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Report/Article Title Memorandum from Donald J. Rosenblum, Committee Manager, Advisory Committee on Health-Related Effects of Herbicides to Interested Parties, subject: Minutes; Next Meeting of Advisory Committee, dated May 22, 1989

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Description Notes Includes minutes of the March 16, 1989 meeting.

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Memorandum

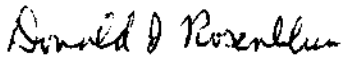
From: Committee Manager, Advisory Committee on Health-Related Effects of Herbicides

Subj: Minutes; Next Meeting of Advisory Committee

TO: Interested Parties

1. Enclosed are the approved minutes of March 16, 1989, meeting of the Advisory Committee on Health-Related Effects of Herbicides. The next meeting is tentatively planned for October ~~31-November~~ 1, 1989. More information concerning this meeting will be sent to you in several months.

2. For additional information on the Advisory Committee, call (202) 233-4117 or write to Staff Assistant, Environmental Medicine Office (10B/AO), Department of Veterans Affairs Central Office, 810 Vermont Avenue, N.W., Washington, DC 20420.



Donald J. Rosenblum

Enclosure

DEPARTMENT OF VETERANS AFFAIRS
ADVISORY COMMITTEE ON HEALTH-RELATED EFFECTS OF HERBICIDES

MEETING OF MARCH 16, 1989

At 8:37 a.m., Dr. Michael Gough, Committee Chairman, called the 30th meeting of the Committee to order. (The meeting was held in Room 119, Department of Veterans Affairs Central Office, 810 Vermont Avenue, N.W., Washington, DC 20420.) A partial list of persons present (including Committee members and staff, department employees, and members of the public who presented oral or written statements) is attached. (See Attachment A.) In addition to the individuals identified, approximately ten members of public attended all or part of the meeting.

Dr. Gough noted that this was the second day of the Department of Veterans Affairs (VA). (On March 15, 1988, Public Law 100-527 redesignated the Veterans Administration as the Department of Veterans Affairs.) Dr. Gough and several other Committee members commented favorably on their experiences during the previous day's White House ceremony to recognize the elevation of the Veterans Administration to the Cabinet. (Advisory Committee members were invited to the ceremony by then Secretary-designate Derwinski.)

Mr. Edward J. Derwinski was sworn in as the first Secretary of Veterans Affairs at the White House. Dr. Gough noted that Secretary Derwinski, who served 24 years as a member of the U.S. House of Representatives prior to six years of distinguished service in the State Department, would be meeting with the Advisory Committee.

Dr. Gough commented that two committee members, Mr. David w. Gorman and Dr. James S. Woods, had planned to attend the meeting, but recent unanticipated events had changed their schedules. Dr. Gough announced that Mr. Joseph S. Carra also was absent due to Capitol Hill commitments. (Mr. Carra joined the meeting later.) Dr. Gough acknowledged the presence of Dr. Robert Levine, Chief of Preventive Medicine at Our Lady of Mercy Medical Center. Dr. Levine, a colleague of one of the Committee members (Richard A. Hodder, M.D., M.P.H.), has extensive experience in herbicide epidemiology and toxicology.

OLD BUSINESS

After brief remarks about the structure of the meeting and some housekeeping comments, the Chairman reviewed the Department's response to the Committee's suggestions and recommendations from the most recent meeting (November 2, 1988). The most obvious reaction was the change to a full day meeting, rather than the half-day sessions that the Committee has had in the recent past. This change was made in response to the Committee's request for more meeting time.

At the last meeting, it was recommended that the Committee receive information regarding the VA Vietnam Experience Twin Study. In February, Committee members were sent the three journal articles published to date on this matter along with a progress report specially prepared for the Committee by one of the principal co-investigators. Dr. Gough observed that a great deal of work was done with World War II veterans who were twins and that this is a very fruitful research effort. The committee was satisfied with the information received on this subject.

Also at the last **meeting**, concerns were expressed about the data collected in the Agent Orange Registry. **Questions** were raised regarding the use of these data. Dr. **Gough** noted that Committee staff had also sent Committee members a progress **report**, prepared for **them**, on these matters. He indicated that the principal author of that report, Dr. Terry L. Thomas of the VA's Office of Environmental Epidemiology, would be answering questions and providing additional information later in the meeting.

