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If Veterans don't help Veterans, who will?

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OPEN LETTER - REQUEST FOR HELP FROM INSTITUTE OF MEDICINE AGENT ORANGE COMMITTEE

To: Members of the Institute of Medicine, National Academy of Sciences

To: Doctor Richard Fenske, Chair *and (in turn)* Dr Erin Bell, Dr Scott Burchiel, Dr Janice Chambers, Dr Naihua Duan, Dr Peter Gann, Dr Mark Goldberg, Dr Nancy Kerkvliet, Dr Stephen Kritchevsky, Dr Michele Marcus, Dr Linda McCauley, Dr Alvaro Puga, Dr Jeremy Shefner *and* Dr Hollie Swanson

Dear Members of the Committee,

On behalf of Colonel Arch Battesta, Colonel Ken Wheeler, Colonel Joseph Curley, Lieutenant Colonel Paul Bailey, Lieutenant Colonel Bob Karpinski, Lieutenant Colonel John Harris, Chief Master Sergeant Charles Fusco, Major Al Harrington, Major Gale Harrington, Brigadier General Mike Walker, Major Stephen Clancey, Master Sergeant Steve Caraker, Master Sergeant George Gadbois, the late Master Sergeant Bob Boyd, Colonel Dee Holiday, Lieutenant Colonel Gail Sorenson and her late husband Lieutenant Colonel Art Sorenson, Lieutenant Colonel Ed Kosakoski, our families, *and an estimated 500 others similarly situated,*

We seek the emergency assistance from the Committee in the form of your recommendation to the Department of

Veterans Affairs and the Department of Defense that the dioxin-contaminated aircraft we flew be designated Agent Orange-contaminated sites. Each of the aircraft we seek to have designated can be identified by historical records, contamination surveys and physical presence of Agent Orange spray apparatus. Agent Orange toxins remained in each of these [aircraft until they were destroyed in 2010](#).

[In 1972 the Air Force Reserve began flying the C-123K/UC-123K "Provider" aircraft previously used for Agent Orange spray missions in Vietnam. Dioxin contamination persisted on these aircraft, at least eleven of which were assigned to our squadron. Numerous tests by the Air Force in 1993 and later established the harmful levels of dioxin contamination remaining on the surplus aircraft, all of which had been retired for eleven years following our duty in them for ten years \(1972-1982\) flying airlift and aeromedical evacuation missions worldwide.](#)

Persistent concerns raised by the Air Force and the State of Arizona regarding the established contamination of the stored fleet of C-123K/UC-123K airplanes led the decontamination by destruction of the remaining aircraft by melting them into scrap metal ingots. [Air Force and GSA testimony before a federal judge on a 2000 private lawsuit](#)

had the aircraft described as “extremely hazardous”, “extremely contaminated” and “extremely dangerous” in the government’s court testimony by Air Force and Air Force-contracted toxicology experts.

Veterans who flew the Provider during the years 1972-1982 did not suspect its contamination although it was clearly established in tests conducted upon stored surplus aircraft (twenty years after the last Agent Orange spray mission!) by Armstrong Labs at Brooks Air Force Base, Texas. The veterans eventually [turned to the Department of the Air Force](#) to help identify the affected aircrews and maintenance personnel so they could be notified of their likely exposure to dioxin, but the [Air Force responded they lacked the ability to identify the personnel involved.](#)

Earlier, for some reason, the [Air Force Judge Advocate General responsible for the Office of Environmental Law](#) (and her supervisor) recommended keeping the contamination of the airplanes "within official channels," perhaps appropriately concerned with the reaction of exposed aircrews. Speaking personally, *this* writer *would* have been concerned, but if I'd been alerted in 1996 when this JAG officer's recommendation was made, I would perhaps have better responded before my cancer, heart

attack, heart surgery, diabetes and peripheral neuropathy surfaced in a two month period sixteen years later.

Certainly, what precautions I would have taken should have been **my** decision to make, not **her** decision to keep me from knowing about.

Our group of veterans submitted the several Air Force test results to the Oregon Health Sciences University with the question..."does the dioxin contamination shown on the aircraft equate to exposure to dioxin by the aircrews and maintenance workers assigned to those aircraft between 1972-1982?" **The OSHU responded "Most Likely"**.

Anecdotal information in sworn testimony from Air Force maintenance workers of the 901st OMS establishes the intense effort after Vietnam to scrape the remaining Agent Orange residue from the aircraft, especially the sub-belly and wing interior sections, with DOD advice being that the residue was harmless and remove the residue and reduce the foul odors to scrape the residue with putty knives, then wash with Dawn dish soap and rinse thoroughly. Yet still, twenty and thirty years after the last Agent Orange spray missions, the aircraft tested in the Air Force words "**extremely hazardous**", "**extremely dangerous**" and "**heavily contaminated.**"

We earnestly seek the Committee's immediate help. There is no controversy regarding the Air Force's own tests establishing the presence of harmful levels of contaminants on our airplanes, and there is no controversy regarding eleven of our squadron's 26 aircraft having been used for Agent Orange spray missions. The OSHU concludes that our exposure while flying and maintaining these toxic aircraft was "most likely" to have occurred. There is no hypothetical situation here...no question about whether we could have been exposed hundreds of miles out at sea or thousands of feet aloft...we point to the multitude of Air Force tests which establish our intense and intimate contact with this contaminated airplane, to the OSHU study, to your own common sense, and to the dramatic action of the Air Force to melt the toxic airplanes to resolve the threat of lingering contamination.

We don't know your procedures or guidelines, but as a small group of veterans with a non-controversial argument for having been exposed to dioxin, we seek your help in whatever manner appropriate, so long as it is soon enough to help our sick veterans seek care through the Department of Veterans Affairs. If you have a different procedure to seek your help, tell me how to proceed. If you are

organizationally restricted from what we request, what other help can you give us?

Hopefully and Respectfully,
For the C-123K/UC-123K Veterans of 1972-1982

Wesley T. Carter, Major, USAF Retired

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