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# AMENDMENT

OFFERED IN THE HOUSE:

By: State Affairs

To: amend HOUSE BILL No. SSHB 663

SENATE BILL No. \_\_\_\_\_

PAGE: \_\_\_\_\_

LINE: \_\_\_\_\_

Page 1, line 20:

Delete "1941 - 1961" and insert "1942 - 62"

Page 11, line 21:

Delete "1955" and insert "1954"

Page 4, following line 7:

Insert a new section to read:

acc "Sec. 18.17.070. APPLICABILITY. The provisions of this chapter apply only to those veterans who live in Alaska and who have resided continuously for at least a year in the state and who establish, according to guidelines adopted by the department, a reasonable basis for believing that they were exposed to

(1) nuclear radiation as a result of above-ground nuclear weapons testing between the years 1942 and 1962 in the continental United States or Pacific Ocean;

(2) nuclear radiation as a member of the United States occupation force at Hiroshima or Nagasaki, Japan, following World War II;

(3) chemical or biological warfare agents between 1954 and 1969, either with their informed consent or through undisclosed experimentation while serving at the following military bases in the continental United States and Alaska

(A) Fort Dietrich;

(B) Fort Greely;

(C) Dugway Proving Ground;

(D) Rocky Mountain Arsenal; or

(E) any other military base confirmed to be a site where active testing or experimentation with chemical or biological agents has been conducted;

(4) a chemical defoliant or any of a class of phenoxy-herbicides or other causative agent, including Agent orange, while serving in Vietnam, Cambodia, Laos, or Thailand, or waters contiguous to those countries, between August 4, 1964, and April 1, 1973."]

Page 44

AMENDMENT

pg 2-72

OFFERED IN THE HOUSE:

By: \_\_\_\_\_

To: \_\_\_\_\_ HOUSE BILL No. SS113643

SENATE BILL No. \_\_\_\_\_

PAGE: \_\_\_\_\_

LINE: \_\_\_\_\_

Page  
Page 4, lines 15 - 19:

Delete all material and insert:

"(4) veteran means a person honorably separated from the military service of the United States who served on active duty for other than training purposes for at least 90 days or whose service was for less than 90 days because of injury or disability incurred in the line of duty."

Page 3, line 29:

Delete "facet issue biopsies;"

A M E N D M E N T

Offered in the HOUSE

By Rogers

TO: SSHB 663

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54

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OFFERED IN THE HOUSE:

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To: \_\_\_\_\_ ss HOUSE BILL No. 663

SENATE BILL No. \_\_\_\_\_

PAGE: 3

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# Alaska State Legislature

## House of Representatives

### Committee on State Affairs

Official Business

1-29 & 2-3

NOTIFICATION SHEET

BILL NO. ~~SB 196~~ HB 663

Pouch V  
State Capitol  
Juneau, Alaska 99811

NAME	ORGANIZATION	PHONE NO.
Bradley	Senate	
VFW	1-26 no ans.	62478
U A	1-26 no ans.	67472
UFW Anch Legion	Mr. Anderson	2768213
Harold Eastham		69603-8643300
Sen Lewis Sec Office		6-1950
Genl Sheril	(Nath. Grayson) Military Affairs	4600
Roger staff with Air	1-27 found no. 20500-00000000	
R. Brown	will have an's ready	

REVISED

POSITION PAPER

SPONSOR SUBSTITUTE FOR HOUSE BILL NO. 663

Sponsor Substitute for House Bill No. 663 adds two other categories of veterans to the Vietnam group as defined in HB 663. Namely any exposed to radiation from above-ground nuclear weapons testing during the years 1941-1961; and any veterans exposed to chemical and biological agents during the periods 1955-1969.

The bill would require collecting and tabulating all veterans who might have belonged to one of the afore-mentioned groups; doing epidemiological studies on veterans and families. Furthermore, this bill would add children of veterans to the genetic screening.

Agent Orange

House Bill No. 663 sets up the framework for genetic screening and an epidemiological study of the effects of Agent Orange and other chemical defoliants and herbicides on Vietnam veterans in Alaska. It also provides for genetic counseling and referral assistance in filing claims to remedy problems caused by these agents.

While it is clear that exposure to Agent Orange and its effects are issues of concern to many Vietnam-era veterans, Alaska lacks the sophisticated laboratory capability, trained staff, and numbers of Vietnam veterans to conduct such a study in a manner that would yield conclusive results. We are concerned that initiation of such a study would lead veterans to expect some definitive answers on the effects and treatment of Agent Orange. Experience of other states and organizations in conducting similar studies has not been very successful. We do not want to see a project begun that would raise false hopes for a sure outcome.

The Center of Disease Control, the Air Force, and the Veterans Administration are all conducting similar studies at this time. They do not expect results for several years. The State of New York determined they did not have sufficient numbers of veterans available to conduct a valid epidemiological study. In response to these concerns, a White House Inter-agency Committee is contracting with UCLA to develop a major national epidemiological study of the effects of Agent Orange and similar substances.

This is an exciting development and it is pleasing to see that such a study is being conducted by a relatively neutral party for there has been a feeling in the past that agencies such as VA and the Air Force could not be totally objective in drawing conclusions.

Epidemiologic research would be extremely costly as cancer and many other medical problems are not reportable diseases and would require extensive investigation. To contract for such a study will cost a minimum of 300,000 dollars per annum.

It is estimated there are 24,000 Vietnam Veterans in Alaska. How many of them would go to a physician for examination; and how many the physician would refer for screening and fat biopsy is very difficult to calculate. Assuming ten percent went to the physician and he referred fifty percent for screening/biopsy we are talking about 1200 individuals.

POSITION PAPER, SSHB 663

Page 2

Laboratory analysis is expensive and could be expected to cost approximately \$1,350.00 per person studied to do and analyze fat biopsies for herbicide and chromosome analysis for genetic screening. As the technology to perform these sophisticated measures is not well developed, the results would be subject to a wide range of interpretation. Definitive conclusions and recommendations would not be able to be made.

As information becomes available from these studies, we think it is valuable to provide for public education concerning the results, but this is several years away.

With regard to assistance programs, (Sec. 18.17.060), veterans are already receiving some referral aid from the Vets Center and its satellites and from the Veterans Outreach program in Juneau. It would be valuable to have a staff member hired as a central contact and resource person and to provide those who come in contact with Vietnam veterans with information about available assistance programs. At this time, the genetic effects of chemical defoliants and herbicides are not clearly known, so genetic counseling would not be appropriate. The other parts of an assistance program: fat biopsies and genetic screening require sophisticated laboratory equipment and trained interpreters and would be of little use except as part of an epidemiological study.

#### Radiation Exposure

This bill will require that Alaska attempt to do what the federal government has been doing for the past four years in an on-going program with the Department of Defense. This program includes location of veterans involved with atmospheric nuclear testing, a compilation of records of medical histories, and determination of radiation exposures from existing records or calculation of radiation exposures if records do not exist. As part of this effort there are at least two groups outside of the Department of Defense, the National Academy of Sciences and the Center for Disease Control, which are evaluating the exposures to determine potential for injury based on personnel oriented histories of each test. This is being coordinated by the Nuclear Test Personnel Review Program of the Defense Nuclear Agency, DOD. This is an extensive effort involving an annual expenditure of 6 million dollars and approximately 170 man years of effort each year.

In addition to the above effort there is pending federal legislation designed to provide assistance to veterans involved with the nuclear testing program. At least one law has already passed. On November 3, 1981 President Reagan signed Public Law 97-72 "Veterans Health Care Training and Small Business Loan Act of 1981." In addition to the assistance evident from the title is medical assistance to veterans exposed to Agent Orange as well as radiation exposure during weapons testing.

Based on information from the Veterans Administration there are 20 thousand Alaska veterans who served in all branches of the military from World War II up through 1960. It has been estimated that during the period of atmospheric nuclear testing in this country, 1945-1962, that 200,000 Department of Defense personnel, military and civilian, were involved. From this one can

estimate that the number of veterans in Alaska who were involved with our nuclear weapons testing is from 200-300. This agrees very well with the number of Alaska veterans, 142, who have contacted the Defense Nuclear Agency stating that they were involved with nuclear testing while in the service.

Due to the extremely small number of individuals involved and the small risk for injury because of the low levels of radiation exposure received, it would appear to be futile to attempt an epidemiological study of Alaska veterans involved with atmospheric nuclear weapons testing. To compound the difficulty, the type of illnesses caused by radiation exposure are not specific to radiation. In the case of cancer, for example, with the high incidence of cancer from all other causes combined it would not be possible to reasonably assert that radiation was the cause or even likely to be the cause in any given situation. It is only statistically that one can show a cause and effect relationship between radiation exposure and cancer.

Chemical and Biological Agents

It is difficult to estimate the number of veterans in this group. There would be overlap with the ones under radiation exposure and the Agent Orange group. Similar efforts for case-finding, collecting and tabulating as in the other two groups would be most difficult to accomplish.

In summary, to accomplish the above bill would require a staff of epidemiologists or a large contract of more than \$300,000 annually plus three positions for collecting, analyzing and reporting. Necessary research is being done nationally and we do not recommend the State sponsor another project. We think the State of Alaska should be supportive of these other projects and participate in them where possible and appropriate rather than funding a separate smaller program.

We therefore recommend this bill not be enacted.

Recommended by: E. S. Rabeau, M.D.  
E. S. Rabeau, M.D. Director  
Division of Public Health

Date: Feb. 2, 1982

Approved by: Helen D. Beirne  
Helen D. Beirne, Commissioner  
Department of Health and  
Social Services

Date: 2-3-82

THE LEGISLATURE OF THE STATE OF ALASKA  
TWELFTH LEGISLATURE

FISCAL NOTE

I. REQUEST

Bill/Resolution No. Sponsor Substitute for House Bill No. 663  
 Title "An Act relating to reports concerning veterans who may have been exposed...."  
 Requested by Commissioner's Office Date 2/2/82

II. FISCAL DETAIL

Agency Affected Department of Health and Social Services  
 Program Category Affected Health/Public Health  
 BRU, Program, Or Subprogram(s) Affected Communicable Disease Control/Epidemiology  
 (Note: If more than one budget component is affected, separate line-item amounts and funding for each component in the analysis section.)

EXPENDITURES (Thousands of Dollars)

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
100 PERSONAL SERVICES		122.3	134.5	148.0	162.8	179.0
200 TRAVEL		20.0	22.0	24.2	26.6	29.3
300 CONTRACTUAL		1928.0	2128.0	2332.9	2566.2	2822.7
400 COMMODITIES		2.0	2.2	2.4	2.7	2.9
500 EQUIPMENT		7.0	7.7	8.5	9.3	10.2
600 LAND & STRUCTURES						
700 GRANTS, CLAIMS, ETC.						
<b>TOTAL</b>		<b>2079.3</b>	<b>2294.4</b>	<b>2516.0</b>	<b>2767.6</b>	<b>3044.1</b>

FUNDING (Thousands of Dollars)

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
GENERAL FUND		2079.3	2294.3	2516.0	2767.6	3044.1
FEDERAL FUNDS						
OTHER (Specify Source)						

POSITIONS

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
FULL TIME		3	3	3	3	3
PART TIME						
TEMPORARY						

III. ANALYSIS (See Fiscal Note Preparation Instruction, Section III)

All inflation @ 10%

A. Epidemiological Contract \$300.0  
 B. Positions(3)  
     (2) Nurse Epidemiologists 99.0  
     (1) Clerk Typist III 23.3  
     Travel 20.0  
     Contractual 8.0  
     Commodities 2.0  
     Equipment 7.0  
     \$159.3  
 C. Genetic screening/fat biopsies  
     1200 x 1350 = \$1620.0  
 D. Total \$2079.3

*2000  
1000000  
1000000  
1000000*  
  
*Minus 420,000  
for 83000*

IV. DATE 2/2/82 PREPARED BY E. S. Rabeau, M.D.  
 AGENCY Dept. of Health & Social Services  
 Original: Legislative Finance PHONE 465-3090  
 cc: Budget and Management  
 Prime Sponsor (First Legislator Named)  
 33-001 (Rev. 12/81)

*JCC*

# More Data On Dioxin Is Urged

LAS VEGAS—The American Medical Association has urged physicians to help collect information on the effects on man of exposure to TCDD, the contaminant in agent orange.

The association, in approving a report by its council on scientific affairs, also recommended that all physicians be alerted to chloracne—the only documented effect so far—and to the “possible signs and adverse effects of TCDD exposure.”

The council report, actually prepared by an outside advisory group whose membership included Dr. Nelson Irey, head of the registry of tissue reactions to drugs at the Armed Forces Institutes of Pathology, now is AMA's official position on the agent orange issue.

Veterans Administration delegate to AMA's interim meeting here, chief medical director Dr. Donald L. Custis, called the report the best summary of scientific knowledge about agent orange that he has seen.

The report notes that an herbicide mixture of 2,4-dichlorophenoxyacetic acid (2,4-D) and 2,4,5-trichlorophenoxyacetic acid (2,4,5-T)—the mixture known as agent orange—was sprayed over certain areas of Vietnam during the latter stages of the conflict in that country.

Similar mixtures, it states, have been used in the United States for years for forestry management, lawn weed control and farming.

In addition, the report notes that numerous persons have been exposed to phenoxy herbicides during the course of their employment.

The report says that despite allegations by Vietnam veterans and others involved in accidental industrial exposures, there is “very little substantive evidence” to link phenoxy herbicide compounds with such effects as malignancy, spontaneous abortion, birth defects and other illnesses.

TCDD, a dioxin, the contaminant in agent orange, was discovered in 1957 when workmen involved in the manufacture of TCP (2,4,5-trichlorophenol, a precursor of agent orange) developed chloracne, the report relates.

About 29 years ago the TCDD level in commercially available 2,4,5-T was anywhere from 1 to 70 parts per million, the report says. However, as industry became aware of this contaminant's toxicity, production operations were changed to reduce this level, which now stands at about .01 to .05 ppm.

The two most pronounced effects of chlorinated dioxins are chloracne, found in the rabbit, nude mouse, monkey and man, and accumulation of fluid in the pericardium and peritoneal cavity of chicks, the report relates.

Chloracne usually occurs within 2 to 3 weeks of exposure. It may clear up within several months or persist for as long as 30 years. Persons most susceptible, the report says, are those prone to developing acne vulgaris.

Chronic exposure to TCDD, the report states, leads to degeneration of the liver and thymus in experimental animals. Porphyria and weight loss also are sometimes seen.

“Of perhaps more relevance to man are the *in vitro* studies on mammalian cells—HeLa; Balb-3T3; normal mouse fibroblasts; SV101; virus-transformed 3T3 mouse fibroblasts, human foreskin fibroblasts and normal human lymphocytes,” the report says.

“No significant growth inhibition in the cell cultures nor discernible ultra structural changes have been observed by electron microscopy.”

The report says the teratogenicity and fetotoxicity of TCDD were discovered in 1969 in a study of 2,4,5-T's biological activity. Cleft palate was linked to exposure in mice, and cystic kidney in the mouse and rat.

“No conclusive evidence is yet available that phenoxy herbicides or TCDD are mutagenic or teratogenic in man,” the report states.

TCDD does promote or cause cancer in some strains of rats or mice—usually accompanied by considerable toxicity.

The report says the most extensive experience in man with TCDD exposure resulted from the July 1976 industrial accident in Seveso, Italy, in which more than 37,000 persons potentially were exposed to varying doses.

In that incident, TCDD accidentally was released from an ICMESA (Industria Chimica Meda Societa Anonima) trichlorophenol synthesis plant when a safety disk in a steam-heated reactor vessel ruptured.

“Two years after the incident occurred, the acute and mid-term health effects were assessed,” the report notes. “The mild chloracne, which occurred mainly in a small group of children, healed quickly.

“Subclinical peripheral nerve impairment was reported; there was also some liver involvement, but without apparent functional disorder. Neither immunoresponse nor susceptibility to infectious diseases was altered.”

The report advises that the following studies currently are being conducted “which may resolve questions on the kinds and extent of human damage from exposure to low levels of TCDD:”

•The Armed Forces Institute of Pathology's department of environmental and drug-induced pathology is examining biopsy and autopsy tissue of Vietnam veterans.

Thus far 152 cases have been assessed. Dominant diseases are epidermal inclusion cysts and chronic, non-specific dermatitis

“If any malignancies were to have been induced by TCDD, they should be appearing by now, yet there have been no unusual morphological features nor clustering of tumors by diagnosis or site as to implicate agent orange.”

•A soft-tissue sarcoma study has been proposed that will be conducted jointly by AFIP and the National Cancer Institute.

•The Air Force is examining 1,200 personnel involved in actual handling and spraying of agent orange. This group and a control population of 20,000 will be followed for 20 years.

•VA has awarded a contract for the design of an epidemiologic study of Vietnam veterans to the University of California, Los Angeles.

•About 45,000 Vietnam veterans have been examined by VA because of concerns expressed about agent orange exposure. Data on 25,000 have been placed in an agent orange registry to be used to indicate health trends.

•A chloracne task force has been established to separate true chloracne cases from others.

AMA recommends that these studies be expanded “to include cooperative engagement of all internationally known exposure data, as recommended by the International Agency for Research on Cancer.”

U.S. Medicine

*U.S. Medicine*

## **Agent Orange Examinations Contract Let**

WASHINGTON—A Houston, Texas, clinic has won a contract to conduct the physical examinations for the Air Force study of pilots who flew agent orange spraying missions in Vietnam.

Under terms of the \$5 million contract, Kelsey-Seybold Clinic will conduct up to 2,400 exams for the study, designed to detect possible health effects related to exposure to the defoliant.

The squadron that flew the missions, the Ranch Hand Unit, was composed of more than 1,200 members. The study involves a one-to-one matched control group for the physical examinations.

The Air Force contends that the Ranch Hand pilots are the most likely group to have had significant exposure in Vietnam.

Louis Harris Associates Inc. received a separate contract to conduct a health, demographic social, and psychological survey of the group in September.

The questionnaire results are expected to be in by April, with the physicals completed by Sept. 30.

Followup examinations are to be continued at regular intervals for 20 years.

POSITION PAPER

CS for SPONSOR SUBSTITUTE FOR HOUSE BILL NO. 663

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We, therefore recommend this bill not be enacted.

Recommended by: E. S. Rabeau  
E. S. Rabeau, M.D., Director  
Division of Public Health

Date: Feb. 10, 1982

Approved by: H. D. Beirne  
Helen D. Beirne, Commissioner  
Department of Health and  
Social Services

Date: 11 Feb 82

POSITION PAPER/Department of Health & Social Services

THE LEGISLATURE OF THE STATE OF ALASKA  
TWELFTH LEGISLATURE

AMENDED FISCAL NOTE

I. REQUEST Committee Substitute for  
Bill/Resolution No. Sponsor Substitute for House Bill No. 663  
Title "An Act relating to reports concerning veterans who may have been exposed..."  
Requested by Commissioner's Office Date 2/9/82

II. FISCAL DETAIL  
Agency Affected Department of Health and Social Services  
Program Category Affected Health/Public Health  
BRU, Program, Or Subprogram(s) Affected Communicable Disease Control/Epidemiology  
(Note: If more than one budget component is affected, separate line-item amounts and funding for each component in the analysis section.)

EXPENDITURES (Thousands of Dollars)

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
100 PERSONAL SERVICES		122.3	134.5	148.0	162.8	179.0
200 TRAVEL		20.0	22.0	24.2	26.6	29.3
300 CONTRACTUAL		1508.0	1658.8	1824.7	2007.1	2207.9
400 COMMODITIES		2.0	2.2	2.4	2.7	2.9
500 EQUIPMENT		7.0	7.7	8.5	9.3	10.2
600 LAND & STRUCTURES						
700 GRANTS, CLAIMS, ETC.						
TOTAL		1659.3	1825.2	2007.8	2008.5	2429.3

FUNDING (Thousands of Dollars)

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
GENERAL FUND		1659.3	1825.2	2007.8	2008.5	2429.3
FEDERAL FUNDS						
OTHER (Specify Source)						

POSITIONS

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
FULL TIME		3	3	3	3	3
PART TIME						
TEMPORARY						

III. ANALYSIS (See Fiscal Note Preparation Instruction, Section III)

All inflation @ 10%

A. Epidemiological Contract \$300.0  
 B. Positions(3)  
     (2) Nurse Epidemiologists 99.0  
     (1) Clerk Typist III 23.3  
     Travel 20.0  
     Contractual 8.0  
     Commodities 2.0  
     Equipment 7.0  
     \$159.3  
 C. Genetic screening  
     1200 x 1000 \$1200.0  
 D. Total \$1659.3

IV. DATE 2/9/82 PREPARED BY E. S. Rabeau, M.D. *JCC*  
 AGENCY Dept. of Health & Social Services  
 Original: Legislative Finance PHONE 465-3090  
 cc: Budget and Management  
 Prime Sponsor (First Legislator Named)  
 33-001 (Rev. 12/81)

there is a mathmatic error  
as pointed out By Doctor from  
Hess

Remove Radial logical  
stuff

THE FOLLOWING DOCUMENT(S) MAY NOT FILM  
LEGIBLY BECAUSE OF POOR QUALITY OF THE  
ORIGINAL.

TITLE (COVER) PAGE  
READS:

AGENT ORANGE  
a story of dignity and doubt

MINNESOTA

JIM GAMBON  
MARTIN LUTHER KING

JIM TOULGIO

MINNESOTA  
MARTIN LUTHER KING

THE PRECEDING DOCUMENT(S) MAY NOT FILM  
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ORIGINAL.



Chairman  
John G. Heubach, Jr.

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Thankyou for your support. Your donation is needed!

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2040 Juliet  
St. Paul, MN 55105  
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# Agent Orange

An Update

Issue #1 Minnesota Veterans Coalition: Contact Person; Tim Michaels, tel. # 612/296-1771, Rm. 325, State Capitol, St. Paul, Minnesota 55155

(St. Paul) Minnesota's Senate Veterans Affairs Committee announced its second Agent Orange hearing scheduled for Wednesday, July 9, 1980 at 1:00 p.m. in room 15 at the State Capitol. Legislators at the hearing will hear from the State Commissioner and the Minneapolis VAMC Chief of Staff regarding the outcome of their recently completed statewide Agent Orange Outreach Program. Latest word is that approximately 11,000 vets have requested the screening, and that about 4,000 have been screened to date. Earlier results had shown 12 veterans who were manifesting symptoms that were possibly relate to herbicide exposure and 615 vets who were called back for follow-up work. The 615 called back (out of 3,500 screened) were experiencing problems ranging from high blood pressure and dermatological problems to liver disease and chemical dependency. There was one death reported which was said to have been non-related to herbicide exposure.

The keynote witness at the upcoming Agent Orange hearing will be Dr. Barclay Shepard, Special Assistant to the Chief Medical Director of the VA. Dr. Shepard was recently named as the replacement for Dr. Haber as the Chair of the VA's Committee on Toxic Herbicides, based out of Washington, D.C., which puts him in the position of heading up the VA's Agent Orange efforts. Dr. Shepard will address the status of the proposed epidemiological study, the newly created Chloracne Task Force, the fat biopsy test, a blood test for genetic damage being perfected in California, the alleged destruction of a portion of the VA's cancer tumor registry, the opening of communications with the Australian government on their Agent Orange efforts, comments on the nature of tests being administered as an "Agent Orange screening" and how that information will be used, and just how the VA plans on using Minnesota's large data base.

Also included in the hearing will be Mr. Victor Yannacone, the New York attorney who is heading up the national class action law suit, who will offer comments on the status of the litigation. The Committee will also be taking testimony from several Vietnam veterans who believe they have been personally affected by exposure, and will hear from John Heubach, the Midwest Regional Coordinator of the National Veterans Task Force On Agent Orange. The hearing will be followed by an Agent Orange fundraiser which will provide the opportunity to informally meet with the hearings participants and discuss the issue. For further information regarding the hearing and/or the fundraiser, contact Tim Michaels, Administrative Assistant to the Committee at 612/296-1771.

\* \* \* \* \*

(St. Paul) Minnesota became the eighteenth (18) state to join the class action suit against the manufacturers of Agent Orange, when the Minnesota portion of the suit was filed in U.S. District Court on Thursday, June 5, 1980. Victor Yannacone, a New York attorney who is heading up the court action against Dow Chemical Company and five other chemical companies, filed the suit on behalf of six families in Minnesota and asked that it be ruled to apply to all those similarly situated so as to cover all Minnesota veterans who came into contact with Agent Orange.

\* \* \* \* \*

(Love Canal) Researchers conducting blood tests on 36 Love Canal residents have reported chromosome abnormalities in 11 of 36 people tested. The blood test to detect genetic damage was conducted by the Bionetics Laboratory under a contract

with the Environmental Protection Agency. The results of the chromosome aberration test have led to the White House's announcement that the federal government will relocate certain Love Canal residents, some 200 households having already left the area. Dr. Picciano, of the Bionetics Laboratory was quoted in a recent article in The Stars & Stripes as saying that they... "would not want to conduct experiments in their laboratories with dioxin because it is so deadly."

\* \* \* \* \*

(Atlanta) Dr. Renate Kimbrough, a medical research officer at the Center for Disease Control, and a member of the Love Canal field research team disputed the results of the chromosome aberration test released by the Environmental Protection Agency. Dr. Kimbrough noted criticism regarding both the collection of the data and the interpretation of the laboratory results. The EPA/Bionetics report also drew criticism from an HEW (now HHS) medical review panel chaired by Dr. Richardson, and reportedly led to a similar critique by Dr. Roy Albert who Chairs the EPA's own scientific review committee. Dr. Kimbrough, who specializes in field work in toxicology and epidemiological research, just recently returned from collecting data in the Love Canal area. It was reported that when the Center for Disease Control attempted to do their own review of the Bionetics research data they were allegedly denied access to this information by that company.

Dr. Kimbrough was in Washington, D.C. during the week of May 26, at the request of the Veterans Administration, to conduct an Agent Orange seminar for physicians from each of the Veterans Administration Medical Centers in the VA hospital system. Parallels between possible Agent Orange exposure victims and exposure victims in the Love Canal area exist since samples taken from the dumps there included a 5ppb (parts per billion) concentration of the chemical 2-3-7-8 (tetrachlorodibenzodioxin) which is used in the manufacturing process of chemicals similar in nature to the herbicide Agent Orange. The Love Canal dump site was used by the Hooker Chemical Company which did produce the chemical 2-3-7-8. Hooker Chemical Company is not one of the plaintiffs named in the national Agent Orange class action suit which includes; DOW Chemical, Hercules, Diamond Shamrock, Monsanto and Thompson - Hayward. It was not known at the time this article was written, whether or not Hooker Chemical Company was a subsidiary of the above named plaintiffs, or was in any way affiliated with the manufacturers of Agent Orange.

\* \* \* \* \*

(Los Angeles) Dr. Gerald P. Hirsch, a medical researcher with the Veterans Administration, is working on yet another experimental technique that may prove useful as a tool for detecting genetic damage in veterans screened for Agent Orange exposure. Dr. Hirsch had developed a blood test to check for genetic damage while he was working with Dr. Raymond A. Popp, at the Oak Ridge National Laboratory. That test concentrated on the level of an amino acid called isoleucine contained in the hemoglobin of test subjects. The test was originally applied to test residents of the Marshall Island in the Central Pacific who were exposed to radiation to determine evidence of genetic damage. The results of the test do seem to confirm its use as a diagnostic tool in evaluating possible genetic damage, however there are some problems in replicating test results at a later point in time. Dr. Hirsch is currently working on a new test which concentrates on lipoproteins and cysteine (an amino acid and a free SH group) which would serve as a check on the blood test perfected earlier with regard to isoleucine in the hemoglobin.

A research proposal to study this latest possible tool to detect mutagenesis has been advanced by Dr. Hirsch and has cleared the local VA station's medical review committee. The research proposal has been forwarded to VA Central for their review and consideration, but no decision has been forthcoming at the

time which this article was written. Dr. Hirsch expressed a fear that in light of the criticism levied against the VA by the General Accounting Office and the National Academy of Sciences for their plans to conduct an in-house epidemiological study, his research proposal might be shot down.

\* \* \* \* \*

(St. Paul) The Veterans Administration continues to ignore a request made by Don Miller, Commissioner of Minnesota's Department of Veterans Affairs, that the VA consider utilizing the fat biopsy test to detect dioxin in the fatty tissue of possible Agent Orange exposure victims. Commissioner Miller made his request on February 26, to Max Cleland, when he learned that this diagnostic tool was not being offered to veterans being given the Agent Orange screening at the Minneapolis VAMC. A local hospital spokesman said that the reason the VA was not making the fat biopsy test available to veterans was due to the expense involved. There was also some speculation that since the test involved elective surgery with an attendant risk involved, and since there was some doubt as to the significance of the results obtained in a pilot study of the test last December, it would not be available to veterans at this time.

In a related story it was learned that several VA physicians who requested the results of the fat biopsy pilot study while at the recent Agent Orange conference in Washington, D.C. were denied access to the data by the VA.

\* \* \* \* \*

(Madison) Meeting in Madison Wisconsin on May 25, and 26, the National Veterans Task Force On Agent Orange provided testimony to Congressman Daschle, Chairman of the Vietnam Veterans Congressional Caucus. The Task Force made the following recommendations;

1) That Dr. Shepard and Max Cleland insure that the Veterans Administration Medical Centers will provide mobile health screening teams to conduct Agent Orange screenings for incarcerated veterans who have requested the same, and that they notify the Task Force of the procedures they will use, and the date they will implement the same.

2) That the VA will insure the timely release (and timely must be defined) of all medical information obtained in Agent Orange screenings to veterans requesting said information, and will reaffirm said access to this medical information as the "veterans legal right-to-know".

3) That Dr. Shepard will address the utilization of the NVTFAO data base compiled by the Minnesota Veterans Coalition, either in a pre-test of the proposed epidemiological study, in the actual epidemiological study, or in a separate research study.

4) That Senator Alan Cranston and Congressman Daschle will open communications with Australia regarding their efforts on resolving the Agent Orange issue, and that they share the resulting information with the NVTFAO and the National Association of Concerned Veterans.

In a related event the Madison Agent Orange conference heard a report from Mr. James Credle regarding planning in progress for a National Agent Orange Convention in Washington, D.C. the weekend of May 23, and 24, 1980. Individuals desiring input into the proposed National Conference planning should contact:

Mr. James Credle  
Assistant Dean of Students  
Rutgers The State University  
53 Washington Street  
Newark, New Jersey 07102

(Dallas) John Anderson, independent Presidential candidate, called for a ..."quick evaluation and treatment for victims of the herbicide Agent Orange". Anderson went on to say that the VA should ..."reach out and contact those who might be victims of Agent Orange, diagnose their illness and treat them".

\* \* \* \* \*

(St. Paul) Mr. Jeff Ryan, Contracting Officer for the VA's procurement office, said that their evaluation panel is still in the process of reviewing and evaluating bids submitted for a VA contract to develop the scientific protocol for an epidemiological study of Vietnam veterans exposed to the herbicide Agent Orange. Congress passed a law in December of 1979 mandating the VA to conduct an epidemiological study. The VA published a Request For Proposals (ie, RFP) on March 19, and received just over 100 requests for information on the research contract. The VA followed up the process with a pre-bid conference in Washington, D.C that attracted somewhere between 20 and 30 interested people. The bidding process was closed on May 8, at 3:30 p.m., and Mr. Ryan noted that they are not allowed to say how many bids were received. Federal laws on procurement procedures do not allow certain types of information to be given out, and only those with a "need-to-know" can get access to it.

When asked about the time-frame involved in such an evaluation of the bids made Mr. Ryan responded that due to the complexity of the issue the panel had to be prudent in its review of the bids, and that no date could be given as to when the VA would actually award the contract. A source within the VA's general counsel's office suggested that because of certain criticisms brought against the VA by the General Accounting Office and the National Academy of Sciences, the VA had to go back to the bidders and request additional information. Asked to respond to the alleged nature of the delay Mr. Ryan responded that he was not at liberty to divulge that type of information while the evaluation panel was still deliberating on the awarding of the contract. Mr. Ryan did note that some procurements do necessitate requesting additional information after the bidding process has been closed, but that he couldn't comment on if this was the case with the epidemiological study. In a related area Mr. Ryan noted that there was another RFP still out on a contract for a literature review of scientific research on phenoxy herbicides.

\* \* \* \* \*

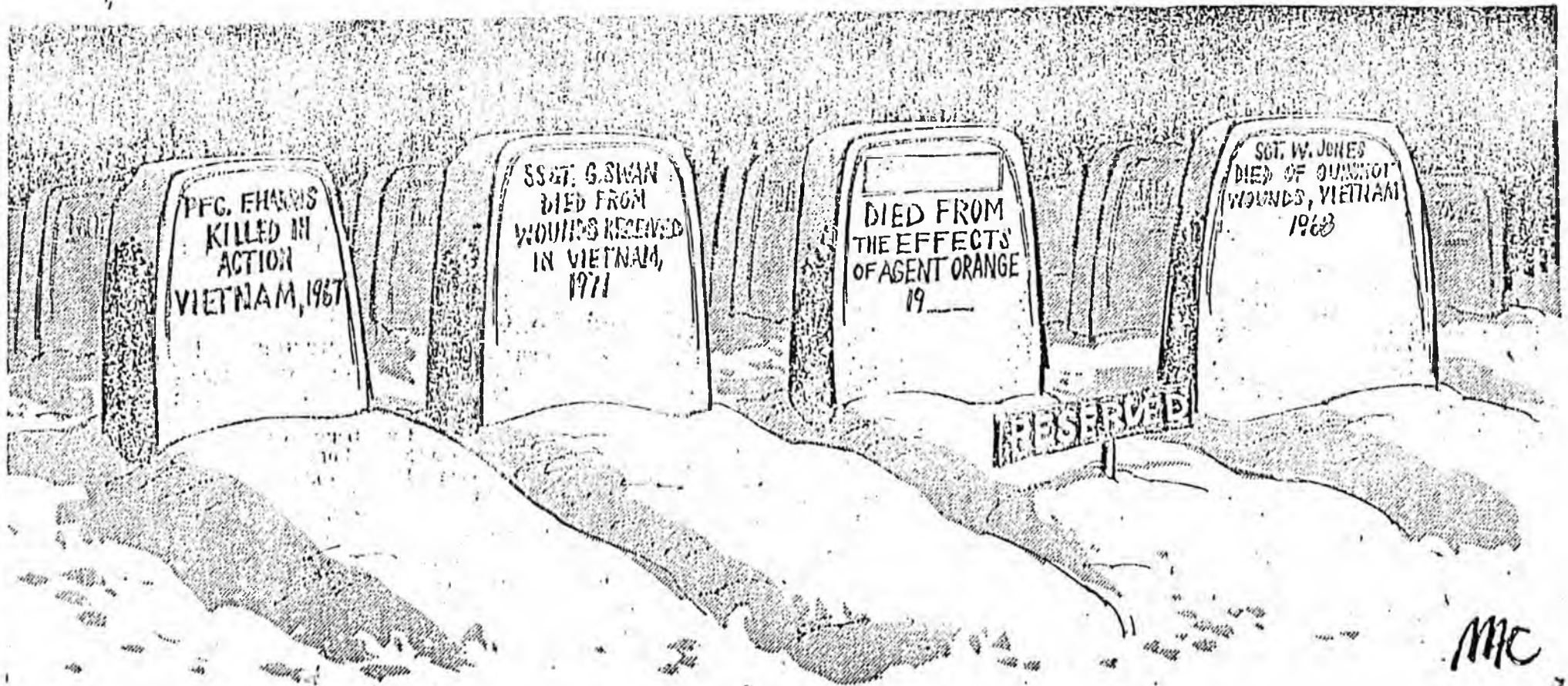
(St. Paul) A documentary film on Agent Orange, and in particular how it has affected a veteran and his family, is being produced in Minnesota. The documentary is being produced by a non-profit organization called Film In The Cities, in conjunction with the Minnesota Veterans Coalition, a member of the National Veterans Task Force On Agent Orange. Any proceeds from the use of the film will go to the two veterans organizations to finance their continuing efforts to work toward a speedy resolution of the Agent Orange issue. A total of \$30,500 is needed to research, produce, process and distribute the film. Any contributions to assist us in our efforts to document this important story would be greatly appreciated. Tax deductible contributions can be made to:

Agent Orange Film Project Fund  
C/O Film In The Cities  
2298 University Avenue  
St. Paul, Minnesota 55108

## RECOMMENDATIONS

### MINNESOTA VETERANS COALITION

- Expedite the epidemiological study
- Utilize the Minnesota data base involving 11,000 Vietnam veterans being given the Agent Orange screening
- Provide mobile health screening teams for incarcerated vets requesting the screening
- Open up communications with Australia, and other governments, conducting dioxin studies
- Reaffirm the veterans access to his Agent Orange medical records as his legal "right-to-know"
- Fund studies concentrating on flushing the system of the dioxin contaminant
- Fund studies on treating the symptoms of Agent Orange exposure
- Approve funding of Dr. Hirsch's genetic blood test proposal
- Initiate legislation that would establish compensation procedures for exposure victims, so that it is in place if and when it is needed
- Keep a Central Registry of all potential dioxin exposure victims, not just Vietnam vets (ie, Love Canal, etc.)



## AGENT ORANGE

Agent Orange was the code name for a chemical herbicide used as a defoliant in Vietnam from 1962 until at least 1971. Herbicide Orange was a chemical mixture of 2,4,5-T and 2,4-D that was used primarily by the Air Force, in a military operation code-named "Operation Ranch Hand". Used as a defoliant, this herbicide mixture denuded the jungle foliage thereby making it easier to observe enemy troop movements, and possibly preventing enemy ambushes. The military use of Agent Orange was halted, by the Pentagon, about 1970 (although there were documented uses of the chemical in 1971) due to adverse health effects cited by scientists researching the impact of the chemical on those exposed to it.

The medical problems which may be related to exposure to Agent Orange are thought to be the result of the veterans exposure to a component of 2,4,5-T called tetraclorodibenzo-para dioxin (or dioxin). Dioxin is a byproduct created during the 2,4,5-T manufacturing process, and is believed to be the deadliest toxin known to man. Vietnam veterans exposed to Agent Orange have attributed a variety of medical problems to their exposure, including;

chloracne rash-skin tumors- liver problems-kidney disfunctions-constant fatigue-numbness of the extremities-depression-personality changes-cancer-birth defects-a loss of sexual interest-and many other symptoms.

Minnesota has conducted an Agent Orange Outreach Program to inform veterans about the possible implications of their exposure to Agent Orange, to refer those who are concerned about these implications to the nearest Veterans Administration Medical Center for a free health screening, and to develop a data base which may prove useful to the VA in addressing this problem. In addition the Legislature conducted hearings on Agent Orange, on December 13, 1979, to familiarize members with the issue and to determine what Minnesota might be able to do to assist in a speedy resolution of the issue.

The Agent Orange Outreach Program was initiated by the Department of Veterans Affairs, the County Veterans Service Officer network, the Veterans of Foreign Wars and the American Legion. The motivating factor behind the program itself, as well as the Legislative hearings, came from the Vietnam Veterans Civic Council and the Vietnam Veterans Against The War. The Outreach Program succeeded in reaching about 22,000 Vietnam veterans, at least 10,100 of whom have requested an Agent Orange screening at their nearest VAMC.

Other activities revolving around the Agent Orange issue include the formation of an organization called the Minnesota Veterans Coalition to carry on the work begun by the VVCC and the VVAW--the Coalition in turn joined forces with the National Veterans Task Force on Agent Orange to work toward a resolution of the issue--members of the Coalition have participated in meetings/conferences and have provided Congressional testimony on the Agent Orange issue (in St. Louis, Denver, Chicago and Madison) Minnesota's efforts have become recognized as being in the forefront of veterans advocacy on behalf of potential Agent Orange exposure victims. Anyone interested in finding out more about the ongoing activities in Minnesota should contact John Heubach (612/376-8189) or Tim Michaels (612/296-1771).

ADDITIONAL CONTACTS: Veterans Administration Medical Center (612/725-6767)  
Toll free # 1-800-692-2121  
Dept. of Veterans Affairs (612/296-2562)  
Veterans Administration Claims Office (612/726-1454)

# Agent Orange

An Update

Minnesota Veterans Coalition

Issue #2 Contact Person: Tim Michaels 612/296-1771, Room #325, State Capitol, St. Paul, Minnesota 55155

(St. Paul) Minnesota's Senate Veterans Affairs Committee held its second Agent Orange hearing on Wednesday, July 9. The Committee heard testimony from Dr. Barclay Shepard, Victor Yannacone, John Heubach, and a number of Vietnam veterans who feel that they have been personally affected by exposure, or who have been working on the Agent Orange issue.

The Senate Committee learned that Minnesota's Agent Orange Outreach Program resulted in contacting over 20,000 Vietnam veterans, 11,190 of whom requested a VA examination for exposure. As of July 9, 4,600 vets had received the physical, 500 were scheduled, 3,700 were in the process of being scheduled, 1,521 did not show up for their scheduled appointment, and 1,980 did not respond to the requested appointment form.

Of the 4,600 veterans who were examined, 747 patients were asked to return for follow-up work, six vets were hospitalized. Listed below are the types of problems which were found that required follow-up work:

Dermatological	52.3%	Orthopedic	2.0%
Medical	22.5%	Eye	1.4%
Neurological	6.3%	Psychiatric	1.1%
Urologic	5.4%	Other Miscellaneous	4.3%
Ear, Nose, Throat	3.3%		

The Dermatological problems included, in order of frequency; nonspecific dermatitis, acne, tinea pedis, eczema, psoriasis, and fungal infections.

The Medical referrals were of three basic types: hypertension, abnormal chest x-ray, and abnormal chemistry.

The referrals to Neurology were for; headaches, numbness, tingling, and stiffness.

The referrals to Urology were primarily for two problems; infertility, and prostatitis (inflammation of the prostate).

The six patients hospitalized had the following problems;

1. Enlarged liver, jaundice.
2. Recurrent acute and chronic alcoholism and drug intoxication.
3. Psychological dependence, headaches, visual disturbances.
4. Probable cluster headaches.
5. Atypical chest pain.
6. Passive aggressive behavior, alcoholism.

The VA Hospital noted that as of July 3, 121 veterans had requested their medical records, Agent Orange, or otherwise.

Dr. Shepard's presentation provided no new information, and concluded with the statement.

"I would like to state emphatically that despite any allegations to the contrary, the leadership of the Veterans Administration is deeply concerned with all aspects of this perplexing problem and is genuinely dedicated to devoting any and all available resources at its command in helping any veteran who is experiencing any problem thought to be related to exposure to exposure to herbicides in Vietnam, continually striving to make our system respond in the most humane and compassionate manner possible and improve our relations with all veterans organizations. As new scientific knowledge and information develop we will apply it in the most effective way possible in order to arrive at a resolution of the issues and problems involved."

The Commissioner of the State Department of Veterans Affairs reported that the outreach effort cost his Department only \$1,140. The remainder of the cost involved was \$62,500 in donated computer services, and over 3,400 man hours put in by staff in the Department, as well as volunteer time put in by County Veterans Service Officers, and Service Officers of the major veterans organizations --- not to mention the time donated by the members of the Minnesota Veterans Coalition, a member of the National Veterans Task Force On Agent Orange.