Another matter discussed at the last meeting was the length, **frequency**, and location of future Advisory Committee meetings. Several members had expressed their views that the meetings should be expanded to full day sessions rather than the half days allowed for recent meetings. As noted earlier, this change was made. Since the last meeting, Dr. Gough conferred with Mr. Allen E. **Falk** and Mr. Gorman (a temporary subcommittee established at the last meeting) to explore the possibility of holding meetings elsewhere to maximize public input. Dr. Gough reported that there was no agreement about a course of action. Mr. Falk confirmed this and described his views. Dr. Gough reported on behalf of Mr. Gorman who was absent. Dr. Gough explained that there were two ways for the Committee to get public input: go on the road (**i.e.**, have the Committee meet in various locations) or invite a large number of people to attend a meeting in Washington, DC. After considerable discussion on the advantages and disadvantages of the alternatives, the Committee opted for the second option (the Washington **meeting**). Mr. Thomas **Hagel** volunteered to consolidate ideas for the "intake" meeting which would be followed by a regular committee meeting the following day (in October or November 1989) to process and act upon what was learned. Ideas are to be sent to Mr. Hagel by April 15. (This information was communicated in writing by the chairman to all committee members on March 23, 1989 - see Attachment **B.**)

Several formal recommendations were made for submission to the Administrator during the most recent meeting. Because three individuals (General Thomas K. **Turnage**, Mr. Thomas E. Harvey, and Mr. Edward J. **Derwinski**) have led VA during the past several months, and because VA has undergone considerable change as it was converted from an agency to a department, no formal response has been received **from** VA to the Committee recommendations. Dr. Gough reported that he had been told informally what the Committee might expect to hear in the future.

He noted that the Committee had made a recommendation regarding the handling of the Agent Orange litigation settlement proceeds. Dr. Gough indicated that he understands that VA thinks the extension of Public Law 100-687 to exempt **non-VA** Federal means-based **benefits** a logical **expansion** of existing public policy, and therefore may not oppose legislation that would effectively implement this recommendation. This matter is under advisement.

Another recommendation urged VA to establish a liaison with the National Association of State Agent Orange Programs. **Since** the last Advisory Committee meeting, the New Jersey Agent Orange Commission, which had been a primary **supporter** of the National Association, has been **defunded**. Agent Orange programs in several other States have recently terminated or are threatened with extinction. Furthermore, the National Association appears to be rather unstructured at present, with no formal charter or membership, officers or **staff**, **budget**, etc. Until such time as the status of the Association is stabilized and clarified, VA will defer action on this recommendation.

Dr. Gough noted that the Committee had **offered** a rather **non-specific recommendation** that VA explore **the** possibility of conducting a satisfaction survey of Vietnam veterans receiving Agent Orange Registry and related services provided by the VA. Dr. Gough said that VA seems inclined to concur although considerable time and VA resources would be required and the value of such a survey seems to have diminished in recent years. VA would like the Committee to reconsider this matter, and to provide ideas and assistance in developing a survey instrument if the Committee is committed to this approach. If the public meeting discussed earlier is successful, the need for such a survey may be obviated.

At the last **meeting**, the Committee also expressed an interest in the mandated Agent Orange outreach program. Dr. Gough indicated that Mr. **Layne A. Drash**, Deputy Director, Environmental Medicine Office, would be providing information on this matter later in the meeting. VA is seeking the Advisory **Committee's** advice on outreach efforts.

STATE **REPORTS** AND DISCUSSION

Mr. Charles F. **Conroy**, Jr. and Mr. **Falk** reported to the Committee on the status of various state Agent Orange programs. Mr. Conroy explained that most of the States that have any program focus on information sharing with Vietnam veterans in their states and/or conducting surveys or studies. He noted that State efforts are declining, that is, fewer States have active programs now and some ongoing State efforts may not be funded in the near future. He cited his own State of West Virginia as a prime example, noting that funding has not been provided for the next fiscal year. Mr. Conroy provided a handout (see Attachment C) listing which States had Agent Orange **programs/commissions/** studies terminated or ongoing.

Mr. **Falk** echoed Mr. **Conroy's** comments on the decline in State programs. He explained that while the New Jersey Agent Orange Commission has been defunded, its research efforts (Project **Pointman II**) is continuing. Mr. Falk expressed his confidence that the New Jersey legislature's appropriations process will restore the Commission that he chairs to full funding by the budget deadline of June 30, 1989. Mr. Falk observed that what the various States now share in common is a serious scarcity of resources. He explained that an uproar among New Jersey veterans appears to have saved the Agent Orange program in his State.

Mr. Conroy noted that most of the States which have terminated their Agent Orange programs have issued final reports. He volunteered to prepare a **summary** of these documents. Lawrence B. **Hobson, M.D.**, Ph.D., Director, Environmental Medicine **Office**, offered to provide any necessary assistance to Mr. Conroy on this project.

Mr. Robert **Boyd** of the Virginia Department of Veterans Affairs briefly reported on the Agent Orange program in Virginia. He noted that Virginia has a survey in progress, that Vietnam veterans are being registered, and that the program is operating with a very small **staff**. He explained that his department has utilized public service announcements for this program. Information is currently being collected and collated. Mr. Boyd said the special telephone lines would be disconnected on March 31.

