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Agent Orange Review

Vol. 2, N0. 1 | *Information for Veterans Who Served in Vietnam* | April 1983

VA Transfers Epidemiological Study to CDC in Atlanta

On January 14, 1983, VA and the Department of Health and Human Services signed an interagency agreement transferring to the Centers for Disease Control (CDC) a study on the possible health effects of Agent Orange exposure on Vietnam veterans.

VA had contracted with the School of Public Health of the University of California at Los Angeles in May 1981 to design the study, which was mandated by Public Law 96-151. In the fall of 1982, it was recommended to VA that the responsibility for conducting the study be transferred to CDC.

In announcing the transfer, Administrator Harry Walters hailed the agreement as a giant step forward in serving the interests of veterans. Said Walters, "I am confident CDC will proceed as fast as possible. The time frame can be dictated only by the realities of sound scientific research."

Walters added, "The transfer of the epidemiological study in no way diminishes the commitment of the Veterans Administration to provide clinical care to Vietnam veterans concerned about exposure to Agent Orange. Further, the agency will continue to conduct biomedical research in the area of possible long-term health effects related to herbicides."

The interagency agreement advances $3 million for FY '83 to CDC to conduct the study, as well as the preliminary study design and subsequent reviews.

VA will forward to Congress interim and final reports on the findings of the study as they are received from CDC.

VA Task Force Focuses on Chloracne Health Issue

At a VA Herbicide Advisory Committee meeting in late 1982, a member of VA's newly reorganized Chloracne Task Force called for an all-out-effort to locate Vietnam veterans who may be suffering from chloracne -- a skin disease believed caused by exposure to dioxin, a contaminant found in Agent Orange.

Dr. A. Betty Fischmann, chairperson of the Task Force, said that the major focus of the Task Force is to resolve the chloracne health-care issue in the near future.

The reorganized Task Force, which consists of five members and a program analyst based at the Washington, D.C., VA Medical Center, held its first meeting in December 1982 during the annual meeting of the American Academy of Dermatology.

Dr. Fischmann reported on the status of Task Force activities at VA's Herbicide Advisory Committee meeting in February 1983. The Task Force has:

- Organized a nationwide network of dermatological consultants;
- Developed a standard questionnaire for dermatologic Agent Orange examinations, which is being reviewed;
- Developed criteria for diagnosing chloracne, which also are being reviewed; and
- Organized special examinations at private clinics for veterans with possible cases of chloracne.

The chloracne examinations at private clinics had been completed by January 1983. Of the 3,200 claims filed by Vietnam veterans for disability compensation for skin conditions, 14 of the 15 possible chloracne cases have been examined. Four additional cases have been located since January 1983, and examinations have been scheduled.

(See **Chloracne**, *page 4)*

In this issue...

"Agent Orange Review" is prepared by VA's Office of Public and Consumer Affairs. The "Review" will be published periodically throughout the year as part of VA's expanded program to provide information on Agent Orange to concerned veterans and their families.

This issue contains information on VA's Chloracne Task Force, the transfer of the epidemiological study from VA to the Centers for Disease Control, VA's Advisory Committee on Health-Related Effects of Herbicides, the Air Force "Ranch Hand" study and updates on other Agent Orange research activities.

For additional copies of the "Review," write the VA's Office of Public and Consumer Affairs (064), 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 or Agent Orange, 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.*

New VA Administrator Pledges Action on Agent Orange Issues

Before he was sworn in as VA's 12th administrator, Harry Walters testified before Congress and declared himself an advocate for America's veterans. He pledged to meet the special health-care needs of younger veterans, many who are combat disabled and some who may have been exposed to phenoxy herbicides.

On the Agent Orange issue, Walters said: "The questions related to Agent Orange exposure are extremely complex. The difficulty in resolving them has frustrated Members of Congress, the veterans' service organizations, those of us in the Executive Branch, and, most important, the veterans who are concerned as to how exposure may have affected their lives. These concerns are real, and VA must meet its responsibilities, whatever they may be."

