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VETERANS ADMINISTRATION ADVISORY COMMITTEE ON HEALTH-RELATED EFFECTS OF HERBICIDES

MEETING OF APRIL 15, 1988

At 8:30 a.m., Dr. Michael Gough, Committee Chairman, called the meeting to order. (The meeting was held in Room 119, Veterans Administration Central Office, 810 Vermont Avenue, N.W., Washington, D.C. 20420.) A list of persons present is attached. In addition to the individuals identified, approximately twenty members of the public attended all or part of the meeting.

ADMINISTRATOR'S REMARKS

After brief opening remarks about the Committee, Dr. Gough, noting that many of the Committee members were appointed for the first time several months ago, asked each member to introduce himself/herself. Following the introductions, Administrator of Veterans Affairs Thomas K. Turnage thanked all those present for their attendance. General Turnage noted that the Agency relies substantially on external expertise such as that assembled in the room. He commented that advice from organized groups, like the committee, is carefully considered and is very much appreciated. The Administrator explained that he was attending the meeting in two roles: as an advocate of veterans and as head of a government agency (VA).

General Turnage noted that the issue has aroused a great deal of emotion and there have been some irresponsible statements, which he hoped the Committee would work to correct. He added that \$100 million dollars had already been spent on this issue. The Administrator mentioned the various research efforts underway (citing Centers for Disease Control studies, the Air Force Ranch Hand investigations, and VA initiatives), the VA Agent Orange Registry examination program, the Agency's priority treatment effort, and disability compensation program. General Turnage thanked the Committee members in advance for their contributions and indicated that he supports their efforts.

FEDERAL RESEARCH OVERVIEW

Lawrence B. Hobson, M.D., Ph.D., Director, Agent Orange Projects Office, provided a brief overview of the major Federal research efforts concerning Agent Orange, dioxin, and the Vietnam experience. Dr. Hobson explained that the VA was also closely monitoring research conducted or sponsored outside the Federal sector (including state studies, international efforts, and private initiatives). He noted that five Federal departments or agencies were conducting research in this area: the Air Force, Centers for Disease Control, National Institute for Occupational Safety and Health, Environmental Protection Agency, and the Veterans Administration.

The Air Force Health Study is an epidemiological study conducted to determine whether adverse health effects exist and can be attributed to occupational exposure to Agent Orange. The study subjects consist of the men involved in the Operation Ranch Hand herbicide spraying unit and a carefully selected control group. The study consists of mortality and morbidity components, with follow-up studies. The initial mortality and morbidity reports were published in 1983 and 1984 respectively. Annual reports on mortality were issued in 1984, 1985, and 1986. The first morbidity follow-up was published in October 1987. In February 1988, the

Air Force released a technical report prepared by one of the original investigators reviewing "salient findings of the first morbidity report and examining the relationships between the initial report findings and the results of laboratory toxicological studies and other epidemiological studies addressing dioxin."

Dr. Hobson reviewed both of these recent Air Force publications. The Air Force investigators have concluded that at present there is not sufficient plausible or consistent scientific evidence to implicate a causal relationship between herbicide exposure and adverse health in the Ranch Hand group. Continued close medical surveillance is indicated.

Dr. Hobson then reported on the Centers for Disease Control (CDC) studies. He noted that the CDC Agent Orange Exposure Study had been stopped because CDC, working with the Department of Defense, was unable to identify which troops were exposed to herbicides in Vietnam. The study was congressionally mandated, so congressional action is needed for termination, although the study has been effectively stopped with the consent of the Domestic Policy Council Agent Orange Working Group, Office of Technology Assessment, and VA. The Vietnam Experience Study is nearing completion. The results of the post service mortality assessment phase of this study were published in the February 13, 1987, issue of the Journal of the American Medical Association. The morbidity component is completed and the results are expected to be published in May.* The CDC Selected Cancers Study will be completed in 1989 or 1990. All of these CDC investigations have been funded by the VA under an interagency agreement approved in January 1983.