Mr. **Dwight Edwards** of the Vietnam Veterans Health Care Initiative Commission of Pennsylvania indicated that, in contrast to a number of **States' Agent Orange efforts**, his program will be alive next year. He explained that this program, formerly known as the Herbicide Information Commission, has a budget of **\$219,000**. Mr. Edwards noted that the Commission is involved in research and outreach. Five regions have been established and meetings are planned. The Commission includes four State legislators and three Vietnam veterans. A large open meeting is planned for **Allentown** in April. Mr. **Falk** asked that the results of that meeting be shared with the Advisory Committee. Mr. Edwards assured the Committee that he would do so. He also noted that the Commission had published a **physician's** reference to educate physicians and other health care professionals about the problems encountered by Vietnam veterans.

George Lumb, M.D., **M.R.C.P.**, congratulated Mr. Edwards and the Pennsylvania Commission on its progress. Dr. Lumb argued that the Commission had taken an important and **useful** step in broadening its scope beyond Agent Orange and herbicide concerns. He also noted that there seemed to be better communications and a greater degree of trust.

Turner Camp, M.D., asked about VA participation in Pennsylvania meetings. Mr. Edwards indicated that VA had been very cooperative. He expressed his appreciation that VA employees have been involved during non-working hours.

Dr. **Gough** asked why so many States had terminated their Agent **Orange-related** programs. Mr. **Conroy** cited the lack of financial resources in many States and the growing acceptance that this issue is a Federal issue and not a State problem. Dr. Camp noted that the Federal budget situation is not very good either, and that VA is limited in what it can do in this regard. Mr. Falk noted that some States (New Jersey, for example) have a definite interest in dioxin aside from its possible effects on Vietnam veterans. He lamented the tough budget situation on both the State and Federal levels.

Dr. Lumb declared that greater education was **required**, that the issues are interrelated, and that a central collection point was desirable in view of the enormous amount of information that seemed to be scattered around. Mr. Edwards urged Vietnam veterans to let responsible people in government know what concerns them and then support those who support them. He said that they should **vote**, organize, and work through the political structure to achieve their objectives.

Dr. Hodder observed that there has been a change in theme. He suggested that dioxin is not the massive problem it was once perceived, and that State interest was waning considerably. He said that we **should** look at the generic **issue**, that while "**Agent Orange**" draws a great deal of attention, it may not be the problem. He noted that in working on this issue we have learned about how to deal more effectively with larger problems. **Dr.** Hodder argued that the Federal and State governments had distinct roles: the Federal government should focus on **scientific** research and the States concentrate on information **sharing**.

Mr. Falk said that the identification of the problem can be quite complex. He noted that while broad Vietnam veterans studies have proven reassuring, the results have been attacked by some veterans because of the lack of Agent Orange specificity. He noted that some critics charge that the government is not finding a **cause-and-effect** relationship because it is not looking hard enough or is intentionally covering up test results.

REMARKS BY THE SECRETARY OF VETERANS AFFAIRS

Secretary **Derwinski** declared that VA **maintains** an **open** mind on the issues that the Committee is considering. He noted that there is a great deal **of** interest in Congress in the Agent Orange controversy. Secretary Derwinski thanked the Committee for its objectivity and the assistance that it has provided VA. He commented that there has been some conflicting opinions in the intense debate about Agent Orange and expressed his sincere appreciation for the efforts of the Committee in moving toward a sound resolution of this matter. The Secretary welcomed suggestions and recommendations from the Committee.

STATE REPORTS AND **DISCUSSION** (continued)

Following the **Secretary's remarks**, the Committee resumed its discussion on how the States could be a more effective resource to Vietnam veterans worried about possible Agent Orange health problems. Mr. Philip R. Wilkerson urged the VA to work through the State Departments of Veterans Affairs. Mr. Conroy noted that the West Virginia Department of Veterans Affairs has 17 field offices. Dr. **Lumb** argued that we all need to carefully explain what the problems are. **Mr. Hagel** commented that for the States to be **effective**, they have to obtain the necessary resources. A unified force is required to get the essential funding. Mr. Hagel urged Vietnam veterans to talk "numbers" rather than morality when seeking State funding. Mr. Conroy concurred. He described an American Legion-Veterans of Foreign Wars coalition in West Virginia, but he indicated that this force was weakened by a perception of fragmentation of views between the organizations. Mr. **Falk** explained that in New Jersey the World War II and Vietnam veterans gained support by agreeing to back each other. It was decided that the Advisory Committee should get a better understanding of the role of the National Association of State Directors of Veterans Affairs. An invitation will be issued to that group prior to the next meeting.