Recently, Administrator Walters addressed VA's Herbicide Advisory Committee and reaffirmed his belief that VA has a special responsibility in helping to resolve the complex issues surrounding exposure to Agent Orange. He said: "I intend to commit the necessary resources and to give top priority to supporting and reviewing research that will determine, to the extent possible, the likely effects of exposure to Agent Orange, as well as the possible environmental hazards related to military service.

"We (the VA) have the additional responsibility to deal sensitively and compassionately with these deeply felt concerns,

"Pending the results of ongoing research, it is essential that we work together to provide appropriate medical care, under the provisions of Public Law 97-72 (the "Veterans' Health Care, Training and Small Business Loan Act of 1981"), to all those veterans who believe their health has been adversely affected by service-related environmental health hazards."

Harry Walters testifies before the Senate Committee on Veterans' Affairs at his confirmation hearing in December 1982.

Australia Releases Two Reports On Australian Vietnam Vets

Two reports on Australian forces who served in Vietnam have been issued. The first examines the possible effects of pesticides on their health and the second covers whether they are at an increased risk of having children with birth defects.

After evaluating evidence and reviewing claims made by the Vietnam Veterans Association of Australia, the Australian Senate's Standing Committee on Science and the Environment released its first report on the possible effects of pesticides on Australian Vietnam veterans.

The committee reached these conclusions:

- It is unlikely that the majority of Australian troops were directly or indirectly exposed to herbicides used by U.S forces, namely Agent Orange and other compounds containing the phenoxy herbicides 2,4-D and 2,4,5-T. However, direct exposure to insecticides (such as malathion) used to control malaria was probable in the majority of cases.
- It is accepted that all Vietnam veterans would have been exposed to harmful chemicals outside of Vietnam. The report suggests that the additional burden of exposure to potential cancer-causing substances associated with a one-year-period of service in Vietnam is likely to have been relatively small.
- There is no convincing evidence, at present, that the rates of birth abnormalities, psychiatric disorders and mortality are excessive among Vietnam veterans. The committee does not rule out the possibility that excessive rates may appear in the future.
- It is highly improbable that birth defects in children of Vietnam veterans result from the veterans' exposure to pesticides while serving in Vietnam.
- There is insufficient evidence to support allegations that there is an increased mortality rate among Vietnam veterans because of cancer. Other causes of death (suicides and accidents resulting from psychiatric disorders) in Vietnam veterans may be excessive and, therefore, may justify further monitoring.

In a separate study, a team from the Commonwealth Institute of Health, University of Sydney, attempted to determine whether Vietnam-era Australian veterans were at an increased risk of fathering a malformed child.

In February 1983, the Australian government issued a report on the results of this study entitled "Case-Control Study of Congenital Anomalies and Vietnam Service (Birth Defects Study)." It is the first scientific study on the subject ever completed.

The study found that Australian veterans of the Vietnam conflict were not at increased risk of fathering a malformed child.

Three groups were included in the study: Vietnam veterans, contemporary Army personnel who did not serve in Vietnam and community members who did not serve in the Army at that time.

The analysis also showed that the risk of fathering a malformed child was no higher for either Vietnam veteran or Army non-Viemam veteran fathers than for other Australian males and the risk was not different for National Service and Australian Regular Army Vietnam veterans.

State Agent Orange Groups Hold First National Meeting

Seventeen states have begun their own programs relating to the Agent Orange issue.

VA's Agent Orange Projects Office maintains an ongoing relationship with each state program, providing Agent Orange informational materials and other assistance.

Representatives from seven of the official state Agent Orange programs held the first national meeting on Agent Orange in the fall of 1982. Representatives agreed to share medical, scientific and outreach information to promote action on resolving the Agent Orange issue.

Representatives also attended the VA Advisory Committee on Health-Related Effects of Herbicides in February 1983 and a special meeting with Administrator Harry Walters.

Agent Orange Research Update

Air Force Health Study

The Air Force released preliminary findings from their study on Ranch Hand personnel who were involved in herbicide spraying missions in Vietnam from 1962 to 1971.

