowing the program and being able to clarify is vital," said Doescher.

A framed certificate marked with a gold seal was given to recognized facilities. The award was mailed to the Directors with the request that it be displayed in an area where it could be easily recognized, preferably with the Agent Orange, Gulf War, and Ionizing Radiation posters and newsletters.

Due to the positive responses, the Office of Public Health and Environmental Hazards looks forward to conducting this survey again in the near future. "I felt it was a success, it was well received by coordinators," said Environmental Agents Service (EAS) Program Analyst Michelle Foster.

Foster was responsible for arranging the survey and for announcing the results at the national EAS quarterly conference call. A survey is planned for next year and should continue in the upcoming years.

## **How to Get Disability Compensation**

Like all veterans, Gulf War veterans are eligible for monthly payments, called disability compensation, from VA if they are suffering with service-connected illnesses or injuries. The disability must have been incurred or aggravated during active military service. Furthermore, the service of the veteran must have been terminated from military service through separation or discharge under conditions that were other than dishonorable.

Disability compensation varies according to the degree of disability and the number of dependents. Benefits are not subject to Federal or state income tax. The receipt of military retirement pay, disability severance pay, and separation incentive payments know as SSB and VSI (Special Separation Benefits and Voluntary Separation Incentives) also affects the amount of VA compensation paid.

The disability ratings range from 0 to 100 percent (in increments of 10 percent). For example, in 2004, a Gulf War veteran with a disability rating of 10 percent receives \$106; a veteran with disability rating of 50 percent gets \$646; and a veteran who is totally disabled and evaluated at 100 percent receives \$2,239 monthly.

Veterans with disability ratings between 30 and 100 percent are also eligible for monthly allowances for a spouse ranging from \$38 to \$127, and for each child, \$19 to \$65. (The amount depends on the disability rating).

A veteran who is in need of regular aid and attendance of another person, or who is permanently housebound may be entitled to additional benefits. VA must make that determination before the veteran can get these benefits.

### **Must Apply to Be Considered**

Compensation is not automatically provided to any veterans. VA veterans service representatives

(VSR) can provide the necessary application and assist veterans who need help in completing it. VSR's are located at all VA Regional Offices, in VA medical centers, and at most VA clinics. For help in locating a VSR near you, call the following toll-free telephone number: **1-800-827-1000**.

### **Other Benefits**

In addition to the compensation program described above, individual veterans may be eligible for the full range of other benefits offered by VA, including education and training, vocational rehabilitation, home loan guarantees, life insurance, pension, burial benefits, and more.

To learn more about VA's programs, Gulf War veterans and other interested parties can visit the VA home page <http://www.va.gov> or call **1-800-827-1000**.

### **Benefits and Services for U.S. Veterans Living Outside the U.S.**

VA provides benefits and services to veterans overseas; however, those benefits and services are provided in a different manner than for veterans who live in the United States.

VA will pay for medical services for treatment of service-connected disabilities for veterans who are living or traveling in foreign countries (Canada and the Philippines excluded). Authorization and payment for medical treatment of service-connected disabilities are completed by our Foreign Medical Program (FMP) located in Denver, Colorado. The FMP address is: P.O. Box 65021, Denver, CO 80206-9021. Veterans living in Canada should contact the VA Center in White River Junction, VT 05009-0001, and veterans living in the Philippines should contact the U.S. VA Office, 2201 Roxas Blvd., Pasay City 1300, Philippines.

VA regional offices are responsible for processing and establishing service-connected conditions, pension ratings, and other benefit programs. Veterans who live in Canada should file a claim with the VA Center in White River Junction, VT, at the address listed in the above paragraph. Veterans living in Mexico, South and Central America, and the Caribbean should file a claim with the Houston Regional Office at 6900

Almeda Road, Houston, TX 77030. Veterans living overseas in countries not listed above should contact the Pittsburgh Regional Office, 1000 Liberty Avenue, Pittsburgh, PA 15222.

Veterans and their dependents living overseas can also contact the United States Embassy, the Foreign Benefits Unit (FBU), in the country they are living for assistance. FBU staff can assist veterans and their dependents in filing VA benefit claims and in answering VA benefit questions.

Veterans and their dependents can also find information about VA benefits and services provided overseas on the World Wide Web at: ([www.vba.va.gov/bln/21/foreign/index.htm](http://www.vba.va.gov/bln/21/foreign/index.htm)). This Web site provides valuable information about VA's Foreign Services Program, and it also enables the inquirer to ask questions, receive answers to the questions, and apply on-line for a number of VA benefits.

### **Gulf War Health Registry Examination Statistics**

Here are some figures, as of August 31, 2004, regarding the VA's Gulf War Registry Health Examination Program that started in 1992.

#### **Cumulative** (1992-August 2004)

Total number of Gulf War veterans who have completed examinations since the program began – **89,143** (Includes **279** from Operation Iraqi Freedom)

Total number of veterans tested for exposure to depleted uranium – **270**

Total number of dependents examination – **1,468**

(Spouses **589**, Children **879**)

#### **Most Recent Month**

Gulf War Registry examinations -- **343**

### **Women Are Veterans Too; Are Eligible for the Same Benefits as Men**

**MYTH:** *Women aren't veterans because they didn't serve in combat.*

**FACT:** Women who served in the military are veterans and are eligible for the same benefits and services as their male counterparts. Unfortunately, many women who served their country in military service do not consider themselves veterans because they did not serve in combat. Consequently, they have not applied for benefits and services for which they are entitled.

