



# Agent Orange Review

Vol. 4, NO. 1

Information for Veterans Who Served in Vietnam

February 1985

## AGENT ORANGE HIGHLIGHTS

• **BIRTH DEFECTS STUDY** On October 3, 1984, representatives of the Centers for Disease Control testified on the results of the Birth Defects Study before the Veterans' Affairs Committee's Subcommittee on Hospitals and Health Care, United States House of Representatives. For more information on CDC's Birth Defects Study, see the October 1984 issue of the "Agent Orange Review."

• **COMPENSATION ACT** President Reagan signed Public Law 98-542, the "Veterans Dioxin and Radiation Exposure Compensation Standards Act," on October 24, 1984. For additional information on this law, see story on page one of this issue of the "Agent Orange Review."

• **VA AO POLICY COMMITTEE** VA's Agent Orange Policy Coordinating Committee, chaired by Deputy Administrator Everett Alvarez, Jr., met on October 2, 1984. Committee members and participants gave updates on current agency Agent Orange activities. The committee coordinates and monitors all agency Agent Orange efforts and recommends specific Agent Orange-related policies to the Administrator of Veterans Affairs.

• **LEGION OF MERIT AWARD** On December 5, 1984, Lt. Col. Alvin L. Young, USAF, was presented with the Legion of Merit Award for his contributions to VA's Agent Orange-related efforts. The Legion of Merit Award is the military's highest noncombat-related award and is given to individuals of the Armed Forces who have made substantial or unique contributions toward accomplishment of assigned missions.

• **AMERICAN LEGION/COLUMBIA U STUDY** The American Legion and Columbia University study of Vietnam-Era veterans is nearly completed. This joint research project looks at problems facing Vietnam veterans, such as Post-Traumatic Stress Disorder, exposure to Agent Orange, other health-related matters and the socio-economic impact of military service on those veterans who served during the Vietnam war. A preliminary report of the findings is scheduled for release in 1985.

• **NEW JERSEY STUDY** The New Jersey Agent Orange Commission is sponsoring a study of Vietnam veterans to determine if Agent Orange is responsible for their medical problems. Thirty veterans, divided into two groups -- those heavily exposed to Agent Orange and a control group of those who were not -- were chosen from among 2,000 volunteers from across the country to participate in this study.

• **AGENT ORANGE INFORMATION CONFERENCE** The VA's Agent Orange Projects Office is planning an Agent Orange Information Meeting. The meeting has been tentatively scheduled for August 1985. Further details will be provided as plans are finalized.

## About the "Review"...

"Agent Orange Review" is prepared by VA's Office of Public and Consumer Affairs. The "Review" is published periodically to provide information on the studies being conducted by the Centers for Disease Control and other federal agencies, as well as information on VA services to Vietnam veterans.

For additional copies of this issue, write VA's Office of Public and Consumer Affairs (003F), 810 Vermont Ave., NW, Washington, DC 20420.

If you have any questions about your Agent Orange examination, contact the environmental physician at the VA medical center where you had the examination.

If you have questions about VA benefits, contact the VA facility nearest you. The phone number can be found in your telephone book under "U.S. Government" listings.

If you would like to be added to the mailing list to receive the "Review," please send your name, complete address and social security number (if you are a veteran) to the VA Data Processing Center (200/392), 1615 E. Woodward St., Austin, TX 78772, Attn: Agent Orange Clerk. Changes of address should be forwarded to the same Austin address, *along with your mailing label.*

If you know someone who has had an Agent Orange Registry exam and is not receiving the "Review," please have that individual follow the instructions just described in order to be added to the mailing list.

## Agent Orange Comp Bill Signed by President

In early October 1984, the House of Representatives and the Senate passed the "Veterans' Dioxin and Radiation Exposure Compensation Standards Act." The President signed the bill into law on October 24, 1984.

This legislation is intended to assure compensation to veterans and their survivors for disabilities or deaths related by sound scientific and medical evidence to dioxin or radiation exposure. The law requires VA to develop regulations containing specific guidelines and standards as to how exposure is to be established

*(See Comp Bill, page 2)*



## AO Working Group Marks Fifth Year

The Agent Orange Working Group of the Cabinet Council on Human Resources, established by the White House, marked its fifth anniversary in December.

The group oversees federal government research activities designed to determine if exposure to phenoxy herbicides is linked to long-term health problems.

This interagency working group assures that the federal government conducts comprehensive research that considers the exposure of Vietnam veterans to Agent Orange and identifies appropriate agencies to conduct this research. All relevant research findings are made available to the public, Congress, and the Veterans Administration's Advisory Committee on Health-Related Effects of Herbicides.