The National Institute for Occupational Safety and Health (NIOSH) has a registry of chemical workers exposed to herbicides on their jobs. Investigators at NIOSH are studying these workers but have not yet published results of their research.

The Environmental Protection Agency is working with the VA on the Retrospective Study of Dioxins and Furans in Adipose Tissue. Dr. Hobson indicated that results of this study will be available later this year.

In conclusion, Dr. Hobson commented that there is now no substantive evidence that links Agent Orange to medical problems in Vietnam veterans. He indicated that so long as research is on-going on this subject, the VA will have an "open mind." He suggested that in view of the lengthy period since the end of the Vietnam era, investigations should focus on the neoplasia question.

In response to a question about dioxin blood levels, Dr. Hobson explained that there is no demonstrated correlation between high levels of dioxin in the blood and adverse health problems. He noted that there is no conflict between the recently published results of the CDC and the New Jersey "Pointman" project. He explained that VA is not offering blood testing for dioxin levels for several reasons: (1) The CDC work shows no significant increase of dioxin in ground troop veterans; (2) Among Ranch Handers there are elevated dioxin blood levels, but there is no correlation of the dioxin level with health status; (3) Only CDC is capable of determining the blood levels for us. No other U.S. laboratories can make the delicate, complicated assays, and CDC has no capacity to do anything except research studies; and (4) Current costs of the assays are high, approximately \$1,000 or more per test.

*See JAMA 1988; 259:2701-2719; May 13, 1988.

When asked about the use of Agent Orange Registry data, Dr. Hobson said this collection cannot be used for epidemiological purposes due to the self-selected nature of the Registry participants, but that the VA has looked at the data in search of clues and research leads. At present, no unusual items have been seen in the Registry reviews.

VA RESEARCH EFFORTS

Han K. Kang, Dr. P.H., Director, Office of Environmental Epidemiology (OEE), summarized the research, completed and on-going, for which his office is responsible.

Dr. Kang explained that the results of the Vietnam Veterans Mortality Study, released in September 1987, would be published in the May 1988 issue of the Journal of Occupational Medicine. His paper, entitled "Proportionate Mortality Study of Army and Marine Corps Veterans of the Vietnam War," compared mortality patterns among 24,235 Army and Marine Corps Vietnam veterans with that of 25,685 non-Vietnam veterans using standardized proportional mortality ratios. The veterans were a random sample of deceased Vietnam era veterans identified in a VA benefits computerized benefit file. Military service information was obtained from military personnel records, and cause of death information from death certificates.

Statistically significant excess deaths were observed among Army Vietnam veterans for motor vehicle accidents, non-motor vehicle accidents and accidental poisonings. Similar findings have been reported in other studies of Vietnam veterans. Suicides were not elevated among Vietnam veterans. The Marine Corps Vietnam veterans appeared to have an increased mortality from lung cancer and non-Hodgkin's lymphoma. This study did not investigate possible etiologic factors for these elevated malignancies.*

Dr. Kang also described the research efforts by OEE that focused on soft tissue sarcomas. The Veterans Administration/Armed Forces Institute of Pathology Soft Tissue Sarcoma Study was published in the Journal of the National Cancer Institute in October 1987. This article, entitled "Soft Tissue Sarcoma and Military Service in Vietnam: A Case-Control Study," concluded that Vietnam veterans in general did not have an increase risk of soft tissue sarcoma when compared to those men who had never been in Vietnam. Subgroups of Vietnam veterans who had higher estimated opportunities for Agent Orange exposure seemed to be at greater risk of soft tissue sarcomas when their counterparts in Vietnam were taken as a reference group. However, this risk was not statistically significant.**

The Patient Treatment File/Soft Tissue Sarcoma Review was published in the December 1986 issue of Journal of Occupational Medicine. This study, entitled "Soft Tissue

*The paper was authored by Patricia Breslin, Sc.D.; Han K. Kang, Dr. P.H.; Yvonne Lee, M.Sc.; Vicki Burt, Sc.M.; and Barclay M. Shepard, M.D. (JOM 1988; 30:412-419)

**The paper was authored by Han K. Kang, Dr. P.H.; Franz Enzinger, M.D.; Patricia Breslin, Sc.D.; Michael Feil, M.S.; Yvonne Lee, M.S.; and Barclay M. Shepard, M.D. (JNCI 1987; 79:693-699).