VSO REPORTS

Mr. Wilkerson indicated that Mr. Richard S. Christian would have a substantive report on The American **Legion-Columbia** University Vietnam Veterans Study later in the meeting and that presentation would constitute the report of this organization.

Dr. Camp noted that the Veterans of Foreign Wars of the United States (**VFW**) continues to assume an active role in the Agent Orange issue. He cited several recent VFW publications with articles on this subject. Dr. Camp reported that there will be a VFW service officers meeting in late April in Phoenix, and that he will get some feedback for the Advisory Committee. He explained that Agent Orange is always discussed at these meetings, but that he would make a special point of soliciting feedback in view of the **Committee's** interest in learning more about **veterans'** satisfaction with services offered to them. He also reported that the VFW has been active in **supporting** legislation on behalf of Vietnam veterans exposed to herbicides during their military service. Dr. Camp cited March 7, 1989 testimony before a joint hearings of the House and Senate Committees on Veterans' Affairs as evidence of his **organization's** commitment to these veterans.

LEGAL/LEGISLATIVE ACTIVITIES

Mr. Hagel reported that S. 11, 100th Congress, which had been passed by both the U.S. House of Representatives and Senate prior to the last Advisory Committee meeting, was signed into law (Public Law 100-687) by President Reagan on November 18, 1988. The law contained a Title XII--Agent Orange and Related Provisions. Since each of these provisions were discussed at the last meeting, Mr. Bagel focused on the issue of how the proceeds from the settlement in the case of In re Agent Orange Product Liability Litigation in the United States District Court for the Eastern District of New York (MDL No. 381) should be treated. (This is the class action lawsuit brought by Vietnam veterans and their families against the manufacturers of Agent Orange.) He noted that the new law required that the settlement proceeds be treated for purposes of laws administered by VA as reimbursement for prior unreimbursed medical expenses and that no such payment be countable income for any such purpose. Mr. Hagel noted that this language was consistent with the Advisory Committee's early recommendation but did not go as far as the Advisory Committee would in protecting the settlement funds. For example, while the law exempted the settlement money from consideration for needs-based VA benefits, it did not deal with other Federal needs-based programs. Since many of the potential recipients of the settlement are totally disabled, it is thought that a large number of these individuals may be affected.

Mr. Hagel reported that Senator Moynihan had recently introduced legislation to rectify this situation. S. 263, 101st Congress, would exclude Agent Orange settlement payments from countable income and resources under Federal means-tested programs. It was introduced on January 25, 1989, and referred to the Committee on Veterans' Affairs. The congressional committee has not taken action on the proposal to date. Mr. Hagel urged that the Advisory Committee reiterate its support for this idea.

He also reported that the first settlement payments had recently been mailed to the recipients. When asked about VA's role, Mr. Hagel indicated that VA had been cooperative in providing copies of the necessary medical reports. Dr. Hobson added that in some instances VA conducted an examination so that the veteran's condition would be documented.

IMPLEMENTATION OF PUBLIC LAW 100-687

Prior to providing a brief explanation of VA's implementation of Title XII of Public Law 100-687, Mr. Drash noted that Secretary Derwinski has a keen interest in the Agent Orange issue, citing a special briefing requested by the Secretary shortly after the President nominated him. Mr. Drash added that Secretary Derwinski has also discussed this matter with individuals outside VA. Mr. Drash noted that the Secretary's attendance at this meeting is consistent with his commitment to the Agent Orange issue and reflects the respect and high regard that he has for this Committee and its members.

Mr. Drash indicated that, in accordance with Section 1201, the Centers for Disease Control (CDC) has transferred \$3 million to the Air Force for expenses in connection with blood tests for Ranch Hand personnel and \$1 million to VA for an independent survey of scientific evidence of the health effects of possible exposure to toxic chemicals contained in herbicides used in Vietnam. These funds are available for obligation until September 30, 1989. The Air Force is utilizing these funds. However, VA is prohibited from using the

\$1 million until enactment of another law **after** the date of the enactment of Public Law 100-687. This other law has not been enacted.

Section 1202 extended the priority **health-care** eligibility provision based on Agent Orange or ionizing radiation exposure **from** October 1, 1989 through December 31, 1990. This provision was originally established by Public Law 97-72. The extension will be implemented through circular revisions when the existing circulars expire. No problems are anticipated.

Section 1203 pertained to the settlement funds. As noted earlier, the **VA** now treats the proceeds as reimbursement for prior **unreimbursed** medical expenses and the proceeds are not counted as income.

Mr. Drash explained that Section 1204 required VA to conduct an active, continuous Agent Orange outreach program and to take action to organize and update the Agent Orange Registry. He noted that while the latter **requirement** is being easily **fulfilled** through an **interagency** agreement with **NIOSH** whereby IRS records are used to update the addresses in the Registry, VA is unclear how the outreach provision should be implemented. Mr. Drash cited a large number of information dissemination/outreach initiatives that VA has been involved in during the past few years and expressed concern about the lack of specificity in the outreach language. He urged the Advisory Committee to make recommendations on how VA could best implement this provision.