The three-part study -- a mortality study, a morbidity study (diseases, including birth defects in offspring) and followup -- was begun in 1980.

Although more extensive analyses and comparisons of the data remain to be done, preliminary findings show that the overall mortality rates of the Ranch Hand and comparison group have been very similar. Based on the 60 deaths identified in the Ranch Hand group, excluding 22 killed in action, no statistically significant differences in total death rates have been found between the Ranch Hand group and the comparison group.

Statistics for both groups were lower than for a similarly aged U.S. white male population. However, thus far, very few deaths have occurred in the study groups, and these deaths represent only a very early assessment of mortality. Further analyses will continue as the data are updated and periodically reassessed.

Face-to-face interviews of participants selected for the in-home questionnaire part of the study have been conducted by Louis Harris Associates.

The interviews, begun in October 1981, were completed in November 1982.

Of the original 2,486 subjects selected for the study, only one Ranch Hand and four comparison subjects could not be located. This location rate of 99.8 percent is very high for an epidemiological study. Interviews with current and former wives and next-of-kin of deceased individuals also took place.

Ninety-seven percent of the Ranch Hand subjects chose to participate in the face-to-face questionnaire.

The indepth physical examinations and psychological evaluations of the participants began in January 1982. The examinations were completed in mid-December 1982.

A mortality report is expected to be issued in May 1983, and preliminary reports on the data from the questionnaire and examinations are expected to be released in mid- or late summer. Followup examinations will be administered to the study subjects at 3, 5, 10, 15 and 20 year points.

Soft-Tissue Sarcomas

VA's Agent Orange Projects Office is now in the process of researching data on the number of Vietnam-era veterans who have been diagnosed as having soft-tissue sarcomas (malignant tumors). With support from VA's Data Processing Center in Austin and the use of patient treatment records, the Agent Orange Projects Office expects to obtain a count and a list of names of those veterans.

VA also is looking into data indicating the prevalence of soft-tissue sarcomas among adult males, ages 30 to 50. The National Cancer Institute and other sources are providing the data.

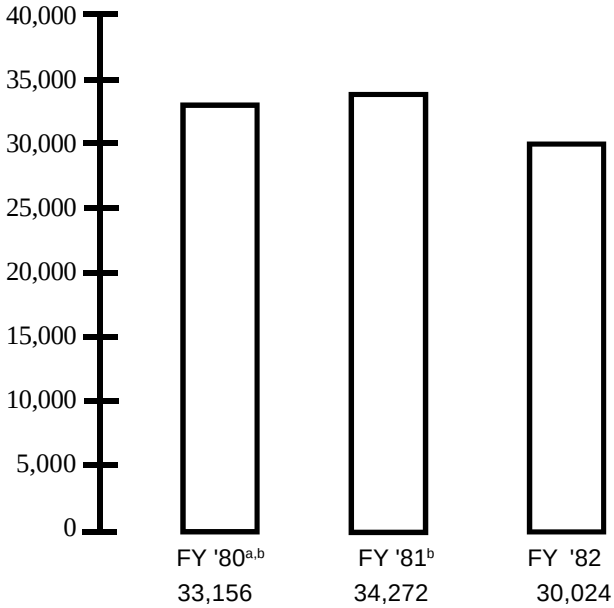
Several epidemiological studies conducted by Swedish scientists have reported evidence of a relationship between soft-tissue sarcomas and exposure to phenoxy herbicides and dioxin. Similar studies in New Zealand and Finland, however, show no such relationship.

The Swedish studies consisted of three investigations. The first involved 52 soft-tissue sarcoma patients who were matched with 208 controls without such tumors. Results indicated a five-fold increase in the risk of soft-tissue sarcomas in those workers exposed to phenoxy herbicides. In the second study, using the same technique as the first, 110 patients with soft-tissue sarcomas and 219 controls were matched. Forestry and agricultural workers had a risk five-times greater than that of the other workers. The third study concentrated on malignant lymphomas. Sixty patients with Hodgkin's disease and 105 with types of non-Hodgkin's lymphomas were matched with 335 controls. Results were similar to the findings of the other investigations.