Sarcomas and Military Service in Vietnam: A Case Comparison Group Analysis of Hospital Patients," examined through a comprehensive review of medical records and military personnel records, the association between previous military service in Vietnam and soft tissue sarcomas. The case group comprised 234 Vietnam-era veteran patients who served in the military between 1964 and 1975 and were treated in VA hospitals between 1969 and 1983 with a diagnosis of soft tissue sarcomas. The comparison group consisted of 13,496 patients from the same Vietnam-era veteran patient population. No significant association of soft tissue sarcomas and previous military service in Vietnam was observed.*

Dr. Kang cited two additional publications prepared by his office. An Agent Orange Registry Review appeared on pages 167-179 in Chlorinated Dioxins in the Total Environment II (Butterworth publishers, 1985). In 1983, Dr. Kang co-authored an overview of Federal sponsored research projects which was published in Environmental Science and Technology (Volume 17, pages 530-540).

Dr. Kang also mentioned a health surveillance review conducted by his office of former members of the 570th Supply Company in Vietnam. This effort was initiated in response to concerns expressed by Congressman Pete Stark regarding the possible long-term effects of exposure to a chemical fire.

Dr. Kang then reported on a number of on-going research projects. He noted that an update of the Vietnam Veterans Mortality Study was underway. This update adds approximately ten thousand deaths to the original study which looked at deaths only through 1982. The update will increase the study's statistical power and provide for greater detection of illnesses with a long latency period. Another follow-up effort being pursued by OEE is the mortality analysis for Army veterans stationed in I Corps in Vietnam. This analysis is designed to determine if Army veterans stationed in I Corps experienced problems similar to Marines who served in that OEE is also conducting VA Patient Treatment File reviews for non-Hodgkin's lymphoma, a cohort mortality study of Marine Corps Vietnam veterans, and a cohort mortality study of Women Vietnam veterans. In addition, the OEE has contracted out the Health Study of Women Vietnam Veterans, mandated by Public Law 99-272. This effort is being designed by the New England Research Institute. As mentioned by Dr. Hobson earlier, the Retrospective Study of Dioxins and Furans in Adipose Tissue is nearing completion. Dr. Kang projected that this joint VA/EPA study would be completed by the end of May.

Mr. Joseph S. Carra asked about the statistical power in the mortality study for soft tissue sarcoma. Dr. Kang indicated that it was small. Mr. Allen E. Falk asked about the Twin Study. Carl O. Schulz, Ph.D. noted that there were two recent publications on this study. Mr. Falk also asked about the numbers in the Health Study of Women Vietnam Veterans, the diagnosing of non-Hodgkin's lymphoma, and the Agent Orange Registry reviews. Dr. Kang respond to these inquiries. Turner Camp, M.D. sought and received clarification regarding the selection process for the Marine cohort mortality study.

*The paper was authored by Han K. Kang, Dr. P.H.; Lee Weatherbee, M.D.; Patricia Breslin, Sc.D.; Yvonne Lee, M.S.; and Barclay M. Shepard, M.D. (JOM 1986; 28:1215-1218).

James S. Woods, Ph.D., M.P.H., expressed concern about whether central nervous system disfunction measurements were included in these studies. Dr. Kang indicated that the CDC and Air Force efforts have such instruments. Richard A. Hodder, M.D., M.P.H., noted that the findings from some of the studies indicated that some problems experienced by Vietnam veterans were quite similar to those suffered by veterans of other wars. George Lumb, M.D., M.R.C.P., added that what is now known as "post tramatic stress disorder" was called "shell shocked" in an earlier era.

VA NON-RESEARCH EFFORTS

Layne A. Drash, Deputy Director, Agent Orange Projects Office (AOPO), indicated that the Agent Orange-related efforts, including non-research activities, have been on-going and sustained at the VA since the issue first surfaced in 1978. Mr. Drash described the Agent Orange Registry program, health care available under Public Law 97-72, publications, nationwide conference calls between VA headquarters and field stations, and VA videotapes.

