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Torpedoing the Blue Water Navy

Is This the Final Insult or the Last Gasp of Stupidity?

Vietnam War veterans are a fine lot: they suffered through the War; they suffered the abuse of an ungrateful nation upon their return; they continue to suffer the indignity of an incompetent and antagonistic Department of Veterans Affairs (DVA); and they are the fastest dying group of veterans of any war we've fought. By the end of 2009, only about 30% of all Vietnam War veterans were still alive. At that rate, the last of the Vietnam War veterans will be buried by the surviving soldiers of WWII.

One group of Vietnam War veterans that have had more than their share of hard knocks are those Navy, Coast Guard, and Marine personnel who served offshore Vietnam. We refer to this group as the Blue Water Navy (BWN). The VA currently refers to them as Vietnam Era veterans, to clearly separate them from those who served in the Vietnam War, which requires having had one's "boots on ground." That is now the definition of a Vietnam War veteran.

Previous generations of soldiers were promised the treatment so eloquently stated in Abraham Lincoln's 2nd Inaugural Address: "...to care for him who shall have borne the battle and for his widow and his orphan..." Such care was offered up through WWII, began to wane with the Korean War, and completely disappeared for the Vietnam War veteran (which from hereon includes the BWN.)

The Vietnam War veterans should be commended for several things:

- They should be saluted because of the extended grief they are taking in the processing of claims for service-connected illnesses. With a large number of them suffering from some form of dioxin-induced disability, they are the first veterans to return from war with a hidden time bomb stored in their fatty tissue. Dioxin can lay dormant for 30 or 40 years before it rears its ugly head.
- They have made sure that their sons and daughters return from War into warm, open arms of a society that distinguishes between the War and the Warrior. They know what it is like because our society gave them a cold shoulder. .
- The most patriotic thing they did was not overthrow the corrupt and deceitful Government that sent them to Southeast Asia. The nature of their training and experience made them an unstoppable force.

The Blue Water Navy veterans have not stopped fighting and still face an antagonistic DVA that blatantly broke a federal law by removing them from eligibility for service-connected health care and compensation for their serious disabilities in 2002. This same agency usually gloats in the fact that they operate a closed system of legislative, executive and judicial control over the lives of veterans. But in this instance, they left their inner kingdom when it ruled against them in the Jonathan Haas case. They spent hundreds of thousands of dollars of resources fighting the BWN in court when in fact they are on public record that they have absolutely no medical or scientific evidence to justify the exclusion of BWN from their earned benefits.

They undoubtedly have a very serious reason for fighting their own veterans as they do, and it is probably the fact that, if they admit that Agent Orange was not confined to the soil of Vietnam, this Government, and the chemical companies they protect, will face unprecedented international liability. But the probability of that liability catching up with them seems inevitable regardless of how polished a smile they can show when they've been caught with their hand in the cookie jar. Or, in this case, on the trigger of the gun they hold to the BWN veterans' head.

In this February, 2010, there is legislation in both the House (H-2254) and Senate (S-1939) that can resolve most of the BWN's grievances. There are 244 co-signers to House Bill H-2254, but only 218 are needed for a majority. And yet, this Bill has not been pulled out of Committee in either the House or the Senate. It's been said quite clearly that the issue is not money, but in the end, all legislative decisions somehow involve a dollar value. In this case, the legislators are being asked to put a price tag on the life of a veteran.

When this issue of Vietnam being veterans poisoned by dioxin-laden Agent Orange had to be dealt with once before, both the House and the Senate voted unanimously to pay for all the War veterans who could be sickened by Agent Orange. And, since there was no way to identify which veteran actually came into contact with the herbicide, and to what degree, the concept of "presumption of exposure," as suggested by Admiral Zumwalt, was used as a means of not leaving any of the potentially exposed veterans without service-connected healthcare or disability compensation. That was the basis of the Agent Orange Act of 1991.

The legislature is now faced with the identical question solved by the 1991 Agent Orange Act: How can we tell which member of the Blue Water Navy was exposed and to what degree? But this time around, it appears they will handle that issue in a much less honorable way than was done in 1991. There has been talk about considering some limit to distance from the shore line to determine who will be eligible for their benefits for having borne the battle. The concept is absurd given the reasonability of the "presumption of exposure" that has been used for the past 19 years. No one knows how far the dioxin molecules traveled on the wind and in the water. But we do know that dioxin has been found in the fat of polar bears that weren't likely to have been within the Combat Zone during the Vietnam War. The logical answer, under the current rules, is: Everyone within the Combat Zone of the Vietnam War is at least as likely as not to have been exposed to herbicide, regardless of where it was intended to go. The basic water cycle of our planet guarantees that it will eventually wash out to sea.

Why Distance From Shore is Totally Irrelevant

In 1989, the Center for Disease Control (CDC) conducted the "Selected Cancers Study" as a comprehensive medical study of the effects of Agent Orange/dioxin exposure to our troops who fought in the war in Vietnam. The outcry from veterans of the US and Australia wanting answers to their growing list of fatal and disabling diseases was growing quite loud.

The conclusion of this and some later Australian studies resulted in a number of interesting findings:

- Of the three service branches studied for all cancers in the "Selected Cancers Study", Navy veterans had the highest overall mortality;
- Veterans of the naval services, who didn't spend time on land, had a higher incidence of Non-Hodgkins Lymphoma (NHL) than the land-based troops, by a factor of about 20%;
- Navy veterans had a higher than expected mortality from lung cancer (39%) and melanoma (56%);
- Veterans of the naval services had a higher incidence of testicular cancer than their counterparts on land.