The working group is composed of three panels. The science panel deals with the planning and review of research; the resources panel deals with identifying the funding, staff and necessary information needed to meet the research goals and is chaired by a representative of the Office of Management and Budget; and the public and congressional affairs panel oversees the dissemination of information on research activities.

The Secretary of Health and Human Services recently appointed a new chairman, Charles Baker, Undersecretary of that Department. The Department of Health and Human Services is the lead agency of the group.

## (Comp Bill, from page 1)

and which diseases are to be regarded as service-connected if suffered by:

- veterans who may have been exposed to Agent Orange while serving in Vietnam and
- veterans who were exposed to radiation as a result of atomic weapons testing or in the occupation of Hiroshima and Nagasaki after World War II.

The diseases for which these regulations must be developed are chloracne, porphyria cutanea tarda (a liver and skin disease) and soft-tissue sarcoma if suffered by Vietnam veterans; and malignancies of the thyroid, female breast, lung, bone, liver and skin, most types of leukemia and polycythemia vera (a blood disorder) if suffered by veterans exposed to ionizing radiation.

VA is required to publish final regulations within 300 days of the signing of the bill, which allows for a public comment period.

Additional rules also must be developed for any other diseases for which sound scientific or medical evidence is found linking these diseases with exposure to Agent Orange or ionizing radiation.

The regulations also are to include specific guidelines governing the evaluation of the findings of scientific studies relating to the possible health effects of dioxin exposure and radiation exposure. Study results must be statistically significant, withstand peer review and must be capable of being replicated in other investigations.

The legislation also requires that a panel be established--a Veteran's Advisory Committee on Environmental Hazards. The Committee will consist of 15 members:

- Three who are experts on the health effects of dioxin exposure;
- Three who are experts on the health effects of ionizing radiation exposure;
- Five who are experts on the health effects of dioxin and radiation in exposed populations;
- Four individuals from the general public, including one disabled veteran with a demonstrated interest and experience in relating veterans' concerns on these issues.

None of the medical or scientific experts may be active duty members of the Armed Forces, VA or Defense Department employees, and not more than three may be employees of the federal government.

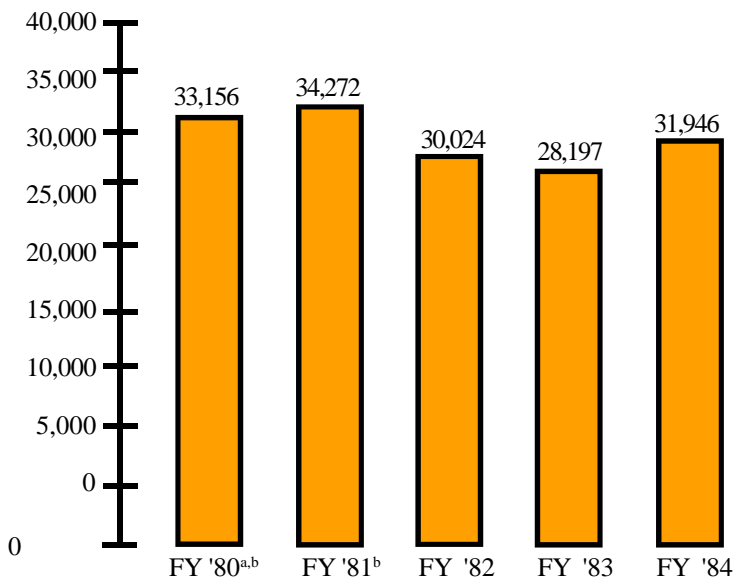
In addition to serving on the Committee, the expert members will form a Scientific Council, which will be subdivided into an eight-member panel to deal with the health effects of dioxin exposure and an eight-member panel to evaluate the health effects of ionizing radiation exposure.

The Council will report on findings and evaluations of scientific studies to the Committee and to the Administrator of Veterans Affairs.

The bill also authorizes interim payments (until September 30, 1986), at disability compensation rates, to veterans disabled by chloracne or porphyria cutanea tarda if suffered by veterans within one year of their departure from Vietnam.

The Veterans Administration has received recommendations for members of the advisory committee from professional organizations and service organizations. VA hopes to establish the committee in early 1985. The committee will participate in developing the regulations, which are expected to be published in the Federal Register in final form by late August or early September.

### AGENT ORANGE EXAMINATIONS



Cumulative total number of initial examinations as of September 30, 1984: 157,595

<sup>a</sup>Includes totals for FY '78 and FY '79.

<sup>b</sup>Because of changes in examination reporting procedures, actual totals prior to 5/81 are unavailable. Estimated figures have been used.

# Agent Orange Research Update

## VA Soft-Tissue Sarcoma Study

The Veterans Administration, in collaboration with the Armed Forces Institute of Pathology (AFIP), is conducting an independent epidemiological study to determine whether Vietnam veterans are at increased risk of developing soft-tissue sarcomas (a group of malignant tumors).