In mid-1978, the VA initiated the Agent Orange Registry as a service to Vietnam veterans concerned about the possible health problems that may have been caused by exposure to herbicides. The Agency continues to offer Vietnam veterans an opportunity to receive a comprehensive medical examination including a series of baseline laboratory tests and other studies which the examining physician determines is necessary. Mr. Drash reported that more than 228,000 Vietnam veterans have chosen to participate in this program to date. He noted that approximately six to seven hundred initial examinations are now being provided each month.

In addition to the examination program, the VA provides medical treatment to Vietnam veterans for illnesses possibly related to Agent Orange exposure. Authority for this interim priority treatment program was established by Public Law 97-72 and extended to September 30, 1989 by Public Law 99-166. Mr. Drash noted that approximately 1.5 million outpatient episodes and 25,000 inpatient admissions have occurred under this authority.*

Mr. Drash reported that the VA has published a series of monographs on Agent Orange-related issues for the education of health care professionals: Birth Defects and Genetic Counseling (October 1985), Cacodylic Acid: Agricultural Uses, Biologic Effects and Environmental Fate (December 1985), and Human Exposure to Phenoxy Herbicides (May 1987). These documents received widespread distribution within the VA and outside the Agency.

The Agent Orange Projects Office has a quarterly nationwide conference call with environmental physicians, chiefs of staff, medical administration service staff, and other field personnel to update them on the status of research and non-research issues and assist in clarifying matters of operational concern. AOPO also has a mailout program to ensure that field stations have appropriate documents, information, and other resources to assist concerned veterans.

Mr. Drash also noted that the VA is in the process of producing a new videotape, updating the award-winning (Emmy, Golden Reel of Excellence, etc.) film, "Agent Orange: A Search for Answers," released in 1981. Mr. Drash indicated that the new tape would be shown to the Advisory Committee later in the meeting.

*These figures are for clinic episodes and contacts; the number of patients treated is smaller since many veterans have been treated two or more times.

Public Law 96-151 required the VA to conduct a comprehensive review and analysis of scientific literature relating to phenoxy herbicides and dioxins. In 1981, a two-volume document entitled, Review of Literature on Herbicides, Including Phenoxy Herbicides and Associated Dioxins was published. In 1984, an additional two volumes were released. Six more volumes were published since then. An additional two volumes, covering literature produced in 1987, will be issued later this year. Lay language synopses have also been prepared for use by the general public.

Mr. Drash introduced Dr. Schulz of Clement Associates, Inc., the contractor who prepared the literature reviews, except for the first two volumes, and synopses. Dr. Schulz indicated that Volumes XI-XII, which will be published in the near future, contain 305 citations, a figure that he noted has been relatively constant over the years. Dr. Schulz explained that Clement tries to identify all appropriate studies, including those not published in the "traditional" way. The contractor is interested in studies conducted in other countries, federal investigations, state efforts, and private studies. He urged the Committee and audience to bring to his attention studies that he may not be aware of because of the nature of release.* In particular, he expressed concern that studies not published in scientific journals may be overlooked. He wants the reviews to be as complete and current as possible. Noting the long delays (timelag) in publication of scientific papers, Dr. Schulz requested preprints of these papers where feasible.

Mr. Falk asked about the selection criteria. Dr. Schulz explained that all relevant articles are included in the bibliography, but that some of the less significant publications have been omitted or mentioned only briefly in the analysis. In response to a question, he explained that he personally reads most of the articles and has overall editorial control over the entire publication. When asked by a member of the audience to summarize the current state of knowledge regarding the adverse health effects of herbicides, Dr. Schulz urged the questioner to read the reviews, especially the conclusions at the end of each chapter. Dr. Schulz suggested that the issues are too complex to be summarized in a few sentences at a meeting.