Based on the "Selective Cancers Study," Congress granted, in 1990, VA compensation for NHL to any person who served "in the waters offshore" of Vietnam between 1962 and 1975. Note that the distance from shore is open ended, just as is the lack of any location or time limit for boots-on-ground qualification for the presumption of exposure to herbicides. Crossing the tarmac at Tan Son Nuht airport with less than 60 seconds on ground provides the same benefits for presumptive exposure as 9 months spent in the bush actually experiencing a contact with the sprayed herbicide.

Following the "Selective Cancers Study," U.S. Government funded investigation by active research into the medical and scientific effects of dioxin on American veterans of the Vietnam War simply stopped. The Ranch Hand Study, now recognized as a fraudulent debacle at the highest levels, is the only large scale study that was conducted. In contrast, the Australian Government, with findings of the same anomalies regarding their Navy

veterans, ordered their medical research facilities to come to some conclusion as to why those anomalies involving service offshore Vietnam existed. In a series of further studies, capped off by the RAN study published in 2002, medical evidence showed that Royal Australian Navy (RAN) sailors were highly dioxin-contaminated. It also showed that the conversion of sea water containing dioxin used in the flash distillation technique identical on all U.S. and Australian naval vessels, increased the toxicity of dioxin taken onboard with water by a factor of almost 4 and tainted the potable water used for cooking, drinking and bathing. No one knows how long the dioxin molecules or the contaminated water remained in the fresh water tanks of these ships, but they both left residuals in the tanks and pipes well after the ship left the vicinity of Vietnam.

We believe that the reason for the unusual level of diseases suffered by the naval services vs. the land services was a matter of ingestion and dosage level: land troops experienced a few exposures with large amounts of dioxin primarily through skin absorption but with some ingestion and inhalation, while naval personnel experienced a long and continuous duration of ingested low dose exposure, on a daily basis, often for six months to a year. No one knows if and for how long that exposure continued after the ship left the vicinity of Vietnam and took on new, unsuspecting crew.

As stated earlier, in February, 1991, the House and Senate unanimously passed the Agent Orange Act of 1991, granting all military personnel who served in the Southeast Asian Theater of the Vietnam War full medical and compensation benefits to treat veterans disabled by dioxin and to help defray the enormous personal cost being expended by veterans due to dioxin-induced diseases and lost wages from their disabilities. The Agent Orange Act of 1991 was extremely important and somewhat undefined because it gave the presumption of dioxin exposure to every individual who served in the Vietnam War Zone. No one knows exactly who was exposed to dioxin during their service in Vietnam or to what degree, whether they were on the land or on the water. Therefore, the concept of presumptive exposure was applied to everyone who was in the defined Combat Zone (which has a graphic at <http://bluewaternavy.org/yournavy.htm>).

The VA was definitely not being bombarded by false claims for disabilities, and was anything but generous when granting service-connected disabilities for Agent Orange exposure. Of the 99,226 claims for dioxin exposure submitted by March, 2000, the VA granted only 7,520 claims.

In February, 2002, the Department of Veteran Affairs, on their own volition, and by their own admission having no scientific or medical evidence to justify the move, stopped providing medical care and compensation for service-connected herbicide disabilities to Navy veterans of the Vietnam War, as well as Air Force veterans of that conflict.

In a controlled dioxin study done in 1996 using lab rats, it was found that those animals exposed to dioxin at 10 parts per trillion (ppt) experienced severe suppression of their immune system resulting in fatal inability to resist common strands of influenza. 10 parts per trillion is the equivalent of one drop of dioxin in a water solution equally distributed in a volume of train cars 10 miles long. But no one knows what the lowest threshold of exposure is. The EPA has never been able to specify a threshold of the danger level for dioxin, but the amount used in this experiment was at least 10 times stronger than the 1 part per trillion currently designated as the lowest danger level. So the line of water-filled train cars would actually be 100 miles long, given the 1ppt, and a drop of water from any of that huge water supply is still enough to cause cancer and other illnesses. The reason it is set at 1ppt is that we don't have sophisticated enough equipment to measure smaller doses. And it probably is a smaller dose. As far as the CDC and EPA are concerned, no one knows the lower limit that is considered a "safe" ingestion of dioxin (TCDD) such as that found in Agent Orange. No one knows.

Just as there is no known safe dosage for dioxin, there is no safe distance limit for offshore veterans to positively avoid all exposure to dioxin in the water, in the atmosphere, and in the spray drift. No one knows what these measurements and distances are. Anyone who says otherwise is seriously deficient in the comprehension of medical or scientific concepts. It seems to be a reasonably safe assumption for the entire area

of the War Zone to be included as an area where the presumption of exposure to dioxin-laden herbicide was a high probability for Blue Water Navy personnel. They are not asking for anything new - just their under coverage of the Agent Orange Act of 1991. The current assumption of exposure is in place to cover all possible cases for the ground troop contamination. No one knows if that area is overly broad, but the same open-ended latitude to encompass unknown troop location and unknown length of time for exposure that is granted to personnel with boots-on-ground should likewise be given to the offshore personnel. To do anything less is a crime against humanity.

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