Victor Yannacone, the New York attorney who heads the class action suit on behalf of Agent Orange exposure victims provided the Committee with background on the litigation that is pending in the courts. Mr. Yannacone elicited much support from the standing room only crowd of onlookers, as he responded to a question regarding which veterans may have been exposed to Agent Orange saying ... "that any veteran who served in Vietnam in combat and who did not spend the entire war in a bar in Saigon drinking bottled water and bottled booze....meaning almost anybody below the rank of Colonel was exposed."

(Washington D.C.) Minnesota Congressman Jam Oberstar has demonstrated his support of Vietnam vets on the Agent Orange issue by coauthoring two bills dealing with the issue; H.R. 6377, authored by Congressman Tom Daschle (Chairman of the Vietnam Veterans Congressional Caucus), which authorizes compensation and service-connected medical treatment for Vietnam veterans exposed to Agent Orange, and for their dependents who may have been affected. The bill also provides for treatment and compensation for dependents of exposure victims, when said birth defects are the result of contamination by dioxin. This law would treat the veterans children, in a sense, as veterans of the Vietnam war. H.R. 7157, which also was coauthored by Congressman Oberstar, waives the one year time limit on disabilities due to exposure to Agent Orange and other herbicides sprayed in Vietnam. In addition Oberstar asked both his colleagues on the House Veterans Affairs Committee and the Chief Medical Director of the Veterans Administration to take steps to ease the financial burden of veterans requesting Agent Orange screening's. The Congressman pointed out the fact that many veterans must take a day off of work, must commute long distances, and make motel accommodations to take advantage of the examination.

The Minnesota Veterans Coalition thanks Congressman Oberstar for his concern for the Vietnam vet, and for the support he has provided us.

(St. Paul) As a result of the hearing conducted by the Minnesota Senate Veterans Affairs Committee, Senator Chmielewski, the Chairman of the Committee, made the following recommendations

Recommendations on the "Agent Orange" Issue

By the Senate Veterans Affairs Committee

1. That the VA move more rapidly on conducting the epidemiological study.
2. That veterans officially requesting the results of their Agent Orange physical be provided the same in a timely (and timely must be defined) manner, and that veterans are to be provided with complete records.
3. That the VA Central office dispatch a memo to all VA Medical Centers reaffirming the veterans access to their medical records as being within the veterans "legal right-to-know".
4. That incarcerated veterans requesting Agent Orange screenings should be notified now as to how the VA plans on responding to their request.
5. That the VA give serious consideration to utilizing the Minnesota data base (presently being collected) in either the epidemiological study or in a pie-test of the same.
6. That the VA Central office will support the research proposed set forth by Dr. Hirsch (of the Wadsworth VA Hospital in Los Angeles) to further develop a blood assay test which can be used as a diagnostic tool in determining genetic damage caused by exposure to toxic chemicals or to radiation.
7. That the Senate Veterans Affairs Committee be kept apprised of the VA's operation of the Agent Orange screening program: including the receipt of regular reports, the issuance of DVB-Circulars regarding the program, and any other documents relating to the operation of the screening program and its results not covered by the Privacy Act.

# Agent Orange

An Update

The Minnesota Veterans Coalition  
A Member of the National Veterans Task Force On Agent Orange

Issue #3. Contact Person: Tim Michaels 612/296-1771, Room #325,  
State Capitol, St. Paul, Minnesota 55155

(Washington, D.C.) The American Legion, testifying before Congress, was highly critical of the VA's handling of the Agent Orange issue. Mr. John F. Sommer, Jr., the Legion's Chief of Claims Services, told the Senate Veterans Affairs Committee that the resolution of this issue was ... "mired in bureaucratic controversy" ... and urged that the ... "National Academy of Sciences conduct a study (of dioxin) rather than the Veterans Administration." (source: Stars & Stripes June 12, 1980)

Mr. Sommer further levied criticism regarding the VA's handling of the issue saying ... "Bureaucratic inertia has been manifest, as has bureaucratic language, so that veterans' apprehensions are aggravated, hospital and clinic staffs are not properly oriented to handle cases, and the feeling is increasing that the VA doesn't care."

\* \* \* \* \*

(Love Canal) The controversy continues to rage surrounding the outcome of the chromosome abnormality test conducted by the EPA on a small number of Love Canal residents. The latest report on those tests coming from Mr. Forrest Lindley, Jr., in the July 31, issue of the Stars & Stripes, stating that the test results were confirmed by a doctor hired by the Hooker Chemical Company -- the firm which had dumped over 21 tons of chemicals at the Love Canal site.

Veterans advocates working on the Agent Orange issue have suggested that the VA utilize the blood test for chromosome abnormalities being used at Love Canal as a check for genetic damage amongst Vietnam vets who may have been exposed to Agent Orange. The Love Canal area was a dump site for 21,800 tons of chemicals, including the chemical 2-3-7-8 (or tetrachlorodibenzo-paradioxin, the component in Agent Orange which is believed to be causing medical problems for vets), by Hooker Chemical Company.

Veterans have been critical about the fact that the government was so quick to respond to the concern of the residents of Love Canal, yet so slow in addressing the veterans concern. Vietnam veterans first began asking for assistance on the Agent Orange issue over two years ago, and the VA has said that results of a medical study will not be ready for at least one to two years. The residents of Love Canal were able to get a much more immediate response from the government when they raised a hue and cry about the possibility of adverse health affects due to chemical exposure. Members of the Love Canal Homeowners Association siezed, and held, two officials of the Environmental Protection Agency hostage, demanding that the government act expeditiously in resolving their concern. A short time later President Carter declared a state of emergency at Love Canal; and the EPA was told to contract out a study to determine the possibility of genetic damage to area residents. The

government is presently looking at the possibility of relocating up to 2,500 residents at an estimated cost of \$3 to \$5 million.

In our first "Update" edition, it was reported that the EPA chromosome abberation study had been completed, and that the results indicated a significant level of genetic damage in those tested. We also reported a conversation with Dr. Renate Kimbrough, of the Center for Disease Control, who disputed the results of the test released by the EPA. Dr. Kimbrough noted that the EPA report also drew heavy criticism from the Department of Health & Human Services (formerly HEW). The criticism cited the lack of controls, failure to use modern staining techniques, and inconsistency in labeling different types of chromosome breaks "supernumerary acentric chromosomes".

Dr. Dante Picciano, of Bionetics Corporation (Houston, Texas), the firm contracted by the EPA to conduct the chromosome abberation test, said that this was essentially meant to be a pilot study to determine whether a larger more scientific study was warranted. Dr. Picciano believes that the preliminary evidence suggests that a larger study would be worthwhile.

At least a part of the controversy regarding the chromosome abberation study regards the scientific credibility of Dr. Picciano, and the accessibility of the study data. Dr. Kimbrough reported that when they attempted to review the data collected by Dr. Picciano, they were denied access to this information. The Bionetics Corporation, and Dr. Picciano, contend that they only wanted to name one of the scientists on the panel which would review the data. The Bionetics Corporation demanded that Dr. Jack Killian be named to the review panel. The Center for Disease Control refused the offer to put Dr. Killian on the review panel citing the fact that Dr. Killian had been involved with Dr. Picciano in a very controversial research study earlier when they had both worked for DOW.

Dr. Killian is a cytogeneticist who had collaborated with Dr. Picciano in a in-house study of workers exposed to bezene while the two still worked for DOW Chemical. The results of the DOW study were criticized by DOW, as well as by a cytogeneticist named Peter Tishler --- at the request of the Manufacturing Chemists Association, and by James H. Jander, a hemotologist at Harvard. DOW would not allow the benzene study to be printed and Dr. Picciano decided to leave, taking the study with him, only to release it at a later date when he went to work for the EPA. The EPA is currently suing Hooker Chemical Company and Plastics Corporation (now owned by Occidental Petroleum) for \$124.5 million, for damages caused by that company's dumping of 21,800 tons of chemicals at Love Canal.

Hooker contends, in the meantime, that they have no obligation or responsibility because they disposed of the wastes in full accordance with existing environmental regulations, at the time the chemicals were dumped. In 1953 Hooker sold the Love Canal dump site to the Niagra School Board for \$1 with a deed disclaiming responsibility for any injuries that may result from the buried wastes. The Board accepted the conditions of the sale and proceeded to build a school on the property and sold the remaining land to developers for home construction.

The Love Canal situation is a significant development in terms of understanding the problems which Vietnam veterans are facing in trying

to get the government to address their concerns about the adverse health implications of exposure to Agent Orange. Residents of Love Canal and Vietnam veterans do share something---they share a sense of frustration that their government is not willing to openly discuss the full implication of their possible exposure to toxic chemicals, and how that exposure could affect them and their children; they share a helplessness in confronting an issue that is both large enough and potentially devious enough to discourage a cohesive grass-roots advocacy approach toward solving the problem; they share a sense of betrayal that their government too is discouraged and divided in its opinion regarding how to address the issue; they share a feeling that the government is perhaps unwilling to stop dragging its feet on the issue in fear of the enormous financial implications which a resolution of the issue might bring; and last of all they distrust the very statements issued by the government to assuage their fears (ie, that there is no scientific data available at this time that would demonstrate medical problems related to exposure), when they know full well that there are many amongst them suffering from a wide range of medical problems that just could be attributable to chemical exposure.

The crux of the overall issue seems to be that both Vietnam veterans and residents of Love Canal are having some very real medical problems, and regardless of whether or not their problems were the result of exposure to toxic chemicals the fact remains that our government is magnifying those problems through the stress they have placed on possible exposure victims due to their indecisiveness, their inept handling of both situations, and their failure to keep people informed about the issue(s).

\* \* \* \* \*



FOR SALE

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LOVE CANAL  
REALTY

(New York) The National Cancer Institute recently reported that they had conducted studies which found that small amounts of Dioxin caused cancer in lab animals.

\* \* \* \* \*

(Wisconsin) The Wisconsin Legislature and the Wisconsin Department of Veterans Affairs announced plans to conduct a statewide Agent Orange Outreach Program. The Wisconsin program, patterned after Minnesota's, will attempt to contact 60,000 of Wisconsin's Vietnam veterans, to inform them about the possible health implications of exposure to the chemical.

\* \* \* \* \*

(Nebraska) Dioxin was found in tissue samples of veterans tested for the VA by the University of Nebraska. The study found that all 33 men tested had traces of dioxin in fat cells, but that none had lethal amounts. (Stars & Stripes, July 31)

\* \* \* \* \*

(Minneapolis) The Minnesota Veterans Coalition announced that the American Cancer Society is interested in coming to Minnesota and conducting a longitudinal cancer study of Vietnam veterans possibly exposed to the chemical Agent Orange. The Cancer Society cited the excellent data base put together by Minnesota in its Agent Orange Outreach Program, which has resulted in over 11,000 Vietnam veterans requesting VA screening's. Approximately 5,000 veterans have been screened so far in Minnesota.

\* \* \* \* \*

(Arizona) Reports out of Prescott, Arizona, have the VA spraying 2-4-D, the other half of Agent Orange, on the grounds of the VA Medical Center. Dr. Barclay Shepard, head of the VA's Agent Orange efforts out of Washington, when asked about the alleged spraying by John Heubach, Midwest Regional Coordinator of the National Veterans Task Force On Agent Orange, offered no response.

\* \* \* \* \*

(Massachusetts) Dr. Arthur Westing, of Hampshire College in Amherst, Massachusetts, will coordinate the American scientific involvement in an International Dioxin Conference scheduled to be held sometime in January, 1981.

\* \* \* \* \*

(Saigon) Dr. Ton That Tung, the Internationally noted scientist from Duc Hospital in Saigon, will be in the United States later this Fall. Dr. Tung is expected to be in Madison, Wisconsin sometime during the third week of October.

\* \* \* \* \*

# Agent Orange

An Update

The Minnesota Veterans Coalition  
A Member of the National Veterans Task Force On Agent Orange

Issue #4 Contact Person: Tim Michaels 612/296-1771, Room #325,  
State Capitol, St. Paul, Minnesota 55155

(Washington, D.C.) The House Subcommittee On Medical Facilities and Benefits held an Agent Orange hearing on July 22, 1980. The following are excerpts from the testimony provided to the United States House of Representatives.

Ron DeBoer, Vietnam Veteran, A Troop, Seventh Squadron, Seventeenth Air Cavalry, United States Army, 1968-1969;

"Never before in the history of this country have a group of veterans been looked upon and treated with such little regard. NOW is the time to aid those men who chose to serve their country and did so honorably and courageously, only to return home to a thankless nation. We, the victims, can only pray that those dark days of exile are behind us and help is forthcoming."

Ed. note: Ron DeBoer is one of the key litigants in the national class action law suit, he has testicular cancer (rare among men his age), and also suffers from a persistent skin rash.

\* \* \* \* \*

Gabriel P. Brinsky, AMVETS;

"We unequivocally oppose HR 6377 the Vietnam Era Veterans Agent Orange Act which would provide for an immediate presumption for service-connected disability to veterans who served in Vietnam"... "The creation of such presumptions are without any foundation either in jurisprudence, medicine, or science, and are contrary to any principle of adjudication. The creation of such presumptions is foreign to and incompatible with any concept of jurisprudence or administrative law. The creation of any such presumptions would completely erode the program administered by the Veterans Administration relative to the adjudication of claims according to the laws and regulations currently in effect. It would completely destruct the concept of the administration of veterans benefits."... "Specifically, we are disturbed that billions of dollars may be required to provide health care and compensation to those Vietnam veterans and members of their families when entitlement thereto has not been established, perhaps at the cost in the reduction or denial of benefits to those whose entitlement has been clearly and unequivocally established. For the resources of this Government, as great as they may be, has a limit."

\* \* \* \* \*

Dr. Samuel S. Epstein, Professor of Occupational and Environmental Medicine and Director of Toxicology at the University of Illinois Medical Center, Chairman of the Panels on Mutagenicity, and on Teratogenicity of Pesticides of HEW Secretary Finch's MRAK Commission, Consultant to OSHA, EPA, the Department of Labor, and numerous agencies, states and Commissions, the author of over 200 scientific publications and five books on the hazardous effects of chemicals;

"There is a clear consistency between the wide range of toxic effects induced in experimental animals of various species and those observed in humans. This consistency particularly relates to multi-system disease, cholracne,...and carcinogenicity."

"In view of the extensive environmental contamination of South Vietnam with phenoxy herbicides, the proposed legislation establishes a "presumption of exposure" of Vietnam veterans without imposing on them the onus for documenting its degree, location, mode, route, and other specific circumstances. In so doing, HR 6377 shifts the burden of proof from the veteran, on whom it now almost exclusively rests, to the Administrator."

"While HR 6377 properly shifts the burden of proof away from the veteran, it appears questionable whether this should be imposed on the Administrator to the exclusion of Dow Chemical and other responsible industries. The herbicide registrants had an affirmative and ongoing duty to supply the USDA with all available data on the health and safety of their products. As such, it would appear that Dow had a non-delegable responsibility to inform the USDA and others in 1964 of its admitted knowledge of the contamination of 2,4,5-T with TCDD. Instead, Dow withheld this information, and in 1964 publicly asserted that its herbicide was "absolutely non-toxic to humans or animals". The failure of Dow to have made public warnings of the potential hazards of TCDD in 1964, at which time appropriate precautions could have been taken including the warning of servicemen, appears to constitute a wrong that justifies a heavy burden of responsibility for restitution."

"In view of these considerations and the superior knowledge of Dow Chemical on the toxicity of TCDD, the Congress could consider directing the Attorney General to take action to recover the cost of providing veterans benefits from the registrants"...

"Recognizing these circumstances, and the overwhelming body of literature on the hazards of TCDD, the bill could explicitly proscribe delay of restitutive action pending further confirmatory studies."

\* \* \* \* \*  
Congressman Thomas Daschle, Chairman of the Vietnam Veterans in Congress (a 19 member Congressional caucus);

"We have now found revealing testimony concerning potential culpability and the withholding of data from the Federal government by the Dow company. This testimony has been a part of the public record since 1970 when Dr. Julius E. Johnson, at that time Vice-President and Director of Research of Dow Chemical, told the late Senator Phillip Hart, before the Senate Commerce Subcommittee on Energy, Natural Resources, and the Environment, that Dow was aware as early as 1964 that 2,4,5-T was contaminated with dioxin. The significance of this matter is that Dow apparently made no attempts whatsoever to notify the Department of Defense, the Food and Drug Administration, the U.S. Department of Agriculture, or anybody else in the Federal government of their discovery until the Hart hearings were held in April, 1970. This was 8 years after herbicide operations had begun in South Vietnam, 6 years after Dow's initial discovery that their product was contaminated, and 6 years after the point when Dow stepped up production of 2,4,5-T to meet increased demands from the DOD. Thus, it appears very likely that DOD was unaware that they were utilizing a contaminated and potential dangerous product to humans until the Secretaries of HEW, Interior,

and Agriculture jointly announced the suspension of 2,4,5-T in April, 1970, based upon the publication of studies that dioxin was a teratogen. Ironically, the suspension order was announced the same day Dr. Johnson was testifying at the Hart hearings."

"I am requesting that Dr. Johnson's testimony and subsequent questioning of him be made a part of the public record. In light of this information, I feel that it is imperative that this committee request from Dow all unpublished studies done on dioxin, including the reproductive study on 300 wives of dioxin-exposed workers that was initiated in July, 1976 and concluded in July, 1978. Furthermore, I believe that the implications raised by this testimony, and unpublished Dow studies, warrant that additional hearings be called."

\* \* \* \* \*  
Congressman David E. Bonior, past Chairman of the Vietnam Veterans In Congress;

"...there is an ominous recurrence of severe medical problems exhibited in those who claim to have been exposed to Agent Orange. These problems include tumors, chloracne rash, birth defects in offspring, and neurological disorders among many others."

"This is not the first time these symptoms have been seen in connection with Agent Orange. Dow Chemical, the largest manufacturer of Agent Orange in the United States, experienced an outbreak of chloracne at one of its manufacturing plants in 1964. Thomas Whiteside, in his research, cites Dr. Benjamin Holder, Director of Dow's Midland Division as stating that heavy exposure could lead to internal organ damage and nervous system disorders."

"In 1953, male workers at a German manufacturing plant were found to have developed chloracne."

"In 1963, following an explosion at a Dutch manufacturing plant, 50 workers suffered chloracne and internal damage."

"The most famous case involving dioxin occurred in Seveso, Italy in July, 1976. An explosion at a Swiss-owned chemical plant produced a cloud of dioxin and forced the evacuation of the surrounding communities. The people exposed experienced eye and throat irritation, skin eruptions, headaches, and dizziness. Within two days, small animals in the area began to die. Postmortems showed extensive liver damage. Because of the publicity on the teratogenicity (disfigurement of fetuses) from dioxin, the Catholic Church sanctioned abortions for exposed women. Spontaneous abortions appeared to double. The following year, 280 children north of the contaminated area were suffering from chloracne. To my knowledge, many of these families are still unable to return to their homes."

Ed. note: Science magazine, Vol. 205, 24, August 1979, reported in an article entitled "Agent Orange Furor Continues to Build";

"Last month, 13 of 74 employees at a 2,4,5-T manufacturing plant in Jacksonville, Arkansas, were found to have chloracne from dioxin leakage. A medical team headed by Irving J. Selikoff of Mount Sinai School of Medicine has been dispatched to the scene to look for effects of the chemical on skin, and immune systems of past and present workers."

\* \* \* \* \*

Robert O. Muller, Executive Director, Vietnam Veterans of America;

"Nearly everyone, including the Veterans Administration and the chemical manufacturers, agree that exposure to Agent Orange and its contaminant dioxin causes chloracne, a distinct, persistent and severe skin rash. Yet, no Vietnam veteran in America with chloracne has received compensation for the skin condition because of exposure to Agent Orange."

"When asked to explain why, VA Administrator Max Cleland states, as he did before this Committee in February, that the existing statistics are inadequate because they were not done on Vietnam veterans."

Ed. note: The following is a verbatim quote from Max Cleland's testimony before the Subcommittee on February 25, 1980;

"Whereas there are a number of reports of human exposure to Agent Orange constituents from industrial settings and accidents... the only clearcut health related finding is that such exposures may be (note: underlining is Editor's emphasis) followed by the development of a skin condition known as chloracne. However, there are no scientifically validated data yet available to show increased frequency among Vietnam veterans of this"...

\* \* \* \* \*  
E. Phillip Riggin, Deputy Director National Legislative Commission,  
of The American Legion;

"We are sorry to say that the VA has, in our judgement, not handled this matter as well as it should have."..."hospital and clinic staffs were apparently not properly oriented as to the rationale for the examinations, which resulted in many veterans being antagonized by the way they have been received and treated by VA medical personnel."

"The American Legion is at present monitoring the examination process, nationwide, to determine how well the Veterans Administration is carrying out its responsibility to examine all veterans who were or may have been exposed to Agent Orange, and to ascertain whether such examinations are being carried out in a thorough and compassionate manner."

..."the Field Service staff of the Legion's National Veterans Affairs and Rehabilitation Commission is presently evaluating the Agent Orange screening program during their visitations to VA medical care facilities. The Field Representatives have recently been instructed to pay special attention to the screening program and to provide comments and observations on the quality and timeliness of these examinations. The feedback we receive as a result of these surveys will be of great assistance in identifying the facilities at which inconsistencies in the quality of examinations exist."

\* \* \* \* \*  
Jeanne M. Stellman, Associate Professor of Public Health, Division  
of Environmental Sciences, Columbia University, New York, NY;

..."there is a pressing need for development of clinical protocols for examination of veterans with possible exposure to Agent Orange. I have appended a medical examination form of one veteran examined at the Veterans facility at Fort Snelling, Minnesota. It is clear that this form was designed without regard to centralization and computerization of results. It is an open form, allowing each examining physician

discretion for even the most basic and routine blood and urine tests. It provides no guidance to the examining physician who must treat a patient with possibly a quite complex array of symptoms. It seeks no systematic reproductive history. It requests that the veteran describe his exposure to Agent Orange, rather than provide the physician with an independent mechanism for determining exposure. There is no attempt at records linkage between the veteran's medical record and his service history."

\* \* \* \* \*  
Phillip R. Mayo, Special Assistant, National Legislative Service,  
Veterans of Foreign Wars Of The United States;

"...a number of questions have been generated in the scientific community regarding the VA's "Request for Proposal for Agent Orange Epidemiology Study Design." These questions relate to the manner in which the VA seeks to conduct the study, the elimination of eligibility of certain scientists from participating in such a study, the lack of certain needed "quality" controls on the study, and the VA's apparent intransigence concerning the criticisms that have been leveled in this regard. At this time, we cannot condone the elimination of any qualified expertise in such an endeavor nor can we acquiesce to a protocol which may be so restrictive as to raise questions concerning its credence."

\* \* \* \* \*  
National Veterans Law Center, Lewis M. Milford, Ronald Simon, and  
Lewis A. Golinker;

"The history of the Veterans Administration policy on Agent Orange reveals several troubling problems. Unlike the actions of the Environmental Protection Agency and other agencies concerned with related health areas, the Veterans Administration has taken a closed and secretive approach to decision-making on issues of health and scientific inquiry. Scientists, veterans and other interested members of the public have been closed out of important agency deliberations on the rules for adjudication and the conduct of scientific inquiry."

"Opposition to such open discussion goes to the heart of this problem and is contrary to the basic principles of scientific integrity: that all relevant data and interpretations be taken into account before important public policy decisions are made. We are too far along in the area of public health and environmental debate to deny the uncertainty of scientific information and the social judgements that must be made on the basis of such imperfect information. To compound these difficulties by making such admittedly difficult decisions without the full range of advice and criticism invites public skepticism and often results in the wrong decisions."

"the absence of informed and independent opinion in these deliberations has meant that the VA has not considered on the record the central scientific and public policy considerations that are necessary to develop sound standards and levels of proof required for compensation decisions in toxic substances exposure areas. The issues are extremely difficult and deserve attention immediately. That the Veterans Administration has relied almost exclusively on scientific evidence developed by the Department of Defense is consistent with the Agency's refusal to consider outside independent information in these sensitive areas."

"We attempt here to set out several suggested approaches to dealing with the problems identified above. First, open and participatory public decision-making is essential in this controversial scientific and political area. The Agency should be required to conduct public rulemaking on the issue of whether health effects may result from dioxin exposure and on the basic issues of level of proof and toxic substances victim compensation policy. The Agency also should contract out completely the epidemiological study mandated by Congress in Public Law 96-151. The inherent defects in the process which have been revealed to date, criticisms by veterans and presumably by the National Academy of Sciences on the lack of credibility of an in-house study fully support this position. The sensitive nature of this problem mandates that an independent and objective study be conducted immediately."

"In addition the Agency should discontinue the practice of denying claims for Agent Orange related disabilities until public rulemaking is completed. At present the Agency has denied all claims based on the current level of information. This has caused a significant harm to current claimants who may be discouraged and not pursue their claims after these initial denials. Also, the Agency should conduct a national, comprehensive outreach program to inform veterans of the current information on Agent Orange, obtain necessary health data and begin to provide a full range of genetic and family counseling services."

"Finally, aggressive oversight and direction by the White House Interagency Work Group on Phenoxy Herbicides on policy and scientific matters is absolutely necessary. The VA has demonstrated remarkable indifference to open and participatory policy making on these health and science matters. Other agencies of government concerned with related health issues must intervene before Vietnam veterans and the public lose whatever hope is left of resolving this issue."

\* \* \* \* \*

Christopher H. Johnson, Vietnam Veterans of South Dakota, Inc.;

"We are the men who went to fight a very complicated war and the suffering and dying was just as real as in all wars. You asked us to go and we went. We are the ones who were fighting on foreign soil so we could keep the United States such a freedom loving country. You must not turn your backs on us now that we are in real need of help. We are not the ones who went to Canada for awhile, who were allowed to come back home with a guaranteed work program."

"You are not turning your backs on the Vietnamese refugees or the Cuban refugees. You are still sending monetary aid to Vietnam and allowing Cubans to take up bed spaces in VA hospitals. I do not mind them coming to our country, I would in no way want to live in their countries either."

"Don't you think that it is only right to take care of the American men who supported you, first?"

Ed. note: Christopher Johnson lost his right leg and sustained multiple fragment wounds to the left foot, left hip, and right arm and also sustained a hearing loss; the Johnson's son, Nicholas was born with severe chromosome damage (some 26 birth defects) and died shortly after birth. Chris also suffered(s) from a large weight loss, a severe skin rash, and persistent flu type symptoms.

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# Agent Orange

An Update

The Minnesota Veterans Coalition  
A Member of the National Veterans Task Force On Agent Orange

Issue #5 Contact Person: Tim Michaels 612/295-1771, Room #325,  
State Capitol, St. Paul, Minnesota 55155

## WHITE HOUSE SEEKS AGENT ORANGE INPUT FROM VETERANS ORGANIZATIONS

(Washington, D.C.) The Interagency Work Group to Study Possible Long-Term Health Effects of Phenoxy Herbicides and Contaminants has scheduled a public meeting, at 10:00 a.m., Monday, September 22, to solicit input regarding the Work Group's recommendations to the White House. The meeting will be held in the Health & Human Services North building auditorium, 330 Independence Avenue, Washington, D.C. The Interagency Work Group recommendations are printed in the August 29, 1980 Federal Register, beginning on page 57783. Individuals wishing to appear before the Work Group for this meeting should contact Les Platt, 202/245-7542, or Susan Wrenn, at 202/245-1897. (Les is the counsel for the General Counsels Office, and Susan is the Deputy Assistant Secretary for the Health & Human Services Office of Public Information.) If you want to appear before the Work Group you are asked to submit a written copy of your statement to the General Counsels Office by Monday, September 15. If you cannot make the meeting you can still offer comments and questions regarding the Work Group's recommendations, provided that they are received by September 22. The meeting itself will consist of three main agenda items: 1.) a report of the Work Group's work, 2.) taking public input on the Work Group's recommendations, and 3.) a question and answer session dealing with the letters they have received regarding recommendations. The Interagency Work Group will present its report and recommendations to Stewart Eizenstadt, the White House Domestic Policy Advisor.

Written comments should be sent to:

Office of Public Affairs  
Dept. of Health & Human Services  
Room 3716E  
Hubert Humphrey Building  
200 Independence Avenue SW  
Washington, D.C. 20201

\* \* \* \* \*

(Washington, D.C.) Mr. Lou Galinker and Lewis Milford, of the National Veterans Law Center, expressed concern about three of the recommendations being advanced by the Interagency Work Group to the White House;

1. That the VA's epidemiological study should not include ground troops.
2. That the scope of the epidemiological study be expanded to include additional variables.
3. That the Air Force should be allowed to conduct the Operation Ranchhand study inhouse.

(St. Paul, Mn.)

The Minnesota Veterans Coalition shares the concerns expressed by the National Veterans Law Center on these three recommendations, and ask that you join us in testifying before the Interagency Work Group, or by submitting your written comments on these proposals.

As to point number 1, an epidemiological study that did not include ground troops would be incomplete at best and would supply no viable answers for the majority of combat veterans who may have been exposed to Agent Orange.

The second point calls for an expansion of the scope of the research to include additional variables. There is a very good reason for the federal government to undertake this type of a study, however, we cannot support the incorporation of this into the Agent Orange study. The Minnesota Veterans Coalition would support a seperate research project in this area. The inclusion of a study of the synergistic effects of chemicals used in Vietnam would necessitate yet another change in the research design, and therefore in the research protocol, or methodology -- which translates into a large delay in getting an already overdue research program underway. Such a change would require that the VA solicit additional information from researchers bidding on the epidemiological study. The VA would then have to reconvene their technical review panel of epidemiologists to reassess the new data before awarding a contract. A major change in the focus of the VA study is unwarranted, and would surely create a lengthy delay in getting answers which veterans and their families have been waiting for too long as it is.

In addition, the probable results of an expanded study do not seem to justify either the changes being proposed or the delay they would necessitate. If scientists are uncertain about the medical effects of exposure to Agent Orange then how much more certainty will they have about the combined effects of additional chemicals? By expanding the scope of the research program the only clear cut result would seem to be the confounding of the variables of causality -- and from what many of us have read in the scientific journals, scientists now know little or nothing about the synergistic effects of chemicals on humans, or even animals for that matter.

On point number three, we agree with the position of the National Academy of Science, the Veterans of Foreign Wars and the American Legion, that a study conducted in-house by the U.S. Air Force would lack credibility as far as veterans and the general public are concerned.

\* \* \* \* \*

(Washington, D.C.) The U.S. Senate voted 96 to 0 (with 1 abstention) to approve the Heintz/Jranston amendment (#1549) dealing with the Agent Orange issue. The amendment, which passed the Senate on Wednesday, September 3, would expand the scope of the VA's Agent Orange study to include other variables. In addition, it would require Congress to promulgate rules to administer Agent Orange disability compensation claims by the VA, no later than two years following the VA's first report to Congress on the preliminary results of the epidemiological study. The adoption of a similar amendment by the House would shift the focus of the VA's research from Agent Orange exposure to Vietnam service and the impact of exposure to a variety of chemicals.

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(St. Paul, Mn.) John Heubach, Regional Coordinator of the National Veterans Task Force On Agent Orange, has provided the following statistics on the number of Agent Orange screening's conducted, or pending, in the midwest region (figures were supplied by Mr. Bob Puttman, DMS - VA Central):

	Minnesota	4,257	completed,	212	pending
	Michigan	1,645	"	"	147 " "
<u>MIDWEST</u>	Illinois	1,081	"	"	155 " "
<u>AGENT ORANGE</u>	Wisconsin	992	"	"	145 " "
<u>SCREENING'S</u>	North Dakota	839	"	"	107 " "
	South Dakota	728	"	"	120 " "
	Missouri	671	"	"	147 " "
	Midwest Total	10,213			

John noted that these figures were representative of the information VA Central had on hand on August 20, 1980. In addition, the total number of requests for physicals in Minnesota have now reached 13,545.

\* \* \* \* \*

(Washington, D.C.) Dr. Lawrence Hobson, Special Assistant to Dr. Custis, the VA's Chief Medical Director, informed us that the VA's technical selection committee selected a contractor for the Agent Orange epidemiological study sometime in August. Dr. Hobson noted that this information could not be released pending the outcome of the General Accounting Office's (GAO) review of the contract procurement procedures. The GAO was requested to investigate the contract negotiations at the request of the National Veterans Law Center. The Law Center had also sought an injunction against the VA to halt the contract review process, based on what they believed to be gross inadequacies in the proposed studies research design. The Court did not issue the injunction the Law Center was seeking, however.

Dr. Hobson stated that it was his belief that the VA would have awarded the research contract as much as three months ago, if it were not for the Law Centers intervention through the courts and the GAO.

\* \* \* \* \*

(St. Louis, Mo.) The National Veterans Task Force On Agent Orange is seeking input on a National Agent Orange Conference being planned for Washington, D.C., on May 23 and 24, 1981. The Task Force is also asking for information regarding local referral systems within states, so that their office can refer veterans concerned about Agent Orange, and other issues, to local veterans advocacy groups. Call or write Jon Furst at 314/428-0113;

Jon Furst  
 NVTFO - National Office  
 P.O. Box 15972  
 St. Louis, Missouri 63114

\* \* \* \* \*

(Washington, D.C.) The Environmental Protection Agency announced on April 29, 1980, that the Agency is requesting additional information from manufacturers to determine whether 2,4-D, a component of Agent Orange still used extensively in the United States, is safe for

humans and the environment. "We have made this decision following a review of health effects studies of 2,4-D," Blum said. "The review showed that significant information gaps exist on the effects of 2,4-D, preventing a definite conclusion on the safety of the herbicide."

The name 2,4-D refers to the phenoxy herbicide 2,4-dichlorophenoxyacetic acid and related salt and ester forms. There are approximately 1,500 2,4-D products which are used to kill undesirable plants in home lawns, forests, right-of-way, drainage ditch banks, rangeland, pastures, aquatic areas, cereal crops, sugar cane and commercial turf. More than 70 million pounds of the active ingredient are distributed annually.

Commenting on the EPA review of 2,4-D, Blum noted that, most of the scientific data submitted to their agency in support of product registrations containing 2,4-D were registered since the 1940's. And that, while some of these studies are scientifically valid, many others do not meet today's standards for scientific testing. As a result, there are significant information gaps in several areas, including cancer potential, reproductive effects, neurotoxicity, and metabolism in animals. The EPA plans on conducting certain reproductive studies on 2,4-D in its own laboratories while awaiting the industry results.

Companies that hold EPA permission to produce concentrated or "technical" 2,4-D include; Dow Chemical, Midland, Michigan; Monsanto, St. Louis; Diamond Shamrock, Dallas; PBI Gordon Corp., Kansas City; Thompson-Hayward, Kansas City, Kansas; and AmChem Products, Ambler, Pa.

\* \* \* \* \*

(San Francisco, Ca.) The Agent Orange Veterans' Advisory Committee has just begun publication of a monthly newsletter. Each month they will have regular columns on legal, legislative, medical, scientific, and local news-- each edition will also include one feature article. The subscription cost is \$12 per year, mail your check payable to Agent Orange Veterans' Advisory Committee, 944 Market, Suite 500, San Francisco, Ca. 94102.

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St. Paul, Mn.) Martin Sheen, noted for his role in "Apocalypse Now", reportedly has agreed to narrate a documentary tentatively entitled "Agent Orange: The Veteran Family". Plans are for the actor to be in the Twin Cities in early October to work with instructor Jim Gambone and his students at Film In The Cities, a non-profit group that promotes films and filmmaking in the Twin Cities. The crew is making a 30 - minute movie on the herbicide and its effects on veterans. The film has been about nine months in the making and is scheduled for completion sometime in November. The documentary, which is being produced in conjunction with the Minnesota Veterans Coalition, will focus on the impact of Agent Orange exposure on a Vietnam veteran and his family. Any proceeds from the use of the film will go to the Coalition to finance their continuing efforts to seek a resolution of the Agent Orange issue for all Vietnam veterans, the Film In The Cities group will only receive funds to cover their costs, since they are a non-profit organization. Any contributions to assist in the effort to document this important story would be appreciated. Tax deductible contributions can be made to:

Agent Orange Film Project Fund  
C/O Film In The Cities  
2298 University Avenue  
St. Paul, Minnesota 55108

The male mouse study exposed 100 mice to varying strengths of the three components of Agent Orange; the two defoliants 2,4-D and 2,4,5-T and the contaminant TCDD, also called dioxin. A control group of 100 mice were not exposed. The report of the study stated that no significant increase in reproductive abnormalities in the exposed groups was observed...exposure did not appear to influence the fetal or infant development or the viability of offspring sired by the exposed mice.

\* \* \* \* \*

(Minneapolis, Mn.) Industries in Minnesota are gearing up to fight new state rules controlling disposal of hazardous waste in an attempt to replace them with less stringent federal regulations.

If efforts by the Minnesota Association of Commerce and Industry-- an organization representing many of the state's largest businesses-- are successful, pollution control officials conclude that at least 17,000 tons per year of hazardous wastes could be improperly disposed of in sanitary landfills, at best, and pits, swamps, rivers and streams at worst.

The federal rules supported by industry would remove from state control all businesses generating less than 2,200 pounds of hazardous waste per month.

That would leave more than 1,000 hazardous waste producers unregulated in Hennepin county alone according to county officials.

The state Pollution Control Agency estimates that about 325,000 tons of toxic, flammable or corrosive substances are generated in Minnesota each year. About two-thirds of that comes from businesses and industries within the seven county metropolitan area. There are no hazardous waste disposal sites in Minnesota, and all of the waste currently must be shipped to special dumps in Illinois and Idaho.

In a recent hearing before the Hazardous Waste Commission, the Minnesota Association of Commerce and Industry testified that ..."the cost of compliance with the state's rules far exceeds that of compliance with federal rules, and with little, if any, environmental benefit."



(Source: Minneapolis Star, Tuesday, Sept. 2, 1980. "Industries Fight State Rules On Hazardous-Waste Disposal", by Jim Dawson, page #1, Sect. A -- headline story.)

## Hazardous waste in Minnesota

Source: Minnesota Pollution Control Agency

(St. Louis, Mo.) An experimental drug used extensively by the military to prevent malaria in Vietnam produces a blood disorder blamed for the deaths of eight U.S. servicemen, the Baltimore Evening Sun reported. The side effects also resemble most of the ailments Vietnam veterans attribute to Agent Orange, the defoliant blamed in recent lawsuits for a variety of health problems among some veterans. Military doctors knew about Dapsone's side effects, the newspaper said, but required the troops to take the pills because the drug was effective in preventing a deadly strain of malaria that was resistant to standard drug therapy.

The following is a description of the side effects of Dapsone which was taken from a manufacturers product insert (ie, Ayerst, Avlosulfon, a brand of Dapsone).

Cyanosis and pallor may occur as transient features soon after treatment has been initiated. Nausea, vomiting, headache, giddiness, and tachycardia are not common if the dosage is gradually induced. Psychosis has been reported but it is not likely to be seen on the lower dosage schedules now recommended. Anemia. In well-nourished patients treatment with the doses recommended, the occurrence of serious anemia is rare. Routine hemoglobin estimations are now considered unnecessary as proper clinical examinations should detect significant degrees of anemia.

With slow induction the hemoglobin level shows a fall over a few weeks after which it becomes stabilized, and may gradually rise as the patient's condition and general health improves. In the occasional case where the fall is severe it may be necessary to stop the drug temporarily, but once the anemia is controlled treatment can be resumed at a lower dosage level.

Drug fever with general dermatitis, hepatitis, lymphadenitis, etc. This complication may develop and usually appears within the first six weeks of treatment when the dosage has risen over 100 mg. per day. Should it occur, administration must be stopped, and oral medication with one of the antihistaminic drugs is of value in assisting the dermatitis to subside quickly. Sulfone treatment should be withheld for at least two months and may only be resumed after the patient has been desensitized with repeated small and increasing doses.

Febrile reactions are common under sulfone therapy, and where they are severe and frequent the dosage should be reduced or the drug temporarily withheld.

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(Washington, D.C.) The National Toxicology Program (NTP) has released a study which apparently shows that dioxin does not cause reproductive problems in males or birth defects among their offspring. An analysis of 200 mice was conducted by a team of federal agencies, and stands as the first scientific attempt to evaluate veterans' charges that Agent Orange affected their reproductive system, and caused them to father children with birth defects.

"We failed to get any indication of a significant increase in birth defects or decreased fertility," said Dr. James Lamb of the National Institute of Environmental Health Sciences, who directed the study.

(St. Paul, Mn.). A Vietnam veteran from Minnesota has been awarded what is believed to be the first case of disability compensation for delayed stress. The significance of this case in light of the Agent Orange issue is that this case, like the radiation compensation claim which was recently won, establish a precedent for waiving the VA's one-year presumptive period for filing of a disability compensation claim. In addition both compensation cases are prime examples of a veterans being awarded VA compensation without having verifiable proof of medical problems evidenced while on active duty. Again these cases seem to break from past precedents which followed the hard line rule of thumb that a veteran must be able to document his or her problem through personal military-medical records.

# Vietnam vet gets stress disability

By Greg Hughes  
Staff Writer

A 33-year-old Vietnam combat veteran, troubled in the last three years by memories of almost daily combat experiences as an infantryman, has received one of the first Veterans Administration disability ratings for war-related psychological stress under a new classification.

Craig Williams of Bloomington, who fought voluntarily with the U.S. Army's 9th Infantry Division in the Mekong Delta, said the stress from those experiences played "a significant role" in a recent divorce.

The former Army sergeant said his war-time experiences, coupled with public condemnation when he came home in 1969, caused extreme anger, nightmares, flashbacks, sleeplessness, impatience, guilt and irritability.

THE VA RATING decision, signed last week at Fort Snelling, probably is the first of its kind in Minnesota and is among the first such rating made anywhere, according to John Kelley, Fort Snelling VA adjudication officer.

The VA customarily provides disability ratings to persons who suffer serious combat wounds, physical disabilities, illnesses and psychological disorders that occur while on active duty.

But the VA in March added a new classification called "Post-Traumatic Stress Neurosis," which is a psychological response to a life-threatening experience, VA officials in Washington said.

The new classification went into effect as Williams was appealing a disability re-

*Craig Williams of Bloomington fought with the U.S. Army's 9th Infantry Division in the Mekong Delta.*

quest the VA had turned down last year. He said he wanted the rating so he could obtain regular counseling from the VA, which is not possible without a disability rating. He said he did not do it for the money.

PREVIOUSLY, MOST psychological disorders have been classified by the VA as nervous conditions, Kelly said. Symptoms had to be reported within one year of discharge in order for the veteran to be eligible for any kind of disability.

Post-traumatic stress in some Vietnam veterans can take eight to 10 years to surface, psychologists say, so documentation in servicemen's medical record books would not occur.

Kelly said the change is important because documentation in service medical records is no longer necessary for this kind of stress neurosis.

Williams, who was in Vietnam from May 1968 to May 1969, was awarded a 30 percent disability, or \$133 a month.

"I feel a great deal of satisfaction in winning this," he said of his 2½-year

Continued from Page 1

effort. "Not so much for myself but for other Vietnam veterans, who are discouraged from approaching the VA bureaucracy for anything."

As a point man on a patrol in Vietnam, Williams suffered shrapnel wounds to both legs after tripping a booby trap, for which he was awarded a Purple Heart. It played a role in winning the stress disability.

"I don't really feel the government owes me anything because I volunteered for the draft and I volunteered for Vietnam," Williams said. "But if damage was done to a person as the result of the war, then I think the government should help repair the damage," he said.

Kelly of the VA said he expects to see a rise in the number of disability rating requests for post-war stress because of the new classification.

"Each case is handled on an individual basis, and no two cases are exactly alike," he said. "There is no easy money in this if someone applies with less than good intentions," he said.