COMPENSATION ISSUES

Mr. Robert M. White of the VA's Compensation and Pension Service provided a brief description of the scope of the Agency's pension program and compensation program. Mr. White explained that service connection of a disability is a legal determination based on medical evidence. The compensation provided for such disabilities are based on the average loss of earning capacity.

He explained the Public Law 98-542 specifically dealt with Agent Orange claims. It required the VA "to prescribe regulations regarding the determination of service connection of certain disabilities of veterans who were exposed to dioxin in the Republic of Vietnam while performing active military, naval, or air service." Such regulations were issued in 1985. (The proposed rule was published in the Federal Register on April 22, 1985—see pages 15848 through 15855. The final rule was published on August 26, 1985—see pages 34452 through 34461). Under these regulations, chloracne manifested not later than three months from the date of

*Dr. Schulz can be reached through the Agent Orange Projects Office, Veterans Administration Central Office, Washington, D.C. 20420.

departure from Vietnam is presumed to be service-connected for disability compensation purposes. Mr. White stated that approximately 32,000 claims had been filed since 1978 alleging that one or more of a veteran's disabilities were the result of Agent Orange exposure. While service-connection was granted for many of the claimed disabilities on grounds other than Agent Orange exposure, few have been granted on the basis that such exposure was the cause of the claimed condition. A review of computer records shows that only nine veterans (revised from eight) are receiving compensation for chloracne. Of those nine, six were service-connected because the condition was shown in service medical records and it was unnecessary to determine the cause. The remaining three claims were granted on the basis that Agent Orange exposure caused the chloracne.

Dr. Woods asked where the three month period originated. An interim benefits provision of Public Law 98-542 cited one year after the date of the veteran's departure from Vietnam for chloracne and porphyria cutanea tarda. The supplementary information for the proposed rule explained that industrial accident follow-up studies indicate that chloracne associated with dioxin exposure is manifested within days or weeks. Mr. White declared that the VA was trying to give veterans the benefit of doubt by expanding this period to three months. Mr. White explained that this time period was endorsed by the Veterans' Advisory Committee on Environmental Hazards. He noted that Dr. Taylor, a recognized world authority on chloracne, was a member of that Committee.

Mr. White noted that veterans who filed for disability compensation for Agent Orange exposure but did not claim a disability are advised to specify their disabilities and submit appropriate medical evidence. (Mr. White later provided the Committee with a copy of the section of VA Manual M-21-1 which pertains to this matter and assured the committee that the manual would be modified to include referral information regarding the VA Agent Orange Registry program.)

LEGAL ISSUES/LITIGATION

Mr. Thomas Hagel reported on legislation pending before Congress and the status of the class action lawsuit known as <u>In re: "Agent Orange" Product Liability Litigation</u> (Case Number MDL No. 381).

Mr. Hagel observed that there are two significant legislative proposals, pending before the Senate Committee on Veterans' Affairs, which would provide for presumptive service connected disability for Vietnam veterans with certain medical conditions.

- S. 1692, Agent Orange Disability Benefits Act of 1987, introduced by Senator Murkowski, Ranking Minority Member of the Committee, would provide for presumption relating to disease or death resulting from non-Hodgkin's lymphoma. The effective date for this provision would be October 1, 1987. The presumption provided would not apply to any claim received by the VA after September 30, 1991.
- Mr. Hagel noted that another legislative proposal, S. 1787, was much broader in scope. S. 1787, Veterans' Agent Orange Disabilities Act of 1987, was introduced by Senator Daschle, for himself and Senators Kerry, Simon, Worth, Heinz, Specter, and Pressler. Mr. Hagel stated that this proposal contained some very significant Congressional findings, namely that "(t)here is sufficient scientific evidence to warrant a presumption that dioxin or other toxic herbicides used in support of

United States and allied military operations in the Republic of Vietnam during the Vietnam era (A) causes non-Hodgkin's lymphoma and lung cancer in humans who have been exposed to such herbicides, and (B) has disease causing immunosuppressive effects on such humans."

