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The New Hork Eimes

At War Notes From the Front Lines

Inconclusive Agent Orange Study Is Conclusive Enough for Vet Groups

By JAMES DAO June 14, 2011, 9:39 am

It has been nearly a month since the Institute of Medicine released its report on Agent Orange exposure and so-called Blue Water Navy veterans from Vietnam, yet the Department of Veterans Affairs says it is still reviewing the document. That's not surprising, for the report is chock-full of nonconclusions, unknowns and uncertainties.

"The committee could not find enough data to determine whether or not Blue Water Navy personnel were exposed to Agent Orange-associated TCDD," the report said, using the initials for dioxin, the toxic chemical in Agent Orange that has been linked to many diseases. Indeed, the report was so full of caveats that the committee all but conceded that its report would not resolve the debate over who was exposed to, and potentially sickened by, dioxin.

"Given the lack of measurements taken during the war and the almost 40 years since the war, this will never be a matter of science but instead a matter of policy," the authors wrote.

Nevertheless, advocates for the deep-sea sailors argue that the report provides them powerful ammunition for gaining benefits that have already been given to troops that actually set foot in Vietnam. Indeed, one group argues that the lack of conclusiveness in the report actually bolsters the case that all Vietnam veterans, regardless of whether they served on the ground, in the air or miles off the coast, should be treated the same.

"No group of individuals has stronger factual exposure than any other, putting Army, Navy, Marine, Air Force and Coast Guard personnel on an equal footing regarding the possibility of exposure to herbicides in Vietnam," the Blue Water Navy Vietnam Veterans Association said in a statement.

Dioxin has been linked to an array of diseases, from cancer to heart conditions. In 1991, Congress enacted legislation saying that Vietnam veterans with diseases associated with defoliants like Agent Orange should be treated as if those diseases were the result of their service in the war.

That presumption of service-related sickness made it simpler for Vietnam veterans to receive health care and disability compensation. Over the years, the Department of Veterans Affairs has recognized 14 diseases as being related to exposure to defoliants,

including Parkinson's disease, multiple myeloma, Type 2 diabetes and some relatively common illness among the aging, like ischemic heart disease and prostate cancer.

Initially, the department interpreted the law to apply to anyone in any of the armed services who deployed to Vietnam. But in 2002, the department narrowed its interpretation, requiring veterans to demonstrate that they set foot in Vietnam, or served on boats operating on inland waterways, to claim presumptive exposure to a defoliant.

That meant that infantry and so-called Brown Water Navy sailors could say their dioxinrelated illnesses were the result of Agent Orange exposure. But sailors stationed on deep-water ships off the Vietnam coast — so-called Blue Water sailors — would not be presumed to have been exposed to defoliants, making it more difficult for them to apply for benefits. That interpretation was upheld by a federal appellate court in 2008.

But that court decision did not end the debate. Through pressure from the Blue Water Navy veterans, bills have been introduced into Congress that would give deep-water sailors equal status to ground troops and Brown Water sailors. The veterans also prodded the Department of Veterans Affairs to study the issue. The result was the Institute of Medicine report released last month.

Given the inconclusiveness of the institute's report, it had been considered unlikely that the veterans department would changes its rules to make it easier for Blue Water sailors to obtain Agent Orange benefits. But the Blue Water veterans association asserts that would be the wrong conclusion to draw from the study.

The association notes that the report finds that sprayed dioxin could have reached the sea on the wind or in runoff carried by streams and rivers, though the report suggests that the amounts would have been relatively small.

"TCDD would enter coastal marine water from river discharge (albeit a very small load because of the mechanisms discussed) and from spray drift," the report says. "The committee concludes that TCDD loading due to spray drift could have occurred but would have been minimal."

The report also says that deep-sea sailors could then have encountered dioxin through direct exposure to contaminated seawater, by swimming for instance, or through drinking water that was distilled from seawater contaminated with dioxin. (Large ships generated their own potable water by distilling ocean water.)

The report also said some Blue Water sailors might have inhaled dioxin or had contact with it through their skin if they were near coastal waters while defoliant was being spraying inland.

"The committee cannot provide quantitative estimates of exposure by any of the exposure pathways described above because of lack of data," the report concludes. "At best, the committee can judge whether specific routes of exposure are plausible."

That plausibility should be good enough reason for the government to extend benefits to the deep-sea sailors of Vietnam, the Blue Water veterans say. Some major veterans groups agree.

"If not the smoking gun, this report reinforces the need for benefits to be paid to our Vietnam War Blue Water sailors," said Jimmie L. Foster, national commander of the American Legion. "Reasonable doubt should be given to the veteran who shows symptoms of having been exposed to Agent Orange, especially if he or she served in a theater where we know the herbicide may have been used directly or carried to by other means."

It is not entirely clear, however, that the report did in fact place all veterans on equal footing. "The committee concludes that, qualitatively, ground troops and Brown Water Navy personnel had more pathways of exposure to Agent Orange-associated TCDD than did Blue Water Navy personnel," the report says.

But John Wells, a retired Navy commander and spokesman for the Blue Water veterans association, said it did not matter whether there were fewer ways for deep-sea sailors to be exposed. "You only need to be exposed once," he said in an e-mail message. "If you were on board a ship in Territorial Seas of RVN, you were exposed," he said, referring to the Republic of Vietnam.

As the veterans department continues to review the report, many veterans believe their best chance of winning benefits is through legislation circulating on Capitol Hill. But given the current budget-cutting climate in Congress, it is far from clear that such legislation will pass.

By some estimates, as many as 800,000 service members could be eligible for expanded benefits if the legislation passes, with the cost potentially running into billions of dollars. But Mr. Wells said the number of eligible Blue Water veterans who are still alive could be fewer than 60,000.

The debate continues.

http://atwar.blogs.nytimes.com/2011/06/14/inconclusive-agent-orange-study-is-conclusive-enough-for-vet-groups/#more-35859

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This is a very good article; however, we should point out that the Australian government conducted an exhaustive study of their blue water navy veterans who were similarly exposed, publishing that study in December 2002. Based on that study (also provided to the Institute of Medicine and the US Dept. of Veterans Affairs as scientific evidence), the Australian government has compensated its blue water navy veterans. If Australia can see fit to do so, why can't the US Dept. of Veterans Affairs?