Section 1205 made several changes in the Ranch Hand Advisory Committee. This section had no effect on VA or its committees.

VETERANS' ADVISORY COMMITTEE ON ENVIRONMENTAL HAZARDS

Mr. **Conroy** briefly reported on the activities of the **Veterans'** Advisory Committee on Environmental Hazards, a VA statutory committee, on which he also serves. That committee assists VA in establishing scientifically-based policies relating to compensation of veterans who were exposed to Agent Orange and ionizing radiation. The Environmental Hazards Committee met most recently on November 3-4, 1988, the two days following the last meeting of the Health-Related Efforts of Herbicides Committee. Noting that the Herbicides Committee members were sent copies of the minutes of the Environmental Hazards meeting, Mr. Conroy limited his comments to a very brief overview of the meeting. He commented that the studies examined received very thorough reviews by that committee and that the members were very well prepared. Mr. Conroy added that the next meeting of the Environmental Hazards Committee is now scheduled for April 25-26, 1989, in VA Central Office.

CONCERNS OF **WOMEN** VIETNAM VETERANS

Col. Lorraine A. Rossi, **USA**, Retired, reported to the Committee on the concerns of women Vietnam veterans. She noted that one of the **most** basic needs of women Vietnam veterans is recognition. Many people ignore, forget or are unaware of the fact that thousands of women served their country in Armed Forces in the combat zone of Vietnam along with men. Another concern is health **care**. women Vietnam veterans have the same concerns about their health as their male counterparts. One of these concerns relates to the possible health effects of Agent Orange and other herbicides used in Vietnam. Col. Rossi noted that women were intentionally omitted **from** certain Vietnam veterans studies, but that VA is undertaking a **large-scale** study of women

Vietnam veterans which hopefully will shed a great deal of light on this matter. This study was mandated by Public Law 99-272. Col. Rossi observed that Dr. Han K. **Kang**, Director, Office of Environmental Epidemiology, would be making a report on this matter later in the meeting.

AGENT **ORANGE** REGISTRY

Dr. Thomas presented preliminary data on the 103,729 Vietnam veterans who received an Agent Orange Registry examination between July 1982 through October 1988. She explained that when these data are finalized an article will be submitted to a **scientific** journal for publication. In order not to jeopardize publication, these data are not for **quotation** or distribution.

Dr. Thomas categorized the data by year of exam, branch of service, sex of participant, race, age, type of reported exposure, medical complaint, number of medical complaints, and diagnosis. She also compared selected diagnoses by branch of service and by self-reported exposure. Dr. Thomas also discussed evidence of birth defects among children of veterans who were ever married. Cancer sites were also reviewed.

The most common diagnoses were skin conditions followed by neuroses. Several Committee members questioned whether comparisons were done with other populations. Dr. Thomas indicated that due to the **self-selected** nature of the registry participants such comparisons would be of limited or even questionable value. She added that **prevalance** rates and incidence rates are very different matters and difficult to compare. Dr. Thomas thanked the Committee for its input and indicated that she would consider performing additional analysis based upon suggestions made at this meeting. She agreed to provide copies of the tables presented at the meeting to Committee members with the understanding that the data be considered preliminary and not cited.

VA RESEARCH UPDATE

Dr. **Kang** briefly reported on several scientific investigations being pursued by his office. He noted that a joint effort with the U.S. Environmental Protection Agency (EPA) had recently been completed. Dr. Kang explained that the **VA/EPA** Adipose Tissue Study found no statistically **significant** differences among the groups studied (**i.e.**, Vietnam veterans, non-Vietnam veterans, and civilians) in term of **TCDD** levels in adipose tissue. Dr. Kang indicated that the study results suggest that it was unlikely that Vietnam veterans were exposed to large quantities of Agent Orange. Mr. **Falk** asked why TCDD levels were higher in this study than in the CDC effort. Dr. Kang explained that the disparity may be due to the time the tissue sample was collected. The CDC examined recent tissue while the specimens used in this study were collected years ago and stored in a tissue bank. Dr. Kang commented that the report on the study is under review at VA Central Office by the Research and Publications Committee and is also being reviewed at EPA. It is anticipated that an article on this study will be submitted to a scientific journal in the near future.

Dr. Kang also reported that progress is being made on several other research efforts. He said that the mortality analysis for Army veterans stationed in I Corps is projected for completion in the third **quarter** of Fiscal **Year** 1989. That effort was promoted by the result of the **VA** Vietnam Veterans Mortality

Study, published in the May 1988 issue of the Journal of Occupational Medicine. The published study reported that Marine **Corps** veterans who served in I Corps had elevated rates of lung cancer and **non-Hodgkin's** lymphoma while Army veterans did not.