This legislation would provide for presumption of service connection for Vietnam veterans who have such disabilities, and direct the VA to enter into an agreement with the National Academy of Sciences or an appropriate nonprofit private scientific organization to survey all scientific studies of the effects that dioxin and herbicides used in Vietnam to determine what (if any) diseases are reasonably associated with damage to or suppression of the human immune system resulting from exposure to herbicides. The legislation also would require semiannual VA reports on the results of examinations and treatments of veterans for disabilities related to exposure to certain herbicides.

Both the Senate and the House Committees on Veterans' Affairs have scheduled hearings on Agent Orange-related issues. The Senate Committee will hold a hearing on May 12. It is expected to focus on this legislation and oversight issues. The House hearing is planned for June 8.

With regard to the lawsuit named above, Mr. Hagel indicated that the original \$180 million settlement fund now has a value of \$235 million. He said that the U.S. Supreme Court has deposed of five appeals, and he speculated that the remaining two appeals before the Supreme Court would be deposed of in the very near future. Mr. Hagel explained that \$195 million would then be distributed to Vietnam veterans and their families based upon the extent of disability. Under the distribution plan a totally disabled veteran could get \$12 thousand and the family of a deceased veteran could get \$5 thousand. Aetna Insurance Company would administer the payments. In addition to these payments, \$40 million would be provided to a foundation established under the settlement agreement to conduct research, provide public information, and perform public relations tasks.

Mr. Hagel noted that in addition to this litigation, there are a number of other legal actions regarding Agent Orange pending in various courts throughout the Nation. He did not comment on these cases except to say that he had some difficulty in tracking them.

Reference was made to S. 1805, a bill "(t)o protect certain pensions and other benefits of veterans and survivors of veterans who are entitled to damages in the case of <u>In re: 'Agent Orange' Product Liability Litigation</u>." This legislation would provide that settlement payments resulting from this litigation not be considered in determining VA-pension eligibility or rates, or eligibility for hospital and nursing home care.

VETERANS' ADVISORY COMMITTEE ON ENVIRONMENTAL HAZARDS

Mr. Charles F. Conroy, Jr., and Mr. Frederic L. Conway, III, commented briefly on the Veterans' Advisory Committee on Environmental Hazards, a group established by the VA in accordance with Public Law 98-542. Mr. Conroy, recently appointed to the Committee on Environmental Hazards, attended his first meeting of that Committee on February 18-19, 1988. As a member of both Advisory Committees, it is hoped and expected that Mr. Conroy will effectively serve as a liaison between the two groups. Mr. Conway is the Executive Secretary of the Veterans' Advisory Committee

on Environmental Hazards. He succinctly described the February meeting, noting that no change in VA compensation regulations were recommended by that Committee notwithstanding its extensive and on-going review of scientific studies.

In view of the interest of many individuals in both Committees, Dr. Gough suggested that the Committees meet on contiguous days. Since the next meeting of the Environmental Hazards Committee is planned for November 3-4, Dr. Gough asked Committee members to hold November 2 open for a next meeting of this Committee.

STATE ACTIVITIES

State officials from West Virginia, New Jersey, Michigan, Minnesota, and New York briefly reported on Agent Orange-related efforts within their states units. Mr. Conroy indicated that 1,400 Vietnam veterans have been examined in the West Virginia program. The most common complaints have been skin problems. (About 6,500 Vietnam veterans have been examined by the VA for the Agent Orange Registry in West Virginia VA medical facilities).

Mr. Falk reported that the Journal of the American Medical Association published the "Pointman Project" study results on March 18. New Jersey has \$650,000 funded for the next phase of the research, looking at the "middle" group of exposed. New Jersey is working with scientists at the University of Umea, University of Texas, as well as Rutgers. Mr. Wayne P. Wilson, Executive Director, New Jersey Agent Orange Commission indicated that a symposium is planned in New Jersey for mid-October 1988.