JEROME PECKARSKY, the VA's director of compensation and pension in Washington, said more than 100,000 Vietnam-era veterans have been diagnosed to have some kind of anxiety neurosis. He said the new classification tries to pinpoint specific symptoms of psychological problems that result from severe combat experiences.

He said post-traumatic stress is a definition that means more than "shell shock" or "battle fatigue." "The important difference here is the amount of time involved — sometimes, a full decade — between the combat or POW experience and the surfacing of symptoms," he said.

See Vietnam, Page 7



By Donald H. Schwab  
Director, National  
Legislative Service

## Agent Orange Study

Public Law 96-151, the Veterans Health Programs Extension and Improvement Act of 1979, among other provisions, directs the Administrator of Veterans' Affairs to conduct, pursuant to a protocol approved by the Director of the Office of Technology Assessment (OTA), an epidemiological study of persons who served in the United States Armed Forces during the Vietnam conflict to determine if they have suffered long-term adverse health effects, resulting from exposure to the dioxin found in Agent Orange, a herbicide used as a defoliant in Vietnam. The Director of OTA is also assigned responsibility for monitoring the VA's compliance with the protocol and reporting to the Congress at specified intervals on the execution of his responsibilities. This provision also directs the President to assure that the VA study is fully coordinated with other Federal studies (past, on-going, or planned) and that all Federal efforts in the area of dioxin research be fully coordinated; and authorizes the appropriation of such sums as may be necessary for the conduct of the mandated study.

Subsequently, the Honorable Alan Cranston, Chairman of the Senate Veterans' Affairs Committee, called for the Agent Orange study to be made by professionals out-

side the VA system. Concurring in this recommendation, Commander-in-Chief Vander Clute sent the following letter to Senator Cranston:

"Dear Mr. Chairman:

"The Veterans of Foreign Wars concurs in your recent statement that any Agent Orange study conducted by the Veterans Administration would be subjected to serious question as to its objectivity. Although there is no question in our mind that research performed by VA physicians would be highly professional and unbiased, affected Vietnam veterans already disenchanted with response to their needs by the VA would not accept as 'factual' the results of an in-house study by the VA. Similarly, a study conducted by the same agency adjudicating claims may have bearing on the conclusions.

"Notwithstanding the provision of section 307, Public Law 96-151, mandating the VA to conduct an Agent Orange study, we also believe much more credibility would be given to a study by professionals not directly associated with the VA.

"In view of the foregoing, it is our recommendation that the Agent Orange study be conducted by an independent agency such as the National Institutes of Health, a world-renowned, highly respected

and professional agency. Further, that the necessary supplemental appropriation be approved and needed funding not drained from the already wholly inadequate VA budget.

"There is no doubt in my mind you will impartially consider our recommendation and with best wishes and kind personal regards, I am

"Sincerely,

Howard E. Vander Clute, Jr.  
Commander-in-Chief"

# Agent Orange

## An Update

The Minnesota Veterans Coalition  
A Member of the National Veterans Task Force On Agent Orange

Issue #6 Contact Person: Tim Michaels 612/296-1771, Room #325,  
State Capitol, St. Paul, Minnesota 55155

(Westbury, N.Y.) Court documents filed Tuesday (Oct.14) by Dow Chemical Co., a defendant in a suit initiated by Vietnam veterans, show for the first time that the Army may have known of the potential danger of dioxin in Agent Orange two years before the defoliant was sprayed in Vietnam.

Dow Chemical filed the documents in U.S. District Court, where a suit has been brought by Vietnam veterans against Dow and four other chemical firms that manufactured the herbicide. The veterans say their exposure to dioxin caused a variety of ills, ranging from tumors to birth defects and nervous disorders.

Dow Chemical produced a scientific paper published in 1962 in the Journal of Investigative Dermatology that details a technique for testing dioxin's potential for harm by using the tissues of a live rabbit's ear. The study, a footnote indicates, was financed by the Research and Development Division, Office of the Surgeon General, Department of the Army.

The paper refers to another investigation of dioxin's toxicity to humans first reported in 1957 in a German scientific journal, which is also included in court papers.

The chemical companies produced the defoliant under Defense Department contracts during the Vietnam War. About 2,000 Vietnam veterans from 24 states have joined in the suit. The dispute has yet to come to trial because of procedural delays.

Both the veterans and the chemical companies have charged that the Defense Department may have been aware of the toxic potential of dioxin in 2,4,5-T, one of Agent Orange's two herbicidal components.

But until now, neither side had offered proof that military authorities may have been aware of dioxin's potential danger.

"So far there have been mainly allegations," said Don Frayer, an officer of Dow's legal claims division. "This is a fact, the first offered so far."

("Maker of Agent Orange says Army knew of risk", Adrian Peracchio, The Minneapolis Star, Wednesday, Oct. 15, 1980)

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(Chicago, Ill.) More than 100 attorneys from all 50 states met in Chicago to discuss an unprecedented class action suit filed against the nation's seven largest chemical companies on behalf of thousands

of Vietnam veterans exposed to the toxic defoliant Agent Orange.

The suit, filed in January, 1979, in a New York state District Court, now involves more than 1,250 attorneys from 150 law firms nationwide and is regarded as history-making litigation in the field of product liability.

"We believe this is the first time in the history of American jurisprudence that this many firms have banded together to pool our resources rather than competing with one another for cases," Chicago attorney Stephen J. Schlegel said.

New York trial lawyer Victor Yannacone said that anyone who served in Vietnam and drank the water was exposed to AO. "This does not necessarily mean that they are a victim but they were exposed. It was in the water. Unless you spent the entire war in Saigon in a bar drinking booze or bottled water, you were exposed to dioxin," he said.

Yannacone said that the lawyers are seeking an order to compel seven Fortune 500 companies to contribute to a trust fund that would pay veterans and their families for their injuries.

Under the proposed trust fund idea, money would be paid out of the manufacturer's current earnings since even the huge chemical companies might not be capable of bearing the financial burden if the plaintiffs prevail in their damage suits.

Yannacone has asked that serial trials be set up in the New York Federal court, one to determine fault, another to determine general causation, and a third to determine liability. ("Vast Agent Orange Suit In Progress", The Stars and Stripes, Thursday, Oct. 9, 1980)

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(St. Paul, Mn.) The Veterans Administration Medical Center here released the latest statistics on Minnesota's Agent Orange Outreach Program indicating that one out of four veterans screened have been called back for further tests and/or follow-up care.

The VAMC reported that 5,704 veterans had been examined, and that 1,011 of those screened had been placed into an after care program, with seven individuals actually hospitalized.

The VA Medical Center also reported that 13,599 applications have been sent out for the Agent Orange screening. The VAMC report was released at a recent meeting of Minnesota's Vietnam Veterans Civic Council, the organization which was responsible for conceiving and initiating Minnesota's Agent Orange Outreach Program, along with the Vietnam Veterans Against the War.

Members of the VVCC have raised concern about the large number of veterans who initially requested the screening, when the state surveyed its veteran population, but who have subsequently failed to return the VAMC application form, or to show-up for their scheduled exam. The VVCC has sought for, and won approval from, the VAMC administration to recontact "no-shows" to determine whether they are still interested in an exam --and why they were a "no-show".

# Viet Vet Group Asks Feds for Martinez VA Hospital Probe

By CARLA MARINUCCI  
Times Staff Writer

MARTINEZ — Contra Costa County's Vietnam veterans, angry about treatment they say they've received at the Veterans' Administration Martinez hospital, have filed a formal complaint for a full-scale investigation of the facility with the VA Inspector General in Washington.

The complaint, filed this week on behalf of the local chapter of the Vietnam Veterans of America, charges that the hospital's Agent Orange screening program is inadequate and outdated, and also contends that hospital staff members have included misleading and false statements on veterans' hospital records.

Hospital spokeswoman Christina Breckinridge said "We officially have no notice of the problem" and have not received a copy of the complaints.

She said she could not comment on the demand for an investigation.

But, she added, "The VA Martinez is doing its level best to offer the best of service in its Agent Orange testing" with Vietnam-era veterans.

However, the veterans don't agree.

"We have attempted numerous times to communicate and work with the administration in Martinez," said Pete Tiffany, president of the local veterans' group, "but our letters have gone unanswered, nor has anyone bothered to contact us."

"We've taken that to be rejection," said Tiffany. "We've taken that to mean that this agency, formed to work with all veterans and assist them, is just not serving our needs."

Tiffany's group then filed the complaint with Washington. A copy was not sent to the Martinez facility.

Inspector General Allen Reynolds, contacted in his Washington office, said that the Veterans' Administration will review the operation and complaints. He said "we'll probably decide this week" how any investigation would be conducted.

Said Reynolds of the veterans' investigation demand: "I recognize that they have some very serious concerns, and one can be sure they will be addressed."

Tiffany said that Congressman Bill Ayers, Ronald Reagan's campaign advisor for veterans' affairs, has also contacted the local group and "expressed some very serious concerns about what's happening to vets" at the VA facilities.

Tiffany, in his formal request for a full-scale investigation, cited "inaction on the part of the VAMC Martinez senior personnel in regard to Agent Orange testing" at the facility.

Art McGowan, another local veterans' leader, maintains that the Agent Orange tests given to veterans are out of date and don't comply with new examinations developed to standardize medical data concerning veterans' exposure to the defoliant.

McGowan contends that a new test has been developed

"which re-emphasized medical problems" which veterans developed because of their exposure to Agent Orange, but that test isn't being given in Martinez.

"The VA has a clear-cut and simple responsibility to give veterans the correct test," he said.

Hospital spokeswoman Breckinridge said "there may be some page differences" between the tests given by Martinez and other facilities, but she added "I know that our tests are correct."

Another of the local veterans' complaints is that they receive "less than humane" treatment at the VA facility and that their medical records sometimes contain false or misleading statements made by the hospital staff.

In his formal request, Tiffany contended that one local Vietnam veteran, Bob Gillespie, "was told that his liver was in very bad shape due to his drinking," even though friends and family testify that Gillespie rarely drank.

At the VA Martinez facility, Gillespie was "informed that his suspected exposure to Agent Orange occurred while he was riding the Bay Area Rapid Transit System and while he drove along the roads of California," according to Tiffany's complaint.

Both McGowan and Tiffany maintain that many local veterans are highly critical of the facility's program for "Delayed Stress Syndrome," a problem experienced by some Vietnam veterans which can result in flashbacks, depression, even violent tendencies.

The VA Martinez program, said McGowan, "proposed peer group counseling to discuss the dramatic events they went through during war time. But we thought reviving those issues would be dangerous and would threaten their readjustment, because it locates the problem within the veteran."

But the problems, he said, are also "outside the veteran — society, politics, time," and he contends the programs do little to help veterans or recognize that.

Inspector General Reynolds said he is considering material and complaints concerning the VA facility.

"We're looking at when was the last time we did an audit, and also looking at other complaints," he said.

"We talked with one administrative staff member as to his perception of the problem. We want to talk to the medical inspector, and based on the results of those discussions, we'll reach the decision on what role we'll play," Reynolds said.

He said in the past year, the VA has had no complaints about the Martinez facility's Agent Orange program.

Tiffany has contacted U.S. senators Alan Cranston and S.I. Hayakawa on the matter, and McGowan — a veterans' liaison to Congressman George Miller's (D-Martinez) office — said Miller's office and staff are aware of the problems.

"My hope is that this demand for an investigation will prompt (the VA) to provide people who will at least listen and communicate with us, to bring some positive solutions to our problems," said Tiffany.

Monday, September 29, 1980

# Complaints of Mistreatment Of Veterans

By CARLA MARINUCCI  
Times Staff Writer

MARTINEZ — An investigation will begin this week into charges by local Vietnam veterans that treatment and Agent Orange screening programs are deficient at the Veterans Administration Medical Center here.

The VA's Inspector General, Allen Reynolds, informed hospital administrator C.H. Nixon on Friday that his representative will arrive to begin the probe, according to hospital administrative assistant Rudy Rodriguez.

"We don't deserve it, but I think we'll stand up to any scrutiny by any investigative body," said Rodriguez. With "as much time and effort as we are spending on the Agent Orange program here, I would be very surprised if any investigation revealed any deficiencies in the program."

In asking for the probe, the Contra Costa County chapter of Vietnam Veterans of America alleged that the Agent Orange program is ineffective and outdated, and that treatment of veterans is often "less than humane."

In some cases, the veterans charged, medical records of veterans have been changed by hospital staff members to include false and misleading statements.

In interviews Friday, Rodriguez and Dr. William Ogston, acting chief of staff, said they were "greatly surprised" by the demand for a full-scale investigation.

Although veterans contend that their phone calls and letters to the hospital have not been answered, Ogston maintained "there has been phone contact, there has been personal contact, and written communication."

Rodriguez said he is considering meeting with veterans to discuss problems on Oct. 10 during their next formal gathering at 8 p.m. in Concord's Queen of All Saints Church.

"I'm really in the dark" as to why there have been complaints from veterans, he said. "You can't say there hasn't been communication."

Hospital regulations require that veterans be informed of the facility's Agent Orange screening program, which attempts to examine any veteran who says he might have been exposed to the toxic defoliant in Vietnam.

But veterans have maintained that they were never asked to be part of the examination program, and that there were few signs even informing incoming vets that the screening was available.

"We may miss some," said Ogston. "We don't ask every vet. 'Are you a Vietnam vet.'" But he said that vets who look old enough to have served in Vietnam are queried.

Signs about the screening program have been posted since May 8, "though they may have been down for temporary renovations," said Rodriguez. "I can assure you we are meeting that qualification."

PROBE, Page 3A

# Probe Into Treatment Of Veterans

From Page 2A

Some veterans in the Contra Costa organization have complained that they generally haven't received courteous care from the hospital staff.

Said one: "They make you feel like a beggar."

Kathleen Gillespie, widow of veteran Bob Gillespie who died in July, said "They really treated him badly. He came away from there depressed. They made him lose his dignity."

Rodriguez responded, "I've been here since 1972, and I don't think I've ever heard a veteran say he'd been treated like that."

Said Ogston, "Walk around and talk to the ones who are actually on the premises. It may be in some cases that the staff are not as courteous and caring as they should be."

Veterans had alleged that in Gillespie's case, hospital staff members had recorded he was an alcoholic — although family and friends attest he didn't drink. They also said that Gillespie was exposed to Agent Orange a number of times, but that his hospital records attribute his exposure to toxic chemicals to riding BART and commuting on freeways.

Ogston and Rodriguez said that they couldn't discuss a specific case without a release.

However, Kathleen Gillespie showed a copy of her husband's VA Agent Orange screening exam to the Times.

Under the question, "Has the veteran been exposed to other potentially toxic chemicals?" the answer checked is no. But written on the exam are the words "except on freeways and on BART."

Agent Orange testing at the hospital, said Dr. Sellg B. Weinstein, attempts to "deal with all the problems veterans are having" but can't connect physical problems with Agent Or-



Rudy Rodriguez

ange exposure.

Many Vietnam-era vets have complained of chronic skin rashes, sometimes a severe case of acne known as chloracne, aches in joints, allergies, and other major health problems that could be related to Agent Orange exposure.

"We don't know whether these conditions are or are not caused by Agent Orange," said Weinstein. So far, the Martinez facility has not analyzed data from its 116 veterans who have been screened, he said.

The results are being tabulated in Washington as part of a nationwide study, he said, and Martinez is not looking for common symptoms because the number of veterans tested is too small to work with.

"All we do is the examinations," said Weinstein. "We don't adjudicate or make any causal relationships. I wish I could make an early diagnosis. There just aren't any easy answers."

Virtually all the veterans contacted by the Times complained of some form of skin rash they contended results from exposure to Agent Orange.

But, said Ogston, "I would almost wonder if there's any of us here who hasn't had a skin rash."

And Weinstein added, "I have not seen a single case of chloracne. We've had all other kinds of skin problems, and we treat them. But we do it without saying they are or are not caused by Agent Orange."

(Martinez, Ca) It was in the jungles of Vietnam that Art and Placida McGowan of Martinez met.

An Army Captain and a member of the Special Forces, he would become a POW, decorated with the Distinguished Service Cross, four Bronze Stars, and four Purple Hearts.

She was a nurse, one of a handful of American women who worked away from home, patching up the wounded victims of war.

Art McGowan's experiences with Agent Orange are vivid ones. He remembers watching the planes swoop down and mist the land with defoliant, he remembers getting ill.

And perhaps most frightening of all, he says he is convinced that Agent Orange was not just being used as a herbicide.

McGowan says the amount of spraying he saw - and the places he saw being sprayed - confirmed that "they were using it as a weapon," a kind of "chemical warfare," and "an effort was being made to make people sick. They were spraying it on grasslands, where there's nothing to defoliate. They were spraying it to get it on the North Vietnamese."

He recalls the nightmare of refugees, pouring across the border out of a heavily sprayed area: "They had skin lesions. All the women had had miscarriages. None had children under two years old."

There were deformed children, too. "The stuff was hitting them bad. They would have to put people through a cattle dip to get those effects."

McGowan says soldiers were just too busy trying to survive the shooting to stop and ask about the herbicide. "What could I say? "Hey you're using it as a chemical agent against them. Why are you using it against us, too?"

He recalls a "flight where I saw 27 Phantoms in groups of three, four and five, almost three squadrons. They were bombing, strafing, going up and down. There were three planes spraying in the middle, it was unbelievable. You could go up to a tree and hit it, but it would shatter and fall like broken glass."

At some points McGowan says, "they were trying everything, dumping 55 gallon drums out of airplanes, spraying with helicopters. We flew right through it. You could even smell the Chlorine-type smell. We got to the end and we were all sicker than hell. They took us home."

McGowan says after every spraying "someone got sick. Whole units would come down with sickness. Several people had false heart attacks, extreme anxiety, a nerve reaction to the chemicals." After one incident, "my eyes were swollen shut," he says.

"We got dumped with it," he says simply. "I don't think they intended to do it, but they didn't take the care to get us out. When we'd ask, "Hey why are you spraying us?, the Air Force colonels would say, "Don't worry about it. Just hold your breath and don't look up."

At one point, "we were even told to get under it, to provide aircraft backup."

Placida McGowan says she never saw the herbicide being sprayed. She was 22, working as a staff nurse in a post of an intensive care ward, part of a hospital MASH-like unit to care for the wounded.

While she was there, the military used herbicides to clear a seven-mile long area of jungle so that the hospital could be built.

"When we got there, it was all jungle, and by the time we left, it was all clear. Everything as far as you could see."

(article supplied by Contra Costa County Vietnam Veterans of America)

(Editor's note: Art McGowan works as a veteran's liaison to Congressman George Miller's office, Martinez, Ca.)

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(Washington, D.C.) Testimony on the Agent Orange issue heated up considerably as VA Administrator Max Cleland went before the House Commerce Subcommittee on Oversight and Investigations. Unlike the Veterans Affairs Committee, the Oversight Committee has considerable experience dealing with toxic substances and their possible health detriments, and Cleland, VA General Counsel Guy McMichael and Chief Medical Director Custis faced a group that was unwilling to accept a sit-back-and-wait attitude.

Cleland, a triple amputee who was himself exposed to AO in Vietnam, agreed with many experts who have testified before that the question of relating a low herbicide dose to chronic illness may never be completely answered. He said three studies now planned or underway, however, could provide significant information in two or three years.

"That is appalling," declared Rep. Andrew Maguire (D-NJ). "Why do we have to have the last bit of evidence?" Maguire said Cleland was "absolutely wrong" to insist on more studies.

Maguire and Rep. Albert Gore, Jr. (D-TN) urged Cleland to "make the reasonable presumption" for a policy decision that enough evidence now exists to link AO to at least some problems of Vietnam veterans to warrant VA action on the claims.

"Just because there are uncertainties doesn't mean these people don't deserve a better performance from the Va than they are getting," Gore said.

Maguire angrily suggested that Cleland fire his Chief Medical Director, Dr. Custis, who was sitting with Cleland at the witness table. The attack was unwarranted because Custis was recently appointed by Cleland, was not responsible for the VA's two year stall, and had not testified as yet at the hearing.

Cleland reiterated that Presidential Domestic Policy Advisor Stuart Eizenstat of the White House had promised recently that policy decisions will be made before the studies are completed.

"The laboratory was not Vietnam," Cleland said. Although experimental animals suffer immediate health problems when fed or injected with

dioxin, the toxic contaminant of AO, Cleland said the VA cannot conclude that a veteran who appeared healthy at the the end of his service became ill a decade later as a result of Vietnam duty.

Maguire pointedly stated that "the scientific evidence is in and it conclusively points to the fact that the component chemicals of AO are carcinogenic, capable of producing birth defects, and yet the VA's response to those exposed to the Agent has been a disaster."

After witnesses had completed their testimony, Cleland summarized a statement designed to give the impression that the VA had long been concerned about and had been active in resolving the AO issue. The contention was recognized as being untrue since it has only been recently that the VA has accepted the fact that AO is more than a public relations problem that could be ignored or countered with public relations expertise. For nearly two years, the VA has contended that the use of AO in Vietnam is harmless to veterans.

Cleland dismissed laboratory studies showing that AO caused cancer in animals, and a highly respected Swedish study showing a higher incidence of cancer in exposed humans, stating that all of his advisors had told him privately that they did not believe AO caused birth defects in the offspring of exposed male veterans and that only a few he had consulted felt that AO may cause cancer.

An extraordinary comment which expressed the VA's attitude was made by Guy McMichael, the VA's General Counsel. McMichael asked the Committee that since tests showed that saccharin caused cancer in test animals, "Does that mean that every veteran who used saccharin in the service and later comes down with cancer should be considered service-connected?"

The Committee was not satisfied with the VA's attitude. Rep. Maguire asked, "Does Congress have to act before people are compensated?" "An and could come sooner if people (in the VA) would meet their responsibilities."

Rep. Gore, a Vietnam veteran, told the VA, "Just because this is a new field, the VA does not have to take the attitude that Agent Orange problems are nonexistent. Just because it is difficult to find an answer, doesn't mean you shouldn't try harder."

The VA countered with largely irrelevant excuses, ignoring the long-term potential health detriments of AO. Carcinogens such as asbestos and radiation take 15 to 20 years to manifest themselves.

The VA contended that there was no medical record in Vietnam of AO's effects nor any evidence of the damage to the veteran from AO when he underwent his physical examination upon termination from the service.

A VA witness asked, "How do (tests on) rats and monkeys relate to experience in Vietnam?"

The hearings showed that while the VA's testimony and actions were designed to evidence concern for veterans exposed to Agent Orange, the VA's attitude precluded the openmindedness and commitment required of the agency to resolve the issue in the best interest of the veterans instead of in the best interest of the VA. ("Agent Orange Verdict Still Out", Forrest Lindley Jr., The Stars and Stripes, Thursday, Oct. 2, 1980, p.1)

(Washington, D.C.) Amid a groundswell of industry opposition, New York Assemblyman Pete Grannis testified before the Senate Finance Committee September 12, in support of the Senate's comprehensive Environmental Emergency Response Act (S 1480).

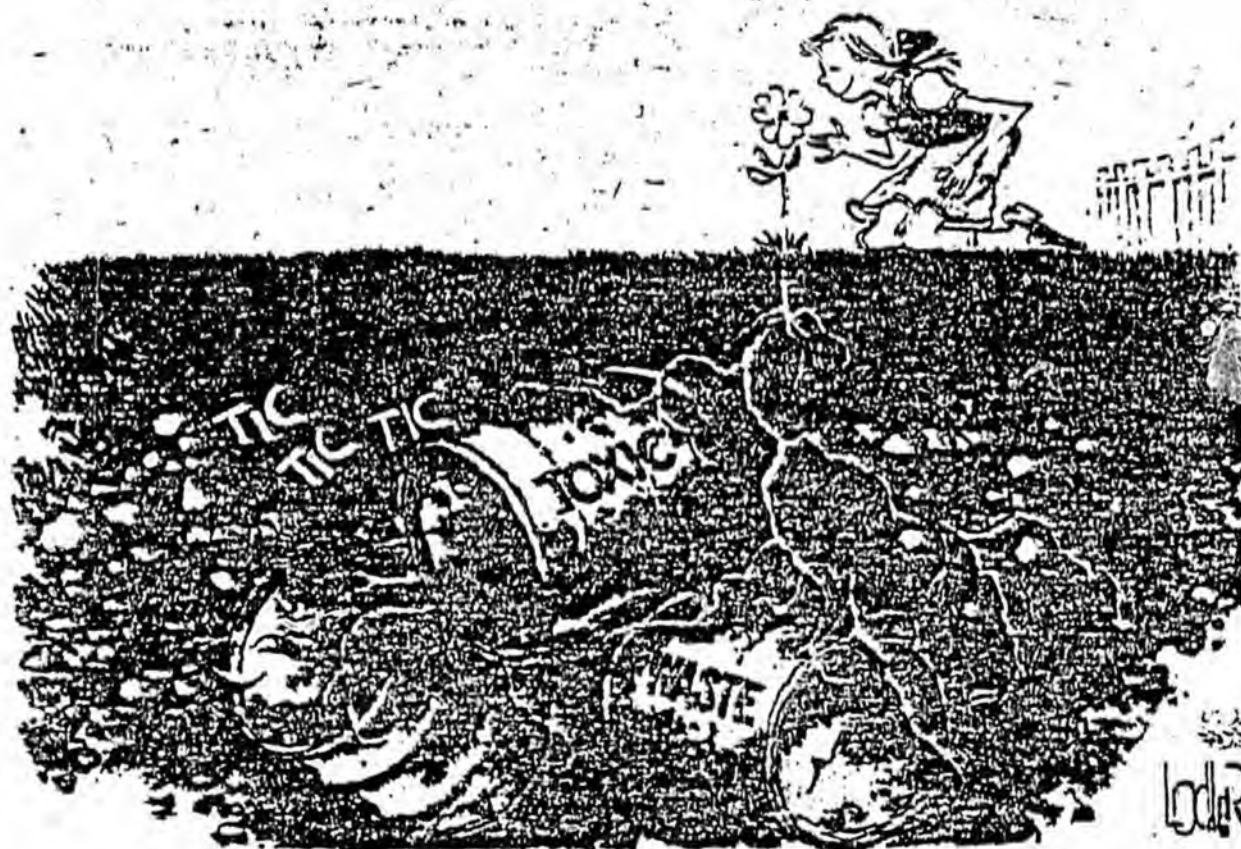
Grannis praised the Senate for addressing the issues of groundwater contamination and the contamination of livestock by hazardous substances, two areas not covered in similar House legislation.

The House has given overwhelming support to both of its hazardous waste "Superfund" proposals, and the Administration is pushing the Senate to compromise on its more comprehensive bill in an attempt to get this key environmental legislation passed before adjournment.

The lopsided House passage --351-23 for the Hazardous Waste Containment Act --came despite strong industry pressure against establishment of funds to pay for the cleanup of hazardous waste spills and abandoned sites.

Both House measures set up federal funds, financed 75 percent by industry and 25 percent by general revenues, to aid states in emergency cleanup efforts. States can receive these funds immediately, when needed, and be reimbursed for up to 90 percent of the cleanup cost.

("Dateline Washington"; Sept. 22 & Oct. 6, 1980, National Conference Of State Legislators. For more information contact: Donna Wise, 202/624-5431.)



(St. Paul, Mn.) Actor Martin Sheen, star of the Vietnam War epic Apocalypse Now, was in Minnesota recently taping the narration for a locally produced Agent Orange film documentary.

Film In The Cities, a Twin Cities based non-profit media resource center, is producing the documentary film project on Agent Orange -- focusing on the possible impact that exposure to this toxic chemical had on a Vietnam veteran and his family. The documentary, over one year in the making, is a joint project undertaken by Film In The Cities and the Minnesota Veterans Coalition. The Minnesota Veterans Coalition is a non-profit veterans advocacy organization working toward an equitable, and expeditious, resolution of the Agent Orange issue. The film is slated for completion before the end of the year, with only final editing remaining.

Sheen said he is volunteering his services because of his growing interest in Agent Orange. "I first heard about Agent Orange in the early 1970's, but then I learned a lot more while doing 'Apocalypse Now' from all the Vietnam veterans I had close associations with as extras," Sheen told reporters at a press conference.

And he said his brother John, a Vietnam veteran, suffers severe headaches and fits of depression that his brother attributes to the chemical.

Sheen said he is offering his services, not as an expert on the subject, but as a patriotic gesture. "You can't live in a free society like ours without giving something back," he said.

Jim Gambone, who is directing the film, said that about \$13,000 has been raised for the film so far, and that an estimated \$15,000 more is needed to cover production costs.

Tax deductible film contributions can be made to:

Agent Orange Film Project Fund  
c/o Film In The Cities  
2388 University Avenue  
St. Paul, Minnesota 55108

Contributions of \$10 or more will be credited in the film.

("Agent Orange film gets star actor", St. Paul Pioneer Press, Oct. 3, 1980.)

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Editor's Note: The next issue of "Agent Orange: An Update" will feature excerpts from the public meeting of the Interagency Work Group To Study Possible Long-Term Health Effects Of Phenoxy Herbicides And Contaminants, on September 22, 1980.  
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(Washington, D.C.) Senator Alan Cranston's office is distributing an "Agent Orange Examination Questionnaire" designed to ascertain the quality of care, the timeliness of examination scheduling, and the veterans overall perception of the Veterans Administration Medical Center's Agent Orange screening program. Contact Senator Cranston's office for further information.

# AGENT ORANGE UPDATE

## U.S. HUNTS FOR CONVICTS

### IN AGENT ORANGE TEST

(Washington, D.C.) Seventy prisoners in Philadelphia were used as human guinea pigs in the mid-1960s to test a cancer-causing component used in Agent Orange and other controversial herbicides.

The experiments were conducted by Dr. Albert M. Klingman, a University of Pennsylvania dermatologist, on Holmesburg Prison inmates under a \$10,000 contract with the Dow Chemical Co.

According to government documents, Klingman strayed far from the cautious testing program authorized by Dow, applying such a high dose of a toxic chemical to the backs of 10 prisoners that eight of the men developed a skin disease lasting four to seven months.

"INFORMATION ABOUT THE KLINGMAN EXPERIMENTS ...COULD BE VALUABLE TO...THOUSANDS OF VIETNAM VETERANS..."

Since learning of the Klingman experiment two months ago, the U.S. Environmental Protection Agency has been searching in vain for the prisoners exposed to dioxin, especially the 10 who got the heaviest dose.

Klingman, prison authorities, Philadelphia city officials and Dow spokesmen have informed the EPA that they have no records identifying the prisoners.

EPA officials would not comment publicly, but an agency source mentioned three reasons why the identity and location of those exposed to dioxin in Philadelphia are important:

- The Klingman experiments were a rare, if not unique, instance in which the level of exposure of humans to dioxin is known.
- The individuals subjected to dioxin nearly 15 years ago may be suffering from long-term health effects that, if detected in time, could be treated successfully. There were no systematic follow-up medical studies after the experiments.
- The present condition of those persons could provide valuable evidence in the bitter debate over whether the dioxin-laden herbicides are safe to use.

Information about the Klingman experiments also could be valuable to the thousands of Vietnam veterans who claim, in a lawsuit against the government and five chemical companies, that they suffered ailments ranging from festering sores to malignant tumors and that their children suffered birth defects because of Agent Orange.

A little over a year ago, 1,800 pages of Pentagon documents obtained by the Philadelphia Inquirer showed that Klingman tested mind control, skin hardening and other chemical agents on 320 inmates at Holmesburg. The tests were done under a \$386,486 contract between the Army and the University of Pennsylvania.

Klingman conducted the experiments secretly from 1964 to 1968 in two aluminum trailers equipped with padded cells and parked on the prison grounds in northeast Philadelphia. It was revealed earlier that prisoners at Holmesburg also were used to test drugs for the Central Intelligence Agency.

Convict Hunt continued on page 4

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**AGENT ORANGE FILM PREMIER IN MINNESOTA**

The Minnesota Veterans Coalition and Film In The Cities would like to invite you to the premier showing of the film Agent Orange: A Story of Dignity and Doubt on Saturday, February 28th, 1981 in Saint Paul, Minnesota.  
Place: Saint Thomas College, Murray Hall  
Parking at lot on Summit & Cleveland  
Time: Refreshments start at 7:00 P.M.  
Program will begin at 8:00 P.M.  
Cost: Film, Program, and Reception \$5.00  
Donations are tax deductible.  
Martin Sheen, star of Apocalypse Now, has narrated this film and will be present at all of the above functions including a party to be announced. Please reserve you spot by making a check payable to Film In The Cities Agent Orange Project, 2388 University Avenue Saint Paul, MN 55114 or call (612) 646-6104.

ISSUE #/	JANUARY 1981
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AGENT ORANGE UPDATE  
MINNESOTA VETERANS COALITION  
2040 JULIET AVENUE  
ST. PAUL, MINNESOTA 55105

TIM MICHAELS 612/296-9475

## ADVISORY COMMITTEE: EXCERPTS FROM THE NOVEMBER MEETING

The following information was taken from the November meeting of the Advisory Committee On Health-Related Effects Of Herbicides.

International Studies: conducted in Sweden and Germany indicate, despite some reservations, that there is a ... "correlation between exposure to phenoxy acid herbicides and an increased risk of some forms of cancer" (Source: Advisory meeting, pp.2,3 Dr. John A. Moore, Chair, Scientific Panel of the Interagency Work Group)

Agent Orange Registry: as of November 1980, 30,000 veterans have received the Agent Orange exam, and 16,000 medical records have been placed into the computer. The code sheets obtaining the Agent Orange exam data is reviewed by the Medical Administration Service in the Central office for accuracy and completeness, and then are mailed to the St. Paul Data Processing Center where they are inputted into their computer (ie, the Agent Orange Registry).

Birth Defects: Animal Study: the study conducted by Dr. James Lamb which involved some 3,000 near term fetuses and 2,000 live offspring was heralded by Max Cleland as possibly providing answers to vets concerned about their birth defects concern. Dr. Lamb's summary of the study stated that the data does not... "support the presumption that Agent Orange is responsible for former Vietnam veterans fathering children with an unusual number of birth defects nor for the veterans experiencing a loss of fertility." The irony of the release of this report is the fact that the VA has reiterated time and time again that veterans should not extrapolate from animal research data about the effects of dioxin exposure to problems associated with human exposure. The question here is in regard to the relevance of animal studies to human exposure. The VA seems to be saying that with regard to other medical problems, such as the carcinogenicity of the herbicide, veterans shouldn't place much credence on these studies but it is alright for the VA to place significance on animal studies on the birth defects issue. This is to say the least a most paradoxical position.

Pathology Study: the Armed Forces Institute of Pathology started an Agent Orange Pathology Registry two years ago. The AFIP Registry looks at surgical or autopsy materials which are suspected to be related to herbicide exposure. The Registry currently has 90 entries in its Agent Orange classification. The entries to the AFIP Registry are submitted by both service and civilian hospitals.

The AFIP has asked that all surgical or autopsy materials secured from Vietnam veterans be forwarded to the Institute. The Institute would like to review the Agent Orange Registry in St. Paul so as to locate cancer patients and request that they submit a biopsy to the Institute if they haven't already done so. The AFIP, which was created more than 100 years ago, has 33 different Registries with nearly 2 million entries.

## ADVISORY COMMITTEE ON THE HEALTH-RELATED EFFECTS OF HERBICIDES

The next meeting of the Advisory Committee is scheduled for February 4, 1981 in room 119 of the Veterans Administration Central Office which is located at 810 Vermont Ave., Washington, D.C.

The agenda includes; a report on VA activities with regard to the literature review of scientific reports; the Agent Orange videotape; the Agent Orange Bulletin; the epidemiological study, and the Agent Orange registry. Also on the agenda are; reports from various veterans organizations; a review of the dioxin registry; an update on the Seveso experience; a crop duster study; a discussion of the environmental fate of TCDD; the status of the birth defects study being conducted by the Center for Disease Control; and a report on the clinical research underway at the Environmental Sciences Laboratory.

## AGENT ORANGE LAWSUIT PROCEEDS

(New York, N.Y.) A ruling by Judge Pratt, a Federal Court Judge in the Eastern District, has dismissed the government from the Agent Orange lawsuit. Pratt's pretrial order cited sovereign immunity as the basis for removing the government from the lawsuit. The government had been named as a party of the lawsuit by both the veteran plaintiffs and the chemical companies who are defendants in what some people have characterized as the largest product liability suit in the history of our legal system.

The chemical manufacturers are asking Judge Pratt to dismiss the suit against them on the grounds that the government contract they agreed to compelled them to make the herbicide to the governments specifications. Therefore, if the courts find that the government is not liable in this suit they should also rule that the chemical companies are not liable either. Judge Pratt has ordered that the discovery phase of the pretrial proceed as has indicated that a trial date may be set sometime very soon.

In another recent court decision Judge Pratt ruled to accept certification of a class action with regard to this suit.

## AGENT ORANGE: MINNESOTA'S EXPERIENCE

(St. Paul, Mn.) Minnesota's Agent Orange Outreach program was a highly successful one with over 13,736 veterans requesting exams from the VA. However, the program has had its share of problems. By sharing our programs problems with others we hope that you may be able to avoid, or diminish, similar problems in your states Agent Orange Outreach program.

### Problems:

1. Misplaced records.
2. No report of Agent Orange exam results.
3. Clarification of reason for follow-up exam.
4. Exam unavailable for incarcerated vets.
5. Need for outreach to minority community.
6. Ignorance about purpose of the exam.
7. Dermatological follow-ups.
8. Exam travel reimbursement.
9. Exam "No-Shows".

#### 1. Misplaced Records

Veterans requesting their Agent Orange exam records are having problems obtaining access to them sometimes. Often times this problem is related to the fact that records may be at some station within the hospital or outpatient clinic, or being duplicated to be sent to the Central Registry, and therefore aren't in the Records Department.

#### 2. No report of Agent Orange exam results

It is a matter of common courtesy that veterans be informed about the results of their exams, be they positive or negative. This was not being done in Minnesota. We have since obtained an agreement from the VA to notify all vets about the results of their exams, and have been informed that the notification letters have all been sent out.

#### 3. Clarification of reason for follow-up exam

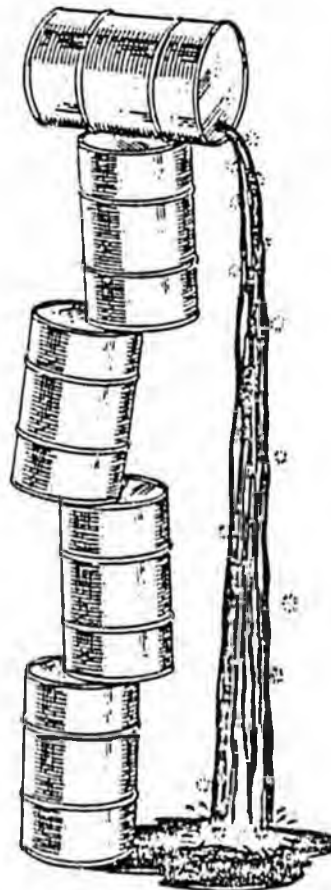
Veterans being called back for follow-up work or for aftercare should be notified why they are being called back. Often times follow-up exams aren't scheduled right away and vets and their families become fearful that the VA found cancer or something else medically wrong with them. Vets and their families should not be faced with the apprehension of not knowing why they have been called back. We have made arrangements with our VA to alter their standard forms in this area so as to provide this information to the veteran.

Minnesota Experience continued on page 5

Minnesota Agent Orange Exams - Jan. 1981	
Total veterans examined	4,882
Follow-ups (exams or aftercare)	1,071
Admissions to hospital	8
Number died	0
Future appointment dates	33

## HAZARDOUS WASTE SITE HUNT LIKE HOT-POTATO GAME

(St. Paul, Mn.) Minnesota's search for a proposed hazardous waste site is starting to resemble a game of hot-potato. In every meeting conducted by the newly created Minnesota Waste Management Board members have repeatedly heard from citizens, local officials and experts that their area is simply not suitable for such a dump.



The Board is charged with finding a site by 1983 and has notified all counties that they will look at every area of the state in its deliberations. The Board is currently in the process of conducting informational hearings throughout the state, explaining how the siting process will work and encouraging citizens to participate in the process.

Hot-Potato Game continued on page 5

## HAZARDOUS DUMPING: CITIZENS' HOTLINE

The Pollution Control Agency, in Minnesota, has established a toll-free HOTLINE PHONE for citizens to report suspected improper hazardous waste disposal sites. The number is: 800/652-9747.

Agency officials said citizens should look for abandoned or buried barrels, oil or sludge spills, chemical odors and dead vegetation or wildlife near suspected disposal sites.

"In light of today's law and ethics, these experiments on prisoners are horrifying," said William A. Butler, a lawyer for the Environmental Defense Fund.

("But)the prisoners were certainly not volunteers in any sense that I know about. They did it because they were trying to get parole or some break that would get them out earlier."

Each prisoner was to sign a form that told him nothing of the risk involved or even what chemical was to be used. The form simply authorised "the hospital, laboratories or others to perform medical and other tests on me" and neither they nor the prison were to be held "responsible in any way for any complications or untoward results that may arise."

Klingman began the testing using a dose of only .2 micrograms of dioxin on 60 prisoners, but nothing happened. So, in a second experiment that Rowe said he knew nothing about until it was over, Klingman applied 7,500 micrograms of TCDD to the skin of 10 prisoners. That was 468 times the maximum dosage recommended by Dow. Eight of those prisoners got chloracne that lasted up to seven months.

According to Klingman, "Eight of 10 subjects showed acne form lesions usually beginning (after) three to four weeks ... In three instances the lesions progressed to inflammatory pustules and papules. These lesions lasted for four to seven months, since no effort was made to speed healing by active treatment ... In no instance was there laboratory or clinical evidence of toxicity ..."

Dow insists that they knew nothing about the high dose given to the prisoners. However, Verald Keith Rowe, former director of toxicology and environmental research for Dow, acknowledged in EPA hearings that he indicated to Klingman after the first experiments that Dow would pay for further testing.

Asked why Dow is fighting so hard against the proposed EPA ban when the herbicide, 2,4,5-T, accounts for only \$14 million of the company's annual sales, which reached \$8.2 billion in 1979, Bob Charlton, public relations manager for Dow's agricultural products department replied:

"There's a scientific principle at stake here. This is a product that has been used for over 30 years and has been more widely studied and tested than most drugs found in your medicine cabinet.

"The preponderance of data demonstrates that 2,4,5-T does not pose an unreasonable risk. So if that product can be restricted in such a rash manner, then what other important chemical tools might also be unnecessarily restricted."

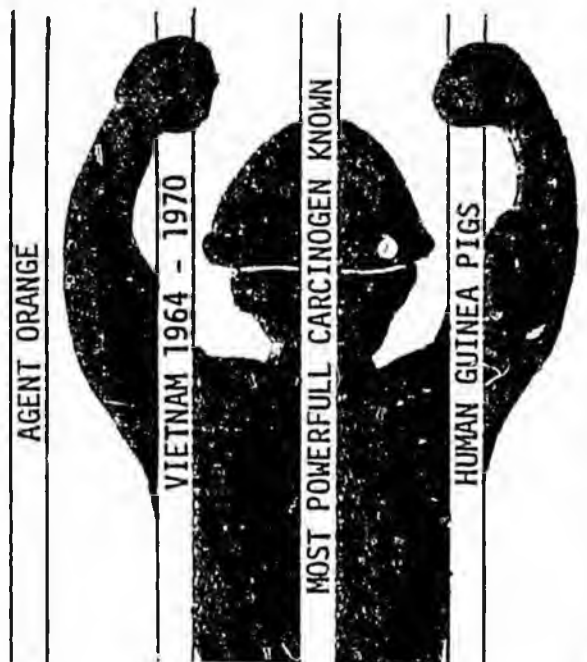
That is not the way the EPA reads the data. The government contends that when the herbicides are spread on forests, rights of way, pastures, range lands, rice and fruit crops, humans are exposed to chemicals that "may result in cancer, increased susceptibility to disease through suppression of the immune response, and increased risks of bearing defective children or of terminating a pregnancy by miscarriage or stillbirth."