He also indicated that an updating of the mortality study by including information about Vietnam veterans who died in 1983 or 1984 is almost complete. The earlier analysis had a 1982 **cutoff**. Inclusion of the additional veterans will significantly increase the statistical power of the study.

The **VA Patient Treatment File/Non-Hodgkin's Lymphoma** Study has been completed but is not yet published. This **case-control** study was initiated in response to the **finding** of the VA mortality study and a National Cancer Institute study of agricultural workers in Kansas. Dr. Rang shared data indicating the distribution of **non-Hodgkin's lymphoma** cases and control patients by location of military service, year of birth, race, and year of hospital discharge. He noted that there were no statistically **significant** differences between the groups. Dr. **Kang** hopes to have this information published later this year.

Another research effort underway at the VA Office of Environmental Epidemiology involves a mortality analysis of Army Chemical Corps Vietnam veterans. Dr. Rang reported that this investigation is almost finished.

Dr. Rang is also responsible for two studies of women Vietnam veterans. **Substantial** progress has been made in the mortality study with a tentative completion date in the first quarter of Fiscal **Year** 1990. The Women Vietnam Veterans Health Study was mandated by Public Law 99-272. Two draft protocols have been submitted and reviewed by the **Office** of Technology Assessment (**OTA**). There is some disagreement between VA and OTA on how best to proceed with the study. The OTA thinks that a pilot study should be conducted first. VA has seriously considered this possibility but has a problem with this approach. VA is concerned that a pilot study would cut into the limited universe available for the full study and that a pilot study may result in significant delays. To date, approximately 4,600 women Vietnam veterans and 6,600 women Vietnam-era veterans who did not serve in Vietnam have been identified for the study. Dr. Rang expressed his hope that the difference of opinion with OTA can be resolved in the very near future.

OPEN FORUM

The open forum provides audience participants an opportunity to bring to the Committee and VA the concerns they have about Agent Orange and other herbicides used in Vietnam as well as **VA's** approach to resolving this issue and helping veterans who were exposed to herbicides during their military experience. The open forum is a regular feature of all meetings of the Committee. Dr. **Gough** asked if anyone in the audience had anything they wished to contribute to the meeting at this point. There was no response. (Several members of the audience had made earlier **contributions**.)

RECOMMENDATIONS

1. The Committee recommended that VA support legislation that would exclude Agent Orange settlement payments from countable income and resources under all Federal means-tested programs.

2. The Committee recommended that VA renew the Committee charter **for** an additional two years in order that the Department can continue to receive input and advice on herbicides **from** individuals outside VA.

3. The Committee recommended that VA allow a **two-day** meeting of the Committee in October or November 1989. The first day would be devoted to obtaining **feedback from** Vietnam veterans and their representatives regarding the VA Agent Orange program. The second day would be a traditional meeting and allow the Committee to immediately process and act on the information received.

THE AMERICAN **LEGION-COLUMBIA UNIVERSITY** VIETNAM VETERANS STUDY

Mr. Christian made a presentation of data from the American Legion-Columbia University Vietnam Veterans Study. He noted that the American Legion has long held the position that the Federal government is responsible to provide all the resources necessary to answer questions raised about Agent Orange and that Vietnam veterans should be treated and compensated for the illnesses and diseases caused by this exposure.

He explained that when the American Legion saw delays in the Federal research in **1983**, they proceeded on their research effort. The study was designed to examine the health effects of combat in **Vietnam**, emotional **health**, **dioxin** exposure, and **veterans'** experience with VA. The investigators used a cross-sectional survey of 6,800 American Legion members from six states. Approximately 2,800 served in southeast Asia; the remainder served in Germany, Korea, Hawaii, and elsewhere.

The **final** study report was published in Environmental Research in December 1988. Mr. Christian indicated that Agent Orange exposure was determined by an assessment system developed by Drs. Jeanne and Steven **Stellman**, the principal investigators. Combat intensity was measured by responses to a series of questions developed and used in several studies of veterans. Veterans were classified as "not in Southeast Asia*" or into different levels of combat and Agent Orange exposure, respectively.

Mr. Christian listed the following health conditions as being elevated among combat veterans: high blood pressure, ulcers, arthritis and rheumatism, nervous system disorders, and benign fatty tumors. He declared that the relationship between post-traumatic stress disorder and combat experience was clearly demonstrated in the study.

He cited the health effects of Agent Orange exposure as benign fatty tumors, adult onset acne, skin rash with blisters, sensitivity to light, miscarriages (among wives), and **•symptom complexes**" (feeling tired and faint, skin problems, colds, body **aches**). He argued that the sources of data on spraying and troop movements available to the investigators in this study and to researchers pursuing other **studies** (including **Federal** efforts) provide more than enough records to do any kind of **epidemiological** study on these subjects.