Elroy C. Klaviter, Ph.D., of the Michigan Department of Public Health, described Michigan's 5-year Agent Orange program. Dr. Klaviter noted that Michigan's 14-member Agent Orange Commission had held four meetings to date. Questionnaires were sent to 161,000 Michigan veterans soliciting information about war service, health status, employment, etc. Of these 38,000 were returned as not deliverable and 51,000 returned completed. Michigan has established a toll-free information/referral telephone number to assist Vietnam veterans in the state. According to Dr. Klaviter, 10,000 calls have been received since October. Many of the callers were referred to the VA. Dr. Klaviter indicated that a descriptive analysis of the data compiled from the questionnaire is planned.

Mr. Kirk Jones of the Minnesota Department of Veterans' Affairs informed the Committee that this department provides information, assistance and referral help to the Vietnam veterans in Minnesota in need of such services.

Mr. Kary Jablonk of the New York State Temporary Commission on Vietnam Veterans and Mr. James R. Peluso of the New York State Division of Veterans Affairs reported on the outreach efforts, seminar series, a newsletter, health department research on dioxin, and Temporary Commission on Vietnam Veterans forums conducted throughout the state. They indicated that the interest in Agent Orange, dioxin and related issues is quite high among Vietnam veterans in New York.

While unable to attend the meeting, officials from two other states wrote to the Chairman regarding their activities. Craig H. Close of the Agent Orange Commission of Rhode Island explained that his group disseminates Agent Orange information to veterans, counsels them to take the Agent Orange Registry examination at the VA medical center, assists these veterans in getting records and acquiring and using

MERBS tapes, helps veterans with the class lawsuit, and acquires and shares with the State Legislature information on dioxin and Agent Orange.

Jerry R. Nida, M.D., Chairperson, Agent Orange Outreach Committee, Oklahoma State Department of Health, wrote that his committee is "relatively inactive for the present." The members continue to review research materials but meet only as needed. He added that they have a "self reporting Agent Orange Register which on annual analysis compares to the larger Texas Register in results." Dr. Nida reported that they continue to answer questions by letter or telephone (405) 271-4194 from veterans and their families.

VSO's EFFORTS

Committee members affiliated with veterans' service organizations provide comments on the efforts and concerns of their organizations regarding the Agent Orange issue.

Dr. Camp spoke of renewed interest in Agent Orange issues at the Veterans of Foreign Wars of the United States (VFW). He indicated that the VFW supports a liberalization of the compensation regulations governing Vietnam veterans with Agent Orange-related disabilities. He noted that the VFW favors legislation that would effect this change.

Mr. David W. Gorman of the Disabled American Veterans (DAV) urged that the State government units keep him and his organization apprised of their activities. Mr. Gorman indicated that the DAV supports the legislation discussed earlier in the meeting and would be testifying during the May 12 Senate Veterans' Affairs Committee hearing. Specifically, DAV favors service connection presumption for non-Hodgkin's lymphoma. Mr. Gorman argued that science cannot answer all the questions raised about the effects of herbicides and that a political remedy would be required. He was pleased with the recent Congressional interest in this matter. Mr. Gorman stated that the DAV fully supports S. 1805, described above, introduced by Senator Mitchell, that would ensure that veterans would not be penalized for receiving funds from the class action lawsuit settlement.

Mr. Philip R. Wilkerson noted that the American Legion has a long history of interest in the Agent Orange issue. He said that American Legion representatives are monitoring the VA's Agent Orange Registry program, that his organization had commissioned a Columbia University study of the effects of Agent Orange and other factors of the Vietnam experience, and that the American Legion supported legislative action on this issue.

WOMEN VETERANS CONCERNS

Col. Lorraine A. Rossi, USA (Ret.), reported to the Committee that female Vietnam veterans, like their male counterparts, have concerns about the possible effects of Agent Orange on their health and the health of their children. In 1983, the Administrator established the VA Advisory Committee on Women Veterans. Col. Rossi was the first person selected to chair that group. She indicated that concerns soon arose about Agent Orange effects and that her Committee was alarmed to learn that women had been specifically excluded from planned and on-going research efforts. Reproductive issues were of particular concern to the Women's Committee. That Committee sought to have existing studies modified or have new research initiated to focus on the concerns of women Vietnam veterans. Col. Rossi said that

she and her Committee were pleased with the inclusion in Public Law 99-272 of a requirement for an epidemiological study of any long-term adverse health effects (particularly gender-specific health effects) which may have been experienced by women who served in the Armed Forces of the United States in Vietnam. She indicated that she and other women will be closely following the progress of this VA study and hope that results will be available in the not too distant future.