Dow says low exposure levels of its herbicides are safe. The government says science has not yet established that there are any safe levels of exposure to TCDD.

In that critical debate, both sides agree that some answers could come from the men who served as laboratory "volunteers" at Holmesburg Prison - if only they could be found. (Source: Aaron Epstein, Pioneer Press Washington Bureau.)

### TRULY HORRIFYING

(St. Paul, Mn.) "In light of today's law and ethics, these experiments on prisoners are horrifying", a spokesman for an environmental group said. The man had the right word - horrifying - but the qualifier wasn't needed. The experiments are horrifying by anytime's ethics, if not law.



The particular experiments, in the mid-1960s, involved dioxin, a chemical widely used in herbicides, including the controversial Agent Orange of Vietnam fame. The researcher is a University of Pennsylvania dermatologist, Dr. Albert M. Klingman, who had earlier done work for the Army and CIA, using prison inmates in Philadelphia as guinea pigs to test various chemical agents.

"...KLINGMAN'S WORK WITH DIOXIN...READS LIKE A MAD SCIENTIST HORROR STORY."

Now, it is true that law and custom at that time permitted prisoners to volunteer for medical experiments in exchange for or anticipation of preferential treatment. Most states won't permit this anymore. But Klingman's work with dioxin, as reported by the Pioneer Press Washington Bureau, reads like a mad scientist horror story.

Truly Horrifying continued on p.6

5. Need for outreach to minority community

A concerted effort should be made to reach the minority community. We have found that our work with the vets organizations and the mass media has not reached the minority community. This is an area which needs some special attention, and extra effort.

6. Ignorance about the purpose of the exam

What we hear more than anything else about the Agent Orange exam from those veterans on the street, is that the exam is a waste of time. Vets perceive the exam in this manner because they hear that no one will be able to tell them whether or not they have dioxin in their system, whether or not they were actually exposed to the herbicide, or how dioxin poisoning would be treated (not a treatment of the symptoms).

The VA, and concerned vets groups, should inform vets that there are no diagnostic tools currently available to detect the presence of dioxin in the system, or to be able to inform a vet as to whether or not he may have been exposed. However, the collection of medical data through the exam is important for a number of other, less personal, reasons. All of the data is being forwarded to a central registry for an analysis by scientific researchers to determine patterns of medical problems and whether the incidence of certain problems is greater than that expected to be seen in a population of non-veteran peers matched for similar characteristics.

7. Dermatological follow-ups

Over 50% of veterans being called back into the VAMC for follow-up work here fall into the category of dermatological problems. The VA admitted with their creation of a Chloracne Task Force that it was very difficult to diagnose chloracne. We feel it is imperative that special attention be given to problems found in this area since they may be indicative of exposure. If the results of your states exams falls into a pattern like ours in Minnesota, you should bring this data, and a request for an analysis of these cases, to the Task Force for their consideration.

8. Exam travel reimbursement

Vets are confused about VA policy with regard to travel reimbursement for an Agent Orange exam. The bottom line is that if this exam program is designed to collect valuable research information which will prove instrumental in addressing this issue, then is it unreasonable for vets to ask for and expect travel reimbursement for their participation in the collection of this information? We believe that their request is not unreasonable and that the VA should consider this as an expense related to the collection of research data. If the VA does not find this acceptable they should consider the recommendation we made over a year ago to let those vets interested in the exam who live great distances from VAMC's obtain the exam through their private physician.

9. Exam "No-Shows"

13,736 veterans in Minnesota asked for an Agent Orange exam, their request being generated by an outreach questionnaire sent out by our State Department of Veterans Affairs. Out of those 13,736 approximately 7,000 either failed to complete and return the VA form for scheduling an exam which was sent to them, or they did not show up for their scheduled exam. The reason for the large number of no-shows can only be guessed at right now. At our request the VA did send a follow-up letter to no-shows asking if they were still interested in obtaining an exam. Our group hopes to do a survey to ascertain the reasons why so many vets don't seem to be interested in the exam, after initially requesting it. Points which we raised earlier (#6 and 7) with regard to ignorance about the purpose of the exam and travel reimbursement are suspected to be key factors. Yet we feel a real need to get more concrete information here which will provide factual information, both for our programs success as well as for those only in the starting or planning stage.

Hot-Potato from p.3

As one part of the solution to the state's hazardous waste problems, the Minnesota Pollution Control Agency this year adopted strict rules for the management of hazardous wastes throughout their entire life cycle - from "cradle to grave." Specifically, the rules are designed to:

- identify the State's hazardous wastes;
- establish a tracking system to follow hazardous wastes from generator to disposal site;
- set environmental and safety standards for storage, transportation, processing and disposal of hazardous wastes;
- require permits for hazardous waste treatment and disposal facilities.

(Source: St. Paul Dispatch, Thursday, Dec. 4, 1980, Hazardous Waste Site Hunt Like Hot-Potato Game, and Minnesota Pollution Control Agency 1980 Biennial Report.)

## NATIONAL CONFERENCE ON AGENT ORANGE

the National Veterans Task Force On Agent Orange is sponsoring a Vietnam veterans Conference on Agent Orange, on May 23-24, 1981 in Washington, D.C. For further information contact:

Ruth Schaffer, Chairperson  
Agent Orange Conference  
City University of New York  
535 East 80th Street (Caldwell)  
New York, N.Y. 10021

Phone: (212) 794-5757 or 794-5758

Dow Chemical Co. was interested in determining the level at which exposure of humans to dioxin produces a certain skin disease that had been seen among Dow employees. Arrangements were made for Dr. Klingman to run a series of tests on prisoners at Honesburg Prison. He did so at the prescribed levels and nothing happened. So Klingman proceeded "more vigorously" with a new group of 10 inmates and painted their backs with a solution containing 468 times the maximum dosage recommended by Dow.

Eight of the ten prisoners developed skin diseases that lasted (untreated) for four to seven months, but Dow never learned the "threshold" level of dioxin hazard in terms of skin disease: it's somewhere between the maximum tested in the first round and the level used in the "vigorous" experiment.

Presumably, neither Klingman nor Dow knew that dioxin was a cancer-causing chemical - it's now considered by some scientists to be possibly "the most powerful carcinogen known" - but everyone involved, except the prisoners, knew it was a very strong chemical. Dow officials have testified in government hearings that they urged a "highly conservative approach" to the studies and wanted warning labels on the bottles of chemicals.

It was known then that animals exposed to dioxin suffered liver damage at about 10 times the dose required to affect the skin.

What, you might ask, happened to the 10 prisoners? If the chemical in a potent carcinogen, one might expect to see cancers 15 years after such exposure. Well, nobody knows what happened to the prisoners. There are no records around to show who they were, where they went, what happened to them. Are they healthy and happy? Do they need help? Are they all dead? As long as that incredibly "vigorous" experiment was done, it would be nice to know. It would be necessary to help, if help is needed.

Even if you're absolutely cold-blooded about this sort of thing - if you believe deep in your heart that human experimentation is OK (so long as the guinea pig is "someone else") - the carelessness and casualness of this job is unforgivable.

(Source: Editorial, St. Paul Pioneer Press, Thursday, January 15, 1981.)

### AUSTRALIAN AGENT ORANGE STUDY PLANNED

(Australia) The Commonwealth Institute of Health is undertaking a study to determine the significance of herbicide exposure in S.E. Asia reported by Australian veterans. The study will include not only those who served in Vietnam between 1962 and 1972, but also those Australian Government staff who served in Vietnam during this period.

The government has decided that all servicemen and public servants who served in Vietnam should be subject to the same study even if methodologically the results for public servants, Royal Australian Air Force and Royal Australian Navy personnel have to be handled separately. The protocol for the study has not yet been finally decided.

### PRESIDENT REAGAN ON AGENT ORANGE

(Washington, D.C.) The Chairman of President Reagan's veterans affairs transition committee says veterans were "more heavily involved in the 1980 national campaign than any election since 1920 - and we've got to do right by them."

William H. Ayers, who served on the House Veterans Affairs Committee for his entire 20 years (1951-71) as an Ohio Congressman, said the Vietnam veteran "woke up politically" in the 1980 campaign.

"Most were too young to be active in the 1972 campaign. They avoided the 1976 campaign because of the opposition of many people to the war in Vietnam.

"Reagan is going to have to do right by them. When you awake a sleeping giant (nine million veterans) you don't want to make them mad by failing to live up to their expectations," Ayers said.

Ayers said the transition team will give serious thought to the Agent Orange problem. "We'll have to decide the proper way to go in determining whether Agent Orange was harmful to the health of people who served in Vietnam. We're uncertain whether this research should be done by an independent organization or by the National Institutes of Health. We do feel that any veteran who feels he has Agent Orange (problems) should automatically be admitted to a Veterans Administration hospital and treated and tested for the ailment," Ayers said. (Source: Army Times Newspaper, December, 1980)

### CHLORACNE TASK FORCE ESTABLISHED

(Washington, D.C.) Chloracne is a skin disease that is often referred to as the hallmark of dioxin exposure. Industrial workers exposed to dioxin have experienced re-occurring skin problems. Unfortunately, chloracne is not always easy to distinguish from other more common forms of acne. To overcome this problem, a Chloracne Task Force has been established, headed by Dr. Kenneth Halprin, a physician at Miami VA Medical Center.

A group of four distinguished dermatologists are currently designing a protocol for chloracne examinations. They are in the process of developing educational materials on this subject for the VA's environmental physicians.

The task force has another job: reviewing previously denied claims for skin conditions to check for possible misdiagnosis.

### Minnesota Contacts On The Agent Orange Issue

The Veterans Administration Center	725-4115
VA Hospital - Minneapolis	725-6767
VA Hospital - St. Cloud	252-1670
VA Hospital - Fargo, N.D.	701/232-3241
State Dept. of Veterans Affairs	296-2783
Minnesota Veterans Coalition	690-5557
Veterans of Foreign Wars	726-1777
American Legion	291-1800
Disabled American Veterans	291-1212

The Minnesota Veterans Coalition and Film in the Cities present:

AGENT ORANGE: A Story of Dignity and Doubt  
2388 University Avenue, St. Paul, MN 55108

You can help us get this film distributed and pay for production and distribution costs. Here are a few suggestions:

1. Approach your local public library and tell them you want them to purchase a print of the film. If 20 people do this--by phone or in person--they will seriously consider it. This is one way to have at least one copy in your community and not have to pay rental fees. Any member of the library can check out a film!
2. Ask your Statewide Legion, VFW, or DAV to purchase a print or prints for use in meetings, educational programs and public discussions.
3. Ask your university or community college library to purchase a print of the film. Again, if enough people ask, in this case 5 to 10, they will usually comply.
4. Call your local public, commercial stations, and pay TV stations and ask them to show the documentary with a follow-up show that includes resource people to answer questions about Agent Orange. Contact community and political organizations, clergy, city council members, labor unions, women's groups, environmental organizations who can express and organize support on the community level for airing this film.
5. Contact your State Humanities Commission about securing a grant to purchase a print of the film to be shown as part of a public forum series around your state. The Minnesota Humanities Commission has awarded such a grant to the Minnesota Veterans Coalition. The Coalition is willing to send you a copy of the grant to use as a model. This can also provide some money to a Vietnam vet who wants to coordinate the program.

As you can see, there are many ways you can get access to the film and help pay for production and distribution costs.

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"AGENT ORANGE: A Story of Dignity and Doubt" is the 1st independently produced film that is publically available on the Agent Orange issue. Produced by Jim Gambone and narrated by Martin Sheen, the film tells the human stories of veterans and their families who feel they have been affected by Agent Orange. It is an outreach tool that should be shown wherever there are Vietnam veterans or others concerned about the environment and overall health of their community. Indicate your order below by circling the appropriate film or tape sizes. Please include \$15.00 for shipping and insurance.

videotape 3/4" or 1/2" UHS  
one-time showing \$ 50 + \$15  
one week rental \$100 + \$15

16mm film, 1/2-hour  
one-time showing \$ 60 + \$15  
one week showing \$125 + \$15

NAME \_\_\_\_\_ DATE NEEDED \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ GROUP \_\_\_\_\_

Please allow a minimum of four weeks for delivery.

## LEGAL QUESTIONS ABOUT AGENT ORANGE

### SOME POINTS TO CONSIDER:

The class action suit which has been filed on behalf of all veterans is the largest products' liability lawsuit in legal history. Here are some points to consider if you are interested in becoming involved in the class action suit:

1. By going to the VA and asking for an Agent Orange examination, you automatically become part of the Agent Orange Registry; when legal proceedings begin, you will be notified that you are member of the Agent Orange "class". You can choose to withdraw or participate in the lawsuit at that time.
2. If you decide to get separate legal counsel, be careful. While most product liability attorneys can handle your case, there are attorneys who have a special interest and expertise with the Agent Orange issue. Do some research. Contact Vietnam veterans' organizations, traditional veterans' organizations (American Legion, VFW, Disabled American Vets) and ask them about legal counsel. Call your local Bar Association or Legal Referral Service with specific questions about attorneys who have been involved with Agent Orange; i.e., those who have a history of experience with the Agent Orange issue.
3. Ultimately, legal decisions are up to the individual veteran and his or her family. Good research and caution will save you headaches and problems in the future.

### LEGAL BACKGROUND:

The first "Agent Orange" lawsuit was filed in January 1979 in New York. Plaintiffs, veterans, their spouses and their children, alleged that the defendants, Dow Chemical Company and seven other major chemical companies, manufactured and sold to the federal government herbicides contaminated with a dioxin, TCDD. Plaintiffs also alleged that dioxin exposure causes a wide range of maladies, including, but not limited to, cancer and genetic damage to offspring. The chemical company defendants denied that there is scientifically conclusive proof establishing that dioxin causes the problems alleged and also brought a third party lawsuit against the federal government alleging that the government compelled them to manufacture the dioxin-contaminated herbicides in accordance with government specifications.

In December 1980 Judge George C. Pratt, the federal district court judge handling the Agent Orange litigation, ruled that the plaintiffs could maintain their lawsuit as a "class action"; that the chemical companies' suit against the federal government be dismissed on the basis of sovereign immunity; and that the chemical companies would be given an opportunity to prove their claim that the federal government compelled them to produce the dioxin-contaminated herbicides. That trial is expected to get underway by early summer, 1981.

In January 1981 plaintiffs brought suit against the federal government alleging, among other things, that the procurement of dioxin-contaminated herbicides was illegal and that the Veterans Administration is guilty to failure to diagnose, treat and compensate exposed veterans.

If plaintiffs prevail, the chemicals companies will be restrained from manufacturing dioxin-contaminated products and will be required to compensate their victims. The federal government will be required to acknowledge dioxin exposure as a service connected disability and act accordingly.

This litigation encompasses very complex and vital issues. All parties involved have a great deal at stake.

CHLORACNE

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## GLOSSARY (CONT.)

**Keratin** - A highly insoluble protein which is the principal constituent of hair, nails, horny tissues, the outer layer of the skin, and the basic material of tooth enamel.

**Nodule (also node)** - A solid mass of tissue in the form of a knot or "bump".

**Pustule** - A visible collection of pus, often in a hair follicle or sweat pore.

**TCDD (2,3,7,8-tetrachlorodibenzo-p-dioxin)** - A contaminant of the chlorinated phenoxy herbicide 2,4,5-T.

**2,4,5-T (2,4,5-trichlorophenoxyacetic acid)** - An herbicide which is widely used throughout the world. Although temporarily banned in this country for use on rice, rangeland, and rights-of-way, it is still allowed to be used on non-food crops, vacant lots, industrial sites, around airports, and along certain rights-of-way.

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Chloracne is a skin disease which is similar to common acne (*acne vulgaris*), but which is caused by exposure to certain chemicals. It is most commonly characterized by straw-colored cysts, blackheads (comedones), abscesses, and nodules.

In the first stages of chloracne, blackheads appear, most commonly on the face, neck, back, and groin areas. Unlike common acne, the blackheads generally involve every hair follicle. The blackheads themselves are created when the follicles become filled with keratin (the principal element of hair, nails, and the outer layer of the skin). This process is called follicular hyperkeratinization. The blackheads generally become quite prominent, appearing as bumps.

As the chloracne progresses, the walls of the follicles are destroyed, and their contents--large keratinous "seeds"--pour out and create abscesses. This particular process does not occur with common acne. The latter stages of chloracne are characterized by abscesses, pustules, and nodules. The various stages of chloracne do not necessarily occur simultaneously; for example, new blackheads will appear throughout the course of the disease.

In some of the more severe cases of chloracne, sheets of follicular hyperkeratosis cover areas of the skin, and hard, reddish nodes form on other areas. The severity of chloracne depends not only on the degree of exposure, but also on the individual. Many cases of chloracne among industrial workers have cleared up within a few years after exposure, while some cases continued to persist even fifteen years later.

Most cases of chloracne have been accompanied by other disturbances, the more common being abnormal growth of hair, abnormal increase in skin pigmentation, liver disease, gastrointestinal disturbances, neuromuscular disorders, and psychological disturbances. It is not known whether any of these disturbances are directly related to chloracne; however, chloracne is felt to be the most sensitive indication of chemical poisoning.

In a medical examination, it may be difficult to distinguish chloracne from common acne, particularly in mild cases. Therefore, the medical history should include possible exposure to acnegenic chemicals, as well as their accompanying disturbances, such as those listed on the previous page.

Chloracne does not respond to the usual methods of treatment for common acne or other skin diseases. However, both Plewig and Taylor have reported success in using vitamin A acid (retinoic acid) in concentrations ranging from 0.05% to 0.3% in various bases. Taylor also points out that the synthetic vitamin A, 13-cis retinoic acid, has produced excellent results in treating other skin diseases.

Chloracne was first reported by Herxheimer in 1899 among workers involved in the manufacture of chlorine gas. As a result, chloracne was thought to be caused by chlorine. Since then, however, numerous studies have shown chloracne to be associated with the class of chemicals known as the halogenated aromatic compounds. (These compounds are derived from the halogens fluorine, chlorine, bromine, and iodine.) More specifically, chloracne is thought to be caused by the various contaminants of these compounds, such as the chlorinated dibenzodioxins and the chlorinated dibenzofurans. One of the chlorinated dibenzodioxins is TCDD, which is a contaminant of the herbicide 2,4,5-T. TCDD is one of the most toxic substances known to humankind.

## GLOSSARY

Abscess - A localized collection of pus in a cavity.

Acne vulgaris - Common acne.

Acnegenic - Acne-producing.

Comedones (also called blackheads) - Plugs in the excretory ducts of the skin.

Contaminant - As used here, an unwanted byproduct produced during the manufacture of chemicals.

Cyst - A closed cavity containing liquid or semisolid material.

Excretory duct - A passage for eliminating waste materials.

Follicle - A sac or cavity; a small excretory sac or gland. (See hair follicle.)

Follicular hyperkeratinization - A process in which the lining of a follicle begins to produce keratin, until the follicle becomes a sac of keratin.

Follicular hyperkeratosis - A disease characterized by the excessive production of keratin in the horny layers of the skin.

Hair follicle - The sac from which the hairs grow.

Halogenated aromatic compounds - The class of chemical compounds which are derived from the halogens fluorine, chlorine, bromine, and iodine. The extensive range of products which come from these compounds include herbicides, pesticides, soaps, disinfectants, wood preservatives, flame retardants, electrical insulators, fumigants, paints, varnishes, and lacquers.

The Progressives  
8/61

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# JUSTICE IS NOT A GI BENEFIT

BY LEWIS M. MILFORD

**W**hen the U.S. Department of Defense began spraying Vietnamese forests with Agent Orange in 1962, it had conducted no tests for impacts on human health and it took no precautions to limit exposure of ground troops. Army manuals described Agent Orange, a combination of two chemicals—2,4,5-T, containing dioxin, and 2,4-D—as “relatively non-toxic to man or animals.”

As spraying increased during the war's peak years, 1967 and 1968, reports of birth defects and miscarriages among Vietnamese villagers began to surface. At the same time, Government studies showed that the 2,4,5-T in Agent Orange caused deaths and stillbirths among laboratory animals. Late in 1969, the White House bowed to public pressure and ordered the Defense Department to phase out the use of Agent Orange in Vietnam. The Pentagon obeyed, but stressed that no damage to human beings had been demonstrated. Dow Chemical Company, a principal manufacturer of Agent Orange, echoed the refrain.

The issue was left in relative obscurity until 1979, when Vietnam veterans in their late twenties and early thirties began to complain of an unusual array of health problems: skin rashes, fatigue, numbness in their fingers and toes—and cancer. They had children with serious birth defects, and many veterans' wives suffered miscarriages. The problems were remarkably similar to health problems reported by workers who had been exposed to dioxin in industrial accidents.

Veterans by the hundreds filed claims for compensation with the Veterans Administration (VA), charging that their problems were caused by Agent Orange exposure during military service. But the VA denied the claims—more than five thousand of them by this year.

For three years, the VA's position has remained simple and uninformed: There is no scientific evidence to show that Agent Orange causes long-term health problems. Veterans who complain that the VA policy

**'The courts  
... cannot  
command or  
regulate the  
Army'**

—Supreme Court, 1911



PHOTOGRAPH BY BOB WILSON

ignores a massive amount of scientific data to the contrary frequently have met little more than cold stares. Some veterans, when they chose to argue, have been quickly shuffled off to a VA psychiatrist.

In June, Congress took an important step to improve VA medical treatment for veterans exposed to Agent Orange: Both the Senate and the House passed similar bills that would give these veterans priority medical care if the VA finds their health problems are related to Agent Orange. And that is the catch: The veterans will get hospital care only if the VA decides there is “credible medical evidence” linking health

problems to Agent Orange. (Senator Alan Cranston, the California Democrat who sponsored the Senate bill, made it clear he believes such evidence exists.)

If some compromise proposal becomes law, the VA for the first time would be forced to decide which health problems may be caused by Agent Orange. An obvious concern is that the VA may defeat these legislative efforts to compensate veterans by holding firm to its current position. (Even if the VA does open its hospital doors to veterans with Agent Orange problems, there is some question concerning the quality of medical care veterans will receive: Many veterans complain that the VA has no idea what to do with the complex medical problems they have.)

Veterans frustrated by the roadblocks at the VA have already turned to the courts for help. But the courts are uniformly reluctant to second-guess Defense Department “military” decisions. And when veterans try to sue the VA, they discover that Congress has passed a law which prevents them from suing that agency. And so veterans find themselves stuck on a legal treadmill.

Historically, courts have been hesitant to intervene in legal disputes between soldiers and the military. The hands-off judicial approach, which views the military as an autonomous segment of the society, was firmly entrenched as early as 1911, when the Supreme Court pronounced, “The courts are not the only instrumentalities of government. They cannot command or regulate the Army.”

The military's exalted status above the law has been eroded somewhat over the years, and soldiers have won a limited right to press their claims in civilian courts. But the courts are still extremely reluctant to involve themselves in serious military matters. This precarious balance between civilian court oversight and military autonomy has tipped most often in favor of the military. Although the late Justice William O. Douglas wrote in a military case several years ago that “the Pentagon is not yet sovereign,” most Vietnam veterans and their families who have sued the Government over Agent Orange probably feel otherwise.

**S**ome thought the situation would change in 1946, when the Federal Tort Claims Act was passed. That law allowed citizens to sue the Federal Government for most personal injuries caused by the Federal Government or its

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agents. The law was passed to eliminate the need for private bills to compensate injured persons; it recognized the modern right to judicial remedy for injuries by the Federal Government. (Before the law's enactment, no citizen could sue the Government for damages.)

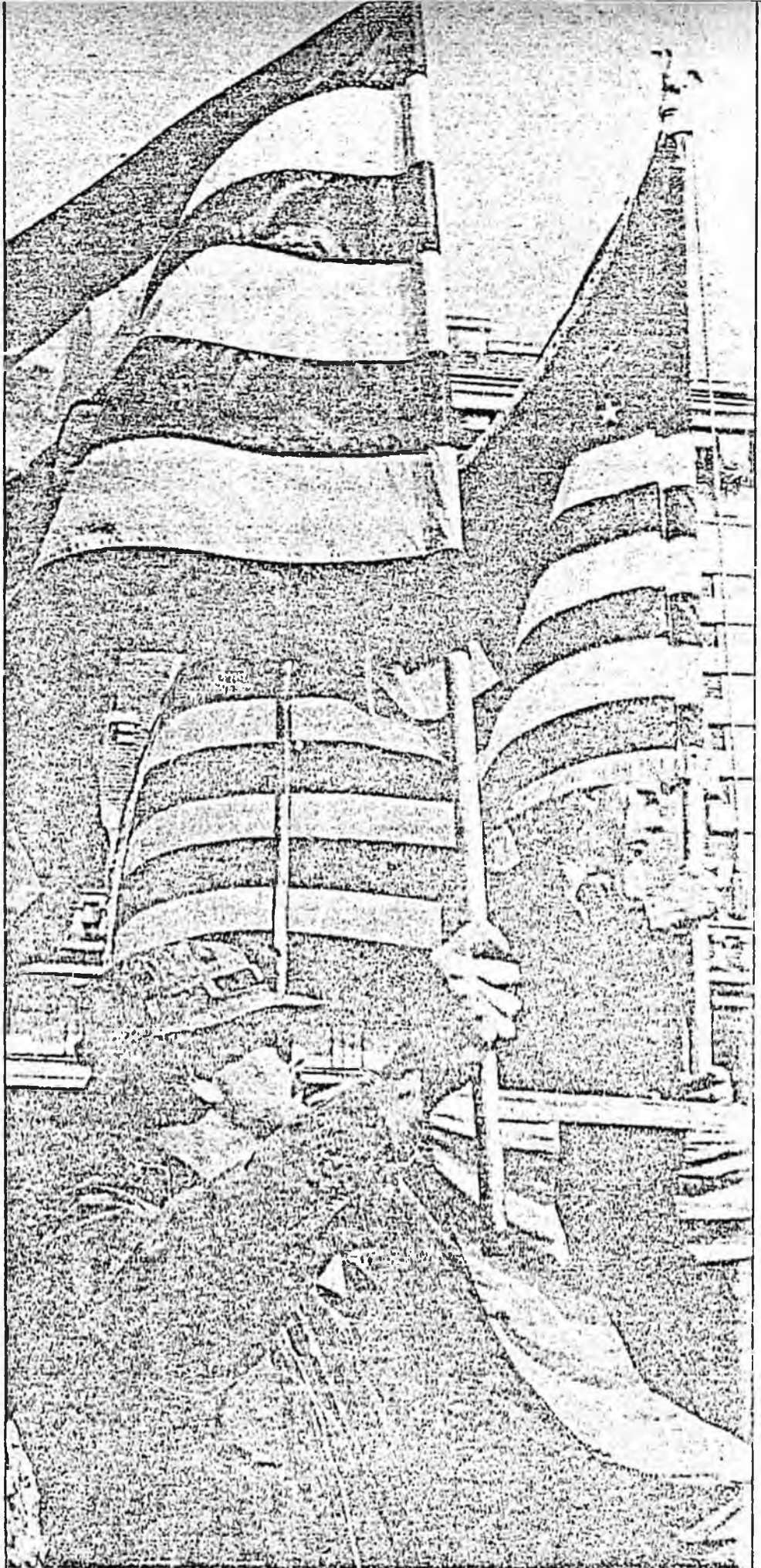
However, the courts chose to exclude members of the armed forces from coverage by the 1946 law. This broad military exception was established by the Supreme Court in 1950, when it decided *Feres v. United States*. In the *Feres* decision, the court said the Federal Tort Claims Act did not give military personnel the right to sue the Government for admittedly negligent acts which occurred on active duty. Following what has become known as the *Feres* doctrine, the courts for thirty years have denied veterans access to the judicial system.

The principal reasoning behind the *Feres* doctrine is that Congress could not have intended the courts to review the propriety of military orders that result in injuries to soldiers. As one court stated, the "security and common defense of the country would quickly disintegrate under such meddling." Discipline would be impaired by subjecting military orders to court review, the reasoning goes. It makes no difference whether the orders result in the infliction of negligent or intentional harm, or directly violate a service member's constitutional rights.

The discipline rationale is puzzling even on a superficial level, because prisoners in Federal penitentiaries have a right to sue the Government under the same law which veterans are excluded from using. Obviously, more than the simple need to maintain discipline justifies military immunity.

The question of whether common sense or basic fairness supports the *Feres* immunity doctrine has rarely been the subject of serious judicial debate. In the last three decades, courts have dismissed the complaints of many grievously wronged veterans and their families with little more than unthinking reliance on the *Feres* case. Congress has never seen fit even to debate the merits of legislating a change in this interpretation of the law.

As a result, Vietnam veterans have virtually no right to sue the Government for health care or compensation related to Agent Orange exposure, even if they can prove that their health problems have been caused by the herbicide. They are not even allowed to pursue their cases in court to the point where they have an opportunity to prove that the Government committed any



RICHARD LODGE

The war goes on: Next to the Stars and Stripes, an Agent Orange flag.

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**A recent  
ruling  
may allow  
chemical  
companies  
under  
Government  
contract  
to hide  
under  
the cloak  
of military  
immunity**

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wrongful act when it sprayed the herbicide in Vietnam.

A ruling in a recent suit brought by veterans against the manufacturers of Agent Orange illustrates how the Government avoids responsibility for its actions.

In that suit, filed in a Federal court in New York in 1979, veterans and their families alleged that the chemical manufacturers of Agent Orange, including Dow and Monsanto, knew before the Government bought and used the herbicide that it posed health problems. Consequently, the plaintiffs argue, the companies are now responsible for health problems caused by Agent Orange exposure.

The chemical companies not only denied the charges but in turn sued the Government, alleging that the Government misused the herbicide by spraying it on soldiers; did not warn soldiers of health risks, and did nothing to minimize their exposure. The companies also contended they were not liable because they simply made the herbicide according to Government contract specifications. In effect, the companies said the Government was partly, if not solely, to blame for any Agent Orange health problems.

The Government countered that the *Feres* doctrine barred the chemical companies from trying to establish any Government responsibility for military actions involving the use of Agent Orange. The New York court agreed with the Government and, in a recent decision, dismissed the Government from the lawsuit.

The court reached this conclusion through a rather circuitous legal route. First, the court decided that because of the *Feres* doctrine, veterans could not sue the Government directly for problems related to Agent Orange. Having arrived at this decision, the court ruled that the chemical companies could not step in and do what the veterans could not—sue the Government.

**I**n a disturbing extension of the *Feres* rule, the court not only refused to address the merits of the veterans' claims, but also barred suits by veterans' wives and their children for their own health problems. Because the Government could not be held responsible for veterans' injuries, the Government could not be held responsible for any results that flowed from them. Speaking of the bar to children's claims for birth defects, the court said: "To hold otherwise might open the door for governmental liability to countless generations

of claimants having ever-diminishing genetic relationships to the person actually injured."

This ruling, if followed by other courts, means that current and future generations of children whose birth defects may be caused by Agent Orange will have no remedy against the Government. They will receive no compensation for their injuries. Even if the VA were to change its policy and compensate veterans for Agent Orange problems, their children and wives would be unaffected.

The court's ruling also suggests another extension of military immunity that raises serious questions about the relationship of war contractors to the Government and their legal responsibility to the public. The court stated that the broad blanket of military immunity that protects the Government against Agent Orange liability might also extend to the herbicide manufacturers.

Put simply, a Government contractor is not responsible for mistakes for which the Government itself cannot be held responsible. Because the Government is protected by the *Feres* doctrine, Dow and other chemical manufacturers may escape all liability by proving that they merely followed the Government's specifications to produce the herbicide and only did what the Government told them to do—a contract-law version of the Nuremberg defense.

The chemical companies would then enjoy the legal immunity of a public body. As the Government immunity doctrine derives from the feudal era when "the king could do no wrong," these corporations which produced chemical weapons of war would enjoy regal protection from legal process. In

the next few months, the court will decide whether to accept the companies' contract defense and dismiss the veterans' lawsuit.

Accepting this defense would have repercussions in future cases brought by persons harmed by toxic agents. Dow's chief lawyer was reported recently to have said that the contract defense could have wide impact on toxic substance compensation cases when manufacturers defend their actions on the ground that they complied with existing Government standards.

Beyond these issues and the immediate needs of Vietnam veterans and their families, the *Feres* immunity doctrine also will keep the truth about Agent Orange from the public. We may never know what Dow and the Government knew about the health dangers of Agent Orange before it was used; why the Government continued to use the herbicide until more than enough evidence was available to suggest its dangers, and why soldiers were never warned of possible health effects.

**A**s a sad irony, courts that have dismissed veterans' claims have at the same time invited them to go to the Veterans Administration for health care and compensation. In fact, one of the stated reasons in *Feres* for barring veterans from the courts is that the VA is available to help them. But once at the VA, veterans face another legal obstacle that parallels the *Feres* doctrine. The VA by law is the only major Federal agency whose decisions cannot be reviewed in court. The law was passed more than fifty years ago out of a paternalistic notion that because the agency had the special expertise and compassion to treat veterans, court review was unnecessary.

The dangers that inevitably result from this absence of outside accountability are nowhere more evident than in the VA's policies on Agent Orange. The agency argues that there is not enough evidence to justify compensating veterans for Agent Orange exposure, even though the Environmental Protection Agency considers the herbicide hazardous enough to justify an emergency ban on most domestic uses—killing vegetation along highways, for instance. (Dow is challenging that ban in court.) The VA can, legally, maintain its position without court review. No court can review the VA's equally ungenerous position that it will not compensate veterans for possible genetic damage, even if veterans could prove such damage was related to Agent Orange expo-

sure. And it is likely that veterans would not be able to sue the VA if it decides to deny them priority treatment mandated by Congress itself.

The legal tangle facing veterans also includes a law that makes it a criminal violation for a lawyer to accept a fee of more than \$10 for representing a veteran's disability claim. This statutory relic was passed after the Civil War to prevent lawyers from preying on veterans who received war benefits. So even if immunity doctrines did not keep a veteran out of court, the \$10 limitation is insurance that arbitrary agency actions will not be challenged.

The need for outside review of military actions is greater now than ever before. Veterans have encountered many of the same problems as workers in modern industrial workplaces. The military arsenal includes not only guns and bullets but toxic chemicals, nuclear weaponry, radiation-emitting radar, and other dangerous and potentially lethal products of our advanced technology. Some critics argue that the military experiments with new technology to test its later usefulness in the corporate sector. Military personnel were ordered to witness above-ground nuclear tests in the 1950s as part of a massive human experimentation program to study, among other things, whether persons could handle the stress of high-level radiation exposure.

Those veterans who were exposed to radiation share a fate similar to Agent Orange victims. They share a history of involuntary and uninformed exposure to dangerous substances, a pattern of Government indifference, deception in the face of their complaints, and, finally, a rude awakening to the realization that they have no right to sue the Government for their health problems. Like Vietnam veterans exposed to Agent Orange, they are victims of the sacred military immunity and the laws that protect the VA from their complaints.

If, some time in the future, a court decision on Agent Orange is reported in the press as a loss for veterans, it will not mean that Agent Orange did not injure them or that the Government and the chemical companies did nothing wrong. Instead, veterans might lose because of a complicated web of legal doctrines that will prevent them from ever having their complaints heard by the courts. This failure to address veterans' charges about Agent Orange also means that the public will be denied the facts about one of the most controversial issues in the continuing legacy of Vietnam. ■

## Orange Journalism

It all started last March, when *New York Times* science reporter Richard Severo wrote an exclusive article on a Congressional subcommittee's draft report that sharply criticized the Government's stand on Agent Orange. Severo was no newcomer to his subject; two years earlier he had written a series on Agent Orange which forced the first serious Government attention to the problem.

This time around, reaction came from another quarter: Severo soon received a call from Reed Irvine, editor of the *AIM Report*, which is published by Accuracy in Media, Inc., a self-styled watchdog group established, according to Irvine, "to combat media inaccuracy and distortion." What AIM actually does is ferret out what it perceives as left-wing "bias" in the nation's newsrooms; much of its funding reportedly comes from the Mellon family, a leading angel of the Right.

Irvine told Severo that he had received "complaints" about the article, but when Severo asked who had complained, Irvine refused to say, insisting that he had a right to protect his sources. Severo countered by saying that he had a right to confront his accusers, and he refused to let Irvine interrogate him.

Within a few days, Irvine peppered *The New York Times* with letters to the publisher, the editor, and Severo. He had two major complaints about the article. First, he said that he had spoken with Mark Raabe, the staff director for the subcommittee responsible for the critical report (which was never officially released), and that Raabe had told him the report was not "balanced." Second, *The Times* had created a "gross distortion" by calling a "draft" an "unpublished staff report." Irvine also blasted *The New York Times* in his April *AIM Report*, citing the paper's "long record of misinforming its readers" about Agent Orange and calling Severo's reporting a collection of "horror stories" which only spread "fear and suspicion."

But no sooner had *The Times* received Irvine's letters when it also re-

ceived copies of a letter Raabe had sent to Irvine. Raabe had quite a different complaint: Not only had Irvine misquoted him, he wrote, they had never even discussed the issue of "balance" together. Raabe also pointed out that Accuracy in Media's editor had spelled his name wrong. Irvine says he never saw Raabe's letter.

While Raabe would not vouch for AIM's story, the VA welcomed it with open arms. Vern Rogers, a public information officer for the VA in Chicago, distributed the *AIM Report* throughout VA offices in the Great Lakes area.

In Washington, Dr. Donald Custis got into the act. Custis is responsible for all VA Agent Orange research; in May, he became the acting head of the agency. In a June 9 memorandum to VA offices titled "Media Coverage on Agent Orange," Custis offered some "reason to hope . . . that future media coverage of the herbicide issue will be more responsible than past accounts which relied on emotional allegations rather than scientific fact." The reason for his hope was none other than the *AIM Report*.

(As it also turns out, the VA's press office aided in the research and preparation of the *Report* in the first place. Irvine himself says AIM got help from the VA, and Stratton Coleman, the VA's acting press officer, confirmed that he gave Irvine a personal briefing.)

Although Custis wrote that "it would be inappropriate for us to disseminate this report through an overt, official campaign," he nevertheless sent it out under official VA stationery because he found it "useful to provide as background to media representatives who come forward for general information in this respect." Lest any of the thousands of VA employes who read the memo suspect bias, however, he added, "I would like to caution you against any action or initiative which might suggest to veterans that the VA has diminished its commitment to a thorough and responsible pursuit of knowledge and understanding of the many facets of this still perplexing issue." —L.M.M.

# Agent Orange Newsletter

Editor: Mimi Yahr  
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## Feature

### FILING AN AGENT ORANGE DISABILITY CLAIM

In the first issue of the Agent Orange Newsletter, our feature article explained VA policies for obtaining Agent Orange examinations. The focus of this article is VA procedures for filing a disability claim. The majority of our information comes from two Agent Orange Self-Help Guides, one published by the veterans organization, Swords to Plowshares, and the other published by the National Veterans Law Center, and copies of the guides are available from either organization.

One of the most important things to remember about filing a claim is that you must be able to prove that your disability is service-connected. If you were treated for medical problems related to your current illness while you were still in service or within one year after discharge, this will establish service-connection. It is more difficult to prove service-connection if your illness developed later; however, the VA does recognize certain "presumptive" diseases such as cancer; in other words, a disease which takes years to develop. What you have to prove, of course, is that your illness originated in the service.

When you file a claim, you must have documentation to back up your claim, and the more you have, the better your chance for winning. Just as important is filing everything together right from the start; adding documentation later, or bringing it for your hearing will hurt your case. Preparing your case as completely as possible is particularly important with Agent Orange claims since the VA does not have set guidelines for dealing with the effects of Agent Orange: one person may be granted disability for a kidney disease caused by Agent Orange exposure, while someone else from the same unit may be denied disability for the same illness. (The only possible exception to this is chloracne, which will be explained later.)

The documents and forms you'll need to file your claim are as follows:

1. Standard Form 180, "Request Pertaining to Military Records" - This form is needed in order to send for

your military records; in addition to establishing your service in the military, these records will include any medical treatment you may have received while in the military. You can get this form from any VA office, and the first copy of your records is free.

2. VA medical and administrative records - If you've received treatment at a VA facility in the past--particularly for an illness related to your current disability--contact the Records Release Department of that hospital and request copies of your medical records by filling out a Form 073288. Since they'll probably charge you for copies, the Swords to Plowshares self-help guide suggests you may want to review your file first. The guide also points out that if you can't afford the charge, you can request a waiver or contact your Congressional office for assistance.

If you've filed a disability claim with the VA before--for any type of disability--contact the Regional office where you filed the claim, give them your claim number and ask to review your file. This file may include VA medical records pertaining to your claim, as well as your administrative records. Get copies of whatever you feel is pertinent to your Agent Orange claim. (Again, if you can't afford what they may charge, you can request a waiver or contact your Congressional office.) The VA Regional Office will also

## Open Letter

The Agent Orange Newsletter is back. With many, many apologies and many, many thanks to all of you who continued to support our efforts--and particular thanks to those of you who subscribed because it was your money that finally enabled us to get out this issue.

A few announcements: The Newsletter will be published every 10 weeks rather than every month, and those of you who subscribed will get a full year's worth starting with this issue; because of space/budget limitations, we've had to delete the Legislative Updates for this issue; the Agent Orange Information Center is the publisher of the Agent Orange Newsletter; we need money.

Keep the subscriptions coming in so we can keep the Newsletter going! And because we do need money to keep our organization going, please send in your donations (which are tax-deductible) so we can continue our work.

And finally: A very merry Christmas, a very happy Chanukah, and a very wonderful New Year to all of you.

Thank you.

Mimi Yahr  
Editor

probably have a copy of your medical records from the military; request that they send you a copy of these records. (You are entitled to a free copy of your military medical records.)

3. Civilian medical records - If you've ever been to a private doctor or hospital for an illness related to your current claim, get copies of those medical records. As the Swords to Plowshares guide points out, "Most doctors are more than willing to assist you by sending records if you explain why you are in need of them. There may be a charge for these records or you might avoid a charge by requesting a summary only."

4. Supporting documents - These include statements from relatives, friends, employers, etc., describing problems they knew you were having. For example, a statement from your wife or girlfriend describing joint pains you may have had, how often, how severe, etc. Or a statement from your employer(s) about how often you were forced to take off from work because of illness. If you have photographs from Nam taken in a defoliated area, include copies of those. If you're in contact with any of your buddies who had a similar problem (for example, a "skin rash") as a result of exposure to herbicides at the same time, get statements from them. Make sure all of these statements describe when, how often, how severe, and over what time period. Swords to Plowshares cautions that "unless they are doctors, family and friends should not state absolutely what your illness was (for example, 'he had a damaged kidney'), but they can describe what you complained of to them (for example, 'he said he had a headache almost every night')." They point out that the statements do not have to be notarized, "but the person writing the letter must declare that the information which is in the letter is true to the best of his/her knowledge. Letters can be addressed 'To whom it may concern' and should be dated, signed and have a return address."