Mr. Christian attacked the Agent Orange Working Group (**AOWG**) review of the American Legion study as biased. He charged that CDC had a vested interest in seeing that the American Legion Study disproved. He said that **CDC's** Dr. Vernon N. Houk, who chairs the **AOWG** Science Panel, asked its members to find fault rather than to provide an objective **scientific** critique of the entire

project. Mr. **Christian** added that CDC had asked the Editor in Chief of Environmental Research not to publish the American Legion Study. Mr. Christian commented that CDC may not have been able to identify exposed Vietnam veterans because of an inadequate methodology.

Dr. Gough observed that the results are somewhat similar to the CDC Vietnam Experience Study before CDC conducted the medical examinations. Many of the **differences** found by CDC in the telephone interviews were not validated in the medical examinations. **Dr.** Camp argued that the American Legion project was a survey not a study. Mr. Christian responded that it was a study in the sense that participants were randomly selected. He explained that the accuracy in terms of matching the known sprayed areas against unit locations is down to about the **size** of a football field.

In order that the Committee could better understand the **study**, Mr. Christian agreed to provide copies to all members through the committee manager. (The study was sent to members on March 29, **1989.**)

ADJOURNMENT

At 3:15 p.m., Dr. Gough 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.



Michael Gough, Ph.D.

Prepared by

Donald J. **Rosenblum**
Staff Assistant
Environmental Medicine Office
Veterans Health Services and Research Administration
Department of Veterans Affairs

DEPARTMENT OF VEETERANS AFFAIRS

ADVISORY COMMITTEE ON HEALTH-RELATED EFFECTS OF HERBICIDES

MEETING OF MARCH 16, 1989

PERSONS PRESENT AT MEETING (A partial list)

1. Advisory Committee members and **staff** – See next two pages (All were in attendance except Dr. woods and Mr. Gorman)

2. Department employees –

Honorable Edward J. **Derwinski**, Lawrence B. **Hobson, M.D., Ph.D.**, Layne A. Drash, Elaine M. **Morrow**, Bill Leonard, Susan **McCrea**, John Forster, zeno St. **Cyr, II**, Han **K. Kang, Dr. P.H.**, Terry L. Thomas, **Ph.D.**, Cassandra Wait, Bonnie M. Marinelli, Frederic L. **Conway, III**

3. Members of the public who presented oral or written statements –

Robert **Boyd, Dwight** Edwards, Richard S. Christian

DEPARTMENT OF VETERANS AFFAIRS
ADVISORY COMMITTEE ON HEALTH-RELATED EFFECTS OF HERBICIDES
MEMBERSHIP - MARCH 1989

Michael Gough, Ph.D. Chairman
Senior Fellow
Center for Risk Management
Resources for the Future
1616 P **Street, NW**
Washington, DC 20036
(202) 328-5080

David W. Gorman
Assistant National Legislative
Director for Medical Affairs
Disabled American Veterans
807 Maine Avenue, **SW**
Washington, DC 20024
(202) 554-3501

Turner Camp, M.D.
Medical Consultant
Veterans of Foreign Wars
of the United States
200 **Maryland Avenue, NE**
Washington, DC 20002
(202) 543-2239

Thomas Hagel
Associate Professor of Law
University of Dayton
School of Law
300 College of Law
Dayton, OH 45469
(513) 229-2423

Joseph S. Carra
Director, Waste Management
and Economic Division
Office of Solid Waste (WH565A)
U.S. Environmental Protection Agency
401 **M. Street, SW**
Washington, DC
(202) 475-7276

Richard A. Hodder, M.D., M.P.H.
Director, **Department** of Medicine
Our Lady of Mercy Medical Center
60C East 233rd Street
Bronx, NY 10466
(212) 920-9000

Charles F. Conroy, Jr.
Director, Agent Orange
Assistance Program
Department of Health
State of West Virginia
1800 Washington Street, East
Charleston, **WV** 25305
(304) 348-2363

George Lumb, M.D., M.R.C.P.
Scholar in **Residence**
Integrated Toxicology
Duke University
Professor of Pathology **Emeritus**
Hahnemann University
5 Creekview Lane
Durham, NC 27705
(919) 493-7476

Allen E. Falk
Healy and Falk
Attorneys at Law
P.O. Box 70
Belford, NJ 07718
(201) 495-1200

Lorraine A. Rossi
Colonel, U.S. Army (Retired)
205 **Yoakum Parkway** #2-1809
Alexandria, **VA** 22304
(703) 370-4906

Philip R. Wilkerson
Assistant Director
for Information Management
National Veterans Affairs and
Rehabilitation Division
The American Legion
1608 K Street, NW
Washington, DC 20006
(202) 861-2756