VIDEOTAPE

The draft VA videotape "Agent Orange: An Update" was then shown. The 37-minute program is designed to update the videotape "Agent Orange: A Search for Answers," released in 1981. Committee members commented briefly on the draft film. Mr. Falk questioned who the audience was. He suggested that knowledgeable Vietnam veterans already knew most of what was covered by the videotape and that its message, that more research was required because we still lack information about possible Agent Orange effects, would only serve to frustrate these veterans. Mr. Falk was assured that the film was primarily for VA employees. Dr. Gough suggested that the program's content was overwhelming for those unfamiliar with research efforts on dioxin and Agent Orange. Dr. Hodder indicated that the VA might wish to produce a shorter version for veterans.

OPEN FORUM

The open forum provides audience participants an opportunity to bring herbicide-related concerns to the Committee and to the VA. Only one matter was raised at the open forum during this meeting. Mr. Mark Lasher of Veterans of the Vietnam War indicated that a veteran he knew was denied a needed prosthetic device although he claimed Agent Orange exposure. Dr. Hobson responded that he would check out this situation if Mr. Lasher would provide him with the specifics of the problems.

COMMITTEE RECOMMENDATIONS

The Committee reviewed a number of issues and concerns as it prepared to make recommendations. The first was the matter of how the VA communicates with veterans applying for disability compensation without specifying a disability. After Mr. White provided additional information on this matter and assurances that the VA manual would be modified, the Committee decided that no recommendation was necessary.

The second issue discussed by the Committee during this segment of the meeting was the concern about the possible reduction of Federal benefits due to receipt of funds from the settlement of the class action lawsuit. There was general agreement that benefits should not be offset because of the money received by the litigants. Discussion ensued as to whether the Committee should issue a single recommendation on the issue (concerning all federal benefits) or make two recommendations (one focusing on VA benefits and a second regarding all federal benefit programs). The Committee decided that a single recommendation would best serve its purpose. The Committee unanimously recommended that the Administrator recommend to Congress that benefits accrued from the Agent Orange litigation settlement not be counted against individuals applying for any Federal benefits or services.

The next matter examined by the Committee is the relationship between the various state efforts. It was agreed that State governments are taking an increasingly important role and that the Committee should assume a greater responsibility in surveying and where possible coordinating these activities. The Committee agreed to serve as a clearinghouse for state activities and to discuss this further at the next meeting of the Committee. No recommendation was made to the VA on this issue.

The fourth issue discussed by the Committee was the matter of communication with Vietnam veterans. It was noted that the "Agent Orange Review" pamphlet had not be issued in the last two years. (The most recent issues were published in February 1985 and March 1986). The Committee was informed that the Office of Public Affairs, the VA unit responsible for this publication, was working on another edition. The Committee unanimously recommended that the Agency move expeditiously to publish and disseminate the Agent Orange Review.

One committee member expressed his appreciation for the information packet provided by committee staff. He requested that such information be furnished in advance of the meeting date in the future. He also requested that the Committee be provided with additional information regarding what data were collected in the Agent Orange Registry. When it was pointed out that the Agent Orange Registry circular contained in the information packet explained this in some detail, the second request was withdrawn.

ADJOURNMENT

At approximately 2:45 p.m., Dr. Gough thanked all present for their participation and brought the meeting to a close.

CERTIFICATION

As Chairman of the Advisory Committee on Health-Related Effects of Herbicides, I certify that these minutes are accurate.

Grand Rosaller Horn Michael Gough, Ph.D.

Attachment

VETERANS ADMINISTRATION

ADVISORY COMMITTEE ON HEALTH-RELATED EFFECTS OF HERBICIDES

MEETING OF APRIL 15, 1988

PERSONS PRESENT AT MEETING

- 1. Advisory committee members and staff See attached
- 2. Agency employees:

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