In recent years, VA has established a wide range of special services to provide appropriate, timely, and compassionate health care services to women veterans. These include the full range of services available to men as well as sexual trauma counseling, homeless women veterans programs, victims of domestic violence programs, and reproductive health care, including maternity care, and infertility evaluations.

Each VA medical center has a Women Veterans Program Manager to ensure that women veterans receive the proper attention. For additional information about these and other programs for women veterans, contact the Women Veterans Program Manager at the nearest VA medical center or outpatient clinic or see the VA Web site: [www1.va.gov/wvhp](http://www1.va.gov/wvhp). Active duty military personnel with questions or concerns about their service in the Persian Gulf region - contact your commanding officer or call the Department of Defense (DoD) Gulf War Veterans' Hotline (1-800-796-9699) for an examination.

## Address Changes and Duplicates

*If this newsletter has your old address, please use this form to update our mailing list. Send the completed form to the Gulf War Review, Austin Automation Center (200/397A), 1615 Woodward Street, Austin, TX 78772-0001. If you have access to the Gulf War Review via the VA Web site [www.va.gov/gulfwar](http://www.va.gov/gulfwar) and wish to discontinue receiving a copy by mail, please complete the above form and return it to the Austin Automation Center. If you are receiving more than one copy of the newsletter, please let us know. Write to the address above. Please provide your name, address, and social security number.*

*Thank you.*

*Check or circle the language that describes your situation.*

My address has changed, and I would like to continue to receive the newsletter.

I am receiving more than one copy, but I only want to get a single copy.

I don't need to get the newsletter by mail as I can read it at [www.va.gov/gulfwar](http://www.va.gov/gulfwar).

Other (explain) \_\_\_\_\_

Please print your:

First Name \_\_\_\_\_

Middle \_\_\_\_\_

Last \_\_\_\_\_

SSN: \_\_\_\_\_

New Street/RFD/Military Unit:  
\_\_\_\_\_

APO/FPO: \_\_\_\_\_ (Indicate which if applicable)

City: \_\_\_\_\_

Alpha State/or APO/FPO Code: \_\_\_\_\_

ZIP Code: \_\_\_\_\_

## Where to Get Help

Gulf War veterans with concerns about their health - contact the nearest VA medical center. The telephone number can be found in the local telephone directory under Department of Veterans Affairs in the "U.S. Government" listings. A Gulf War Registry examination will be offered. Treatment will be provided to eligible veterans. The VA Gulf War Information Helpline can also provide the latest information and assistance. The toll-free telephone number is **1-800-PGW-VETS (1-800-749-8387)**.

Gulf War veterans in need of marital/family counseling - contact the nearest VA medical center or VA vet center. For additional information, call the Gulf War Information Helpline at **1-800-PGW-VETS (1-800-749-8387)**.

Gulf War veterans seeking disability compensation for illnesses incurred in or aggravated by military service - contact a Veterans Benefits Counselor at the nearest VA regional office or health care facility at **1-800-827-1000**, or call the VA Gulf War Information Helpline at **1-800-PGW-VETS (1-800-749-8387)**.

Gulf War veterans seeking participation for their spouses or children in the VA-funded health examination program for spouses and children - call the VA Gulf War Information Helpline at **1-800-PGW-VETS (1-800-749-8387)**. Veterans interested in the alternative self-funded examination for spouses or children - contact the Environmental Health Coordinator at the nearest VA medical center for forms and information.

Gulf War veterans interested in learning about the wide range of benefit programs administered by VA - contact a Veterans Benefits Counselor at the nearest VA regional office or health care facility at **1-800-827-1000**, or call the VA Gulf War Information Helpline at **1-800-PGW-VETS (1-800-749-8387)**.

DoD has changed its "Incidents Hotline" to the "Direct Veterans Hotline" to more accurately reflect the work done by the Hotline's contact managers. The new toll-free number is **1-800-497-6261**.

For additional information about VA's program initiatives, see VA's Gulf War veterans' illnesses home page at [www.va.gov/gulfwar](http://www.va.gov/gulfwar).

Gulf War veterans who encounter difficulties at a VA medical facility can contact the "patient advocate" at that facility for assistance in resolving the problem. The medical center telephone operator should have the telephone number.

Representatives of veterans service organizations, including the American Legion (**1-800-433-3318**), Veterans of Foreign Wars of the United States (**1-800-VFW-1899**), Disabled American Veterans (**1-877-426-2838**), etc., have been very helpful to Gulf War veterans, especially veterans who are seeking disability compensation. (These organizations are cited as examples. There are many other excellent organizations. VA does not endorse or recommend any one group over another.)

**County Veterans Service Officers** also have been of great help to many military veterans, including those who served in the Gulf War, who are seeking benefits they earned through their service to the Nation.

For additional **Federal benefit** information, see VA's Federal Benefits for Veterans and Dependents booklet. It is updated annually to reflect changes in law and policies. It is available for purchase from the U.S., Government Printing Office, Superintendent of Documents, Washington, DC 20402, Web site: [bookstore.gpo.gov](http://bookstore.gpo.gov). VA's World Wide Web pages are updated throughout the year to present the most current information. The VA home page ([www.va.gov](http://www.va.gov)) contains links to selections on compensation and pension benefits, health care benefits and services, burial and memorial benefits, etc.

For additional information, see the websites listed on page 9 of this newsletter.



**Department of  
Veterans Affairs**  
Austin Automation Center (200/397A)  
1615 Woodward Street  
Austin, TX 78772-0001  
OFFICIAL BUSINESS  
Penalty for private use \$300

**Gulf War Review**  
*Information for Veterans Who Served in  
Desert Shield/Storm and Their Families*  
October 2004