James S. Woods, Ph.D., M.P.H.
Senior Research Scientist
Battelle
Seattle Research Center
4000 N.E. 41st Street
P.O. Box C-5395
Seattle, WA 98105
(206) 525-3130

Designated Federal Officer

Donald J. Rosenblum
Staff Assistant
Environmental Medicine Office (10B/AO)
Department of Veterans Affairs **Central** Office
810 Vermont Avenue, NW
Washington, DC 20420
(202) 233-4117

CENTER FOR RISK MANAGEMENT

March 23, 1989

Dear Fellow Committee Member:

As those of you who attended the March 16 meeting know, we have **embarked** upon a very ambitious project. After a discussion of the comparative merits of taking the committee on the road or **organizing a Washington** meeting to hear from veterans, the committee decided on the latter. Although many details **remain** to be worked **out**, we are going to try to organize a **one-day session** to hear from veterans from around the country in October or November. If we are **successful** in doing that, we will then have a regular **committee** meeting on the next day.

Three items that must be immediately addressed are (1) what do we want to find out from the veterans, (2) who do we want to invite, and (3) what, if any, screening do we want to make of people who want to attend? There was general agreement that we do not want to spend a day listening to individual **veterans'** complaints. There will be some of that, of course, but most of our time should be spent in listening to people who represent a geographical area, an organization, or a concerned group. That is much **easier** to write than it will be to arrange.

Mr. Bagel will tackle the first item. He asks that you write him by April 15 to tell him about what you'd like to find out from the meeting. His address and **phone number** are University of Dayton, School of Law, 300 College of **Law**, Dayton, OH 45469, (513) 229-2423.

We did not assign items 2 or 3 to anyone. For the time being, I will take on those tasks. You can write me or phone me at the **Center** for Risk Management, Resources for the Future, 1616 F Street, **NW**, Washington, D.C. 20036, (202) 328-5080. Sometime in the **future**, I expect that I'll ask some of you to help with this task.

At some time you may decide that **we've** bitten off more than we can **chew**. If that happens, please let me know. I'll try to keep a finger on the **pulse** of the committee, and if it seems we should consider changes in our plans, I'll involve all of you in the decision.

Finally, please **excuse** the photocopied letter, but it saves time and **expense**.

Sincerely,

Mike

Michael Gough

STATES WHICH HAD AGENT ORANGE PROGRAMS/COMMISSIONS/STUDIES

Georgia - Terminated 1983
 Tennessee - Terminated 1984
 Iowa - Terminated 1985
 Hawaii - Terminated 1985
 Ohio - Terminated 1985
 Texas - Terminated 1985
 Kansas - Terminated 1986
 Oregon - Terminated 1986
 Wisconsin - Terminated 1986
 California - **Terminated** 1987
 Massachusetts - Terminated 1988

STATES WITH ON-GOING AGENT ORANGE PROGRAMS/COMMISSIONS/STUDIES

Charles F. Conroy Jr., Director
WV Agent Orange Assistance Program
 1800 Washington Street, East
 Charleston, West Virginia 25305
 Phone: (304) 348-2363

Dwight Edwards, Executive Director
 Vietnam Veterans Health Initiatives Com.
 Department of Health
 P. O. Box 8380
Harrisburg, Pennsylvania 17105
Phone: (717) 787-5264
(717) 787-7430; (717) 783-1376

Bruce Percival, Director
 NY State Dioxin Outreach Program
 NYS **Division** of Veterans' Affairs
 194 Washington Avenue
 Albany, New York 12210
 Phone: (518) 486-5863

Dr. Jerry Nida, Coordinator
 Agent Orange Assistance Program
 Health Department
 P. O. Box 53551
 Oklahoma City, Oklahoma 73152
Phone: (405) 271-4200

Craig H. Close
 Agent Orange Commission
 242 Prairie Avenue
 Providence, Rhode Island 02907
Phone: (401) 521-6710

Bert Boyd, Agent Orange Coordinator
 Veterans Office on Agent Orange
 P. O. Box 491
 Roanoke, Virginia 24003
 Phone: (703) **982-6396**
 (800) 423-3413

Elroy Klaviter, Ph.D.
 CEHS
 3500 N. Logan Street
 Lansing, Michigan 48909
 Phone: (517) **335-8336**

Tom Shaner
 113 W. Franklin
 Baltimore, Maryland 21201
 Phone: (301) 332-1626

Wayne Wilson, Executive Director
 P. O. Box 1717
 Trenton, New Jersey 08607-1717
 Phone: (609) 984-7397

Pete Currier
 Veterans Service Center
 Building **248**, Room 116
 Togus, Maine 24330
Phone: (207) 623-8411