5. Published medical evidence - The Swords to Plowshares guide recommends books on medicine as another source of supporting evidence: "Many books on medicine are written in a straightforward fashion and are available at public libraries. These books will give an understandable explanation of the disease process involved. If the book's explanation of the disease supports your argument, take a photocopy of the important parts to submit along with your claim."

6. Form 21-526, "Veteran's Application for Compensation or Pension" - This is the form you need in order to file your claim, and it can be obtained at any VA office. The form is long, but make sure you fill it out completely.

7. Form 21-4138, "Statement in Support of Claim" - This form should be attached to the 21-526, and can also be obtained at any VA office. As the Swords to Plowshares guide points out, this form is extremely important since it gives you the chance to explain why you believe your illness is service-connected, therefore entitling you to service-connected disability compensation. If you're in contact with any of your buddies who may be suffering from similar problems, include that information in your argument (in addition to their statements). You may also want to point out (if this is the case) that you did not suffer from this problem before your military service and that no one in your family suffers from similar problems. If you've had no exposure to toxic chemicals or radiation since you were discharged, mention that as well. On the other hand, if you suffered from a similar problem before your service (or were exposed before), explain that your condition was aggravated by your service exposure. You may also want to point out that even though your disability was not apparent during your military service or within a year after discharge (if this is the case), you believe

that your illness was caused by exposure to Agent Orange and took a number of years to develop.

Swords to Plowshares recommends that you take some time to find out as much as you can about your illness. This way, you can explain in your argument how you believe your illness developed (describing early symptoms, for example). This is also important when you review your past medical files: "If you are claiming disability for a gastric disorder, for example, you will want to look for times when you were treated for either that disorder or for unexplained nausea or vomiting. If you are not sure what the early medical symptoms of your disease would have been, most doctors can explain the types of treatment you would have been likely to receive when your present disease was in an earlier stage."

Another important point is brought up by the National Veterans Law Center guide: "If you had a child with a birth defect and you think that the defect may have been caused by Agent Orange, state that you (not your child) suffered 'genetic damage' as a result of Agent Orange exposure."

In addition to establishing service-connection, a second factor in a disability claim is the amount of compensation. VA disability payments are determined by a set schedule of ratings--from 0% to 100%--based on how much an illness disables a person and interferes with their ability to work. Thus, if your illness is not considered disabling, the VA will give you a 0% rating, but as the Swords to Plowshares guide points out, "This rating is important because any disease presently rated at 0% will be compensated in the future if it should become disabling. There are also other benefits which go with a 0% rating, such as hospitalization." Just as important, of course, is the fact that they have recognized your illness as being service-connected.

Keep in mind that filing an Agent Orange disability claim with the VA is not the same as filing a disability claim for a combat wound. The VA does not recognize Agent Orange exposure as a disability by itself, nor do they recognize that Agent Orange causes any health problems other than a skin disease known as chloracne. Unfortunately, chloracne is a difficult disease to diagnose, primarily because most doctors are not familiar with it. As a result, most of the veterans filing claims for chloracne are being misdiagnosed and their claims denied. (Psoriasis is one fairly common misdiagnosis.) The Agent Orange Information Center has published a "Chloracne" booklet for 50¢ each which describes the causes, clinical symptoms and course of the disease, and also includes a bibliography of scientific studies on chloracne. If you are filing a claim for chloracne, you may want to include either the booklet or the studies cited as supporting evidence; it may also help you get a proper diagnosis if you show the booklet to the private or VA dermatologist who examines you.

Aside from acknowledging chloracne as being caused by Agent Orange, the only other set standard the VA has on Agent Orange claims concerns exposure. According to the Department of Veterans Benefits Circular 21-90-1, dated April 3, 1960, unless "there is positive evidence that veteran could not have been exposed, such as a headquarters assignment in Saigon or a desk job at the Da Nang Air Force Base...it will be assumed that veteran was exposed to defoliants as alleged." Thus, you are not required to provide dates, locations, etc., of exposure; the fact that you were in the field is proof enough. What you must prove, though, is the fact that your illness was caused by that exposure. As the Circular states, "the claim for service connection will be resolved on the basis of the relationship of the disability in question to such exposure." (In the case of chloracne, the relationship is clear to the VA, but the diagnosis is not.)

Even with the benefit of the doubt on your side as to exposure, it is best to describe how you were exposed. The National Veterans Law Center guide recommends that you "be as exact as you can in describing the way you believe you came into contact with Agent Orange. ...List all the ways you believe you were exposed and when and where it happened if you can remember." They also advise that you "identify the lowest unit level you served with. For example, the company and squad name would be better than just the company name." This way, the VA may be able to match the movements of your unit with records of herbicide spray missions (from the HERBS computer tapes, which are the flight logs of the fixed-wing and helicopter spray missions). You may want to specifically request the VA to do this, and the National Veterans Law Center guide contains an attachment to add to your VA claim form which includes this request.

When you have gathered all the documents you need to attach to your claim form, make sure you keep the originals and/or one copy of everything for yourself. Submit your claim to a veteran's benefits counselor at any VA Regional Office. The Swords to Plowshares guide recommends that you ask the counselor to stamp your claim as having been received and to request a receipt.

Get assistance from the veteran's benefits counselor or DAV representative in obtaining records, filling out forms, and anything else you might need. If you feel the person is sympathetic, you might ask for assistance in preparing your case.

Once you have filed your claim, it will probably take a number of months before you hear from the VA. (You can ask the benefits counselor or DAV rep to check up on your claim.) You'll be given a medical examination by a VA doctor, but these are not the same doctors who give Agent Orange examinations, so don't expect them to know too much about Agent Orange. (This is all the more reason why you need as much documentation as possible.) You may want to ask for a hearing before your case is decided, and again, you can get assistance from the benefits counselor or DAV rep on this. Most importantly, be prepared to have your claim denied because the VA does not yet recognize Agent Orange as causing any serious health problems. If your claim is denied, refile it as soon as possible (within a year), and as many times as you have to. This way, if and when your claim is acknowledged, the benefits you receive will be retroactive to the time you first filed your claim. And do file your claim: the VA doesn't have to recognize Agent Orange if you don't file a claim.

(Note: The November 27, 1980 issue of Stars & Stripes included information on filing a tort claim against the government as an alternative course of action (Standard Form 95, "Claim for Damage, Injury, or Death"). Since the laws governing tort claims are extremely complicated, we strongly urge that you consult a lawyer or an organization such as the National Veterans Law Center before you take this step.)

## Legal Updates

### LAW SUIT AGAINST VA

On May 7, 1980, the National Veterans Law Center filed an injunction in U.S. District Court for the District of Columbia to prevent the VA from evaluating bids on the design of a study on the health effects of Agent Orange. Under Public Law 96-151, passed on December 20, 1979, the VA has been ordered to conduct an epidemiological study on Vietnam-era veterans exposed to herbicides. Thus, on March 19, 1980, the VA issued a "Request For Proposal" (RFP) for the design of a study which they will conduct themselves. According to the lawsuit, however, the VA's Request For Proposal "violates a variety of federal procurement regulations and

contemplates a study that does not comport with the study ordered by the underlying legislations." Among numerous issues brought out by the suit, some are as follows:

● The VA's RFP states that "the award will be made to the bidder with the lowest bid price and with an evaluation score of 80 or better." This places undue emphasis on monetary considerations rather than scientific merit, which is in direct conflict with federal regulations on selecting contracts. As the lawsuit states, "this means that a score of 81 will be selected over a score of 99 if it is a dollar cheaper."

● Federal regulations specify that the contracting agency (in this case, the VA) must have qualified personnel to evaluate the technical aspects of bids. Yet the VA, according to the lawsuit, "has no epidemiologist or otherwise technically competent person on its staff" to evaluate the bids.

● The VA's RFP calls for a general design which will later be modified by the VA; it further states that the study itself will be conducted by the VA, but fails to give any description of the type of personnel or facilities to be used. For both reasons, the suit contends, it is not likely that responsible scientists will want their names associated with such a study.

● The VA has consistently held the position that exposure to herbicides causes no long term health effects other than chloracne and causes no damage to offspring. Thus, the suit states, "a finding of health problems will be inconsistent with prior VA policy." In view of the fact that VA personnel will be conducting the actual study, "it is hard to conceive a more biased and less appropriate fact gatherer."

● Although the VA has been ordered to conduct an epidemiological study--which is a comprehensive investigation of disease and mortality rates, medical and reproductive histories, etc.--the VA's RFP indicates a clinical screening survey--which is a superficial look at current health status. Aside from being in violation of the law, this type of survey will present two basic problems: 1) a substantial number of Vietnam veterans are not likely to participate in any VA project, and 2) as the suit points out, "the dead are particularly unresponsive to medical screening examinations."

In support of their suit, the National Veterans Law Center presented various statements from scientists who had reviewed the VA's RFP. These scientists concluded that the "study contemplated is unscientific and unlikely to result in valid conclusions about the health problems thought to be associated with Agent Orange exposure", that the RFP was "significantly deficient in comparison to those of other agencies who contract for scientific studies", and that the "long-running dispute between the VA and the veterans on this issue has caused the agency to lose all credibility with the veterans."

District Court Judge Harold Greene did not grant the temporary restraining order, feeling it was "essentially premature." However, he did retain jurisdiction over the case, saying that the court would consider another application for an injunction if fears about VA bias or the inadequacy of the study are justified in the future.

### AGENT ORANGE SUIT FILED IN SAN FRANCISCO

On October 29, 1980, attorneys Patrick T. Hall and Robert A. Kiernan filed a lawsuit in the California State Superior Court on behalf of a Vietnam veteran who was exposed to Agent Orange. The suit, filed against Dow Chemical, Hercules Inc., Diamond-Shamrock Corporation, Monsanto Company, Thompson-Hayward Chemical Company, Stauffer Chemical Company, and McKesson Chemical Company, is the first in a series of individual actions

to be brought against these chemical companies by Hall and Kiernan on behalf of other California Vietnam veterans.

Charging negligence on the part of the chemical companies for manufacturing and selling 2,4-D and 2,4,5-T, which were defective products because of their high toxicity to humans and their offspring, the suit asks \$7 million in damages for "severe and permanent bodily injuries", "great mental pain and suffering", "loss of past and future income, and impairment of earning capacity", as well as other injuries sustained by the veteran. The suit also charges that the chemicals were "defective as to testing, manufacture, inspection, and supply, and as to manuals, instructions and warnings," and that the chemical companies themselves were negligent in failing to provide adequate warnings or instructions on the use of the chemicals.

The suit further charges that the chemical companies were aware of the toxicity of the chemicals, yet "fraudulently concealed such facts, and still continue to deny the existence of defects in the products and their toxicity to humans."

The suit points out that the veteran, a resident of California, "did not know or discover the cause of his injuries until a time within one year of the filing of his Complaint" nor could he "have known or discovered the cause of his injuries at an earlier time" since the chemical companies still maintain that the chemicals in question are non-toxic to humans. (The statute of limitations for the discovery of the cause of an injury is one year in California.)

#### UPDATE ON CLASS ACTION SUIT

On November 24, 1980, a 3-member panel of the 2nd U.S. Circuit Court of Appeals in New York granted an appeal by the chemical companies and ruled that the class action suit filed on January 8, 1979 by attorney Victor Yannacone on behalf of 2.4 million veterans exposed to Agent Orange was not covered by federal common law and must therefore be tried in separate state courts. (See Agent Orange Newsletter, Volume I, Issue 1, page 3.) Some 800 veterans and their families have joined the suit thus far in various states across the nation.

The appeal came about when U.S. District Court Judge George Pratt denied a motion last year by the chemical companies to dismiss the class action suit on the grounds that the federal law has no jurisdiction to rule on the claims. In granting the appeal by a 2-1 decision, Appellate Court Judge Amalya Kearse stated, "We agree with defendants that there is no federal common law right of action under the circumstances of this litigation."

In the dissenting opinion, however, Chief Appeals Judge Wilfred Feinberg stated, "I agree with District Judge Pratt that this case should be tried in federal court under rules of federal common law." Pointing out that if the claims were forced to be refiled and tried under various state laws, "then veterans may well be subjected to sharply differing rules of law in pursuit of their remedies." Another problem is the statute of limitations, which varies from state to state, and could bar a number of the claims from being tried.

Although this latest development will delay the suit, the plaintiffs can appeal to either the full 11-member appellate court or to the Supreme Court in order to overturn the decision, or they can amend the complaint to allege a diversity cause of action. This would mean that the suit would no longer be a federal question (and thus, would not be tried under federal common law), but would be under multi-state jurisdiction and federal laws would still apply.

## Medical/Scientific Updates

### STUDIES FROM EUROPE

Five European studies on the relationship between several types of cancer and exposure to phenoxy were recently brought to public attention in this country. Although most of the studies have been available for some time, it was only in April that the findings were reported to the general public by Congressmen Thomas Daschle and Dan Rostenkowski. The following are summaries of each study.

1. "Case-Control Study: Soft-Tissue Sarcomas and Exposure to Phenoxyacetic Acids or Chlorophenols", L. Hardell & A. Sandström, British Journal of Cancer, 39:711-717, 1979.

In 1977, Dr. Hardell published a report (in Lakartidningen, 74:2753) on the relationship between Swedish patients with soft-tissue sarcomas--a rare type of tumor--and their exposure to phenoxyacetic acids. As a result of this clinical observation, Hardell and Sandström conducted a case-control study of 52 patients with soft-tissue sarcomas against 208 controls. The researchers concluded that exposure to the phenoxyacetic acids (2,4,5-T, 2,4-D, MCPA, and Weedone) increased the risk for soft-tissue sarcomas 5.3 times, and exposure to the chlorophenols (fungicides, stain preventatives, wood preservatives, and waterproofing agents) increased the risk 6.6 times. However, while the researchers were able to isolate specific exposure to phenoxy alone and chlorophenols alone, they were unable to determine what effect such contaminants as polychlorinated dibenzodioxins and dibenzofurans may have had. (TCDD, or dioxin, is a chlorinated dibenzodioxin.) They concluded, therefore, that "the increased risk for this type of tumor after exposure to phenoxyacetic acids or chlorophenols can consequently be caused by the pure chemical substances, impurities in the commercial preparations or a combination of both."

2. "Case-Control Study on Malignant Mesenchymal Tumors of the Soft Tissue and Exposure to Chemical Substances", M. Eriksson, L. Hardell, N.O. Berg, Torgil Möller, & O. Axelson, Lakartidningen, 76:3872-75, 1979.

This study was undertaken in order to more clearly define the relationship between soft-tissue sarcomas (malignant mesenchymal tumors) and the contaminants of phenoxyacetic acids and chlorophenols. While the Hardell and Sandström study reviewed above was carried out in the three northernmost counties of Sweden where 2,4,5-T and chlorophenols are more commonly used in the lumber and forestry industry, this study was conducted in the five southernmost counties of Sweden, where phenoxyacetic acids such as 2,4-D and MCPA and phenoxypropionic acids such as mecoprop and dichlorprop are more commonly used in the agricultural industry. In comparison to 2,4,5-T, these phenoxy acids are less prone to contain impurities such as polychlorinated dibenzodioxins (PCDD's) and polychlorinated dibenzofurans (PCDF's). Comparing 110 patients with soft-tissue sarcomas against 219 controls, the researchers found that exposure to phenoxyacetic acids including 2,4,5-T increased the risk for soft-tissue sarcomas 6.8 times, and that exposure to phenoxyacetic acids excluding 2,4,5-T increased the risk by 4.2. Exposure to chlorophenols increased the risk by 3.3. The researchers concluded that "exposure to phenoxy acids may constitute a risk factor in the development of malignant mesenchymal tumors of the soft tissue, and that the risk is not limited only to the phenoxy acids which, like certain chlorophenols, can contain polychlorinated dibenzodioxins and dibenzofurans, but also to other phenoxy acids."

3. "Malignant Lymphoma and Exposure to Chemical Substances, Especially Organic Solvents, Chlorophenols and Phenoxy Acids", L. Hardell, M. Eriksson & P. Lerner,

In 1979, Hardell conducted a pilot study of 17 men with malignant lymphoma and found that 11 of them reported exposure to phenoxy acids or chlorophenols ("Malignant Lymphoma of Histiocytic Type and Exposure to Phenoxyacetic Acids or Chlorophenols", *Lancet*, 1:55-56). As a result of this observation, Hardell, Eriksson and Lenner conducted a case-control study of 169 patients with malignant lymphoma (60 with Hodgkin's disease and 109 with non-Hodgkin's lymphoma) matched against 335 controls, all of whom lived in the three northernmost counties of Sweden. The researchers found that high-grade exposure to phenoxy acids produced a risk of 7.0 and low-grade exposure a risk of 4.3; high-grade exposure to chlorophenols created a risk of 9.3 and low-grade exposure a risk of 2.5. The researchers also looked at exposure to the organic solvents benzene, trichloroethylene and styrene: they found that high-grade exposure produced a risk of 4.6, while exposure to the solvents together with exposure to phenoxy acids or chlorophenols created a risk of 12.2. In the discussion of their findings, the researchers pointed out the relationship between Hodgkin's disease and defects in cell-mediated immunity, as well as the relationship between non-Hodgkin's lymphomas and immunity deficiencies. They also noted several studies which found that exposure to benzene increased the risk for both leukemia and malignant lymphoma. Their study, they concluded, "suggests that exposure to organic solvents, chlorophenols and/or phenoxy acids constitutes a risk factor for the incidence of malignant lymphoma. The mechanism of this is unclear, although a conceivable mode of action may consist, for example, of immunologic depression, which is described for dioxins, especially TCDD, or mutagenic effects by phenoxy acids which were demonstrated in some test systems."

4. "Herbicide Exposure and Tumor Mortality: An Updated Epidemiological Investigation on Swedish Railroad Workers", O. Axelson, L. Sundell, K. Andersson, C. Edling, C. Hogstedt, & H. Kling (publication and date not available).

In 1974, Axelson and Sundell reported an increase of tumor incidence among Swedish railroad workers exposed to herbicides ("Herbicide Exposure, Mortality and Tumor Incidence: An Epidemiological Investigation on Swedish Railroad Workers", *Scandinavian Journal of Work, Environment & Health*, 11:21-28). This latest study has followed the same 348 workers through October 1978. While the earlier study seemed to indicate a higher tumor mortality rate among those exposed to amitrol and only a slight increase among those exposed to phenoxy acids, this latest follow-up shows the opposite. Among those exposed to amitrol, there were 3 deaths from tumors versus an expected rate of 1.95, and in the group exposed to phenoxy acids (mainly 2,4-D and 2,4,5-T), there were 6 deaths from tumors versus an expected 3.14. The overall mortality rate among those exposed to amitrol was 4 versus an expected 7.83, and among those exposed to phenoxy acids 17 versus 12.53. The most significant increases, however, were found in the group exposed to both amitrol and phenoxy acids: The overall mortality rate was 15 versus 7.25 expected, and the tumor mortality rate was 6 versus an expected 1.73. No one particular type of tumor was represented; however, stomach and lung cancers occurred at a higher than expected rate. Although the researchers also updated the overall incidence of tumors (both fatal and non-fatal), this data was omitted from the final report.

5. "Mortality Study of Persons Exposed to Dioxin Following an Accident Which Occurred in the BASF on 13 November 1953", A.M. Thiess & R. Frentzel-Beyme. Presented at the Fifth International Conference of Medicine - Occupational Health in the Chemical Industry, San Francisco, California, September 1977.

In 1976, a preliminary report on morbidity (rate of illness) was presented to the Fourth Medichem Con-

gress in Haifa on 73 employees of BASF who had been exposed to dioxin as a result of the 1953 West German accident ("Follow-up report über das Trichlorophenol-Dioxin-Unfallgeschehen in der BASF AG vom 13 November 1953", A.M. Thiess & P. Goldmann). (At the same time, Professor Röhrborn of the Institute of Human Genetics of the University of Düsseldorf was carrying out an investigation of possible chromosome damage in these employees.) This latest mortality study by Thiess and Frentzel-Beyme compared all 75 employees who had been exposed against an internal comparison group of another 75 BASF employees and against three external comparison groups: total population of Ludwigshafen (where the BASF plant is located), total population of the government district of Rheinhessen-Palatinate, and total population of the Federal Republic of Germany. While the researchers found that the mortality rate of the dioxin group was lower than expected for the city of Ludwigshafen (17 versus 25), it was higher than those occurring in the internal comparison group (11), and only slightly higher than the expected rates for Rheinhessen-Palatinate and the Federal Republic of Germany (15 and 16, respectively). Causes of death, however, presented a somewhat different picture. Stomach cancer accounted for 3 of the deaths in the dioxin-exposed group, with none occurring in the internal comparison group, versus 0.8 expected for Ludwigshafen and 0.5 expected for both Rheinhessen-Palatinate and the Federal Republic. Malignant neoplasms accounted for 6 deaths in the dioxin-exposed group and 4 in the internal group, versus 3 expected for the Federal Republic of Germany (expected rates for Ludwigshafen and Rheinhessen-Palatinate were not provided). Suicides were also higher in the dioxin-exposed group: 2 versus none in the internal group, with 0.3 expected for Ludwigshafen, 0.2 expected for Rheinhessen, and 0.6 expected for the Federal Republic. Violent deaths (including suicide) accounted for 4 in the exposed group and 1 in the internal group, with 2.5 expected for Ludwigshafen, 1.1 expected for Rheinhessen-Palatinate and 1.7 expected for the Federal Republic of Germany.

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#### NEW FINDINGS BY DR. POLAND

Dr. Alan Poland of the McArdle Laboratory for Cancer Research at the University of Wisconsin has presented findings which may be a key to understanding how dioxins work. In studies on laboratory rats, Poland has found that a protein receptor binds itself to dioxin molecules on the outer portion of a cell. As a result of this binding, dioxin then enters the nucleus of the cell, where it eventually destroys the cell. How it works once inside the cell is not yet understood, however, this discovery could provide a first step in preventing dioxin poisoning. As Poland pointed out, if a drug were found to bind with the protein receptor, this could stop the dioxin from entering the cell in the first place.

Dr. Poland discussed his findings in an interview with the Oregonian on March 9, 1980 at the Oregon Regional Primates Research Center, where he was a guest lecturer. In another part of the interview, Dr. Poland explained that dioxins, chlorophenols, phenoxyacetic acids, and thousands of related chemicals come from the family of "halogenated aromatic compounds." All of these compounds, he pointed out, are derived from chlorine, which is a waste product of industrial potash. Poland suggested that instead of seeking bans on individual chemicals, environmentalists should work toward urging the chemical industry to find other ways of disposing of their chlorine. Some chemical companies, he said, have already begun to do so.

## WARNING ISSUED ON 2,4-D

On June 24, 1980, the California Department of Health Services issued a "hazard alert" on 2,4-D. The warning--the first of its kind--came after examination of seven persons who suffered nerve damage as a result of exposure to 2,4-D.

Six were exposed while working as pesticide applicators and one was exposed while working in her garden. All seven developed numbness or tingling in their extremities, followed by weakness in their arms and legs, and some suffered almost complete paralysis of the arms and legs.

The hazard alert report is being sent out to workers and doctors to warn them that 2,4-D causes cancer and birth defects in laboratory animals and permanent neurological damage in humans. According to Dr. Marc Lappe, Chief of the Department's Hazard Alert System, the warning was issued because of EPA inaction. Said Dr. Lappe, "There is a policy vacuum in EPA, an absence of leadership. So we had to move on this."

On April 29, the EPA announced that manufacturers of 2,4-D were being asked to provide additional information on the herbicide. Following a review of health effect studies, the EPA decided "that significant information gaps exist on the effects of 2,4-D, preventing a definite conclusion on the safety of the herbicide." Manufacturers have been asked to undertake new studies on the reproductive, metabolic and oncogenic (tumor-producing) effects of 2,4-D on laboratory animals. The EPA will also conduct certain reproductive studies of their own.

These studies, however, could take anywhere from one to three years. Meanwhile, more than 70 million pounds of 2,4-D are distributed nationwide each year for use on forests, rights-of-way, rangeland, pastureland, cereal and sugarcane crops, aquatic areas, drainage ditch banks, commercial turf, and home gardens. 2,4-D is one of the most widely used herbicides in the United States, and is available in 1,500 products.

In addition to concern about the use of 2,4-D by home gardeners, Dr. Lappe stated that "current work practices are inadequate to protect against potential neurotoxicity."

## Other News

### CHROMOSOME DAMAGE IN LOVE CANAL

On May 18, 1980, the EPA announced the possible evacuation of an additional 710 families from Love Canal, New York as a result of tests which found chromosome damage in a number of residents.

Love Canal is the site of a chemical waste dump used by Hooker Chemicals and Plastics Corporation from the 1940's until 1953, when the site was sold to the city of Niagara Falls for \$1.00 and a school built directly over it. In 1978, following numerous reports of ill health among the residents, the New York State Health Department discovered 20,000 tons of various toxic chemicals, including 141 pounds of dioxin, and declaring a "health emergency," evacuated 239 families from the immediate area. Residents left behind, however, have insisted that the contamination is not confined only to the six-block area now sealed off, and have spent the past two years trying to get the state to evacuate the entire area. This latest finding of chromosome damage is confirmation of their fears.

In tests conducted on 36 residents of Love Canal by the Biogenics Corporation in Houston, 8 were found to have supernumerary acentric chromosomes--a type of damage that has been associated with cancer. Normally, this type of damage occurs at a rate of one in 100. In all, 11 of the 36 tested showed chromosome abnormalities which have been associated with spontaneous

abortions, birth defects, and cancer.

Mrs. Patricia Sandonato was one of the 11 found to have chromosome damage. In addition, a sample of the air in her basement was found to contain benzene. She was told that the damage to her chromosomes "over the longer term may be an early warning of future health problems." Her five-year-old son, Jason, was born with "minimal brain dysfunction" and has been operated on for a deformity in one knee.

The tests were conducted as part of the federal government's suit against Hooker Chemical Company. The government is seeking \$124.5 million from Hooker to clean up four chemical dumps in Niagara Falls, including the Love Canal site. The New York State government has also filed suit against Hooker Chemical and its parent company, Occidental Petroleum. The state is seeking \$95 million in restitution costs and \$540 million in punitive damages. In response to the Biogenics report, Donald L. Baeder, president of Hooker Chemical Company, stated that "the information submitted is inconclusive that there is a problem caused by any prior exposure to chemicals or that there is any continuing exposure which is hazardous and needs to be alleviated."

### SEVESO UPDATE

The Swiss chemical company, Givaudan, has agreed to pay damages for the 1976 explosion which contaminated the town of Seveso with dioxin. (See Agent Orange Newsletter, Volume I, Issue 1, page 9.) Givaudan, a subsidiary of Hoffman-La Roche and parent company of the IC-MESA plant where the explosion took place, will pay \$114 million; Italian national and regional governments originally sought \$131 million.

In the weeks following the explosion, 40,000 animals died, and residents of the area suffered skin rashes, swollen livers, black nails, nausea, dizziness, and headaches; women in the area were puzzled by sudden personality changes in their children and the lack of sex drive in their husbands. Hundreds of new cases of chloracne continued to crop up even months later, particularly among children.

Of the 900 people originally evacuated, some 700 from the most heavily contaminated area have been barred from their homes permanently; however, there are fears that the contamination goes far beyond the 283 acres now closed off. Heavy rains following the explosion may have deposited high amounts of dioxin into the Seveso River which runs into Milan, and this could explain why dioxin was found months later in garden along the Seveso River as far south as Milan. In Milan itself, samples of mud taken from the streets were found to contain dioxin as well.

## Organizations/Local Scenes

### AGENT ORANGE VETS ADVISORY COMMITTEE ACTIVITIES

The Agent Orange Veterans' Advisory Committee, now located in Berkeley, has begun preparation of the "Vietnam Map Book: A Guide to Agent Orange Contamination of Vietnam Veterans." According to their recent newsletter, "This book will reproduce a series of maps of Vietnam using the grid coordinates cited in the HERBS tapes. Essential information from the HERBS tapes will be reproduced on facing pages with instructions to veterans on how to use the maps and data to determine whether they were in sprayed areas."

Their newsletter also reports that they now have the WBBM-TV film, "Agent Orange: Vietnam's Deadly Fog," available in 16mm (black and white). The organization has begun a series of film showings around the Bay Area on campuses, at community centers, etc. in order to pub-

licize the Agent Orange issue.

Another announcement in their newsletter is that they are greatly in need of volunteers for their new office. If you can spare even a few hours for helping with mailings, answering the phone, etc., please give them a call.

#### CONFERENCE ON URBAN PESTICIDES

The Coordinating Committee on Pesticides is sponsoring an all-day conference on urban pesticide use at Laney College in Oakland on January 17, 1981. The conference, which runs from 10 A.M. to 4 P.M., will open with a panel on the use of pesticides in parks and other urban areas, pesticides in foods, and will include victims of urban pesticide use. The second panel will focus on worker exposure, and will also include victims of occupational pesticide use.

The afternoon panel on alternatives to pesticides will be followed by various workshops. Running concurrently throughout the day will be a "garden clinic" to which people can bring their plants for evaluation and advice on alternatives to pesticides.

Much like the Politics of Pesticides conference sponsored by CCOP in March (see Agent Orange Newsletter, Volume I, Issue 1, page 7), the main theme of this conference will be organizing.

#### NATIONAL CONFERENCE ON AGENT ORANGE

The National Veterans Task Force on Agent Orange and its member organizations are sponsoring the Vietnam Veterans Conference on Agent Orange on May 23-24, 1981 in Washington, D.C. The conference will be geared toward Veterans and their families, veterans' organizations, physicians and others in the medical field, mental health workers, and all others concerned with the Agent Orange issue.

The purpose of the conference is to provide the most current information on effects of Agent Orange exposure, scientific investigation, legislative action, legal actions, VA policy, and treatment procedures.

One of the major goals of the conference is "to help unite the efforts of various groups toward the development of viable resources to meet the needs of Agent Orange victims."

More information on the conference can be provided by the National Task Force office or by:

Ruth M. Schaffer, Conference Chairperson  
Veterans Affairs Office  
City University of New York  
535 East 80th Street (Caldwell)  
New York, N.Y. 10021  
Tel: (212) 794-5757 or 794-5758

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#### Organizations

Coordinating Committee  
on Pesticides  
1507 Solano Avenue, #6  
Albany, CA 94706  
(415) 526-7141

National Veterans Law Center  
4900 Massachusetts Avenue, N.W.  
Washington, D.C. 20016  
(202) 686-2741

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#### Changes Since Last Issue:

Monterey Peninsula College  
Jeff Burkhardt no longer there

University Veterans Association  
Julian Camp & Russ  
Linebarger no longer there

Winter Soldier Archives  
(415) 527-0616

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St. Louis, MO 63114  
(314) 428-0113  
(Please note change)

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(415) 540-6175

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# AGENT ORANGE UPDATE

CONGRESSIONAL REPORT CRITICIZES VA AND DEPARTMENT OF DEFENSE FOR HANDLING OF THE AGENT ORANGE ISSUE

DETERMINING WHO WAS EXPOSED TO AGENT ORANGE

\* \* \* \* \*

\* \* \* \* \*

An unpublished staff report of the House Subcommittee on Oversight and Investigations accuses the VA, the Department of Defense, the Dow Chemical Company and a panel set up by President Carter of failures in dealing with the controversy over the defoliant Agent Orange.

A spokesman for the subcommittee said that the report had been prepared by the staff that existed before last November's election and that, without new hearings, it could not be released now by the subcommittee which has eight new members. The report was written after the election.

Congressional Criticism continued p. 2

The Department of Defense has developed a computer data base on herbicide spraying missions conducted between August 1965 and February 1971. This data base included the date, number of planes, amount of herbicide sprayed, and the location for approximately 86 percent of all herbicide operations in South Vietnam. What was missing was a data base of troop locations and strengths which could be compared with the spraying missions to estimate the number and proximity of troops to the area sprayed with Agent Orange.

Exposure continued p. 2

New Hampshire  
New Jersey  
New York  
Ohio  
Oklahoma  
Oregon  
Pennsylvania  
South Dakota  
Vermont  
Washington  
Wisconsin



California  
Colorado  
Wash. D.C.  
Idaho  
Illinois  
Iowa  
Massachusetts  
Minnesota  
Missouri  
Montana  
Nevada

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## AGENT ORANGE UPDATE REACHES 22 STATES

Contributions to the Update; articles, newspaper clippings (please provide source), & funds are appreciated.

AGENT ORANGE UPDATE  
MINNESOTA VETERANS COALITION  
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ST. PAUL, MINNESOTA 55105

TIM MICHAELS 612/296-9475

According to the subcommittee report, the Veterans Administration relied on "inaccurate and incomplete information" when it denied Agent Orange claims. Veterans who sought advice from Veterans Administration facilities were "greeted with VA personnel who, in many cases, did not even know what Agent Orange was," and "were often hostile," the report says.

The Veterans Administration is accused of denying the claims of veterans, "while declining to specify what level of scientific certainty will be required to establish the link between Agent Orange exposure and ill health effects."

As for the Department of Defense, the report says that in the late 1960's, after Agent Orange had been used for several years, the department, "refused in the face of new, verified scientific data, to acknowledge that there could be a problem with Agent Orange," that it "took no precautions to prevent exposure of servicemen," and that it permitted spraying of Agent Orange in Vietnam in an amount "14 times greater than that applied domestically."

The report also accuses the department of continuing to use Agent Orange widely "despite a White House directive to phase out defoliant operations."

Finally, the report criticizes the Interagency Work Group set up by President Carter in late 1979 to facilitate a solution to the Agent Orange problem. The report says that the group largely failed to achieve any of its objectives.

The report recommends that the Veterans Administration stop denying Agent Orange claims, an action the report calls "unsupportable." The report urges that such decisions be held in abeyance until more is known about what is making the veteran claimants sick.

("House Study Assails Herbicide Actions", The New York Times, Sunday, March 29, 1981)

#### LUTHERAN CHURCH SPONSORS DOW STOCK RESOLUTION CALLING FOR AN INVESTIGATION OF 2,4,5-T

The American Lutheran Church (ALC) will help sponsor a Dow Chemical Co. stockholders' resolution calling for an investigation of the herbicide 2,4,5-T, a component of Agent Orange.

The ALC and 11 other church organizations sponsoring the resolution hold a total of 98,276 shares of Dow stock, worth more than \$3.2 million. The ALC is the group's largest stockholder with 30,000 shares. The United Methodist Church's Board of Global Ministries has 23,000 shares.

This will be the second resolution in two years. Last year, eight religious organizations sponsored a similar resolution.

The resolution proposes that a review committee - of outside directors, management and employee representatives, and noncompany experts - study the effects of 2,4,5-T and Silvex, another herbicide manufactured by Dow. The Environmental Protection Agency (EPA) has banned virtually all domestic production and use of 2,4,5-T, although it is being produced in New Zealand. An EPA study linked the herbicide to an unusually high rate of miscarriages in Oregon women living near forest area subject to herbicide spraying, officials of the Methodist Church said.

Unfortunately, Army troop records from the Vietnam conflict were neither complete nor well organized because of the Army's rapid pullout from Vietnam. Thus, a thorough reconstruction of these records was necessary to determine the locations of Army personnel who made up the majority of roughly 2.6 million people who served in Vietnam. However, a review of 31 quarterly operational reports from 13 major Army combat units located throughout Vietnam showed that 10 of the 13 units reported using Agent Orange on base camp perimeters, roads or crops, or aircraft missions in areas of operation. Undoubtedly, Army troops were close to areas sprayed with Agent Orange.

Marine Corps unit records from Vietnam proved more encouraging. Monthly Marine Corps battalion reports contained detailed information on location, strength and personnel turnover necessary to develop a data base to compare with Agent Orange spraying missions. A random sample of monthly reports from the 24 Marine infantry battalions stationed in the I Corps, or northern section of South Vietnam, between January 1966 and December 1969 was used to compile the data base. During these four years 2.18 million gallons of Agent Orange, or about 20 percent of the herbicide used in Vietnam, was sprayed in I Corps.

Using average strength and turnover figures for the sample, GAO estimated that 218,000 personnel were assigned to the 24 battalions in I Corps between 1966 and 1969.

Ground troop locations were compared with Agent Orange missions, taking into account the time and geographic proximity of battalion locations to spraying sites. Various time and distance combinations were analyzed because many variables affected an individual's potential for exposure. Different estimates exist on the life of dioxin and the drift of Agent Orange from target areas.

The four time periods used were the day the mission was conducted (day 1) and within 7, 14 and 28 days after the mission. The 28th day was significant because DOD has consistently stated that ground troops' exposure to Agent Orange was unlikely because they did not enter sprayed areas until 4 to 6 weeks afterward.

The distance criteria used were .5, 1.5, and 2.5 kilometers, or about .3, .9, and 1.6 miles from a sprayed area. (A kilometer is 0.62 miles, almost 2/3 of a mile.) Distance from a sprayed area was important because the Agent Orange sprayed from a plane often drifted beyond the target area. Drift was affected by the altitude and speed of the aircraft, the terrain of the area to be sprayed, and the climate. DOD studies showed that drift was generally less than 1 kilometer when the aircraft sprayed Agent Orange at an altitude of 150 feet, an airspeed of 130 to 140 knots, and windspeed of less than 10 knots. However, the National Academy of Sciences reported that drift had caused widespread crop damage. In fact, its study showed that crop damage resulting from drift on missions designated as defoliation was greater than that caused by crop destruction missions. Herbicide mission commanders confirmed that drift was a common problem and could extend from 1 to 2 kilometers.

The Australian Government has undertaken a pilot study of 300 Vietnam veterans and their wives, together with 300 controls and their wives, to determine if there was an increased incidence of disabilities in veterans who were exposed to the chemical defoliant Agent Orange in Vietnam. The study will also include Vietnam veterans children, in an attempt to ascertain any increased incidence of birth defects.

The major study of all Vietnam veterans and their families will begin sometime in the third quarter of this year, and the first results are expected to be available in March 1982. The Australian Government has asked the Commonwealth Institute of Health at the Sydney University to undertake the epidemiological study.

Senator Messner, Minister For Veterans' Affairs, said that a number of essential tasks for the study had already been completed.



The Central Army Records Office in Melbourne has conducted a search of the records of all Army personnel who had served in Vietnam, and has provided the Institute with necessary data such as: names, serial numbers, units, date of arrival in and departure from Vietnam. Twenty-five full-time staff had been involved in this task.

Location of the servicemen and their families to be studied was also a crucial matter. The addresses of the veterans will be obtained by running the names of the veterans provided by the Defense Department against the computer records of the Australian Electoral Office.

The Minister went on to say that the Department of Defense is supplying the Institute with a great deal of information relating to the question of exposure. This includes information extracted from Australian unit diaries about troop locations and movements.

(Thanks to Brian Burke, St. Paul, Minnesota for a copy of the Minister For Veterans' Affairs letter, dated Feb. 25, 1981.)

**NATIONAL PARKS SERVICE HALTS 2,4-D USE**

The U.S. National Park Service has discontinued the use of 2,4-D in its 325 parks and recreation areas.

Park service director Russell Dickenson ordered all Superintendents in a memo to stop using 2,4-D immediately. According to a story in the Washington Post, "Future use is to be allowed only if the Superintendents convince their Regional Directors that no alternative methods are available to accomplish indispensable control."

Spokesman Duncan Morrow said the action came in response to environmental groups, many of them based in the Capital, who argued that the herbicide causes spontaneous abortions, bleeding of fetuses and birth defects. Duncan said the evidence is not sufficient to make a definite judgment, but that "its better to err on the side of conservatism and not use a potentially dangerous chemical unless we can find that our fears are unfounded."

The accompanying table shows the estimated number of marines assigned to Marine Corps infantry battalions in I Corps from January 1, 1966 to December 31, 1969, within the various time and distance criteria from sprayed areas.

Estimated Number of Marines Near Areas Sprayed (A.O.)		
Within Kilometers of Sprayed Area	Within Days of Spraying Mission	Estimated # of Marines
.5	1	5,900
	7	7,600
	14	9,100
	28	16,000
1.5	1	16,500
	7	21,500
	14	25,800
	28	30,100
2.5	1	17,400
	7	23,900
	14	29,900
	28	39,400

About 5,900 marines were assigned to units within .5 kilometers of areas sprayed with Agent Orange on the same day. Some of the units were directly in the path of Agent Orange spraying missions. The number of marines within .5 kilometers of sprayed areas before the 4-week reentry period established by DOD was about 16,100.

Thus, DOD's contention that ground troops did not enter sprayed areas until 4 to 6 weeks afterward was inaccurate, and the chances that ground troops were exposed to Agent Orange were higher than DOD previously acknowledged. Since ground troops were not included in the ongoing health effects studies, GAO recommended that the Congress determine the need for a study of the health effects of Agent Orange on ground troops likely to have been exposed, on the basis of its feasibility and value in resolving veterans' concerns over alleged health risks.

("The Vietnam Veteran vs. Agent Orange: The War That Lingers", GAO Review/Spring 1981, pp.32,33.)

**6,693 AGENT ORANGE DISABILITY CLAIMS FILED WITH VA**

The one health effect that is generally recognized as a possible consequence of Agent Orange exposure is Chloracne, a severe form of acne that causes skin lesions. As of this February (1981), the VA has received 6,693 Agent Orange-related claims for disability compensation. Twenty-four of these cases received compensation (although not necessarily for Agent Orange-related ailments), including three awards for chloracne. Overall, the VA receives about one million claims annually.

("Agent Orange: Has it Caused Health Problems For Veterans", Science/Illinois Issues, May 1981, p.38)

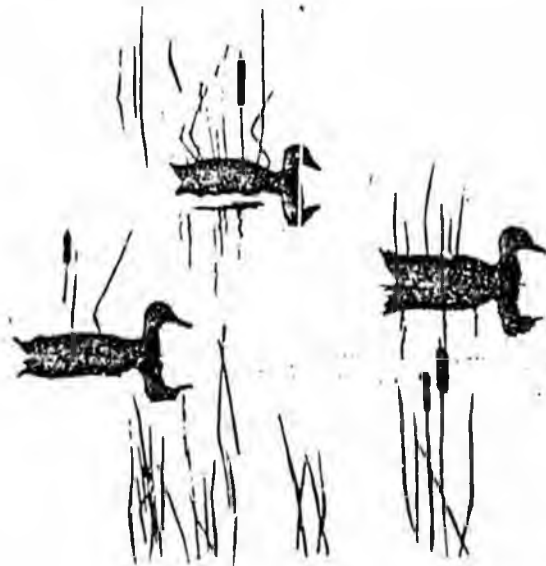
## DIOXIN POLLUTION IN THE GREAT LAKES

Dioxin is the name of a group of 75 chemicals of the chlorinated dibenzodioxin family. One member of the family -2,3,7,8 tetraclorodibenzo-para-dioxin, or TCDD -is extremely dangerous. To some mammals it is 500 times more deadly than strychnine and 1,000 times more lethal than cyanide. Small doses can cause skin irritations, or damage livers, spleens, central nervous systems, the pancreas, brains or lungs and can cause birth defects. TCDD can pass directly through the skin to act on the internal systems of animals and people.

TCDD is not manufactured on purpose. It is an unwanted by-product of the manufacture of certain other chemical compounds, for example, pentachlorophenol and 2,4,5-T.

The presence of dioxin is measured in the parts per trillion. One part per trillion corresponds to one second in 30,000 years. It is difficult to comprehend that so small a quantity can be dangerous. Yet, once dioxin is present in any amount it can accumulate and affect the health of animals and people.