New Zealand scientists conducted a study involving 102 males with soft-tissue sarcomas who appeared on the New Zealand Cancer Registry between 1976 and 1980 and 306 controls chosen from patients with other forms of cancer. The two groups were matched by age, year and occupation when added to the Cancer Registry. In spite of the fact that phenoxy herbicides have been used extensively for many years in New Zealand in agriculture and forestry, so far the study findings do not show an excess of soft-tissue sarcomas for those workers involved in these occupations.

In Finland, mortality data on 1,926 workers involved in dioxin-contained-herbicide spraying during 1955-1971 were studied from 1972 to 1980. Although exposure was rather low and of a short duration (but similar to that reported in the Swedish studies), no cases of death from soft-tissue sarcomas or lymphomas were found. Mortality figures (including deaths from natural causes and from all types of cancers) also were studied separately for subgroups of workers who were more heavily exposed. Results did not show an increased mortality rate for these workers.

AGENT ORANGE EXAMINATIONS



Cumulative total number of initial examinations as of September 30, 1 982 (as illustrated by graph): 97,452; as of January 31, 1983: 106, 149.

[a]Includes totals for FY '78 and FY '79.
[b]Because of changes in examination reporting procedures, actual totals prior to 5/81 are unavailable. Estimated figures have been used.

Advisory Committee Seeks Answers To Agent Orange Questions

VA's Advisory Committee on Health-Related Effects of Herbicides was formed in 1979 to resolve the complex issues surrounding the possible health effects of herbicides on Vietnam veterans.

The committee is made up of from 12 to 16 members. Currently, membership stands at 13. Membership includes scientists from within and outside the federal government and individuals from several veterans' groups. The committee is chaired by Dr. Barclay Shepard, acting director of VA's Agent Orange Projects Office.

Notice of the purpose, date, time and location of all meetings are published in advance in the "Federal Register." To ensure maximum public participation, time is set aside during all committee meetings for questions or comments from the audience.

During 1982, the committee discussed a wide range of subjects related to the entire Agent Orange issue. A number of ongoing, planned or potential efforts were reviewed and discussed in 1982, including VA activities (Agent Orange Registry, identical twins' study, mortality study, in-house research studies, monograph series, Chloracne Task Force, public information efforts), activities of other federal agencies (Air Force health study, Centers for Disease Control birth defects study, Armed Forces Epidemiological Board, Armed Forces Institute of Pathology Agent Orange Registry), international efforts (Australian government activities and International Dioxin Symposium), state government initiatives, veterans' service organization activities and new research efforts.

The committee held its 15th quarterly meeting and first of 1983 on February 24th. Among the topics discussed were Chloracne Task Force activities, the National Institute for Occupational Safety and Health's Dioxin Registry and mortality study, and Australia's birth defects study (see related articles in this issue of the "Review").

At the February 24th meeting, the committee decided to establish two subcommittees -- one to deal with epidemiology and biostatistics and one to deal with the delivery of services to veterans, including addressing matters of particular concern to Vietnam veterans and sharing Agent Orange-related information with them.

The committee's next meeting is scheduled for May 1983.

Dr. A. Betty Fischmann, chairperson of the Chloracne Task Force, reports to the Herbicide Advisory Committee on the special examinations given to veterans with possible cases of chloracne.

(Chloracne, *from page 1*)

Reports on eight examinations have been received from the clinics showing one veteran with a possible case of chloracne who will be examined further and another veteran who worked at a chemical arsenal and whose acne flared after working with halogenated hydrocarbons.

The Task Force also has nearly completed a pilot study analysis of the Washington VA Medical Center Agent Orange Registry examinations for dermatologic diseases to locate possible chloracne cases. Two of the 906 veterans examined had possible cases of chloracne. The Task Force has proposed an ongoing review of current Agent Orange Registry examinations.

The Task Force also plans to serve as a resource in the development of a monograph on chloracne.

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Information for Veterans Who Served in Vietnam

April 1983

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