



Persian Gulf Review

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Information for Veterans Who Served in Desert Shield/Storm

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Birth Defects Risk Not Increased

The children of Gulf War veterans are not at increased risk of birth defects, according to a study of medical records of more than 75,000 children born in military hospitals from 1991-93. Analysis of these data showed no significant association between service in the Gulf War and the risk of (1) severe birth defects that the Centers for Disease Control and Prevention characterize as being of public health concern or (2) other birth defects. The study results were published in the *New England Journal of Medicine* on June 5, 1997.

"This study provides strong scientific evidence that the children of Gulf War veterans are not more likely to suffer birth defects," commented principal investigator David Cowan, Ph.D. "It is important that concerned Gulf War veterans understand that we found no evidence that they are more likely than a non-deployed Gulf-era military service member to have a child born with birth defects. Our work suggests that service in the Gulf War should not affect family planning or a veteran's decision on child-bearing. We hope that healthcare providers who treat veterans and their families will share these findings with their patients."

The study researchers identified 579,000 active duty men and women who served in the Gulf War, and selected a sample of 700,000 active duty service members who were not deployed to the theater of operations. All live births conceived after these Gulf War veterans returned from the War (or after January 1, 1991 for non-deployed veterans) and occurring in military hospitals prior to October 1993 were included in the study.

The computerized medical records of 30,151 children born to male Gulf War veterans were compared to 32,638 children born to male non-deployed veterans. The records of 3,847 children of female Gulf War veterans were compared to 8,825 children of female non-deployed veterans.

Researchers found that overall the comparisons for both men and women Gulf War veterans showed that the risks for severe birth defects for children were not different from the comparison groups. Since the study was based on records of live births, investigators could not evaluate events such as abortions or miscarriages.

Researchers found that the proportion of Gulf War veterans having children following the War was not different from the number among non-deployed veterans. This indicates no reduction in fertility. Researchers also found that the number of boy babies compared to girl babies did not vary between the study groups.

Cdr. Greg Gray, one of the study investigators, reported that this is the "first large study of its kind examining birth defects among the children of Gulf War veterans." Cdr. Gray noted that

the study had the "statistical power to detect differences between Gulf War veterans' children and children of military families and found none." He added that other large reproductive outcomes studies are in progress.

Dr. Edward Martin, Acting Assistant Secretary of Defense (Health Affairs) stated, "While this report does not answer all questions about the effect the War may have had on veterans and their families, the findings in this large study provide some reassurance in that no association was found between birth defects among children born in military hospitals and Gulf War service."

Secretary-Designate of Veterans Affairs Hershel Gober Reaffirms VA Commitment to Gulf War Veterans



It has been my privilege to serve as Deputy Secretary of Veterans Affairs during the past four and a half years. During that period, VA has significantly strengthened programs to respond to the concerns of Gulf War veterans and their families.

Among other things, we requested and received legislative authority to give Gulf War veterans special eligibility for VA medical care; expanded the Gulf War

referral center program; named an expert scientific advisory committee, with representatives from veterans' service organizations; established and then expanded an environmental hazard research center program; conducted special nationwide clinical training for staff caring for Gulf War veterans; and successfully advocated legislation to compensate Gulf War veterans with undiagnosed chronic illnesses. The undiagnosed illness compensation program was initially limited to veterans with illnesses that appeared within two years of Gulf War service. President Clinton approved expanding the program to provide for compensation for Gulf War veterans with undiagnosed illnesses that appear before 2002.

I am proud of these accomplishments. We have always said all we want to know is what happened. We want to provide the treatment and care that these veterans deserve. I am committed to that policy.

As I have traveled around the country, I met with many veterans' groups and talked with many Gulf War veterans. I understand that many are ill, some with problems our best scientists cannot yet explain. We have an obligation to do right by these veterans. And we will.



DoD/CIA: Nearly 100,000 Troops May Have Been Exposed to Chemical Agent in Gulf War

On July 24, 1997, the Department of Defense (DOD) reported that 98,900 U.S. troops may have been exposed to minute amounts of sarin, a nerve agent, released when U.S. troops demolished the Khamisiyah ammunitions depot in southern Iraq in March 1991. Earlier estimates, based on incomplete information, had indicated that about 20,000 troops may have been exposed to this gas.