The acutely toxic chemical dioxin has been found in gull eggs collected throughout the Great Lakes. Dr. Douglas Hallett, Canadian Wildlife Services researcher, reported early in December 1980 results of tests of eggs collected over the past ten years but kept frozen until the testing procedures had been proven. He had found the dioxin last August, but his research was not announced until Agriculture Canada and the U.S. Environmental Protection Agency confirmed it in separate tests.



The U.S. EPA criterion for dioxin in drinking water simply states that there should be none; there is no safe level for the chemical. Canadian guidelines do not list a dioxin criterion.

Levels of dioxin in the gulls eggs are declining. The highest levels were found in samples taken from Lake Ontario in 1971: 800 parts per trillion. Levels found in 1980 samples fell to between 44

A June 1980 U.S. EPA report on dioxins named Hooker Chemical and Plastics Corporation of Niagra Falls as the only Lake Ontario producer of trichlorophenols (TCP), a building block of dioxin. Hooker's production ended in 1974. Olin Corporation, also of Niagra Falls, is said to have disposed of 65 tons of dioxin-contaminated TCP and benzene hexachloride (a TCP building block), according to

the U.S. government's 1979 lawsuit. A New York state report points to the Love Canal site and an even larger one, Hyde Park, as the two major sources from which dioxin is leaching.

On December 2, 1980 Canada's Environment Minister John Roberts asked the U.S. government to investigate the dioxin problem and to take action once the sources are identified.

Few laboratories are equipped to handle dioxins. Not only are the analytical methods complex, the amounts of materials being sought are so small that the entire laboratory must be in ultraclean condition at all times so that samples are not contaminated. Further, the safety precautions must be extensive. The safety and cleaning procedures must outdo those of an operating room. Ontario's Ministry of the Environment recently established such a laboratory in Rexdale, Ontario.

The Aquatic Ecosystem Objectives Committee spokesman, Dr. Robertson, stated that unfortunately, for most members of the dioxin family, there are inadequate data. For TCDD, however, the Committee does believe there is enough information. In the Committee report, members recommend "that this material be absent from all components of the ecosystem including air, land, water, sediment and biota. Absent means not detectable as determined by the best available technology." --however advanced that technology becomes. The present detection limits for TCDD are 0.01 ug/kg in tissue and sediment and 0.00001 ug/kg in water.

"Great Lakes Focus on Water Quality", Vol. 6, Issue 4, February 1981, International Joint Commission, Great Lakes Regional Office, Windsor, Ontario.

### BIRTH DEFECTS STUDY ON VIETNAM VETERANS CHILDREN

The Center for Disease Control in Atlanta, Georgia is in the beginning stages of a case control study to determine if Vietnam veterans are at some increased risk of having babies with birth defects. The study will look at babies born over the last decade in Georgia who were born with congenital malformations.

The study in question will examine 10,000 babies who were born with what is classified as major malformations. Major malformations being defined as one which poses a serious life threatening defect, a defect which requires substantial surgery or might engender a substantial psychological problem for the baby.

A pilot study is expected to start in August or September, with a full study beginning in December or January of next year. The Center for Disease Control expects to have a final analysis and report ready sometime around the end of 1983.

For further information write; Contracting Officer, PGO, Center For Disease Control, 225 E. Paces Ferry Rd., N.E., Atlanta, Georgia 30505.

(Transcript of Proceedings, Advisory Committee On

## DEADLY DIOXINS IN BURNED BUILDING DEFY REMOVAL

Binghamton's (N.Y.) tallest building, centerpiece of a modern, multimillion-dollar downtown government complex, is now a landmark of the Chemical Age, an empty monolith filled with deadly dioxins.

What started as a routine electrical fire in the State Office Building on Feb. 5 eventually released some of the most toxic chemicals on Earth throughout the interior of the 18-story structure.

Today only a few people wearing protected garb and respirators are allowed inside. The 725 state employees, separated from their offices and files, are working elsewhere while people try to figure how to make the building safe again.

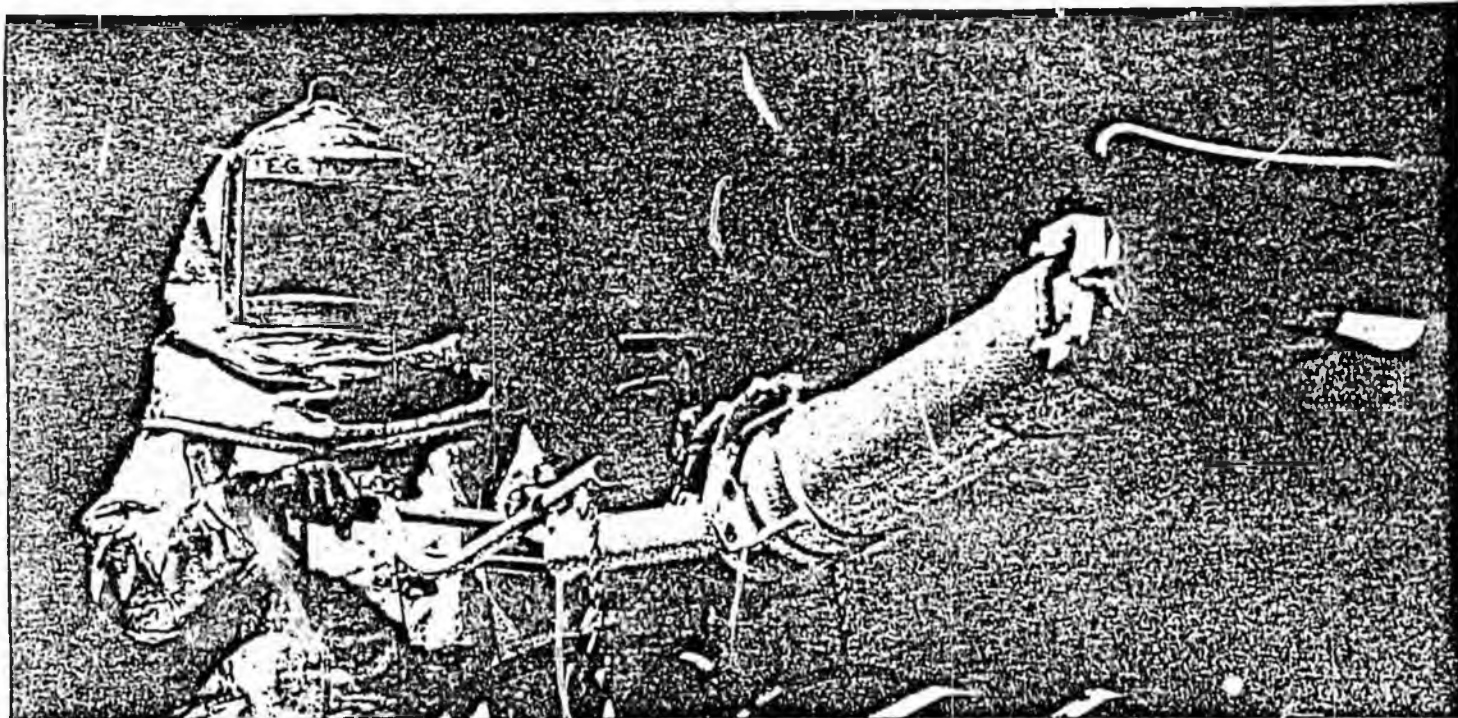
Officials who initially approved a routine cleanup, and called it off when the gravity of the situation was realized, are now awaiting advice from a panel of international experts. People who originally thought the bill would run into the thousands of dollars are now talking about millions of dollars. More than \$1 million was spent on the initial, aborted cleanup.

The poisons spread through the building, coating ventilation shafts, desks, drapes and restrooms with what appears to be a layer of black soot. In the early cleanup, contaminated water from toilets inside the building was flushed into the city's sewer system.

No one immediately understood the severity of the situation. The deadliest chemicals were not discovered until eight days after the fire, after some workers had walked through contaminated areas without protection.

"We've been trying to comprehend the magnitude of this incredible, astounding incident, which, quite frankly, none of us could believe was happening for the first time anywhere right here in quiet Binghamton," said Dr. Arnold Schechter, the Broome County health director.

Schechter, who is a medical doctor and professor of preventative medicine at the state university's medical school here, walked through a contaminated area in his street clothes. Now he minces no words when discussing the seriousness of the problem.



What happened in the State Office Building on Feb. 5 apparently has never happened before in this country, but authorities say it could happen again, in any of the nation's large office buildings.

Binghamton Fire Chief Ed Faughnan says his investigators have not completed their study of the fire, but they do know that more than 180 gallons of coolant laden with toxic polychlorinated biphenyls, commonly known as PCBs, leaked out of the building's electrical transformer into the fire.

The intense heat and oxygen combined with the PCBs to produce an even more deadly poison, dioxin, the same form of dioxin found in Agent Orange, widely used as a defoliant during the Vietnam war. Veteran's lawsuits throughout America blame Agent Orange for physical ailments and birth defects.

"We now have a new environmental hazard to live with," he said in a recent interview. "We have a unique event here that could only happen in the Chemical Age. Nothing quite like this has ever happened before, not in an office building this way, not in a city. What happened here had only happened in the laboratory.

"The question that is raised by all this is: Do we have this health hazard in most office buildings across the country?"

Transformers using coolant containing PCBs are common throughout the country, Schechter said. In 1979, after a similar, but less extensive, incident in Toronto, the Canadian government banned such transformers.

## A NEW BREED OF ENVIRONMENTALIST

John Heubach Jr. has these feelings. He wrestles with them every day, but they won't let him alone.

Last October, Heubach's mother died of cancer, and he feels that just maybe the Reilly Tar & Chemical Co.'s former creosote plant in St. Louis Park had something to do with her disease. The plant was only five blocks from where John Heubach grew up.

He has other feelings, too. For the past two years Heubach, a Vietnam-Era veteran, has been fighting to establish a connection between the herbicide Agent Orange and a plethora of ailments afflicting veterans all over the country. Just maybe, he feels, Agent Orange, which was sprayed to defoliate the jungles of Vietnam, is slowly killing these men.

As an "activist" or "environmentalist", Heubach doesn't fit any mold. He's not a burned out protestor, he's not particularly paranoid and he's not particularly religious. He attended college but he's not a scientist. And yet, he has these feelings, intuitions that he's often hard-pressed to explain with solid evidence. But he's been right enough times that it's hard to ignore them.

Essentially, Heubach is just a 33 year-old guy who's watched too many people get hurt and too many people die. He feels that just maybe the poisoning of our planet can be stopped, and he's compelled to do his part.

Maybe he gets it from his mother.

Before Eve Heubach died, she had a feeling that just maybe water contaminated by wastes from the old creosote plant had something to do with the breast cancer that struck her in 1977 and Marjorie McFadden in 1974 and Delores Schander in 1975 and Corrine Hunt in 1976 and Mary Schwantz in 1978.

By 1979, these people and 14 others who lived within several blocks of the Heubach house, at 3325 S. Texas Ave., had developed cancer - the 14 other cancers of different types.

In 1978, about a year after Eve Heubach found out about her disease, the first of five municipal drinking wells in St. Louis Park was closed when analysis showed trace amounts of PAH compounds - cancer-causing chemicals that have been linked to the creosote wastes. Black, oily creosote, used to weatherproof railroad ties and telephone poles frequently were spilled at the Heubach site.

Eve Heubach wrote to the Minnesota Department of Health in December 1979, listing those with breast cancer and 14 others in her neighborhood who had other cancers. Health officials subsequently conducted a study. In November 1980, the Department reported that although there seems to be an above average breast-cancer rate in St. Louis Park, there is no evidence that it is related to contamination of the city's water supply.

The report was published one month after Eve Heubach died.

Just before his mother died, John Heubach promised her that he'd try to get some better answers. He had this feeling: just maybe the whole story isn't known.

People like John Heubach have emerged in the past ten years as a new breed of environmentalist.

Consumer advocate Ralph Nader has dedicated his new book, "Who's Poisoning America", to such people: "the victims of environmental violence who, by fighting back courageously in communities across the country are defining a new kind of patriotism."

Dramatic statements, these. But the truth - as usual - is more complicated than winners and losers. In the end, the truth becomes a distillation of scientific certainty, economic reality and political expediency applied with a heavy dose of righteous indignation, intuition and raw emotion.

In this sense, St. Louis Park's pollution problem and John Heubach's story in particular, illustrate the national dilemma over pollution and toxic chemicals.

Heubach and his father, John Sr., and his brother Chuck understand the dynamics of the situation. How the public officials in St. Louis Park, though concerned about a possible health threat, on the other hand don't want to cause a panic. And how everyone in the area is worried about property values going down.

And most important they understand how hard it is to prove that seeping creosote caused the cancer that killed Eve Heubach. And they know that proving a connection won't bring her back.

That leads to a difficult question: What's the point in even trying?

In John Heubach's case, the point is ethical as well as emotional. As a child, Heubach looked

forward to camping, hiking, hunting, fishing, or just being outdoors with his dad. After high school (St. Louis Park class of 1966), Heubach served in the Marianas Islands with the U.S. Coast Guard. He loved the jungle and spent hours atop a cliff, gazing at the Pacific. He left the Marianas an environmentalist.

Though he didn't serve in Vietnam, Heubach saw the results of war while recovering in Chicago's Great Lakes Naval Hospital from a 1969 auto accident.

During his six month convalescence, Heubach watched combat veterans who still had arms shove the faces of those who didn't. He saw mothers and girlfriends enter the ward and watched their pained expressions as they spotted their sons and lovers.

In January 1970, when he got out of the Coast Guard, Heubach decided to enroll at the University of Minnesota and eventually found himself involved in environmental issues.

One of his first big battles was for minimum exposure standards for asbestos.

Back then, he and others had a feeling that just maybe asbestos caused cancer. While working for the Minnesota Public Interest Research Group, a consumer advocacy organization, Heubach learned how hard it is to protect people from themselves. The asbestos workers were a hard lesson.

Heubach continued p.8

The Binghamton fire and explosion came at 5:30 a.m. Schecter noted.

"If this had happened at 9 a.m. in a building like the World Trade Center there would have been a lot of dead people, and a lot of people whose health would have to be monitored the rest of their lives, and a lot of babies would be born with problems. There would be reason to worry," Schecter said.

Still, as many as 200 people were exposed to the dangerous chemicals, including one pregnant woman who worked in a City Hall office contaminated by cleanup workers who unknowingly tracked dioxins in with them, Schecter said.

"We're faced with a problem we don't know much about," he said. "We don't know much about the medical consequences of exposure to low level PCBs and dioxins."

The chemicals contaminating the building have been linked to cancer, and are known to attack the liver and nervous system, cause fetal damage and remain in the human body, he said.

Two workers involved in the initial cleanup say they will sue the state, contending they were not informed of the dangers they faced.

The reactions of state officials have ranged from alarm to attempts at humor.

Governor Hugh Carey, for example, offered to drink a glass of PCBs and clean the building with a vacuum cleaner. The remarks caused a small furor in Binghamton, and the Governor later backed off, saying he had only meant to warn New Yorkers of what he called overreaction to the contamination.

Schecter said that a glassful of the toxins in the building would kill Carey. "It's Agent Orange, essentially, not just PCBs in that building. They're all bad," he said. "Depending on the Governor's system, he would be dead within a few minutes or hours."

"Deadly Dioxins In Burned Offices Defy Removal", Associated Press, Monday, March 16, 1981, St. Paul Pioneer Press

### HERBICIDE RISKS

Thousands of citizens nationwide have suffered individually from chemical contamination - some near forested areas, from herbicide spraying by the Forest Service, and lumber interests, some from exposures through accidents involving chemical and farm workers, over-spraying into yards, gardens or farm areas, as a result of herbicide use along rights of way, roadsides to clear weeds and brush for utilities. They do not receive the attention that disasters such as the Binghamton office building does.

Many victims react with disbelief at the lack of concern from local, county, state and federal agencies to their plight. We are told risks are to be tolerated, that chemicals are economically beneficial to our very lifestyle, that herbicides are essential to crop growth, that all weeds are a blemish on our lawns, thus chemicals are applied regardless of ingredients (2,4-D, the other half of Agent Orange, is used as a weed killer in commercial lawn care) and sprayed on parkways, private lawns, parks, schoolgrounds, and golf courses. This in spite of the fact research has proven 2,4-D carcinogenic, teratogenic, and mutagenic in laboratory animal tests.

Any concern over the widespread use of these poisons is considered an "over-reaction", that if the product is used as directed, no serious problems will result. But they do. They continue to be tested in our environment, ecologically they are in direct contact with all living organisms on land and water. People continue to be exposed, and waterways and ground waters are contaminated, while hazardous wastes provide the very real possibility that every state has its own "Love Canal".

Still science is allowed to produce poisons for public use without proper safeguards, or without antidotes which are necessary when disasters do occur. Chemical companies sell them without directions for their disposal, and industries using them take no responsibility for their safe disposal, while the Environmental Protection Agency has prepared no enforced precautionary measures for the regulation and restrictions covering all of these actions.

The real "horror" is that we seem willing to accept the "risks" of these chemicals which may be poisoning us and unborn generations to come, in order to kill weeds and protect the short-term economics involved.

Mrs. B. Kent  
Edina, Minnesota

### MAN-MADE ENVIRONMENTAL CRISIS

The following story illustrates an historic example of how man's ignorance of the ecological system can result in a man-made environmental crisis.

It happens that malaria was widespread in Malaysia. In an effort to control mosquitoes, the Malaysian government undertook massive spraying with DDT. The poisoned Mosquitoes were then devoured by roaches. In turn a shy and obscure animal from the Malaysian Archipelagos, the Gecko lizard, whose all-consuming passion is cockroaches ate the poisoned roaches. The residual poison was not sufficient to kill the hardy little lizards, but it did affect their central nervous system, slowing them down and making them easy targets for hungry cats. The cats, however, were very vulnerable to DDT and died by the hundreds. As the cat population declined, the number of rats skyrocketed, bringing both terrible economic loss and the threat of an explosive outbreak of Bubonic Plague (The Black Death). At this point the World Health Organization stepped in and recommended discontinuation of DDT; and then -- to restore the ecological balance -- they airdropped plane-load after plane-load of cats into remote areas where the rats



roamed fearlessly.

Like certain other animals, man has a remarkable propensity to foul his own nest, but he seems to be the only species on earth who then attempts to chop the tree down behind him.

(Great Lakes Focus On Water Quality, Vol. 7, Issue 1, May 1981, International Joint Commission.)

Heubach continued

"I remember having to do battle with the lathers and the plasterers and having to try to convince hard-working people that there are problems with the environment," he says. But he and other environmentalists persisted and Heubach now considers the asbestos battle his sweetest victory in 11 years as an environmental activist.

Since then - in fights over the possible adverse health effects of Agent Orange, in his fight to get to the bottom of the high cancer rates in St. Louis Park - Heubach has learned that clear victories are few and far between, and that fighting is more important than winning.

Heubach knows enough about these thorny problems to recognize their complexity and yet to never despair of a solution. This may be because he's seen the stakes grow higher as his family and friends succumbed to diseases he feels were environmentally ignited.

And now more than ever he's learned to trust his feelings.

\* \* \* \* \*

In Heubach's old St. Louis Park neighborhood, several blocks southeast of the old creosote plant, there is a lead smelter owned by Taracorp Industries, which is suspected of polluting the soil with lead. And though it has nothing to do with Reilly Tar & Chemical, the situation surrounding the lead smelter, its property and its neighbors, graphically illustrates the environmental dilemma now facing the Heubach family.

Taracorp refuses to allow state officials on the property to monitor lead concentrations in the soil. Next to the lead smelter is Golden Auto Parts. In May 1980, Harry Golden, the owner, sued Taracorp Industries, its parent Taracorp Inc., and National Lead, former owner of the smelter, charging, among other things, that the smelter violates the federal clean air act for lead emissions.

In 1979, two of Golden's junkyard dogs died. Autopsies attributed the deaths to lead poisoning. Subsequently, 11 employees at the junkyard - including Golden himself -- were found to have high concentrations of lead in their bloodstreams. Altogether, four dogs have died and several employees have experienced severe headaches and vomiting while working in the yard. Manager Bob Auberger said one employee was taken by ambulance to the hospital after collapsing one day in 1970.

Auberger and his son, Gary, have had elevated concentrations of lead in their bloodstreams. Gary recently was examined at the Mayo Clinic, where doctors found high lead concentrations and diagnosed a nervous condition. Lead intoxication can cause damage to the central nervous system as well as headaches and vomiting.

The PCA says that Taracorp and their associated properties are the source of the lead. But the agency believes sources in addition to the stack emissions must be contributing to the problem.

Golden disagrees.

"This business is 56 years old and we've never had a lead problem until we moved out here," he says.

"It's absurd, I'll tell you that," Golden says. "It's like a comic strip."

As with the creosote case and, indeed most battles, inconclusive studies make it difficult to fix blame. Even if the fact of contamination is unassailable.

That's the point. If Harry Golden, whose business is right next door to a lead smelter, hasn't been

able to prove that lead from the smelter killed his dogs and poisoned his employees, then how can John Heubach expect to prove that his mother's cancer was caused by creosote spilled by a plant five blocks away? Or that veterans were poisoned by a herbicide in Vietnam 10,000 miles away and 10 years ago?

It is the classic environmental dilemma, says Heubach. Nobody takes any action until the studies come in and the courts make their decisions. And the question that never quite gets answered is this: Can we afford to wait?

Heubach has this feeling that just maybe we can't.

(Condensed from "Tracking Pollution in St. Louis Park", by John Oslund, The Minneapolis Star, Wed., June 3, 1981.)

Editors Note: John Heubach is the Director of Minnesota's Veterans Coalition and the Midwest Coordinator for the National Veterans Task Force On Agent Orange.

## HAZARDOUS DUMPING: CITIZENS' HOTLINE



The Pollution Control Agency, in Minnesota, has established a toll-free HOTLINE PHONE for citizens to report suspected improper hazardous waste disposal sites. The number is: 800/652-9747.

Agency officials said citizens should look for abandoned or buried barrels, oil or sludge spills, chemical odors and dead vegetation or wildlife near suspected disposal sites.

President Jimmy Carter was concerned about U.S. firms exporting hazardous products to foreign nations. President Reagan isn't. And therein lies the potential for a serious international problem that promises to become a nightmare for unsuspecting citizens of both the U.S. and the world.

While hazardous products include everything from drugs to pesticides, the major concern of the moment centers on pesticides. According to Agriculture Department statistics, the U.S. chemical industry exported more than 670 million pounds of pesticides in both 1978 and 1979. Most of the exporting involved pesticides banned in the U.S., including such notables as DDT and Aldrin. Most of the poison is ending up in Third World nations struggling to improve their agriculture production.



Ironically, foreign growers, unrestricted by either warnings or rules, apply heavy doses of the poisons to their crops, then turn around and ship the produce to U.S. markets. American shoppers, assuming that whatever is on the grocers shelf is safe, purchase it, take it home and feed it to their families.

Testing is performed, of course, but it's random. The Agriculture Department generally tests one sample of meat for every 3,000 pounds imported. Furthermore, government tests are able to detect only about 30 of the 94 pesticides used - legally or illegally - on coffee crops grown in nations exporting to the U.S.

Although banning exports of all pesticides not approved for use in the U.S. would solve, temporarily at least, part of the problem, it would not be the final answer. To get around such restrictions a number of U.S. chemical firms already have opened branch plants in foreign nations and now are manufacturing highly profitable and dangerous pesticides outside U.S. jurisdiction. Others are manufacturing the pesticides in the U.S. and shipping them to foreign subsidiaries.

Experts are convinced the first step toward stopping this poisoning of the world must be taken in the U.S., in the form of a ban on exporting hazardous pesticides. The next step would involve the adoption by major Western industrial nations of strict pesticide guidelines. Once these two steps are taken, the third step, an international agreement, can be worked out.

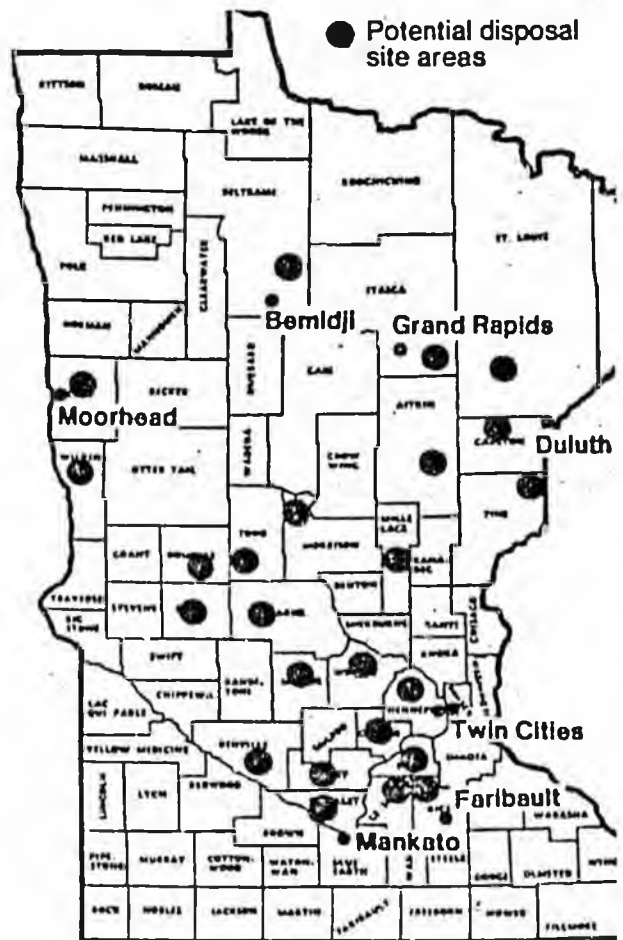
Under the Carter administration, environmentalists had hope of achieving such agreements. Since Mr. Reagan's "damn the regulations, full exporting ahead" pronouncements, though, their hopes are fading fast.

It all becomes rather disconcerting - especially when eating or drinking something grown or produced in a Third World nation.

St. Paul Pioneer Press/Dispatch April

The state's Waste Management Board designated 2,800 square miles of land in 24 counties for consideration of a disposal site for Minnesota's annual production of 150,000 tons of hazardous waste.

The Board must present a list of 12 to 20 possible sites to the Minnesota Pollution Control Agency by August for further analysis. The 2,800 miles of land currently under consideration was selected using information supplied by the Land Management Information System's regional screening process. The candidate sites, which touch upon about 190 townships in 24 counties, have met the preliminary criteria of not containing any productive farm land.



The Boards' release of the potential sites follows three rounds of statewide meetings which drew hot public reaction from people who feel threatened with the possibility of living near a hazardous waste site.

"We know this is an emotional time," said Al Shilepsky, hazardous waste coordinator for nine-member board. "But we've got to get rid of this midnight (illegal) dumping. There has got to be something the state can monitor and keep track of," he said.

"We are really trying to solve a problem... Unfortunately, the people in those areas," Shilepsky said, pointing to a map showing potential disposal sites, "...they think we are trying to create a problem."

(St. Paul Dispatch, Thursday, May 28, 1981, p.1)

## OPERATION RANCH HAND STUDY UPDATE

The U.S. Air Force's Operation Ranchhand study will involve a three-phased epidemiologic approach, based on physical examinations, a mortality and a morbidity study, as well as a long-term follow-up study. The follow-ups are scheduled for years 3, 5, 10, 15 and 20.

The study subjects are 1,196 Air Force personnel that worked under the operation code-named "Operation Ranchhand". The study subjects fall into three broad categories; those who sat up front and who should have received the lowest exposure; the crew chiefs and men who took care of the aircraft who would have received moderate exposure; and those located in the rear of the aircraft who operated the console tank during spraying missions who should have received the highest dose of herbicide exposure.

Col. Lathrop of the US Air Force, in presenting a status report to the VA Advisory Committee, stated his opinion that, "even under conservative biomathematical models, the ranch handlers received approximately 1,000 times a higher dose than the

average dose of an average ground troop."

The Air Force has already commenced its mortality study of the ranchhandlers. As of December 1, 1980 there were 50 recorded deaths in the ranchhand population. Of the 1,196 ranchhandlers about 20% are still on active duty, 5% Reserve or National Guard, 40% retired, 30% separated and roughly 5% deceased. The following table provides a breakdown of the known causes of death in the ranchhand population.

### Ranch Hand Mortality Study - December 1, 1980

#### Accidental Deaths;

Killed In Action (Vietnam)	18
Aircraft (Non-Combat)	9
Other (Motorcycle, auto)	2

Unknown Cause:	7
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#### Disease States

Heart	5
Cancer (Lung, Renal)	3
Liver (Cirrhosis)	4

Suicide	1
---------	---

Total Known Dead:	50
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The Air Force mortality study was conducted through the Air Force personnel and financial systems. Following this point they will utilize the Social Security and IRS system to make further determinations as to alive/dead status. The objective after obtaining all deaths from both the study and control groups, will be to pursue the death certificates and to correlate them with all known medical records on each individual within the study.

In response to a question regarding accidental exposure and how this factor will be dealt with, Col. Lathrop responded that;

"The anecdotal stories of many of the flyers are genuinely terrifying. One would not expect a pilot and navigator sitting up front in the aircraft to get outside their aircraft literally with their flight suits dripping with the herbicide, but that, in fact, was the case in many circumstances.

Again, we've done the simulation studies to look at vapor trails within those aircraft in various operational configurations, ie, flying 150 knots indicated air speed, 150 feet off the deck with



the rear cargo door open. All pilots and navigators flew with the cockpit windows open because of the intense ground fire. And what happens when one of those pipes burst...or that main tank took a hit, that vapor was literally pulled forward into the aircraft and out the cockpit windows. So the folks up front, indeed, received very substantial exposure, but, again, in relative terms nothing like the poor fellow in the back. He was doused repeatedly."

(Transcript of Proceedings, Advisory Committee On Health Related Effects of Herbicides meeting on February 4, 1981)

### NEUROLOGICAL TEST ON AGENT ORANGE VETS COMMENCES

Research has been initiated at a VA hospital in Buffalo to contrast the nerve conduction velocities both of 100 Vietnam veterans complaining of tingling in the feet and legs and of 100 controls.

Dr. Stephen Barron, director of the medical center's EMG laboratory and an assistant professor of neurology at the State University of New York at Buffalo, said an electrical stimulus will be applied to the calves of the subjects' legs to measure conduction at the sural and perineal nerves.

"It may be that minute traces of dioxin, persisting in the body at levels too small to measure, are damaging the myelin or some other element of the nerve, or that some veterans were more susceptible to the effects of dioxin than others for unknown reasons or through receiving larger doses of it," Dr. Barron said.

("Criticism Prompts New VA Agent Orange Exam", U.S. Medicine, March 1, 1981)

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## FEATURE

### "THE INDUSTRIAL BIO-TEST CAPER"

"The Industrial Bio-Test Caper" was uncovered by Paul Merrell and published in the Winter 1981 edition of NCAP News. The following consists primarily of excerpts from his article (with permission).

"Industrial Bio-Test Laboratories, Inc., a subsidiary of Nalco Chemical Co., is the nation's largest commercial toxicological testing company. Over the years, IBT has performed thousands of studies on pesticides, drugs, cosmetics and other chemicals. On the basis of IBT data, hundreds of products have been registered as safe for use with government agencies by companies which contracted with IBT to develop the data.

"The story of how the IBT scandal was discovered is interesting. According to Science magazine [December 23, 1977 issue], 'In 1975, Food & Drug Administration officials received a tip from an employee of Syntex Corp., a drug manufacturer in California, that there were problems with tests that Syntex had submitted to the FDA. An FDA official, instead of pulling a file on Syntex, pulled one by mistake on Industrial Bio-Test, an independent laboratory that had done a study for Syntex on an antiarthritic drug called Naprosyn. On reading it, he found enough deficiencies to warrant an inspection.' Adrian Gross, then associate director of nonclinical studies in FDA's Bureau of Drugs, was quoted as saying, 'What we found there is enough to make your hair stand up.'

"Science reported that an investigation of IBT was begun by the FDA, the Environmental Protection Agency, the National Cancer Institute, and the Inspector General of the Department of Health, Education & Welfare.

"In 1978, the Washington Post [March 9, 1978] reported that 'federal investigators say they have evidence that the nation's biggest commercial testing laboratory deliberately falsified data submitted to the government on potential carcinogens and that at least four major pesticide manufacturers were aware of the problem.' The Post said EPA and FDA had referred results of their investigations to the Justice Department, and quoted 'knowledgeable federal regulatory officials' as saying audits of IBT data 'turned up far more problems than investigators had originally expected.'

"At the beginning of this thing, we thought we were dealing with problems confined to just one three-year period,' said a senior official involved in the probe. 'Now we are in a position where we have to regard all of IBT's data as suspect.' According to the Post, the extent of the problem caused by the lab's alleged data tampering was described by a senior official involved in the investigation 'who said the World Health Organization, which sets international safety exposure standards for potentially harmful chemicals and pesticides, also relied heavily on data from IBT.'

"The report said IBT changed its top management after the data tampering took place. Some tampering took the form of 'substitutions of healthy animals kept by IBT at the lab for animals that became ill during the tests.' Investigators also discovered that IBT researchers failed in some cases to number test animals, making it impossible to tell which were affected by test substances.

"The Wall Street Journal [February 21, 1978] said irregularities at IBT involved 'slippups (that) may have been deliberate.' A former IBT technician told of a 'toxicologist's pretending to kill rats for autopsy to examine a drug's effect on them; in truth, he said, the rats had already died of neglect or of exposure to the drug, but the autopsy findings didn't reflect this. The technician figures that the pretense was aimed at concealing inadequate animal care or hiding the high death rate among animals exposed to the drug, or both.'

"One study, the IBT technician said, was termed 'the magic pencil study' because complete blood analyses appeared in the final report, even though most of the analyses had never been performed. Chevron Chemical (now also under investigation by the Justice Department) 'concluded that the IBT rat study had lasted just 18 months, and that six months of fabricated data had been added to the final report.' (The study involved the insecticide Orthene, marketed by Chevron.)

"Syntex Corp. filed a lawsuit for unspecified damages against IBT because of problems they had discovered with the tests on Naprosyn. According to Syntex, there were serious shortcomings in tests: incomplete records, evidence of tumors that didn't appear in the final report, rats recorded as having died twice, and other animals whose weights continued to be logged along with other test animals long after they had been listed as dead.

"The Journal said, 'the uproar grew louder ...when IBT said that Mr. Frisque [IBT's former president who, in turn, had replaced the previous president in 1977] had inadvertently ordered the shredding of hundreds of records requested by the EPA. Among the shredded data were seven long-term studies on the cancer-causing potential of substances used in plastics, herbicides, and cyclamates, the artificial sweeteners.'

Another source cited by Paul Merrell was a Canadian reporter, Peter von Stackelberg. In the November 4, 1980 Leader-Post, von Stackelberg reported that, according to EPA official Dr. Diana Reisa, "nearly 250 of 600 studies done by IBT--and later reviewed by U.S. and Canadian government authorities--were found to be invalid." The biggest problem concerned "long-term studies--studies designed to turn up cancer and other tumors, reproductive disorders, problems in the second and third generations of the laboratory animals that were exposed....Reisa said 99 per cent of those long-term studies were invalid. Other problem areas were:

- "Tests for birth defects - 76 per cent invalid;
- "Tests for mutations - 50 per cent invalid;
- "Tests on toxic effects to the nervous system - 50 per cent invalid;

•"Tests to determine how toxic the chemical is if swallowed, breathed or absorbed through the skin - 50 per cent invalid; and

•"Medium-term tests for a variety of effects - 50 per cent invalid."

Unfortunately, as Merrell's article points out, "One vexing thing about the IBT fiasco is the continuing secrecy. It is nearly impossible to determine what studies are valid for individual chemicals, the information that would be most useful to persons desiring to protect themselves from the chemicals' effects. EPA's Reisa who has been assigned to other duties since granting her interview with the Canadian reporter, said 'only the companies manufacturing the products would be notified of problems with specific chemicals.'

"At one time, EPA imposed a moratorium on agency action involving pesticides supported by IBT data. But by July 1980, EPA had announced that under a new policy, 'in cases where virtually the entire data base is invalid and there is a strong possibility of substantial health risk, the Agency will consider cancellation. In cases of major data gaps, the registrant (chemical company) will be required to fill the data gaps as soon as possible, and in cases of minor data gaps, the gaps will be filled through the Registration Standard Data Call-in process' (a process that takes up to five years before a company is even requested to begin new studies).

"Estimates vary of the actual number of tests performed by IBT which will have to be redone. But the Wall Street Journal reported that EPA is asking 235 chemical companies to reexamine 4,363 IBT tests that were crucial in obtaining federal clearance to market 483 different pesticides."

Four years later, the situation remains virtually the same. All the chemicals involved are still registered for use in the U.S. (Sweden, on the other hand, banned six chemicals whose "safety" was based on IBT data: captan, captafol, alachlor, terbutryn, terbuthylazine, and metabromuran.)

"And the problem," reports Paul Merrell, "doesn't end with studies performed by the IBT. EPA spokesman Jim Sibbison said the agency is auditing test results from 'nine or ten laboratories because of the possibility of careless or deliberately careless work.' Previous massive deficiencies in registration data and record-keeping have been discovered for tests performed by G.D. Searle & Co. [a leading pharmaceutical manufacturer], Biometric Testing, Inc. [an independent laboratory], and other laboratories. Numerous other laboratories have been found wanting in good lab practices and recordkeeping, with university laboratories generally ranking the lowest."

At the end of Merrell's article is a listing of 222 pesticides which were registered for use on the basis of IBT's data. (Identification of other pesticides involved have not yet been made available to the public.) The list includes such widely used chemicals as 2,4-D, picloram, cacodylic acid, Silvex, atrazine, carbaryl, dicamba, MCPA, and orthene.

## 2,4,5-T HEARINGS IN RECESS

On March 1, 1979, the EPA issued an emergency suspension order on registration of 2,4,5-T and Silvex (2,4,5-TP) for use on forestland, pastureland and right-of-ways. Temporary suspension hearings began, then moved into permanent cancellation hearings. On one side is the EPA, the Environmental Defense Fund and the Northwest Coalition for Alternatives to Pesticides, and on the other side is Dow, various industry associations, other chemical manufacturers, and the Department of Agriculture. At stake, of course, is whether or not 2,4,5-T and Silvex will be used in this country. Also at stake is whether or not the Environmental Protection Agency can actually protect the environment--or humans.

Last month, NCAP announced that the hearings had gone into temporary recess in order to work out a possible settlement. The recess, requested by both Dow and EPA, came as a surprise as EPA's case was felt to be going well. Worse yet, the negotiations are being held behind closed doors.

While a great deal of information on safety, effectiveness and economic feasibility has been presented on both sides, there is evidence that one reason Dow requested the recess was to forestall the release of certain damaging documents from its files.

NCAP requests that "individuals and organizations write to both the EPA and the White House, urging them not to settle for anything less than complete cancellation of all uses" of 2,4,5-T and Silvex. NCAP also asks you to "request that any continued use of 2,4,5-T and/or Silvex be determined in a public process, not behind closed doors, and that all of the evidence be presented so as to have a complete public record."

As of the publication date of this issue, the hearings were evidently still in recess. However, it is very likely that the recess will end while this issue is still in the mail. There is a strong possibility that EPA will drop their suspension order altogether, putting 2,4,5-T and Silvex back into our food, water, air, and land. Therefore, we urge you to write to EPA and the White House to request that no settlement be made and that the hearings continue on schedule.

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President Ronald Reagan  
The White House  
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The U.S. National Park Service has discontinued the use of 2,4-D in its 325 parks and recreation areas.

Park Service Director Russell Dickinson ordered all superintendents in a memo to stop using 2,4-D immediately. According to a story in the Washington Post, "Future use is to be allowed only if the superintendents convince their regional directors that no alternative methods are available to accomplish indispensable control."

Spokesman Duncan Morrow said the action came in response to environmental groups, many of them based in the capital, who argued that the herbicide causes spontaneous abortions, bleeding of fetuses and birth defects. He said the evidence is not sufficient to make a definite judgement, but that "it's better to err on the side of conservatism and not use a potentially dangerous chemical unless we can find that our fears are unfounded."

## LEGAL UPDATES

## SUIT FILED TO STOP SPRAYING

On April 15, 1981, Paul Merrell filed a temporary restraining order in U.S. District Court of Oregon to prevent the spraying of 6,305 acres of the Siuslaw National Forest. Merrell, who investigated the Industrial Bio-Test fraud (see Feature article, this issue), has charged officials of various federal agencies, including the Department of Agriculture, the Forest Service, EPA, Bureau of Land Management, and the Secretary of the Interior, with violations of the National Environmental Policy Act of 1969.

His complaint points out that a number of the chemicals to be used in the spray program are currently under investigation by the EPA for insufficient or invalid safety data as a result of falsification of scientific data by Industrial Bio-Test Laboratories. These chemicals include 2,4-D, glyphosate (Roundup), picloram (Tordon), ammonium ethyl carbamolyphosphanate (Krenite), and 3,6-dichloro-o-anilic acid (dicamba).

Merrell's suit charges that:

- The draft environmental analysis report, published January 23, 1981 by the Department of Agriculture, violates the National Environmental Policy Act by making no analysis of environmental effects and by not acknowledging "gaps in relevant information or scientific uncertainty" in regard to the abovementioned chemicals.

- The Department of Agriculture's "finding of no significant impact", also published January 23, 1981, is totally without basis because of the deficiencies of the environmental analysis report.

- The Forest Service plans to proceed with the spray program before a final environmental impact statement has been prepared, which is also in violation of the National Environmental Policy Act.

By failing to respond to Merrell's request for information on the adequacy of the data supporting registration of the pesticides, the Administrator of the EPA is in violation of the Federal Insecticide, Fungicide & Rodenticide Act, which requires such information to be made available to the public within 30 days of registration.

The temporary restraining order was not granted, however, Merrell was invited to file again after the Forest Service awards their contract for the spray program.

## LEGISLATIVE UPDATES

### AGENT ORANGE BILL REINTRODUCED

On March 12, 1981, Congressman Tom Daschle reintroduced the Vietnam Veterans Agent Orange Act, which had originally been introduced by Daschle on January 30, 1980 as HR 6377. (See Agent Orange Newsletter, Volume I, Issue 1, page 4.)

The new bill, HR 2493, would amend Section 512 of Title 38 to allow service-connection for certain herbicide-related illnesses which are disabling to a degree of 10% or more. (Section 512 already allows service-connection for certain "presumptive" diseases--diseases which take longer than one year to develop; for example, tuberculosis.)

Substantially the same as last year's bill, HR 2493 would require the VA to determine--and to establish uniform regulations for--"what diseases medical research has shown may be due to exposure to herbicides." (The VA currently considers chloracne, the skin disease, to be the only illness caused by herbicides. However, no guidelines on chloracne exist within the VA system, either for disability ratings or diagnosis.)

Congressman Daschle pointed out (in the March 25, 1981 Congressional Record) that while a total of 6,164 herbicide claims have been filed with the VA as of February 2, 1981, only 24 have been allowed. Claims for "skin conditions" accounted for 2,962 of the total; yet only 5 of those claims for "skin conditions" were allowed.

Thus, HR 2493 would shift the burden of proving cause and effect relationships away from the veteran for some diseases, at least, and would require the VA to prove that a veteran was not exposed before denying service-connection.

The bill would also require the VA to determine--and to establish uniform regulations for--"what birth defects, if any, may result from exposure of the natural parent of a child to herbicides." Any child determined to have an herbicide-related birth defect disabling to a degree of 10% or more would also be considered to have a service-connected disability.