In this case-control study, individuals with soft-tissue sarcomas are compared with individuals without soft-tissue sarcomas, with respect to Vietnam service, possible Agent Orange exposure and other possible risk factors.

Cases are drawn from the AFIP Soft-Tissue Sarcoma Registry. One-third to one-fourth of the soft-tissue sarcomas occurring in the United States are sent to AFIP for review. Controls are selected from the patient logs of the pathologists referring the cases.

The study is conducted in two phases. Phase I of the study will investigate whether service in Vietnam during 1965-1971 increased the risk of developing soft-tissue sarcoma. Providing that an acceptable way of ranking individual veterans' exposure to Agent Orange is developed by the Army's Environmental Support Group, an attempt will be made to determine a trend in the odds of developing soft-tissue sarcoma with an increasing probability of exposure to Agent Orange. In addition, the study of the progress of the disease and the location of the soft-tissue sarcoma will be compared among Vietnam veterans, non-Vietnam veterans and nonveterans.

Military service of the cases and the controls will be determined through cross-checking VA records, the National Personnel Records Center files in St. Louis and the military personnel records center files of each branch of the service.

Phase II of the study will investigate other environmental risk factors for the development of soft-tissue sarcoma based on information obtained from interviews with the study subjects or their next of kin. Information on risk factors, such as occupational or nonoccupational exposure to phenoxy herbicides, radiation, asbestos, arsenic and vinyl chloride, will be obtained from the interviews and analyzed individually and jointly.

The design for the study has been reviewed by various scientific groups--the Agent Orange Working Group's science panel, VA's Advisory Committee on Health-Related Effects of Herbicides and the Armed Forces Epidemiological Board.

The selection of subjects for the study has already begun. A contract for tracing and conducting interviews was awarded in October 1984. The Office of Management and Budget approved the study questionnaire in December 1984.

Data collection is expected to be completed by December 1985, and the final report is expected in June 1986.

## Patient Treatment File Cancer Study

In collaboration with the Armed Forces Institute of Pathology, VA is planning to conduct an evaluation of tissues from malignant neoplasms among Vietnam-Era veterans who are treated in VA medical centers.

Several reports have been published suggesting that exposure to phenoxy herbicides may contribute to a higher risk of developing soft-tissue sarcoma, lymphoma (certain tumors that are usually malignant), nasal cancer and possibly liver cancer.

In general, it takes more than a decade for cancer to manifest itself if it is caused by environmental chemicals. It has been more than a decade since the last U.S. troops were exposed to defoliants in Vietnam and approximately 20 years since the first massive spraying of Agent Orange occurred. The timing, therefore, is appropriate for evaluating cancer problems in Vietnam veterans.

Approximately 5,000 cancer cases among Vietnam-Era veterans treated in VA medical centers during the last three years will be selected for this study. The Armed Forces Institute of Pathology will make a pathology diagnosis without knowing Vietnam service status of cases. The Army Environmental Support Group will determine military service status and the likelihood of Agent Orange exposure for each case without knowing the diagnosis.

VA's Agent Orange Projects Office will coordinate this effort, as well as analyze data once all the information is collected.

The study will serve as a built-in quality control program for VA's Pathology Service by systematically comparing diagnoses made by the VA pathologists with those of the experts at the Armed Forces Institute of Pathology.

## Patient Treatment File Reviews

In a parallel effort to the VA-AFIP Soft-Tissue Sarcoma Study, VA's Agent Orange Projects Office is reviewing the soft-tissue sarcoma cases in VA's Patient Treatment File (fiscal years 1969-1983) for Vietnam-Era veterans.

The study, in collaboration with VA's Pathology Service and AFIP, will compare the anatomical site, history of the disease's progress and frequency of soft-tissue sarcoma between Vietnam veterans and non-Vietnam veterans.

A total of 418 patients with a diagnosis of malignant neoplasm (abnormal growths, such as tumors or cysts) of connective and other soft tissue were identified in the Patient Treatment File between 1969 and 1982. A review of the pathology reports for these cases was made by a VA pathologist.

Information on military service -- Vietnam and non-Vietnam -- was obtained through the National Personnel Records Center in St. Louis. Thirty-six percent of the soft-tissue cases served in Vietnam. In the entire Patient Treatment File, however, 41 percent of the Vietnam-Era patients served in Vietnam. These data suggest that for Vietnam-Era veterans treated in VA medical centers, the frequency of soft-tissue sarcoma among veterans who served in Vietnam is not greater than among those veterans who did not serve in Vietnam.