The substantial increase in the number of individuals exposed to sarin was based on a Central Intelligence Agency (CIA) computer model that considered weather conditions, wind patterns, rate at which the chemical would have dissipated, and troop locations. The CIA model indicates that over a three day period the plume carrying trace amounts of the chemical traveled about 300 miles.

DoD officials noted that none of these troops reported ill health effects at that time and that the concentrations of the nerve agent were so low that no known health effects are associated with such a level of exposure. A lethal dose of sarin would be approximately 100 milligrams per cubic meter. An incapacitating dose would be about 35 milligrams. Initial effects, such as dimmed vision, occur at an exposure level of 1 milligram per cubic meter. The model indicates that none of these troops received even the 1 milligram exposure.

Even though DoD officials reported that none of these 98,900 troops was exposed to an amount of gas that would cause even the most minor immediate symptoms, DoD is referring the question of appropriate scientific follow-up to the Research Working Group of the White House-established Persian Gulf Veterans Coordinating Board.

Congressional Interest Intensifies

January 9, 1997. January 21, 1997. January 29, 1997.
February 11, 1997. April 2, 1997. April 3, 1997. April 16, 1997.
April 17, 1997. April 24, 1997. June 19, 1997. June 24, 1997.
June 25, 1997. June 26, 1997.

These are the dates that congressional committees/subcommittees held hearings on Gulf War veterans' illnesses during the first half of 1997. Except for appropriation and budget issues, these medical problems have probably been the subject of more congressional focus than any other VA-related subject. Key VA officials, including the Secretary of Veterans Affairs, Under Secretary for Health, and Deputy Under Secretary for Health, have provided testimony at many of these sessions.

Hearings have been held by the Senate Committee on Veterans' Affairs; the Subcommittee on Human Resources of the House Committee on Government Reform and Oversight; the House Committee on Veterans' Affairs; and the Subcommittee on Health and the Subcommittee on Oversight and Investigations of the House Committee on Veterans' Affairs. Additional hearings are anticipated.

This does not include hearings in congressional committees that focus on activities of the Department of Defense.

About the "Review"...Name Changes

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.

The most recent, prior to this, issue of the newsletter is dated June 1997. Additional issues will be prepared when warranted by significant developments. EAS anticipates publication of the "Review" three or four times annually. Four issues were published in 1995 (January, April, August, and December) and three in 1996 (March, September, and December). This is the third issue this year. (Previous 1997 issues were dated March and June). This issue was written in late July 1997 and does not include developments that occurred after that time.

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

Requests for additional copies of this and/or future issues should also be sent to Mr. Rosenblum. A limited supply of issues released in 1995-97 is also available. Please specify the quantity and issue date requested. VA facilities should order additional copies from the VA Forms Depot.

Questions about the Registry examination should be directed to the Registry Coordinator or Registry Physician 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**.

The name of this publication recently changed from "Persian Gulf Review" to "Gulf War Review" to be sensitive to individuals of Persian ethnicity. Veterans who participated in Operation Desert Shield/Storm are now referred to as Gulf War veterans rather than Persian Gulf War veterans. The benefits and services that these veterans are eligible for are unaffected by the name change.

DoD/CIA Respond to FAC Report

The most recent issue (June 1997) of the "Review" described the supplemental letter report, dated April 30, 1997, of the Presidential Advisory Committee (PAC) on Gulf War Veterans' Illnesses. The report, regarding declassified documents pertaining to the Khamisiyah storage facility and U.S. troop demolition activities at this site, was very critical of the Department of Defense (DOD) and the Central Intelligence Agency (CIA).

On May 15, 1997, the Persian Gulf Veterans Coordinating Board, co-chaired by the Secretaries of Defense, Health and Human Services, and Veterans Affairs, transmitted to the President joint comments, prepared by DoD and CIA, on the report. The following is the DoD/CIA response in its entirety.

Introduction

The supplemental letter report from the Presidential Advisory Committee (PAC) on Gulf War Veterans' Illnesses restated the PAC's findings previewed on March 18, 1997, at its hearing in Salt Lake City. However, since that time, DoD and CIA have made significant progress in our efforts related to Persian Gulf War operational events and intelligence information, which may in turn shed light on potential causes of Gulf War veterans' illnesses. Our efforts include the release of 41 DoD and intelligence documents and a detailed Intelligence Community paper on Khamisiyah which was very candid in its self assessment identifying areas where the Intelligence Community performed well, and those where it did not. Their efforts also included quick DoD responses to personal information requested by the PAC. In its letter, the PAC made little reference to the recent DoD and Intelligence Community accomplishments.