### AGENT ORANGE/READJUSTMENT BILL

On May 7, 1981, a bill was introduced which would provide some type of medical care to veterans exposed to Agent Orange, and would extend the Vets Centers until September 30, 1984.

Under HR 3499, any veteran who served in Viet Nam would be eligible for VA health care for illnesses which may be associated with exposure to Agent Orange, if the VA physician determines that medical treatment is necessary. Veterans exposed to Agent Orange would be given priority treatment at VA hospitals.

HR 3499 would also require the VA to design and conduct an epidemiological study of the long term health effects on Viet Nam veterans of the phenoxy herbicides--and their dioxins--which were used in Viet Nam. In conducting the study, the VA "may include an evaluation of the adverse health effects" in Viet Nam veterans which may have resulted "from other factors involved in such service, including exposure to other herbicides, chemicals, medications, or environmental hazards or conditions."

The bill was originally introduced on April 1, 1981 by Congressman Tom Daschle as HR 2953, and a third part of the bill would have provided vocational training programs for Viet Nam veterans through the vets centers, state unemployment offices, veterans' assistance offices, and VA hospitals. This section, however, was subsequently written into another bill, while the sections on Agent Orange and the Vets Centers were reintroduced as HR 3499.

The House Veterans Affairs Committee approved passage of HR 3499 on May 12, 1981, and it will now go before the full House.

### SPRAY BILL INTRODUCED MISSISSIPPI

The Southern Coalition for the Environment reports that a bill to prohibit the use of 2,4-D and MSMA (monosodium acid methanearsonate) on state highways was introduced in the Louisiana state legislature earlier this year. Introduced by state Senator Elwyn Nicholson, the bill represents the second attempt to restrict the use of these herbicides in the state.

Last year, Senator Nicholson introduced a bill to prohibit their use on all state-owned lands. While the bill survived hearings through three senate committees, it finally died on the senate floor. According to the Southern Coalition, the bill "caused quite a controversy," and nearly resulted in a fist-fight between Nicholson and Senator Bill Dykes, Chairman of the Senate Agriculture Committee. (Nicholson's personal interest in the issue is not surprising: he became seriously ill on two occasions following direct exposure to roadside spraying.)

Last year's hearings were attended by a large number of people who had suffered various illnesses (nausea, headaches, rashes, and flu-like symptoms) following exposure to roadside spraying of the chemicals. The testimony by medical and scientific experts on the effects of the chemicals was summed up by Dr. Stuart Phillips: "To say it has not hurt anyone is medical nonsense. That's like the optimist who falls from a 10-story building and as he passes each floor he shouts, 'So far, so good!'"

Opponents of the bill claimed that mechanical weed-control would cost the state \$2.3 million, and expressed the fear that a ban on state lands would lead to a ban on agricultural lands.

The latest bill, SB 4, would amend Title 48 of the Louisiana Revised Statutes by adding a section which would prohibit the use of herbicides on state highway right-of-ways by state agencies (or its employees) or by any person under contract with the state. Violation of the prohibition would be cause for suspension or dismissal of the state supervisory personnel responsible for the violation.

Just prior to introduction of SB 4, a subcommittee hearing on state use of herbicides was held in the legislature March 31, 1981. Despite the numerous accounts of ill effects during last year's hearings, Bob Odom, Commissioner of Agriculture, testified that there has "never been one proven case in the state of Louisiana where 2,4-D or 2,4,5-T caused any damage to humans," and that 2,4-D is one of the safest compounds on the market."

Mac Corbin, however, of the Southern Coalition for the Environment, cited evidence on the dangers of 2,4-D, including the report published by the Hazard Alert System division of the California Department of Health. (See Agent Orange Newsletter, Volume I, Issue 2, page 6.) According to the report, "the scientific data are sufficiently suggestive of a carcinogenic effect, and demonstrate a weak teratogenic effect, that 2,4-D use should be restricted to areas in which human exposure can be kept to a minimum. Contamination of open water must be monitored and prevented. Broadcast methods of application that could directly expose the general population should be strongly discouraged. Greater consideration must be given to alternative methods for removing unwanted plants."

Corbin also presented testimony regarding safe methods of applying herbicides, including use of the rope wick applicator. According to Senator Jumonville, chairman of the subcommittee, "the rope wick applicator may be an area of compromise." Jumonville pointed out that methods of application, as well as the effects of the chemicals, need to be considered.

(Note: 2,4-D and MSMA are two of the chemicals whose "safety" was based on the IBT stamp of approval.)

The Jackson County Environmental Committee in Ohio reports that a recently enacted state bill (SB 269) has stripped local governments of their right to regulate the disposal of hazardous wastes.

As the public becomes increasingly aware of the hazards of chemicals, more and more communities are becoming opposed to chemical companies dumping in their backyards. While the chemical industry argues that chemical wastes have to be disposed of somewhere, the Jackson County Environmental Committee points out that "hazardous wastes can often be rendered harmless at the place of manufacture.... Many wastes can be recycled. Industrial processes can be redesigned. Less harmful raw materials can be substituted for more harmful ones. Disposal, however, appears to be the cheapest way to get rid of wastes."

To combat the growing opposition to dumping from local communities, the Chemical Manufacturers Association--a powerful industry lobby--drafted model legislation to weaken local government powers. According to the Environmental Committee, Ohio's new law appears to have been based on this model.

Under the law, local governments, such as cities, townships and counties, may not enforce zoning or any other local regulation against hazardous waste disposal facilities approved by the state's Siting Board. But while the CMA's model legislation would have at least provided local representation on the Siting Board, the Ohio version does not.

The new law also changes certain state standards to conform with less stringent federal standards. Ohio EPA regulations had previously required hazardous waste landfills to be surrounded by a 25-foot-thick clay liner in order to prevent the chemical wastes from leaching into the groundwater. The Environmental Committee points out that groundwater, which is often very near the land surface in Ohio, is the only source of water for most of the state's rural population. Proposed federal regulations would require the clay lining to be only three to five feet thick.

The Jackson County Environmental Committee has proposed an amendment to the Ohio State Constitution which would restore local governments' control over their own environments:

"Be it resolved by the people of Ohio that Section Five of Article X of the Ohio Constitution be enacted to read as follows:

"Townships and counties through their legislative authorities shall have the power to regulate their land use relating to hazardous waste disposal. This power shall not be infringed or diminished by the General Assembly. Any statute enacted by the General Assembly which purports to infringe or diminish this power shall be void."

Letters to support passage of this amendment are urgently requested by the Jackson County Environmental Committee.

## DIOXINS FOUND IN 2,4-D

The Winter 1981 edition of NCAP News reports that a team of Canadian scientists has found various dioxins in samples of 2,4-D "taken from a broad cross-section of agricultural and domestic products now on the market." The study, which was made public by Canadian Agriculture Minister Eugene Whelan on October 23, 1980, was conducted by the Laboratory Services Division of the Food Production and Inspection Branch of Canada Agriculture.

In 16 samples of 2,4-D compounds, the scientists found 12 to contain varying levels of di-, tri- and tetra-chlorodibenzo-p-dioxins. (The tetra-CDD isomer found in the 2,4-D samples--1,3,6,8-TCDD--is different from 2,3,7,8-TCDD, which is the tetra-CDD isomer found in 2,4,5-T.)

Of the seven dimethylamine salt samples of 2,4-D, four were contaminated with the dioxins in levels ranging from 5 parts per billion to 584 parts per billion. Two of the three mixed butyl ester formulations were contaminated in levels ranging from 102 ppb to 684 ppb, while all six of the iso-octyl ester compounds were contaminated with the dioxins in levels ranging from 104 ppb to 4200 ppb (4.2 parts per million). The ester products, the scientists pointed out, "showed significantly higher levels of contamination than the amine formulations."

The scientists also analyzed 10 samples of 2,4-D technical acid, and while they found no dioxins, they did find levels of di-, tri- and tetra-chlorodiphenyl ether contaminants.

As a result of these findings, NCAP News reports that on January 27, 1981, Canada's federal agriculture department took emergency action to restrict the use of 2,4-D. According to NCAP, "Canada placed an immediate ban on sale of ester feedstocks to chemical manufacturers producing 2,4-D. Sale and use of 2,4-D ester weed-killers will be permitted for the rest of the year, but all ester formulations must be free of dioxins by 1982 under conditions of the order."

Amine formulations of 2,4-D, however, are not affected by the action. While the study samples indicated that ester products are more likely to contain high levels of dioxins, NCAP reports that the amine formulations of 2,4-D are the most commonly used in Canada.

Approximately 8 million pounds of 2,4-D are used annually in Canada. It is the most widely used herbicide there, accounting for about 25% of total herbicide use.

In the last issue of the Agent Orange Newsletter ("Australian Government To Study Veterans", page 5), we reported that a blood test has been developed which could detect the possibility of birth defects, specifically for those who had been exposed to dioxin.

Developed by Dr. Gerald P. Hirsch, who is currently with the VA Wadsworth Medical Center in Los Angeles, the test is capable of identifying a specific type of genetic damage which would lead to birth defects in the children of the exposed parent. Dr. Hirsch, along with Drs. R.A. Popp and B.S. Bradshaw, originally developed the technique for persons exposed to radiation. ("Amino Acid Substitution: Its Use in Detection and Analysis of Genetic Variants", Genetics, 92:539-547, 1979.)

Modification of the test to identify the specific genetic damage caused by dioxin is nearly completed; approval to begin conducting the Hirsch Test is expected from the VA following completion of their review.

## REPORT ON CLINICAL ECOLOGY

The Southern Coalition for the Environment, in their Pesticide Newsletter (Volume 3, No. 2), has a listing of publications on clinical ecology, a relatively new field of environmental health. Clinical ecology, explains the Coalition, is the study of an individual's reaction to environmental factors. "One of the problems we encounter often with pesticides is individuals who have become overexposed. Once an individual becomes sensitive to pesticides, they can have adverse reactions from minute doses.... People can become susceptible to pesticides either as a result of a massive exposure or more sustained, frequently repeated exposures."

The Southern Coalition reports that the Human Ecology Action League (HEAL) is one of the primary groups in this field. HEAL publishes a newsletter called the Human Ecologist which, according to the Coalition, is "a wealth of information on current material and information and includes a 'pesticide update' in each issue." Subscriptions to the Human Ecologist are \$12 per year. Of particular note, says the Coalition, is Issue No. 7, February 1980 (\$2.00), which contains "essential" information on "how these toxic substances affect not only the individuals who have been hypersensitized, but every one of us."

More information on clinical ecology can be obtained from either the Southern Coalition for the Environment or from the Human Ecology Action League.

## PESTICIDE CLEARINGHOUSE IN TEXAS

The Texas Pesticide Hazard Assessment Program is serving as a national clearinghouse for pesticide information. Part of the Epidemiological Studies Program at Texas Tech's Medical School, the program has extensive files on pesticide accidents, studies, resources, bibliographies, etc.

To report a spray incident or to obtain information on the pesticide of your choice, call them at 1-800-531-7790. In Texas, call 1-800-292-7664.

## GROUP SEEKS ACCESS TO INFORMATION ON CHEMICALS

The California Agrarian Action Project in Davis urgently needs your support in their efforts to make information on safety and health effects of pesticides used in California available to the public. As the Project points out, such information is vital not only to those in the health care field and those involved in the pesticide issue, but also to thousands who are exposed daily to these chemicals.

Under existing legislation, pesticide manufacturers are required to submit information to support registration of their chemicals to the California Department of Food & Agriculture. This information includes safety data as well as studies on the short-term and long-term health effects of the chemicals. By unwritten agreement, however, all information submitted by the chemical companies to the CDFA has been considered "trade secrets"--even if the manufacturer did not specify that the information be kept confidential.

Although the CDFA recently ruled that information in support of registration submitted after March 1, 1980 will be made available to the public, the California Agrarian Action Project is attempting to gain access to the health and safety data and the thousands of studies submitted before that date which are still considered to be "trade secrets".

In January of 1980, the Project requested that the CDFA provide them with the health and safety registration data on 11 commonly used pesticides. In February, the CDFA replied that it would cost "in excess of \$10,000" to supply data on just one of the pesticides. Although the Project requested an itemized breakdown of these costs, to date they have not received any reply from the CDFA.

The Project recently discovered that the information submitted to the CDFA by chemical manufacturers includes "poison management studies"--information on antidotes, treatment, etc. in cases of pesticide poisoning. In light of the estimated 13,000 cases of pesticide poisoning which occur annually in California, such information would seem to be more useful to doctors than to the "trade secrets" files of the CDFA.

The Project also reports that "there is evidence that the effects of many widely used pesticides have never been evaluated. In 1976, the CDFA Environmental Assessment Team's review of studies on 44 pesticides found that there were 26 without toxicological data and 'a large majority' had never been evaluated for long term effects. Last summer, the California Auditor General found no health data in the files of 23 out of 25 products studied."

The California Agrarian Action Project needs your support in urging the CDFA to make this information available to the public. Current legislation does not in any way specify that such information be considered "trade secrets"; however, the CDFA has chosen to interpret it as such.

The Project asks that organizations and individuals write to the CDFA at 1220 "N" Street, Sacramento, CA 95814 (Richard Rominger, Director). They have a petition available as well, and they ask that you send them a copy of your letter (or a copy of any resolution your organization may want to pass) so that they may present it along with the signed petitions.

Please send your letters or resolutions by the week of June 8, 1981.

## NEW COALITION FORMED

The Southern Coalition for the Environment reports that a national coalition of health, legal, environmental, and community groups has been established "to stop the pesticide poisoning of millions of people across the country and to resist Reagan administration budget cuts which threaten pesticide safety."

The new group, called the National Coalition Against the Misuse of Pesticides (NCAMP), says that most of the 1,850 pesticide ingredients and 47,000 chemical compounds currently on the market have never been adequately tested for human health and environmental effects. "Extensive pesticide misuse throughout the U.S. results in birth defects, miscarriages, sterility in males and untold cases of nausea, vomiting, rashes, headaches, nervous system damage, as well as suspected long-term health problems, such as cancer. Unsafe use of pesticides has resulted in irreparable damage to crops and food and contamination of the nation's drinking water and air." One of NCAMP's goals is to promote alternative methods of pest control.

According to the Southern Coalition for the Environment, which is a member of NCAMP, "Reagan administration budget cutters are moving to abolish consumer participation and public awareness programs in the EPA... Elimination of EPA's farmworker protection project, Label Improvement Program, forest use chemical project, and projects focusing on spray drift from aerial application of pesticides are planned. On an occupational note, U.S. Labor Secretary Ray Donovan has withdrawn a proposed 'Right-to-Know' standard which would provide precise chemical identification and appropriate warnings on containers of hazardous chemicals found in 328,000 manufacturing facilities where more than 20 million

workers are employed. Meanwhile, the Federal Insecticide, Fungicide and Rodenticide Act (FIFRA), with its provisions to protect workers and the public from pesticide hazards, is due to expire September 30, 1981. The National Agricultural Chemical Association, a strong industry lobby, in predicting that the 1981 FIFRA oversight hearings could lead to a significant rewrite of the Act during the next session of Congress with an emphasis on the benefits of pesticides rather than on the risks."

In addition to the Southern Coalition for the Environment, founding members of NCAMP include the Consumer Coalition for Health, the Environmental Action Foundation, Friends of the Earth, Migrant Legal Action Program, National Association of Farmworker Organizations, Northern Thunder, Rural Legal Assistance, and Urban Environmental Conference.

#### MEMORABLE QUOTES FROM THE "FINAL SOLUTION" FILE

#### ADVANCES IN FAMILY PLANNING

In response to charges that 2,4-D spraying had caused an unusual rate of miscarriages in the area around Mt. Rainier, Weyerhaeuser chemist Dr. Illo Gauditz told a local environmental group that "Babies are replaceable."

The environmental group, Succotash Alliance, was concerned about the fact that out of 12 pregnancies in Ashford, Washington in the past year, there were 9 miscarriages, one stillborn and one baby born with a rare heart defect; the baby died shortly after birth. In the past year, Weyerhaeuser had sprayed 2,4-D over a large area just outside of Ashford some 15 times.

Dr. Gauditz also suggested to the group that women plan their pregnancies around the spray schedules.

(Thanks to the National Veterans' Task Force on Agent Orange "Updates" for this stimulating idea from Weyerhaeuser.)

#### MEANWHILE.....

#### A CHEMICAL SAGA

Probably one of the most bizarre stories on chemical poisoning was reported in the March 21, 1981 Sacramento Bee. It concerns a woman and her young son, and began in 1976 when they moved to a house in Fallbrook, California. The house was periodically sprayed for fleas by a professional fumigator, Lloyd's Pest Control of Vista, California. While the periodic sprayings seemed to cause some illness, it was the effects of the last fumigation, carried out in 1979, which forced Kay Lyons and her son to move. According to the Bee:

"Lyons became severely ill, suffering from vision loss, weight loss, dizziness, suicidal tendencies, paranoia, crumbling teeth and shaking. Admitted to San Luis Rey Hospital, she was assured by a psychiatrist that she was not crazy, and had, in fact, probably been poisoned.

"Her seven cats and a dog all fell ill. Five cats died within three days of the flea extermination. Her puppy became crippled and lost hair from its back."

Her son, Jamie, "a usually congenial youngster, became ill and developed suicidal and homicidal symptoms, threatening to kill his mother. In desperation, Lyons sent her son to a private school in Wisconsin. "While there, he felt fine but when he came home on vacations, she said, he began acting strange and feeling sick."

"When Lyons and her son finally moved, she sent her Persian rugs, curtains and a bedspread to her parents in Illinois. According to Lyons, "Within two months my father had serious health problems. His health decline corresponded with receiving the things in the house. Previously a healthy man, he suffered from diabetes, severe arthritis, sciatic nerves, and shingles."

"A friend of Lyons, Wes Buist, who was described as "a robust surfer....moved in to solve the mystery. Buist said he became so mentally disoriented that his auto upholstery business took a turn for the worse because tasks that previously took a few hours were taking him days to finish."

"Some of her household possessions were left with another friend. "He soon had swollen eyes that were black in the corners, and complained of feeling dizzy and weak and weaving around.

"A friend received house plants from the Fallbrook house, and in the next several months unaccountably fell from 130 pounds to 76, and began losing her teeth.

"Professional cleaners, sent to clean up the house, fell ill and billed Lyons for their medical bills."

Kay Lyons was able to find a specialist in chemical intoxication, Dr. Frances Knock, a surgeon and researcher in organic chemicals at Augustan Hospital in Chicago. According to Dr. Knock, who was interviewed by the Bee, Lyons had "a toxic concentration of substances we're not very fond of." He remarked that "a lot of chemists are so frightened that (toxins) will stay for generations and can't be cleaned up unless a very, very potent solvent is used."

Lyons was also treated by Dr. Granville Knight, of Poway, California, a renowned specialist in allergies and pesticide poisoning. Knight said that he didn't "know yet what was used, but whatever it was, it's still there." He pointed out that "chemical companies don't stress it, but it (chemical poisoning) is more widespread than most people imagine. Most physicians are not accustomed to its subtle effects that often seem like flu or virus symptoms." Dr. Knight also said that for a "chemical to last that long is very unusual," however, "some people are very susceptible; it varies. Usually the defense of the chemical companies in court is that the person is suffering from psychoneurosis."

Lyons, meanwhile, has filed suit against Lloyd's Pest Control, and following Dr. Knock's recommendation of sea air for detoxification, they are now living on a boat.

PUBLICATIONS/ITEMS FOR SALE

FROM THE AGENT ORANGE INFORMATION CENTER

- Agent Orange Newsletter - \$15.00 per year  
Published every ten weeks  
Back issues - \$1.00 each
- "Chloracne" - \$1.00 each  
Clinical description, course of the  
disease and chemical causes; includes  
glossary and bibliography
- "Annotated Bibliography on 2,4-D" - \$5.00  
14 pages; price includes "Periodic  
Update"
- Bumper Sticker - "Dow Shalt Not Kill"  
Lettered in pseudo-classic Biblical  
style. Stick 'em on your car, your  
front door, or your local Dow plant!  
\$1.00 for one  
75¢ each for quantities over one

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FROM FRIENDS

- NCAP News - Published quarterly; an invaluable tool for anyone involved in the herbicide issue.  
NCAP News  
P.O. Box 375  
Eugene, OR 97440  
\$8/one year individual; \$15/two year individual; \$15/one year institutional; \$10.50/one year foreign
- Pesticide Newsletter - Published quarterly; also an invaluable tool for anyone involved in the herbicide issue. Also free, but if you can afford a donation to keep it going, please do so--this excellent group is currently broke and needs money to keep their work going.  
Southern Coalition  
for the Environment  
P.O. Box 3021  
Hammond, Louisiana 70404
- T-Shirts - "Love Canal: Another Product from Hooker Chemical"  
Luella Kenny  
c/o Love Canal Homeowners Assn.  
8561 Krull Parkway  
Niagara Falls, N.Y. 14304  
\$6.00 each; please specify small, medium, or large

ORGANIZATIONS

California Agrarian  
Action Project  
433 Russell Boulevard  
Davis, CA 95616  
Elizabeth Martin  
(916) 756-8518

National Veterans Task  
Force on Agent Orange  
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St. Louis, Missouri 63114  
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Southern Coalition  
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Hammond, Louisiana 70404  
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Human Ecology Action League  
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Suite 6506  
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Northwest Coalition for  
Alternatives to Pesticides  
P.O. Box 375  
Eugene, OR 97440  
(503) 344-5044

Texas Pesticide Hazard  
Assessment Program  
P.O. Box 914  
San Benito, TX 78586  
1-800-531-7790  
1-800-292-7664 in Texas

Jackson County  
Environmental Committee  
P.O. Box 31  
Jackson, Ohio 45640  
Stephen Cochran, Chairman  
(614) 286-5290

Ruth M. Schaeffer  
Veterans Affairs Office  
City University of New York  
535 East 80th Street  
New York, N.Y. 10021  
(212) 794-5757, 58

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## VA UPDATES

### NEW PROCEDURES FOR AGENT ORANGE EXAMS

On January 15, 1981, VA Central Office issued new guidelines to all VA hospitals, outpatient clinics and regional offices with regard to Agent Orange examinations and follow-up procedures. According to Circular 10-81-12, "Each veteran examined will be advised personally of the results of the physical examination (including both positive and negative findings) by the environmental physician" or by "a designated physician familiar with the Agent Orange program." The circular also states that this personal interview is to be documented in the veteran's medical records.

With regard to follow-up, a letter is to be sent to each veteran "explaining the results of the examination and associated laboratory tests." A copy of the letter is to be placed in the veteran's administrative medical records. With regard to follow-up examinations, the circular states that "where medically indicated, arrangements will be made for the scheduling of a follow-up examination or additional laboratory tests."

It is not clear whether these guidelines pertain only to veterans examined after January 15, 1981. In the event that they do not apply to veterans examined before January 15, 1981, we suggest that any vet who did not receive an explanation of the results of his/her examination or an appointment for medical follow-up go back to the VA for another exam. Make sure an accurate record of what the doctor told you has been entered in your medical file. (Write down what the doctor tells you and make sure the doctor agrees with what you've written down before you check it against the entry in your records. If there is any contradiction between what the doctor told you personally and what was written in your file, contact the nearest veterans organization before you leave the hospital.) If the doctor feels that an appointment for a future exam or lab work is not "medically indicated" find out why and make sure that is put in your medical records as well.

Whether or not you are scheduled for a future exam with the VA, or whether you go to the VA at all, we strongly recommend that any veteran who was in Viet Nam get a thorough examination every six months.

## LEGAL UPDATES

### CLASS ACTION SUIT AGAINST THE U.S.

On January 6, 1981, a class action suit was filed in U.S. District Court of Los Angeles by attorneys Victor John Yannacone, of Yannacone & Associates, and Alvin F. Greenwald and Dorothy Thompson, of Greenwald and Greenwald on behalf of veterans and their families affected by herbicides in Viet Nam. Charging that the United States violated the rights of veterans in its herbicide program, the suit names various federal agencies, including the Department of Defense, Air Force, Army, Navy, Marine Corps, Department of Agriculture, Department of Commerce, Department of Health, Education & Welfare, Department of the Interior, and the VA. Among other charges, the suit alleges that the United States (and its various agencies):

- Knew that the herbicides used in Viet Nam were (and still are) contaminated with polychlorinated dibenzo-p-dioxins (PCDD's) and polychlorinated dibenzofurans (PCDF's), and that these contaminants were "inherently dangerous" and "could cause human injury."

- Prohibited the chemical companies "from placing any warning or instructions pertaining to handling, shipping, storing or use on the drums containing Agent Orange."

- Was "responsible for improperly, inadequately and negligently using the Agent Orange in excessive quantities and concentrations without proper safeguards and warnings, and without due care to avoid or minimize exposure to humans."

- Was "responsible for wantonly and recklessly failing to adequately and properly test the Agent Orange specified in its contracts with the war contractors."

•Failed "to give notice to Plaintiffs on any information concerning exposure, contamination, suspected and known effects of herbicides on humans, and failed to provide care, treatment and compensation to Plaintiffs."

•Violated the constitutional rights of veterans and their families "by failing to provide general protections for members of the Uniformed services and veterans, as embodied in various federal and state statutes and regulations since the formation of the Continental Army in 1776."

In the specific charges against the VA, the suit states that the agency knew or should have known of "the reported toxicity and suspected damages of TCDD," and alleges that the VA:

•"Conspired to disseminate false and misleading information to the Plaintiff veterans and their families and to most of the more than two million Vietnam combat veterans" in order to persuade them "not to assert their rights and pursue their legal remedies" and instead, has "actively discouraged the Plaintiff veterans and their families" from filing claims for VA benefits and filing claims under the Federal Tort Claims Act.

•Failed or refused "to comply with statutory mandates to provide proper care and treatment for veterans."

•Failed or refused "to provide service-connected disability pensions for veterans who have suffered illness or disease incurred during service."

•Failed or refused "to adequately staff and properly maintain its medical facilities where Plaintiffs seek care and treatment."

•"Conspired to overmedicate Vietnam combat veterans with psychotropic drugs; ignore symptoms of serious, permanent, and irreparable damage to the brain, central and peripheral nervous system; ignore clearly discernible symptoms of burgeoning neoplastic diseases; and actively neglect the evidence of significant genetic damage."

The lawsuit asks the Court to rule that the United States (and its agencies) be:

•Stopped from using the statute of limitations as a bar to any claims of the veterans and their families.

•Stopped from limiting medical examinations of veterans exposed to herbicides "to cursory physical examinations, minimal blood work and urinalysis, and completion of a prefabricated history dealing with 'exposure' to herbicides in Vietnam."

•Forced "to conduct complete dermatological examinations, blood chemistry analysis, chemical analysis of urine, and such other tests as are medically appropriate."

•Stopped "from disposing of any medical records or statistical studies, or data dealing with the health of Vietnam combat veterans."

•Barred "from any further distribution of a certain document entitled 'Worried About Agent Orange?' and the use of the publication Vanguard for further dissemination of misleading information" on the health effects of chemicals such as TCDD.

The suit further asks that the Court declare "that the continued prescription of psychotropic drugs without justification and without adequate monitoring of the effects of the administration of such drugs is a violation of the fundamental human rights of the

Plaintiff veterans and constitutes a form of 'cruel and unusual punishment' prohibited by the Eighth Amendment of the U.S. Constitution." The suit asks that the VA be:

•Prohibited "from continuing to prescribe psychotropic drugs to Vietnam combat veterans unless and until the veterans has been fully informed of the effects of such drugs, and the opportunity for alternative forms of treatment have been presented to the veteran and his family."

•Prohibited from prescribing "psychotropic drugs to Vietnam combat veterans unless and until adequate physiological monitoring of the level and effects of such drugs has been established."

•Prohibited "from conducting any form of 'operant conditioning' therapy on any Vietnam combat veteran without the informed consent of the veteran and his family, based on a full and complete disclosure of the nature of the treatment and its effects, and the alternative therapeutic modalities available."

•Prohibited "from conducting any form of medical experimentation upon Vietnam combat veterans without the informed consent of the veteran and his family, based upon a full and complete disclosure of the nature of the experiment, its purpose, and its effect upon the veteran."

#### FILING UNDER THE FEDERAL TORTS CLAIMS ACT

In the November 27, 1980 issue of Stars and Stripes, attorney Victor Yannacone suggested that veterans injured by Agent Orange should file a form A-95 by January 8, 1981. This memo is written in response to the many questions that this suggestion generated from veterans around the country.

##### 1. What is the form A-95?

In order to sue the federal government under the Federal Torts Claims Act, a person must file a form A-95 with the Department or Agency he/she thinks caused him/her the personal injury. The government has said that a person does not have to file an official A-95 form. You can take any piece of paper and mark it "A-95 Form" on the top.

##### 2. Who should file a form A-95?

Any person who intends to sue a federal agency under the Federal Torts Claims Act because of a personal injury caused by that agency.

##### 3. Which veterans exposed to Agent Orange should file a form A-95?

Veterans who have an injury that they believe was caused by Agent Orange and who want to sue the federal government. You could be injured in at least two ways: (1) injury due to exposure to Agent Orange; (2) injury due to VA mistreatment of your injury.

##### 4. Can wives or children file?

Yes. If either a wife or child was injured due to the husband's exposure to Agent Orange, they can file a claim.

##### 5. I have no injuries now, but fear I may get such later. Do I have to file now?

No. You have to file two years after the injury.

6. Doesn't my participation in the lawsuit against the chemical companies mean I don't have to file the form A-95?

No. You must file an A-95 if you want to make a claim against the government.

7. Where do I get a form A-95?

At the Post Office, VA Hospital, or U.S. Attorney's Office.

8. Where do I file the form A-95?

With the Secretary of the Navy at the Pentagon if you want to sue any of the armed forces, or with the General Counsel of the VA if you want to sue the VA. If time is running out, you can file at a local Navy or VA office.

9. When do I have to file?

You have to file within two years of the injury. In the case of Agent Orange, the injury is likely to have taken place long after exposure. You have to file within two years after you know the cause of your injury.

10. Since the cause of my injury has never been fully proven, when do I have to file?

If you sue the government, it will almost always argue that your suit is too late. It will argue that you should have filed within two years of your belief that Agent Orange caused your injury.

11. How can the government prove when I thought my injury was caused by Agent Orange?

They would point to your statement or actions, particularly claims filed at the VA or if you are a plaintiff in a lawsuit against chemical companies.

12. Where did the January 8, 1981 date come from?

It is two years after the filing of the lawsuit by veterans against chemical companies. The government has suggested in court that on that date all veterans knew of the cause of their injuries.

13. If I only want to make a claim against the VA for malpractice, am I barred by the January 8 date?

No. You would have to file within two years of the knowledge of the malpractice.

14. Do I have to file by January 8, 1981?

If you have any injury and didn't file, the government may argue that you're too late. You have a strong argument in response. You can argue that you couldn't have known the cause of your injury for sure because the government says that Agent Orange has not been proved to cause injuries.

15. If I have any injury and didn't file and argue as you describe above against the government, will I win?

This is not certain. The argument you have is strong, but a conservative approach would be to file.

16. If I file, what else do I do?

You have to file your case in court six months after your A-95 is denied, which is almost certain to be the case. This means getting a lawyer, etc.

17. Are there any other problems with filing?

Proving your case will be difficult since the scientific data to tie Agent Orange to particular diseases is still in the early stages.

18. Isn't suing the government difficult?

It's always difficult, but suing the Armed Services is especially hard. The courts have held that servicemembers cannot sue the military for injury occurring while on active duty under the Federal Torts Claims Act, because the veterans can get compensated at the VA. This legal barrier faced by veterans who seek to sue the military is called the Feres doctrine.

19. What problems do I face if I file my A-95?

(a) You must get a lawyer to take your case to court within six months of the denial of your form A-95 claim;

(b) Your case in court must overcome the Feres doctrine; and

(c) You must prove that your injury was caused by exposure to Agent Orange (the difficulty of proving this in court, based on current scientific information, must be overcome).

20. If I file my A-95 now, and then take my case to court and lose, can I go back to court later if better scientific proof comes out?

The courts generally do not allow you to take the same case to court again after you've lost once. Under the unusual circumstances an exception might be made, but you could hardly count on it.

21. I don't want to get into problems by letting time go by without filing the A-95, but I don't want to have to get a lawyer and try to prove in court that Agent Orange caused my injuries. Any ideas?

This is the problem many veterans face. You are truly between a rock and a hard place. One idea would be to write something like this as your A-95: "I am filing this under protest. The government tells me the statute of limitations will prevent me from filing later. At the same time, the government says that adequate scientific proof is not available. I am filing to prevent time from running out, but I believe I am entitled not to have to litigate my case until the government does the scientific research on Agent Orange."

Reprinted with permission from the National Veterans Law Center.

#### POSSIBLE SETTLEMENT WITH HOOKER CHEMICAL

On January 19, 1981, a tentative settlement was filed in U.S. District Court in Buffalo, New York which would require Hooker Chemical and Plastics Company to clean up one of four chemical dump sites in Niagara Falls. Under the agreement, it will cost Hooker an estimated \$15 million to clean up and monitor the Bloody Run site, located in the Hyde Park neighborhood of Niagara Falls, which was used by Hooker from 1953 to 1974 to dump 80,000 tons of chemical wastes. (According to New York State officials, 80% of these chemicals are toxic.) The settlement will not become final until it is approved by U.S. District Court Judge John T. Curtin, and it is expected that public comment, to be accepted for 30 days, will also have an impact on the final decision.

The agreement was reached after ten months of negotiations with federal, state and local agencies which filed claims totaling more than \$300 million against the chemical company. Similar suits are still pending against Hooker involving three other dump sites in Niagara Falls, one of which is Love Canal. (See Agent Orange Newsletter, Volume I, Issue 2, page 6.) New York State Attorney General Robert Abrams said an out-of-court settlement in the Love Canal case could also be accepted if it were in the public interest.

At a press conference in Albany, state officials called the Bloody Run agreement "the most comprehensive and technically advanced program ever devised to correct environmental contamination resulting from the disposal of chemical wastes." The clean-up program, expected to cost \$10 million, will include finding the extent of contamination both downward and outward from the site, and will require that Hooker use "stringent safety precautions that exceed Federal Occupational Safety and Health Administration requirements to protect workers and the community." The monitoring program, estimated to cost \$5 million, is expected to last some 35 years. In addition, Hooker has agreed to deposit \$1.5 million in a special environmental fund to finance government studies on chemical waste disposal.

One likely result of the agreement, according to some officials, is that the standards set for Hooker will establish minimum requirements for settling similar actions in the future. Another result, according to one source, is that Hooker could become the industry leader in developing the technology to clean up chemical wastes.

#### LEGISLATIVE UPDATES

##### NEW YORK ENACTS DIOXIN LAW

On March 23, 1980, the New York State dioxin bill was signed into law by Governor Hugh Carey. Under the new law, a temporary 9-member state commission has been set up, five of whom are Viet Nam veterans. The purpose of this 2-year commission is "to obtain information relating to the health effects of exposure to herbicides containing dioxin for residents of the state of New York, including those Vietnam era veterans who may have been exposed to these substances during their period of military service." The responsibilities of the commission include "determining what medical, administrative and social assistance is needed for victims of dioxin exposure" and "conducting an extensive outreach program to inform Vietnam era veterans who may have been exposed to herbicides containing dioxin of any federal or state assistance available to them."

The new law also amends the public health law by adding a new article for "special policies with respect to dioxin exposure." Under Article 24-B, the state health commissioner has been directed to:

"Establish, promote and maintain a public information program on dioxin." This program will include "an effort to contact Vietnam era veterans and employees of the public and private sectors within the state who were exposed to an herbicide containing dioxin."

"Maintain a central data bank within the department for information collected on the health effects of exposure to dioxin and for the cataloguing of existing scientific and medical literature on the health effects of this exposure."

"Initiate education for health professionals to assist them in understanding the potential risks and state-of-the-art knowledge with regard to detection, diagnosis and treatment of acute and chronic symptoms associated with dioxin exposure."

##### NEW AGENT ORANGE BILL INTRODUCED IN CALIFORNIA

On March 6, 1980, Assemblyman Patrick Nolan introduced an Agent Orange bill to the California state legislature which eventually died in the state Senate Governmental Organization Committee. (See Agent Orange Newsletter, Volume I, Issue 1, page 4.) On December 1, 1980, Assemblyman Nolan again introduced a similar Agent Orange bill to the state assembly which, if passed, would remain in effect until January 1, 1985. Under the new bill, the California Department of Veterans Affairs would be required to:

"Assist Viet Nam era veterans and their dependents in filing herbicide related claims against the United States. Such assistance will include referrals for medical and legal services.

"Work with various state, federal and private agencies, including the State Department of Health Services, to "organize and distribute the information on the toxic effects of Agent Orange and other herbicides on Vietnam era veterans."

"Establish an outreach program to inform California veterans of the possible effects of herbicide exposure in Viet Nam. The program will include "dissemination of information to county veteran service officers and other California veteran agencies and organizations." The information gathered in this outreach program will be submitted to the state legislature by June 30, 1985. This information will include "the number of California veterans identified as being at risk from Agent Orange and other defoliant exposure"; "the number of California veterans filing claims for compensation for service-related exposure to Agent Orange and other defoliants"; "a categorization of symptoms reported by veterans"; and "a summary of medical test results from exposed veterans."

The bill would also require the State Department of Health Services to "conduct a review of scientific data and literature on the effects of Agent Orange and other herbicides widely used in Vietnam." A report of current research findings on the effects of Agent Orange would be submitted to the Department of Veterans Affairs and the state legislature by January 1, 1983.

AB 14 is currently before the Assembly Health Committee, however, a hearing date has not yet been set. Assemblyman Nolan asks that letters be sent to the Committee members urging support of the bill.

##### NEW JERSEY AGENT ORANGE COMMISSION

In February of 1980, the country's first Agent Orange bill was signed into law in New Jersey. Introduced by Assemblyman Richard Van Wagner in June 1979, AB 3401 established a 7-member Agent Orange Commission, four of whom are Viet Nam veterans, to assist the estimated 56,000 New Jersey Viet Nam veterans.

Since then, the New Jersey Agent Orange Commission has opened a full-time office in Trenton to provide services and information to Viet Nam veterans. Their services include assistance in filing claims, setting up appointments for Agent Orange examinations at VA facilities, monitoring New Jersey's VA facilities, and keeping track of both "sensitive" and "insensitive" VA employees.

As part of their outreach program, they have established lines of communication between various veterans organizations, and have conducted seminars and informational programs at colleges, Vets Centers and other locations. Through their own outreach efforts and with names and addresses provided by the state, they have been able to contact thousands of Viet Nam veterans with information on Agent Orange. The Commission also plans to conduct a retrospective epidemiological survey of New Jersey's Viet Nam veterans.

New Jersey veterans should contact the Agent Orange Commission for a copy of their Self-Help Guide, and for assistance in filing claims and obtaining medical examinations.

MEDICAL/SCIENTIFIC UPDATES

AUSTRALIAN GOVERNMENT TO STUDY VETERANS

The Australian government has begun a two-year study of Viet Nam War veterans and their children to determine the effects of exposure to herbicides. The study will compare these veterans against a control group of armed services personnel in the same age group who did not serve in Viet Nam.

So far, over 1,000 veterans have applied to the Australian government for disabilities caused by exposure to herbicides in Viet Nam. Veterans Affairs Minister Evan Adermann has said that children affected by the chemicals will be compensated as well as the veterans once a link is established.

In a related development, the Sydney Morning Herald reported on October 13, 1980 that the United States government knew of the harmful effects of the herbicides used in Viet Nam as early as 1962. According to Bill McMillan, an attorney for the Australian Vietnam Veterans' Action Association, certain correspondence proves that the United States knew of the toxic effects of the herbicides and that the Australian government should have known as well. "It is a fair deduction," said McMillan, "that the Australian Government willingly exposed our troops to these chemicals. Information flowed freely between the U.S. and Australia during the war."

McMillan, recently returned from a visit to the United States, also reported on a test developed in Los Angeles which can detect the possibility of birth defects. He reported that the Hirsch test had already been conducted on 200 people--half on veterans and half on civilians--and said that the "test can be done in Australia." McMillan stated he would ask the Australian government to begin conducting this test "as one way of alleviating the situation."

(Note: The Agent Orange Newsletter is in the process of getting more information on the Hirsch Test for our next issue.)

The National Institute for Occupational Safety and Health has begun a registry of chemical workers in the United States with documented exposure to the constituents of Agent Orange, including TCDD (dioxin). According to Anthony Robbins of NIOSH, "Once this registry has been developed, NIOSH plans to evaluate trends in mortality of the exposed workers and, if the data permit, will consider conducting morbidity [disease rate] and reproductive studies."

The registry is being compiled with cooperation from the chemical industry, major unions and the Department of Defense, and is expected to contain several thousand workers from the mid-1940's to the present.

LOCAL SCENE

HERBICIDE EXPOSURE MAP READINGS

In the last issue of the Agent Orange Newsletter (page 6), we reported that the Agent Orange Veterans' Advisory Committee has begun preparation of the "Vietnam Map Book: A Guide to Agent Orange Contamination of Vietnam Veterans." Until actual publication of the book, the organization has begun providing individual map readings for veterans. Using the HERBS tapes--the flight logs of the fixed-wing and helicopter aerial spray missions--they will match the spray missions against the movements of a veteran's unit to determine actual exposure.

To find out if you were exposed to direct aerial spray, you can set up an appointment with the Agent Orange Veterans' Advisory Committee for a map reading or, if you live outside of the Bay Area, contact them by mail. Send them as much information as you can on dates and locations of your unit's movements and they will let you know if, when and where you were exposed.

The Agent Orange Veterans' Advisory Committee also conducts map readings every Friday at various locations throughout the Bay Area. Contact them to find out where the next map reading will be held or to invite them to conduct a map reading for your own organization.

MINNESOTA VETERANS OUTREACH PROGRAM

In late 1979, two Minnesota veterans groups, the Minnesota Veterans Coalition and Vietnam Veterans Against the War, initiated a major outreach effort to contact the state's 51,000 Viet Nam veterans. Using a computerized mailing list of veterans who had applied for Minnesota's Vietnam Veteran Bonus Program, they were able to contact an initial 20,000 veterans and inform them of the free medical screening available at the VA medical center. Of that number, 8,500 veterans requested such screening. Tim Michaels of the Minnesota Veterans Coalition pointed out that it had taken them three months to identify 8,500 veterans whereas the VA in Minnesota had only seen 70 veterans for Agent Orange screening in two years. Moreover, the original mailing list was comprised of addresses that were at least six years old.

By late 1980, over 13,000 veterans had requested Agent Orange screenings, and Tim Michaels attributes much of the success of the outreach program to the

"cooperation and hard work of our County Veterans Service Officers, and the assistance of Service Officers and Auxiliaries from the American Legion, the Disabled American Veterans and the Veterans of Foreign Wars."

According to the Fall 1980 edition of NCAP News (published by the Northwest Coalition for Alternatives to Pesticides), Reed Holt of Vietnam Veterans Against the War reports that "the program has touched off a minor panic within the VA," and that Minnesota's Ft. Snelling VA hospital "has been forced to go to two shifts a day in their Agent Orange physical exam program." Holt also reports that "the VA has refused to provide doctors at Ft. Snelling VA hospital with common symptoms of dioxin exposure 'because if they knew what to look for it might bias their examinations.'" [Although we normally keep our editorial comments to a minimum, we can't resist pointing out that if a doctor were to tell you he doesn't know what the symptoms of exposure to chicken pox are because it might bias his examination, that doctor would be considered incompetent.]