In Phase II of this review of the Patient Treatment File, the tissue specimens from these cases will be examined by an expert pathologist from AFIP to confirm the original diagnosis.

The final report on the review is expected in May 1985.

## Symposium on Dioxins Held

The Fourth International Symposium on Chlorinated Dioxins and Related Compounds was held in Ottawa, Canada, on October 16-18, 1984.

This annual gathering of dioxin/furan research specialists includes industry, government, and university representatives. The symposium provides a forum for participant interaction and exchange of information on current advances in the different fields of dioxin/furan research.

The three-day program included a presentation on the status and results of federal epidemiological studies of populations exposed to TCDD (dioxin) by Dr. Han K. Kang of VA's Agent Orange Projects Office. The presentation included a brief description of the 15 ongoing studies being conducted by agencies of the United States Government. Dr. Kang covered the studies in progress, their available results and timetables for their completion. Special emphasis was placed on VA's studies of mortality, soft-tissue cancers, dioxin residues in human adipose tissues, and other ongoing health surveillance of Vietnam veterans. Additional Agent Orange Projects Office staff also attended.

A fifth symposium is planned for September 1985 in Bayreuth, West Germany.

## Australia Issues Mortality Report On Vietnam Veterans

The Australian Commonwealth Institute of Health has issued a report indicating that Australian Vietnam veterans are not dying at a faster rate than contemporary Army personnel who did not serve in Vietnam or from diseases that have been suggested are linked with phenoxy herbicides.

The report, a three-part retrospective study, assessed the possible effects of Vietnam service on mortality rates, specifically, whether death rates among Vietnam veterans were higher than among a comparable group of non-Vietnam veterans.

The population studied in 46,166 subjects -- included all former Australian National Servicemen from the Vietnam Era, except those who enlisted after February 1971, those who served for less than 90 days, those who died during service within two years of enlistment, and those who died from combat injuries received in Vietnam.

The study population was divided into two groups: 19,209 Vietnam Era veterans and 26,957 non-Vietnam veterans.

The Australian Department of Defence (Army Office) provided the identifies of the study subjects and data relating to their Army service. Data included age and year of enlistment, and -- for Vietnam veterans -- dates of Vietnam duty.

A manual and computerized search of death and other registers identified whether the study subjects were dead or alive.

Using death records and medical certificates, the cause of death was coded by the Australian Bureau of Statistics. The causes of death were confirmed by a panel of physicians, and the cancer deaths were confirmed by pathological examinations of tissue slides.

Mortality among the study subjects was examined, comparing such variables as pre-enlistment characteristics, discharge characteristics and- for Vietnam veterans- Vietnam service characteristics. For these comparisons, the analysis was restricted to 19,205 Vietnam veterans and 25,677 former National Servicemen who did not serve in Vietnam but who had more than 12 months of Army service. These subjects were followed from the end of their National Service duty until Jan. 1, 1982.

There were 260 deaths among Vietnam veterans and 263 deaths among the non-Vietnam veterans during this period. Three-fourths of the deaths in both groups were attributed to external causes, such as accidents, suicides and murders.

Among the findings:

- The death rate among study subjects was statistically significantly lower than expected for Australian males, taking into account age and year of service. This finding applied both to Vietnam veteran and non-Vietnam veteran groups. Similar observations of low mortality in comparison to the general population have been made of World War I and World War II veterans. These low death rates have been attributed to the high standard of health required of enlistees.

- There was no statistically significant difference in the death rates from cancer between Vietnam veterans and non-Vietnam veterans. In addition, there was no statistically significant difference in the death rates from soft-tissue sarcoma or non-Hodgkin's lymphoma.

- The number of deaths from major categories of causes of death among the study population was not statistically significantly greater than that expected from the estimated Australian general population death rates.

- An excess in mortality observed among Vietnam veterans compared with non-Vietnam veterans within the Royal Australian Engineers and not among other Army Corps groupings was due to deaths from external causes, mainly car and other accidents.

- There was no evidence of an excess of deaths among Vietnam veterans from causes that would be unusual in this group of males. If such evidence had been present, it might have suggested that some deaths of Vietnam veterans might have been caused by exposure to a specific toxic substance.

Earlier studies of Australian Vietnam veterans, released in 1983, had similar findings. One study, coordinated by the Australian Senate's Standing Committee on Science and the Environment, found no evidence of excessive rates of psychiatric disorders or mortality among Australian Vietnam veterans or birth defects among their children. In a separate study by the Commonwealth Institute of Health in Sydney, researchers found that Australian Vietnam veterans were not at an increased risk of fathering children with birth defects. See the April 1983 issue of the "Agent Orange Review" for a more detailed discussion of the study results.

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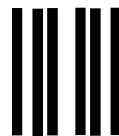


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