DoD and CIA have worked closely with the PAC on several issues. We will continue to apprise the PAC, as well as veterans, the public and relevant government agencies of our progress.

Adequacy of Government Activities

The PAC notes several findings, with which we generally concur, regarding the adequacy of previous government efforts. In its discussion of the adequacy of ongoing activities, the PAC noted that Inspector General and DoD oversight efforts together could answer the President's questions about the significance of warnings and when we had sufficient evidence to determine possible exposure. However, on the issue of addressing the sufficiency of actions for the safety and health of service members in the future, the PAC notes the need for a single entity to integrate "multiple efforts into a comprehensive government policy."

We concur with the PAC's observation that no entity has clear action on integrating the data to provide a comprehensive assessment of the government-wide response to Khamisiyah. Both DoD and the Intelligence Community are developing recommendations drawn from the lessons learned through their efforts. We will work independently and jointly to evaluate the recommendations. Former Senator Warren Rudman has recently been asked by the SECDEF [Secretary of Defense] to provide outside review of the findings and results of the many investigations, soon to become available, to further government efforts to learn the causes and cures of Gulf War Illnesses. In addition, Secretary Cohen and the Acting Director of Central Intelligence have asked Senator Rudman to suggest ways to improve the provision, handling and use of intelligence during wartime. We have high regard for the expertise and outside perspective that Senator Rudman will bring to this issue.

Once the recommendations are developed, they will be merged with others in the government into a comprehensive package. At that time, an interagency team will meet to do as the PAC recommends to integrate the multiple efforts into a comprehensive, more effective set of policies and procedures for the future.

Modeling for the Khamisiyah Pit Area

DoD and CIA are co-chairing a team of experts to settle issues over meteorology, the number and dates of explosions in the pit at Khamisiyah, uncertainties about release of chemical agents at the demolition and of appropriate models. Both DoD

and the CIA have done this openly with the PAC although the responsibility to conduct experiments and select the models to use is jointly DoD's and CIA's. The PAC has been advised that a final report will be issued by 21 July 1997. Logistics for testing are complicated but the goal of the two departments has been to find what most likely happened. Neither DoD nor the CIA want to needlessly alarm those veterans not affected by the demolition at Khamisiyah.

The PAC mentions that government-administered guidelines for evaluating potential accidents and emergency responses should be used. DoD and CIA believe those guidelines are appropriate if facing an accident and determining evacuation needs. Evacuation is not the issue; determining a best estimate of what happened is. Ground testing is essential for this determination. One of the PAC's reasons for recommending a worst-case model is to warn veterans who were located further from Khamisiyah. Since all participants in the Gulf have been invited by DoD and CIA to come forward and indicate their concerns, a worst-case plume, other than being inaccurate and alarming veterans, does not add to that invitation. Once additional information becomes available as a result of modeling the plume, DoD and VA will ensure that any additional veteran notifications required will be made as appropriate. DoD and VA will continue to emphasize the availability of medical care to all Gulf War veterans regardless of their proximity to a suspected CW [chemical/warfare] agent event.

Access to Information

The PAC's inference that the Privacy Act was used by DoD as a shield to prevent access to information is incorrect. The Privacy Act was established to protect individuals against unwarranted invasion of privacy. Within the constraints imposed by law, DoD has acted quickly to respond to the PAC's requests for personal information protected by the Privacy Act. DoD has also identified the specific legal prohibitions preventing it from sharing all information with the PAC and acted to carry out the procedural steps to remove them. We have conducted a thorough review to ensure maximum openness consistent with the law and intend to meet with the PAC staff to confirm that access is not a continuing problem. We will continue to apprise the PAC, as well as veterans, the public and relevant government agencies on our progress openly and forthrightly.

Standards for Evaluating Detection or Exposure Incidents

The DoD is moving as quickly as possible toward conclusions about the incidents under investigation. DoD is not using a courtroom standard of evidence. Rather, on a case by case basis it applies the common sense approach taken by a reasonable person to determine who might have been exposed. The DoD routinely informs all veterans about the availability of free diagnosis and treatment programs, established by the government, through its various outreach programs such as by publishing on GulfLINK (its world wide web), discussing available programs during nation-wide townhall meetings, communicating to veterans and other interested parties through correspondence and two-way electronic mail, publishing brochures and hand-outs, and publishing a new bi-monthly newsletter, GulfNEWS. Targeted notification, as accomplished by the Khamisiyah survey, will be conducted once we have confirmed reports, those with corroborating evidence, of possible chemical exposure. For any other exposures that may be identified in the future and for any other service members who

may have been exposed, similar steps will be taken with respect to notification, evaluation, care and research. We note, however, that this issue of notification has no bearing on the eligibility of veterans for physical examinations, health care and compensation. DoD and VA continue to encourage all Gulf War veterans to take full advantage of the government's healthcare services.

Implementation and Next Steps

DoD and the Intelligence Community will continue investigation and analysis efforts. We will keep the staff of the Committee, as well as the veterans, the public and other elements of the government apprised of our findings and actions. Our purpose is to support government efforts looking into potential causes of Gulf War veterans' illnesses, and to use the information gained to improve our policies for use in the future.

We remain committed to the men and women who served this country in the Persian Gulf. We owe them a full and accurate accounting of what happened during and after Desert Storm. To that end, we will continue to release information that gives the veterans and American citizens a clearer understanding of this issue and how we used intelligence material to prepare, warn, and support our forces. We stand behind our contributions to national security and are working to enhance our support for the future.

VA to Issue Fact Sheet Series

The Environmental Agents Service in VA headquarters in Washington, DC, will soon release a series of fact sheets, called "Gulf War Briefs," that describe a wide range of Gulf War-related matters.

The twenty-two "Briefs," modeled on the "Agent Orange Brief" fact sheet series, will be dated December 1997. The following "Gulf War Briefs" will be available, without charge, from the Environmental Agents Service and from the Gulf War Coordinators at VA medical centers:

A. General Information

- B1. Research Activities**
- B2. Registry Health Examination Program**
- B3. Medical Care Eligibility for Gulf War Veterans**
- B4. Referral Center Program**
- B5. Examinations for the Spouses/Children of Gulf War Veterans**
- B6. Disability Compensation, Including for Undiagnosed Chronic Illnesses**
- B7. Information Resources**

C. Gulf War Veterans in Coalition Countries

D. Are Gulf War Veterans' Illnesses Contagious?

- E1. Chemical/Biological Warfare Agents**
- E2. Stress - Psychological and Physiological**
- E3. Vaccinations**
- E4. Pyridostigmine Bromide**
- E5. Depleted Uranium**
- E6. Infectious Diseases**

- E7. Oil Well Fire Smoke and Petroleum Products**
- E8. Pesticides**

- F1. Adverse Reproductive Health Outcomes and Birth Defects**
- F2. Chronic Fatigue Syndrome**
- F3. Multiple Chemical Sensitivity**
- F4. Gulf War Veterans' Mortality**

For additional information or a copy of some or all of these fact sheets, write to Gulf War Briefs, Environmental Agents Service (131), VA Central Office, 810 Vermont Avenue, N.W., Washington, DC 20420.

Q's and A's

The "Review" occasionally includes a questions-and-answers section in which VA officials respond to readers' inquiries regarding various concerns of Gulf War veterans and their families. Questions should be sent to Donald J. Rosenblum, Deputy Director, Environmental Agents Service (131), VA Central Office, 810 Vermont Avenue, N.W., Washington, DC 20420. We cannot guarantee that all questions received will be included in the "Review."

Several readers have recently written about incarcerated Gulf War veterans interested in participating in the VA Gulf War Registry health examination program. Several other questions were submitted by Mr. Chris Kornkven, President, National Gulf War Resource Center, Inc.

Q: Can incarcerated Gulf War veterans receive the Registry examination? What is the procedure?

A: VA medical facilities have and will continue to provide assistance to penal authorities or institutions, which agree to furnish examinations to Gulf War veterans, without reimbursement from VA, for purposes of entry in the Registry.

The penal institution can request the necessary information and forms (directives, code sheets, etc.) from the nearest VA medical center. The penal authorities are advised that the examination results and completed forms must be returned to VA for inclusion, on the veteran's behalf, in the Registry and in the veteran's consolidated health record.

Q: With the release of information pertaining to Khamisiyah, how has the direction of treatment and testing changed at VA ?

A: The release of information about possible exposure to chemical weapons during the munitions demolition at Khamisiyah has not significantly affected the examination or treatment programs at VA healthcare facilities. Three years prior to the Department of Defense disclosure, VA designed a special protocol. It was meant to detect symptoms related to possible neurotoxins, including nerve gas exposures.

On November 1, 1993, VA responded to a specific group of veterans who thought they had been exposed to chemical warfare agents. We selected the Birmingham VA Medical Center to intensively review the scientific literature on the health effects of these chemicals. They developed a specialized neurological examination to look for these effects. This facility continues to

serve as a focal point for referral patients, including those with chemical agent exposures.

On November 16, 1993, then Secretary of Veterans Affairs Jesse Brown declared in congressional testimony that "VA has a responsibility to remain sensitive to the concerns of veterans. So we have had an open mind from the beginning. Our search for answers has never ruled out chemical agents." In the Spring of 1994, VA revised the Registry questionnaire and code sheet to ask veterans if they believed they were exposed to chemical warfare agents. These activities continue to be important, and they are being carried out today in VA medical centers nationwide.

Q: We are aware that a chemical casualty has been diagnosed, and the diagnosis has been deemed valid. What does VA have in place to monitor others for determining whether they may be suffering from health effects related to low level agent exposure?

A: We suspect that the "chemical casualty" you refer to is the service member who received a mustard burn while inspecting a bunker. We are unaware of any Gulf War veterans who have been conclusively diagnosed in a VA healthcare facility as a casualty of chemical or biological warfare agents. VA is monitoring Gulf War veterans' health through the Registry and Referral Center programs. As noted above, the Birmingham facility has developed particular expertise regarding the possible health consequences of exposure to chemical warfare agents.

Q: Does VA regulation currently contain rating codes for chemical or biological warfare agent casualty?

A: 38 CFR part 4, the Schedule for Rating Disabilities, provides codes for evaluating disabilities under sixteen separate body systems. The rating schedule addresses any disability that may arise as a result of exposure to chemical or biological agents based on the body system(s) affected.

Q: What is VA doing to ensure that the disability claims adjudication process is taking place properly; fairly, and by the regulations ?

A: These claims are subject to a great deal of scrutiny, and we strive always to ensure their quality. We centralized the processing of Gulf War environmental hazard claims to four area processing offices to assure that these specialized claims would be evaluated by rating specialists who have developed expertise and experience dealing with such claims. We regularly monitor the quality of the claims processed by local level reviews conducted in VA Central Office.

In July 1996, to assure that VA personnel properly developed all supporting evidence in environmental hazard claims and that proper weight has been given to lay evidence in deciding claims for undiagnosed illness, we ordered a complete re-adjudication of all previously disallowed claims.

On May 13, 1997, Secretary Brown approved redistribution of environmental hazard claims from the Area Processing Offices to the 57 regional offices of local jurisdiction because of dramatically increased workload concerns. The expertise and experience developed at the Area Processing Offices was used extensively in the training of regional office personnel who handle these claims.

Where to Get Help

Active duty military personnel with questions or concerns about their service in the Gulf War region - contact your commanding officer or call the Department of Defense (DOD) Gulf War Veterans' Hotline (**1-800-796-9699**) for an examination.

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 and/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 and children - contact the Gulf War Registry 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)**.

Anyone with first-hand information about "incidents" that occurred in the Southwest Asia theater of operations during the Gulf War that may be related to health problems experienced by military personnel who served in the War - call the DoD "Incidents" Hotline at **1-800-472-6719**.

For additional information about VA's program initiatives, see VA's Gulf War veterans' illnesses home page at <http://www.va.gov/gulf.htm>

Note: Representatives of veterans service organizations, including the American Legion. Veterans of Foreign Wars of the United States, Disabled American Veterans, etc., may also be very helpful to Gulf War veterans.

Has Your Address Recently Changed?

If yes, please use this form to update our Gulf War Review mailing list. Send completed form to the Gulf War Review, Environmental Agents Service (131), VA Central Office, 810 Vermont Avenue, N.W., Washington, DC 20420. Thank you.

Your Name

Social Security Number

Old Address

New Address

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