The two organizations also enlisted the aid of the veterans incarcerated program of the Veterans Resource Center in Minneapolis to contact Minnesota's incarcerated veterans. In order to provide these veterans with medical screenings, John Heubach of the Minnesota Veterans Coalition reported that "we have asked the VA to allow mobile teams to be sent out to our state prisons." However, the VA has not yet responded to their request.

Surveys which were utilized in the outreach program will be analyzed by computer and the results presented before the Minnesota state legislature. Information on how the outreach program was organized can be obtained from the Minnesota Veterans Coalition and Vietnam Veterans Against the War.

#### NATIONAL CONFERENCE ON AGENT ORANGE (REMINDER)

On May 23-24, 1981, the National Veterans Task Force on Agent Orange and its member organizations will be holding the Vietnam Veterans Conference on Agent Orange in Washington, D.C. A major purpose of the conference is to share the most current information in the following areas:

- Effects of Agent Orange exposure
- Scientific and medical research
- Legislative actions
- Legal actions
- VA policies
- Treatment procedures

The conference will include panel discussions, workshops and films on all of these areas, with an overall goal of uniting "the efforts of various groups toward the development of viable resources to meet the needs of Agent Orange victims."

The conference will be held at Wesley Theological Seminary, located at 4500 Massachusetts Avenue, N.W. More information can be obtained from the National Task Force office or from:

Ruth M. Schaeffer, Conference Chairperson  
Veterans Affairs Office  
City University of New York  
535 East 80th Street (Caldwell)  
New York, N.Y. 10021  
Tel: (212) 794-5757 or 794-5758

#### SECOND REGIONAL VETERANS CONFERENCE

From April 17 to 19, 1981, the University Veterans will hold the Second Western Regional Conference for Vietnam Veterans in Eugene, Oregon. The First Conference, held last year from January 11 to 13, included workshops on a variety of veterans' issues. (See Agent Orange Newsletter, Volume I, Issue 1, page 6.) The purpose of the conference was to unite Viet Nam veterans and organizations in order to share information and establish an organizational power-base "to effect humanistic change legislatively, politically and socially."

The workshops planned for the Second Conference are:

- Agent Orange
- Delayed Stress Response Syndrome
- Legislation and Political Activism
- Preventing Another Noble Cause
- Explaining the New American Militarism
- Veterans Employment Issues
- Incarcerated Veterans
- Women Veterans and Significant Others

The conference will also include a press conference as well as a benefit dance. For further information, contact Dave Isenberg at University Veterans.

#### NATIONWIDE VIET NAM VETERANS' RALLIES

The Center for Veteran's Rights in Los Angeles has called for a series of rallies across the country on March 8, 1981. The primary purpose of the nationwide day of unity is "to demand that the federal government initiate a national delayed re-entry program for all 4.2 million veterans of the Vietnam War in Southeast Asia." The delayed re-entry program, or "debriefing from wartime service," includes:

- "Individual counseling with another Vietnam veteran trained to understand the various readjustment problems associated with Vietnam War service and the lack of compassion by society upon return from that wartime experience."
- "Psychological counseling and claims assistance for veterans with post-traumatic stress disorders and other psychological problems with representation before the Board of Veterans Appeals."
- "Completion of health questionnaires and examinations for symptoms that could be related to exposure to toxic herbicides."
- "Screening of all less-than-honorable military discharges to determine qualification for upgrading."
- "Review of all mental and physical disabilities to determine status of treatment, compensation and vocational rehabilitation by the VA."
- "Coordination of existing services in the community to provide employment assistance."

Although the VA began a belated attempt to deal with some of these problems by establishing the Vets Centers last year, these Centers are underfunded, understaffed and overworked, and now face being shut down entirely by the Reagan Administration in October. To demonstrate the problems faced by the Vets Centers, as well as by veterans, the Center for Veteran's Rights is also holding a public rally outside the Los Angeles VA on March 5, where the Board of Veterans Appeals will be hearing an Agent Orange case. Some of the public testimony to be given by veterans and their families will be:

"Military exposure to radiation, toxic herbicides and dangerous drugs with no follow-up treatment or compensation by the VA."

"No right of appeal for denied claims to a court of law."

"Less-than-honorable military discharges given for medical problems."

"Denial of medical treatment to veterans."

"Denial of Agent Orange examinations to Vietnam veterans."

"Inadequate funding for Vietnam Veteran Outreach Centers."

As a symbol of unity, the Center for Veteran's Rights asks that all veterans, and all those who support veterans, display a green ribbon on March 8.

In the Bay Area, the March 8 rally is being organized by the Coalition of Independent Viet Nam Veterans and the Contra Costa chapter of Vietnam Veterans of America.

#### OPEN LETTER

Today is Day 42 of the Occupation. On Day 1 of the Occupation, some people wore black armbands, because back then, on Inauguration Day, they were paranoid enough to think that the Reagan Administration was out to get them. By now, there are more of us who feel that way. By now, those of us who care about the environment, who care about our children and who care about our future know that the Reagan Administration is not on our side. And now, on Day 42 of the Occupation, those of us who care about veterans know, too. Specifically, Viet Nam veterans. Specifically, those who went, believing or not believing, to fight an unpopular war, and who came back realizing that human life was more important than any government. But who also came back realizing that their government gave them cancer, permanent physical and emotional scars, deformed children, and contempt.

Today, on Day 42 of the Occupation, Reagan announced yet another budget cut: the psychological readjustment centers. The Vets Centers that took ten years to squeeze from the government--a program that is underfunded and understaffed to begin with, and that is only a small beginning--will be cut in October. What this means is one less place to go for counseling, suicide prevention, finding housing, employment, and help in dealing with Agent Orange. What this will mean after October is that these veterans--along with the unemployed, the disabled, the elderly, 'attered women, battered children, and so many others who are part of our world--will have nowhere to go because the community organizations that have dealt with these things all along are being taken out by Reagan's cuts, too.

Maybe I'm being too paranoid in thinking we're headed for something disastrous. Maybe I'm imagining things when I get the feeling that we're all just sitting here holding our breaths. But doing that doesn't really make it easier when the blow comes. I'd like to think that I'll look back on this two years from now and laugh at what an alarmist I was. But I'm afraid I'll look back and say, "It was all of that, and more."

Appropriately enough, the calendar on my wall advises me, "It's bigger than the both of us." That it is.

But maybe not bigger than the all of us. Maybe if we all understand that we've spent so much, so long supporting an economy that supports the rising cancer rate and supports the rising birth defect rate, maybe then we can understand that we have to begin supporting each other, instead. For our own survival. And maybe if we understand that survival doesn't mean fighting the Arabs or providing arms and "advisors" to another government (which will not be another Viet Nam, although it may be another Hiroshima) or buying into violence because it's easy and it doesn't make any real change, maybe then we can make it.

I don't think we can afford to hold our breaths any longer. Like it or not, we're all being forced to make a choice--to do more than wait for someone else to take care of it. Because I don't think we can afford to say, ten years from now, "I didn't know."

Mimi Yahn  
Editor

#### PUBLICATIONS/ITEMS FOR SALE

From the Agent Orange Information Center:

- Agent Orange Newsletter - \$15.00 per year  
Back issues - \$1.00 each
- "Chloracne" - Clinical description, course of the disease and chemical causes; includes glossary and bibliography - \$1.00 each
- "Annotated Bibliography on 2,4-D" - 14 pages - \$5.00 each

From Other Organizations

- NCAP News - Published quarterly; an invaluable tool for anyone involved in the herbicide issue.  
NCAP News  
P.O. Box 375  
Eugene, Oregon 97440  
\$8/one year individual; \$15/two years individual  
\$15/one year institutional; \$10.50/year foreign
- T-Shirts - "Love Canal: Another Product From Hooker Chemical"  
Luella Kenny  
c/o Love Canal Homeowners Association  
8561 Krull Parkway  
Niagara Falls, N.Y. 14304  
\$6.00 each; please specify small, medium, large.

ORGANIZATIONS

Agent Orange Veterans'  
Advisory Committee  
1027 University Avenue  
Berkeley, CA 94710  
Don Watkins/Clark Smith  
(415) 540-6175

Center for Veteran's Rights  
514 West Adams Boulevard  
Los Angeles, CA 90007  
Ron Bitzer/Michael McCarthy  
(213) 746-6315

Minnesota Veterans Coalition  
2040 Juliet  
St. Paul, Minn. 55105  
Tim Michaels/John Heubach  
(612) 690-5557

National Veterans Law Center  
4900 Massachusetts Ave., N.W.  
Washington, D.C. 20016  
(202) 686-2741

National Veterans Task  
Force on Agent Orange  
P.O. Box 15972  
St. Louis, Missouri 63114  
(314) 428-0113

New Jersey Agent Orange  
Commission  
143 E. State St., Room 512  
Trenton, N.J. 08608  
Wayne P. Wilson, Exec. Dir.  
(609) 984-7396

University Veterans  
Suite 3, Erb Memorial Union  
University of Oregon  
Eugene, Oregon 97401  
Dave Isenberg  
(503) 686-4098

Veterans Resource Center  
University of Minnesota  
2020 Minnehaha Avenue  
Minneapolis, Minn. 55404  
(612) 376-5085

Vietnam Veterans Against  
the War  
709 26th Avenue South  
Minneapolis, Minn. 55454  
Reed Holt  
(612) 332-1979

Vietnam Veterans of America  
Contra Costa Chapter  
57 Water Street  
Pittsburg, CA 94565  
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(415) 458-0195

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## Open Letter

In spite of numerous missed deadlines, the first issue of the AGENT ORANGE NEWSLETTER has finally arrived! The purpose of the newsletter is to share information, news, contacts, plans, projects, and support, but we want this to be a joint effort, so we need your help in putting it all together.

Each month we will have regular columns on legal, legislative, medical, scientific, local, and other news, and one feature article. This month's feature is "VA Policies for Agent Orange Screening." Next month's will cover VA claims procedures. The coming months will feature a variety of topics including practice and malpractice in VA hospitals, international use of herbicides, domestic spray incidents, EPA regulations, the California pesticide mafia, and much more. But we need your help. Articles, letters, graphics, comments, even graphic comments, will be much welcomed.

We also need your financial support. For those of you who can afford it, the subscription is \$12 per year. For those of you who put out your own newsletter, we'd like to do an exchange. Send us what you can, so we can make this thing go.

Thank you!

Mimi Yahn

## Feature

### VA Policies for Agent Orange Screening

Any veteran who thinks he or she may have been exposed to Agent Orange should go to the VA hospital for a medical examination. All VA health care facilities are under orders from the VA Central Office in Washington, D.C. to handle all possible herbicide exposure cases as follows:

The VA will provide appropriately detailed medical examination and follow-up of all Vietnam veterans who come to VA health care facilities claiming herbicide exposure in order to obtain further information regarding any possible long-term health-related effects of these agents. . . .

All Vietnam Era veterans who currently are being treated in a Veterans Administration medical center, and future applicants for VA health care, will be asked if they were exposed to herbicidal chemicals during their service in Vietnam. . . . Veterans who claim exposure to herbicidal chemicals during the Vietnam War will receive a thorough examination. . . .

In eliciting the medical history and performing the physical examination . . . particular attention will be given to those organs which are most commonly affected by chemical intoxicants, namely, nervous system, immune system, blood-forming system, liver, kidneys, thyroid, adrenals, gonads, skin, and lungs. Particular attention will be paid to the detection of chloracne, a skin condition which has been associated with acute exposure to herbicide mixtures containing the toxic chemical, Dioxin. Evidence will also be sought concerning the following potentially relevant symptoms or conditions: altered sex drive, sterility, congenital deformities among children, repeated infections, neoplasia (tumors), and for female veterans, difficulties in carrying pregnancies to term. . . . In conjunction with this workup, appropriate diagnostic studies should be performed and consultations obtained as indicated by the patient's symptoms and signs. Non-routine diagnostic studies, such as sperm counts, should be performed only if suggested by the workup."

—Circular 10-79-83, April 16, 1979

An important aspect of these orders is as follows: " . . . it is VA policy to provide thorough medical evaluations

of all veterans in its patient population who claim exposure to herbicides during the Vietnam War and to follow them over a period of years so that any long-term complications resulting from these chemicals can be detected and treated. Data on all veterans examined for possible herbicide toxicity in the VA system will be entered into a registry maintained in the VA Central Office [VACO]. Follow-up of the veterans entered into the registry will be monitored and supervised. . . ."

This section is important because of reports from veterans who have gone to VA hospitals, and because they either displayed no outward symptoms or the symptoms they did have were not considered to be caused by Agent Orange, they were refused any medical examination for herbicide exposure. On August 29, 1979, Paul A. L. Haber, M.D., Assistant Chief Medical Director for Professional Services, wrote the following to all VA health care facilities:

. . . several medical centers are only including data on these veterans who the staff feels have symptoms possibly related to herbicide toxicity. As a result, data is not submitted on veterans who do not have what are considered appropriate symptoms. . . . The purpose of establishing the VACO Herbicide Registry is to set up a system for long-term follow-up of Vietnam veterans exposed to Agent Orange. . . . Accordingly, I request that all VA medical centers meticulously comply with the provisions of Circular 10-79-83. Specifically, all Vietnam veterans in your patient population who were exposed to herbicides should be identified and then evaluated according to the procedures outlined in the Circular whether they are symptomatic or not."

—Professional Services Letter 11-11-79-25,  
August 29, 1979

The procedures for follow-up are detailed as follows:

A quarterly report will be submitted to VACO Professional Services by the 8th workday of the month following the close of each quarter. . . . Negative reports are required. . . . This report will contain the following information:

- a. A legible copy of all the data obtained on Vietnam veterans who claim herbicide exposure. . . . Pertinent laboratory data and consultations obtained as part of these examinations will accompany this report.
- b. Copies of all medical record documents prepared as a result of follow-up of Vietnam veterans already reported during previous quarters. These documents will be identified with a statement indicating that their submission is a follow-up of a previous report."

—Circular 10-79-83  
April 16, 1979

In other words, follow-up examinations are required, regardless of whether or not you have symptoms and regardless of whether the VA hospital thinks your symptoms were caused by Agent Orange. Obviously, official VA policy and reality are two different things. A great many VA employees don't even know what Agent Orange is, let alone what the VA policy is in dealing with

veterans exposed to it. Cite their own regulations to them if necessary, and if that doesn't work, ask to see the Environmental Health Physician (there are physicians designated by the VA Central Office to handle Agent Orange within each VA hospital). It's important that everyone go to the VA hospitals because they have the facilities to provide the health care, but the only way to get it is to flood them—and a flood is hard to manage.

The veterans group, CAVEAT, in Illinois, has written the following "Checklist for Hospital Procedures":

Prepare a list of health problems which you have experienced since your possible exposure to toxic chemicals. . . . Provide yourself with a copy of this list. . . . Prepare "Test Result Request." On a clean sheet of paper write the following:

Please send a copy of any test results from today's tests to my home address.

Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Phone \_\_\_\_\_  
Social Security # \_\_\_\_\_

Thank you

(Signature) \_\_\_\_\_

(Date) \_\_\_\_\_

**PLEASE NOTE THAT THIS SHOULD BE DONE EACH TIME YOU GO TO THE HOSPITAL.**

Prepare yourself for a cold reception. Some VA hospitals have been informed through official channels that no such problem really exists. Go to the hospital in the morning, Tuesday through Friday. Present yourself at the Ambulatory Intake Desk. Tell them you wish to be evaluated as a "possible herbicide exposure victim. . . . AGENT ORANGE."

**DO NOT** take your service records to the hospital. **DO** take a pen and pad of paper. **DO** take this checklist, a list of "symptoms," and the note requesting test results. During the intake process your records should be identified with an orange card or other means of identification showing you to be an AGENT ORANGE test person. Expect to be given a questionnaire which you must fill out. Any questions that cannot be answered with CERTAINTY (such as "where and on what dates were you exposed?"), should be answered with the following:

"I will answer this question in a written statement to be submitted at a later date."

**YOU MUST MAKE A NOTE OF WHICH QUESTIONS YOU NEED TO ANSWER LATER.**

When seen by a doctor (or physician's assistant), write down his or her name, explain that you have had problems and give them a copy of your "symptoms." Have the list of "symptoms" entered into your medical record. When finished for the day, proceed to the Records Release Office at the hospital. Request

that a copy of any entry on your medical records from that day be furnished to you. (You *are* able to receive such information by signing a release form.) [This is important—make sure you get these copies every time you go to the hospital.] When such copies are made available, you should give the worker the note requesting that copies of TEST RESULTS from that day's testing be forwarded to your home address. Be sure to note the times and dates of any future appointments for further testing. Make notes on specific tests which you are given for future follow-up.

Another word of advice: Go to the VA hospital during the first part of the month.

The second step is filing your disability claim. A number of organizations are in the process of putting together self-help guides; next month's NEWSLETTER will detail the procedures and give advice on dealing with the differences between VA policy and reality. At this point, it's important to know that your service records will be needed if you file a claim. Your records can be obtained from the Records Center in St. Louis by filling out a Standard Form 180 (which can be gotten from most community veterans organizations or from the DAV rep. at the VA hospital). DO NOT file an Agent Orange claim until you've gotten your service records FIRST.

If you're in contact with a veterans organization working on the Agent Orange issue, get back to them and let them know how you were treated at the VA hospital. This is the only way the organizations can continue monitoring the hospitals to make sure they comply with their own regulations and provide adequate care.

—Mimi Yahn

## Legal Updates

### *Pesticide Suit in California*

On February 5, 1980, a major lawsuit was filed in San Francisco Superior Court against the California Department of Food and Agriculture for allowing the presence of harmful pesticides in food. Filed by a coalition of 14 health, environmental, and labor groups, three farm workers, two doctors, and Assemblymen Art Agnos (S.F.) and Art Torres (L.A.), the suit challenges the Department's standards of "tolerance levels" in food for pesticides that cause birth defects, cancer, sterility, and mutations.

The current standards are based on the assumption that an average person weighs 132 pounds and eats no more than 7.5 ounces per year of a given fruit or vegetable that has been sprayed with pesticides. These pesticide residue standards do not take into account children, who weigh less than adults, or people such as farm workers, who are exposed to additional levels of pesticides at work.

The suit also challenges the Department's inadequate food monitoring system, that can only detect 25 percent of pesticides with tolerance level standards, and its failure to test many of these pesticides for their car-

cinogenic, mutagenic, or birth-deforming effects. The suit asks that no pesticide be allowed in food until such tests are done, and that the California Department of Food and Agriculture be barred from allowing such harmful pesticides in food.

### *Class-Action Suit Against Chemical Companies*

More than 600 veterans have joined the class-action lawsuit against six chemical companies since the suit was first filed on January 8, 1979, by attorney Victor John Yannacone, Jr. The suit, filed in U.S. District Court in Westbury, Long Island, seeks damages from Dow Chemical Company, Hercules, Inc., Thompson-Hayward Company, Diamond-Shamrock Corporation, Monsanto Company, and Uniroyal for the adverse effects of dioxin on veterans, their families, and unborn generations. Thus far, Yannacone, in conjunction with a consortium of lawyers, has filed the suit in the district courts of approximately 20 cities.

Some developments since the suit was first filed are as follows:

- On August 15, 1979, U.S. District Court Judge George Pratt in Westbury denied all motions by the chemical companies to dismiss the class action suit; he also denied another motion by the chemical companies to bar Yannacone from talking about the case with reporters or veterans groups.

- On November 23, 1979, Judge Pratt ruled in favor of the suit by bringing it to federal rather than the state courts. Federal law, which will now apply, is felt to be more favorable than many state statutes.

- In early January 1980, the chemical companies filed legal briefs making the U.S. government a third party in the liability suit, charging that the government was "reckless" in its use of the chemicals. According to Phil Schneider, a Dow spokesman, "We still believe that Agent Orange cannot cause the damages claimed." He further claimed that Dow was not allowed to apply warnings to labels on Agent Orange canisters or instruct government personnel in the "proper" use of the chemicals.

- In late January 1980, Judge Pratt ruled that videotaped testimony will be admissible; the videotaped testimony of veterans who may die before the suit finally comes to trial will have more impact than a posthumous written statement.

- On February 24, 1980, a group of Australians who served in Vietnam filed in U.S. District Court in Westbury, thus joining the class-action suit. The plaintiffs, Vietnam Veterans Action Association of Australia, represent the first of 650 claims to be filed by Australian Vietnam veterans.

It is expected that the suit will go to trial by September 1980 and, if successful, the individual damage claims will be tried in early 1981. Ultimately, it is felt that a trust fund will be set up from the profits of the six chemical companies to compensate all those affected by Agent Orange.

## *Class Action Suit Against the VA*

The National Veterans' Law Center in Washington, D.C. filed a class-action suit on May 31, 1979, against the VA for failure to publish a 30-day notice in the *FEDERAL REGISTER* of its *Agent Orange Program Guide*. The *Program Guide*, issued on April 17, 1978, in the Department of Veterans' Benefits' "Rating Practices and Procedures," states that "Except for a skin condition known as chloracne, there are presently no firm data to incriminate the herbicides as causative agents of any other known category of disease or chronic symptom."

Disability claims against Agent Orange—for a range of health problems including organic diseases, nervous disorders, muscle and joint disorders, psychological disorders, and various cancers—have thus far been denied on the basis of the present *Program Guide*. In addition, the burden of proof is placed on the veteran: "No special procedures will be initiated for these claims. Instead, each case will receive a thorough development of all available evidence. This will include a request to both the veteran and the service department to furnish verification of exposure to herbicides, the extent and duration thereof, and the dates on which such exposure occurred."

As for the children of Vietnam veterans with deformities, the *Program Guide* states, "A veteran's claim alleging herbicide related genetic damage based upon damage or defect in the veteran's child will be administratively disallowed since Title 38 U.S.C. makes no provision for such claim."

It has been the VA's standard procedure to publish all changes of rating and benefits procedures in the *FEDERAL REGISTER* 30 days prior to taking effect for public comment. Failure to do so in the case of the *Agent Orange Program Guide* represents the first breach of this stated policy which, the class action suit contends, places the VA under liability by their own regulations.

## *Legislative Updates*

### *Agent Orange Bills*

On February 28, 1980, the Los Angeles County Vietnam Veterans' Advisory Commission submitted a bill to the Los Angeles County Board of Supervisors that would establish an Agent Orange Commission. The bill—similar to the one introduced and passed in the New Jersey State Legislature last summer and introduced in the Illinois State Legislature last fall—would direct the Agent Orange Commission to "study the effects of Agent Orange and other defoliants on Vietnam era veterans, determine the variety and extent of infirmities caused by exposure, gather information, disseminate findings to appropriate public agencies, and coordinate with private and federal agencies independently engaged in the study of the effects of Agent Orange."

The Commission, to be composed of at least eleven members, a majority of whom will be Vietnam era veterans, will work with the California Department of Veterans Affairs and will report back to the State Legislature after 24 months with its findings and recommendations for further legislation.

The Los Angeles County Board of Supervisors adopted

the bill unanimously in mid-March, and will now find an author to introduce the bill to the State Legislature.

On March 6, 1980, a similar Agent Orange bill was introduced to the California State Legislature by Assemblyman Patrick Nolan (L.A.). Assembly Bill 3065 would also create an Agent Orange Commission that would be composed of six members, with at least four of them being Vietnam Era veterans. Among other responsibilities, the Committee would "serve as a central data bank for compiling all appropriate data relating to the effects of Agent Orange," and would "provide for the coordination of legal, medical, administrative, and social assistance to such veterans." The Committee will report back to the State Legislature with recommendations on needed legislation on or before January 3, 1981.

The bill is currently before the Assembly Health Committee and is expected to be heard on April 10. The chairman of that committee is Assemblyman Art Torres, and Assemblywoman Jean Moorhead is the vice-chairwoman. Other members of the committee are Assemblymen Art Agnos, Tom Bates, Gordon Duffy, Leona Egeland, Jerry Felando, Bill Ivers, Dennis Mangers, Herschel Rosenthal, and Maxine Waters.

### *Congressman Korman Warns Against Agent Orange*

Congressman James Korman (Van Nuys, CA) met recently with a group of Vietnam veterans to discuss Agent Orange, and promised to inform his constituents by mail of the issue. He urges other congressmen to do the same in their campaign letters. He also promised to provide an Agent Orange information desk in his office to be run by a Vietnam veteran.

### *Vietnam Era Veterans Agent Orange Act*

On January 30, 1980, Congressman Tom Daschle (SD) and co-sponsor George Miller (CA) introduced the Vietnam Era Veterans Agent Orange Act to the House of Representatives. HR 6377, an amendment to Title 38, would place the burden of proof on the VA for service connection of disabilities caused by exposure to Agent Orange.

Under the bill, the VA would be required to establish regulations that would define conditions of service-connected exposure. In determining exposure, the regulations may not require a veteran to provide more than what is contained in the discharge papers, and "a presumption of exposure" will be established "when Department of Defense records, information supplied by the veterans, and other information establish a possibility of such exposure."

If the veteran "is suffering from a disease developed to a 10 per centum degree of disability or more . . . such disease shall be considered to have been incurred in or aggravated by such service, notwithstanding that there is no record of evidence of such disease during the period of service." The VA will also be required to establish regulations on "what diseases medical research has shown may be due to exposure to phenoxy herbicides contaminated by dioxins."

The bill would also change Title 38 regulations on birth

defects that currently do not allow claims based on genetic damage in a veteran's child. The VA will be required to establish regulations on what birth defects shall be deemed . . . to be an aggravation of a preexisting injury suffered in line of duty in the active military, naval, or air service during a period of war.

The bill is currently before the Committee on Veterans' Affairs of the House of Representatives.

## *Medical/Scientific Updates*

### *Chicago Researchers Release Finding*

Medical researchers in Chicago have reported finding a high incidence of autoimmune antibodies in the blood of a number of Vietnam veterans who were exposed to Agent Orange. Drs. Mitsuo Yokoyama, Dean Jabs, and Yoshinobu Matsuo have been conducting immunological blood tests of 17 veterans since last fall at the University of Illinois Medical Center in Chicago. Completed in January, the study found a majority of the veterans to have a high incidence of these antibodies that are formed against the body's own cells and react with "the smooth muscle and nuclear components of their own systems."

According to Dr. Yokoyama, "It's very unusual to find such a high incidence of autoimmune antibodies in a group of people, especially when compared to the general population." Another of the researchers pointed out that these smooth-muscle antibodies are frequently associated with, but not proof of, several chronic liver diseases. While the presence of such antibodies is not a major defect of the immune system, she felt it was "certainly suspicious."

"Our inability to ascertain any long-term problems with the immunity systems of these veterans does not mean that they don't exist," said Drs. Jabs and Matsuo. "We conducted a few tests on a very small group of patients. A much more extensive, large-scale investigation is needed."

Mimi Yahn  
With thanks to Jeff Burkhardt  
Monterey Peninsula College

### *Dr. Bogen Study*

Dr. Gilbert Bogen, of Vetline-Hotline in Illinois, has released the findings of a ten-month study of 78 Vietnam veterans who were exposed to Agent Orange. In a report published by the *JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION* on November 30, 1979, Dr. Bogen reported finding various skin, neurological, gastrointestinal, and psychological problems among the veterans.

Eighty-five percent of the veterans suffered a treatment-resistant skin rash, which was aggravated by sunlight in 53 percent. Tingling occurred in 55 percent, numbness in 60 percent, dizziness in 69 percent, and autonomic dyscontrol in 18 percent. Psychological problems were as follows: depression (73 percent), sudden loss of memory (21 percent), inability to concentrate (17 percent), violent rages (45 percent), and suicidal attempts (8 percent). Loss of libido occurred in 47 percent. Gastrointestinal complaints included,

Anorexia (41 percent), nausea (59 percent), vomiting (13 percent), diarrhea (51 percent), constipation (31 percent), and abdominal pain (24 percent). Hepatitis occurred in 10 percent, and jaundice in 5 percent. Three veterans died of cancer, and another 10 percent were being treated for cancer.

### *New Study by Dr. Tung*

Dr. Ton That Tung, the Vietnamese scientist who was responsible for linking liver cancer and birth defects to the use of Agent Orange in Vietnam, has released the findings of a new study. Following his visit to the United States last May, Dr. Tung began a survey of North Vietnamese veterans who had gone south to fight and then returned home to the north, marrying women who had never been exposed to herbicides. Using hospital statistics going back to 1975, his findings show an unusual number of birth defects and miscarriages when compared to the general population.

In a survey of one hospital, miscarriages occurred in 16 percent of the couples where the husband had been exposed to Agent Orange, and 8.5 percent in couples where neither the husband nor the wife had been exposed. There were no birth defects in the unexposed couples and a 4.6 percent rate of birth defects in couples where the husband had been exposed during the war. In a survey of another hospital, birth defects occurred in 20 percent of the couples where the father had been exposed, and there were no birth defects among unexposed couples. The birth defects themselves were considered to be highly unusual; in addition to many polygenetic defects, there was an abnormal frequency of brain defects. Anencephalia (lack of brain), for example, usually occurs at a frequency of one out of every 2,777 births, while among exposed veterans, the frequency was one out of every 350 births.

Dr. Tung's earlier studies, although internationally recognized, were not well received in this country. They were considered to be, among other things, "communist propaganda" and lacking in any firm data. This seems to be the case with his latest study. U.S. scientists have already termed it "suggestive" and "interesting," but full of "inconsistencies."

### *Dr. James Allen*

For more than ten years, Dr. James R. Allen of the University of Wisconsin has been conducting scientific research on the effects of dioxin on rats and monkeys. His findings have been cited internationally, and he is to be a key witness in the coming EPA cancellation hearings on 2,4,5-T and Silvex.

In the fall of 1978, an assistant in his laboratory wrote a letter to the personnel department of the University of Wisconsin charging that Dr. Allen had violated federal grant regulations. After a preliminary investigation, the UW Medical School dean invited the former lab assistant to discuss the matter further; she declined and instead, took the matter to Senator William Proxmire. Proxmire passed it on to the Inspector General of the Department of Health, Education, and Welfare, and from there it went to the Justice Department.

In October 1979, Dr. Allen pleaded guilty to misap-

appropriating a total of \$892 from a federal grant for personal use. On three occasions, he combined a business trip with a ski trip, each time submitting expense vouchers for the ski trip. As a result, he has been convicted of criminal charges, is facing 6 months probation, a fine of \$4,000, and will resign from the University of Wisconsin in June. And Dow Chemical has gone into high gear to discredit Dr. Allen's work.

Claiming that the dioxin used in one of Allen's studies was contaminated with PCB's, Dow says there are "serious questions about the reliability of any of Dr. Allen's work. In addition, Dr. Allen's general credibility is impugned by his recent admission of guilt involving the theft of government funds."

Considering that Dr. Allen is only one of two researchers who will be testifying for EPA in the 2,4,5-T and Silvex battle against the chemical manufacturers, the timing couldn't be better for Dow. Using Dr. Allen's personal misfortune, Dow's lawyers told an EPA administrative judge that Allen's "overall credibility and integrity is suspect in light of his recent criminal conviction."

This statement, of course, assures us that neither the executives nor the scientists of Dow Chemical have ever engaged in such activity. Moreover, Dow's many activities—such as withholding scientific studies from the public on the harmful effects of dioxin, testifying publicly that dioxin causes no more than chloracne in their workers while their medical director privately informs a group of chemists of the other health effects he has seen, barring unionization of their plants in order to avoid complying with safety regulations, poisoning the waters and destroying the aquatic life of the Tittabawassee, the Chippewa, and the Saginaw Rivers near their Midland plant, knowing of the high levels and the harmful effects of dioxin present in their phenoxy products for at least twenty years before the government forced them to reduce such levels, continuing the export and manufacture in other countries of phenoxy herbicides containing frighteningly high levels of dioxin, and shifting the blame on the government for "misuse" of herbicide agents in Vietnam while neglecting to provide directions for "proper and safe use"—certainly do not raise any questions regarding Dow's overall credibility or integrity. After all, they've not been criminally convicted.

## *Organizations/Local Scenes*

### *National Veterans' Task Force On Agent Orange*

The National Veterans' Task Force on Agent Orange is a nationwide coalition of veterans, environmental, and other groups working on the Agent Orange issue. Formed in July 1979, their membership currently numbers 24 organizations. Their purpose and goals are as follows:

- To aid Vietnam veterans and their families affected by Agent Orange.
- To collect and develop statements from Vietnam Era veterans regarding the use of herbicides and other chemicals by the U.S. military.
- To staff and operate a coordinating office, to include a

hotline, information clearinghouse, library, reprint and duplication service, and newsletter.

- To create and disseminate models and suggestions for services to those affected.
- To stimulate the Veterans Administration, Department of Health, Education, and Welfare, the Congress, and other government agencies to take appropriate and timely action toward Agent Orange claims.
- To provide public information and education pertaining to Agent Orange, and other residual disabilities due to chemical exposure while in military service.
- To encourage the scientific community to conduct studies on the effects of Agent Orange in a factual, balanced, and objective manner, and aid in the implementation of such studies.
- To assist in the creation of legal strategies and to inform veterans of their legal rights and alternatives.
- To assist in the creation and permanent ban on the use of the components of Agent Orange: 2,4-D; 2,4,5-T; and TCDD.
- To establish a linkage with environmental groups and other veterans groups working on this issue or allied issues.
- To encourage the passage of favorable legislation.
- To raise funds for these endeavors.

### *Regional Conference for Vietnam Veterans*

From January 11-13, 1980, the University Veterans of Eugene, Oregon, sponsored the First Western Regional Conference for Vietnam Veterans. The purpose of the conference was "to unite veterans and Vietnam Veteran self-help organizations for the purpose of sharing information, and to establish a power base of Vietnam Veterans organizations to effect humanistic change legislatively, politically, and socially."

The three-day conference included forums on Agent Orange, the draft and recall of veterans, delayed stress response syndrome, women as veterans and as partners of veterans, minorities and the third world, discharge upgrading, jobs, funding resources, and networking.

At the close of the conference, a policy statement was issued that called for immediate action by Congress and the VA on Agent Orange and delayed stress, and opposed all legislation calling for reinstatement of the draft and the recall of veterans.

The conference was considered a tremendous success, and University Vets plans to sponsor a second conference in the near future.

### *Winter Soldier Archives*

In January, Clark Smith established the Winter Soldier Archives. Formerly the editor of *The Ally*, Smith has written a number of pieces on Vietnam veterans, including "Brothers," an oral narrative of the black experience during the Vietnam War, "Oral History as Therapy," which appeared in Charles Figley's "Strangers at Home," and "Marine Doves and the Baffled Brass," which appeared in the September 1970 issue of *The Nation*.

The purpose of the Winter Soldier Archives is "to

gather materials from Vietnam veterans in order to preserve a body of first-hand knowledge of the Vietnam War and post-war, to encourage research into the human experience of the war and post-war periods, to increase public awareness of the veteran's experience, and to draw alienated veterans within the orbit of a positive humanistic endeavor.

The materials gathered for the Archives include oral history interviews, photographs, letters, diaries, newspapers, and other items collected from veterans. In addition, the Archives will soon begin publishing a quarterly journal that will feature individual veteran's experiences. This publication, as well as an index of the Archives holdings, will be available to libraries, research institutions, and other subscribers.

Other activities of the Archives will include public exhibits of such materials as photographs and workshops involving veterans, scholars, and the public to promote discussion and education on veteran-related issues.

### **"Politics of Pesticides" Conference**

The Coordinating Committee on Pesticides sponsored a two-day conference on "The Politics of Pesticides" at the University of California, Berkeley on March 29 and 30. Key speakers included Dr. Barry Commoner, Dr. Samuel Epstein, and Anthony Mazzochi, Director of Health and Safety of the Oil, Chemical and Atomic Workers International Union.

The conference focused on "the growing misuse of pesticides," which has become "a serious and widespread threat to the public health and the environment. Pesticides are being found in our food, water, home and workplaces. The threat of pesticide poisoning could be cut in half by the use of existing economically viable alternatives, saving \$10 per year for every man, woman and child in California. This conference [described] the health and environmental dangers of pesticides. Concerned citizens from all over California and the Northwest [came] together to talk about what can be done and how to do it."

In addition to the key speakers, the conference included panels on such topics as the Northwest anti-herbicide movement, alternatives to pesticides and herbicides, and educational workshops, including a workshop on veterans and Agent Orange. Also included in the program was the film "A Plague On Our Children," a benefit performance by the San Francisco Mime troupe of "We Can't Pay? We Won't Pay!," and satirist Darryl Henriques (aka Joe Caremonenni aka The Purple Poisoner) who emceed the Agent Orange Benefit on January 7, 1980, for the Agent Orange Veterans' Advisory Committee.

The conference itself was a memorial for Dr. Robert Van den Bosch, who died in November of 1978. Dr. Van den Bosch was a noted entomologist and author of a number of books, including "The Pesticide Conspiracy."

### **Agent Orange Veterans' Advisory Committee**

The Agent Orange Veterans' Advisory Committee held a presentation on dioxin for the medical field on

February 9 and 10, 1980. Speaking before the doctors and representatives of various clinics were Dr. Gideon Letz, Steve Zoloth, Mimi Yahn, Jim Janko (February 9) and Jack McCloskey (February 11).

The purpose of the presentation was to kick off a clinic outreach program that would provide information, medical care, counseling, and referral for anyone exposed to phenoxy herbicides. Separate intake sheets will be provided to all participating clinics in order to obtain information from patients on possible exposure through military service, occupation, or any other manner. It is hoped that the examining physician will be able to correlate specific health problems with past exposure to phenoxy herbicides, and conduct tests not normally included in a standard examination (e.g. liver dysfunction, tumor/cancer screening, etc.). It is also hoped that the data collected from the intake sheets will show the connection between exposure to phenoxy and the syndrome of health effects in three separate populations. The intake sheets are designed to gather information on exposure to any chemical or radiation, thereby isolating and identifying the specific health effects of exposure to phenoxy.

Another aspect of the clinic outreach program is getting the word out. It is standard policy for clinics to provide information on cancer, DES, VD, and a variety of other health problems; information on Agent Orange and all phenoxy herbicides should be provided in the same manner. Exposure to these chemicals, and their health effects, are far more extensive than most people—including those in the medical field—are aware of.

The evidence gathered from the intake sheets will be used to apply pressure on public and private health agencies to realize the widespread hazard to the public and the need to begin working on treatment.

### **"What You Gonna Do About Me"**

(The above quotation comes from the song, "What About Me?", sung by Richie Havens. This column is for the personal stories of veterans; please send us yours.—Mimi Yahn)

I was a Marine, so I was out there in the field. I saw planes spraying the forests we had to go into. No one talked about Agent Orange: there were no warnings—not a word. The way I was exposed, I think, was by drinking water from streams and bomb craters in the forests that were sprayed. Now I've got a skin rash for just about 15 years. The VA gives me forty-four dollars a month—about as much as I could get if I went around collecting pop bottles. They won't call the rash chloracne, though they can't say what it is. They also can't explain the tingling and numbness in my hands and feet, the bloated feeling in my stomach, nor the arthritic pains in my joints. For forty-four dollars I guess they hope I'll shut up and go away. Well, to hell with them. If enough of us get together, their attitude will have to change.

—Veteran from Oakland, California

As a medic in the infantry, I was exposed to Agent Orange the same way as any other grunt. I was in forests

and jungles that were heavily sprayed. I drank water where I could find it—from streams, from bomb craters from any source that would fill a canteen. Before Vietnam I was healthy, nothing wrong. Today I have more health problems than I care to talk about. I'm like a lot of veterans who wonder where they'll be five or ten years from now. They tell us there's no treatment, no antidote for Agent Orange. Well, are they looking hard

for one? And paying disability in the meantime? As far as I can see, they are shuffling their papers. Unless veterans speak out and get organized, they'll ignore us to the grave.

—Jim Janko  
Oakland, California

(This first issue of the AGENT ORANGE NEWSLETTER is dedicated to Steve Hassna, who gave us the following poem.

<p>Will people listen to the words you speak? will they understand the feelings your eyes portray? of the recognition of reality that was born in you as you walked upon the soil of Southeast Asia? will they only hear the words as war stories never seeing that you don't glorify what you say and miss the reason for the words to show America and killing as one and all the same? will it mean anything to anyone that you stepped off a chopper in a jungle clearing landing zone blown there by bombs? will they understand a hot L.Z. where the asian gecko awaits with its call that taunts in the night</p>	<p>uck you! uck you! it wails or the A.K. 47 with its crack and green tracers? (now the uck you lizard won't kill but it will drive you nuts!) the A.K. kills and maims no different from yours just pointed a different way ... will they believe you when you say "had to worry more about our own anyway" gunships missing target artillery missing range with 50% of all dead and wounded on Uncle Sam's head. gunships killing you as they shoot at the holder of the A.K. or the holder of the liberation flag or the baby suckling at its mother's breast and her with a bullet in her head.</p>	<p>Well, America I that's right I! don't care if you don't see don't feel don't understand for if you at anytime in any manner had cared or seen I wouldn't have to tell you the reality of the Southeast Asian soil. Think hard, America for the fact is I am your only son. —Steve Hassna (Copyright 1979)</p>
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## *Other News*

### *Edmund Juteau*

Edmund Juteau, vice-president of Agent Orange Victims International, died of cancer on February 3, 1980. One of the co-founders of AОВI, he had written a petition that has been distributed nationwide. Juteau, who was 30-years-old, died of lymphoma, cancer of the lymph glands.

### *Veterans Protest Spraying in Oregon*

On March 17 1980, six veterans who were exposed to Agent Orange, occupied land belonging to the Bureau of Land Management in Oregon. The veterans, residents of Applegate River Valley, are protesting the use of 2,4-D on the land and vow to stay there until spraying is stopped.

### *Herbicides in Korea*

Following reports from veterans alleging use of defoliants in Korea, CAVEAT (Concerned American Veterans Against Toxins) and the National Veterans' Task Force on Agent Orange filed a Freedom of Information Act request to obtain evidence of such spraying. On February 15, 1980, information was received that revealed that Orange (2,4-D and 2,4,5-T), Blue (cacodylic acid, an arsenic compound), Monuran (a soil sterilant), and 2,4-D alone took place in Korea from October of 1967 to sometime in 1969.

The available records show that a total of 23,687 acres was sprayed "between the south tape of the DMZ and the civilian control line in I Corps (GP) and First ROK Army areas." This figure is derived from records of spray operations carried out between October of 1967 and July of 1968; however, as the Department of Defense states that the "program ended in 1969," this leaves a gap between August of 1968 and an unspecified period in 1969.

According to the Department of Defense, U.S. Forces "advised in the use of herbicides," and "no U.S. personnel are known to have been actually involved in their application." Such application "by hand or trailer-mounted sprayers," was carried out by ROK Forces. It is not known how much of the chemicals was used, nor is it known how many of the U.S. and ROK Forces may have been exposed, regardless of who carried out actual application.

### *Seveso Update*

On February 5, 1980, Paolo Paoletti, chief engineer of the ICMESA chemical plant in Seveso, Italy, was shot and killed outside his home in Monza, Italy. The ICMESA plant was the site of an explosion on July 10, 1976, that deposited an estimated 5 pounds of dioxin over hundreds of square miles. For eight days following the accident, both the ICMESA plant and its parent company, Hoffman-La Roche, kept secret the fact that more than 17,000 people had been exposed to dioxin. By that time, 19 children had been hospitalized and thousands of animals and birds had died. Two weeks after the explosion, Paoletti and two other company officials were arrested for their involvement in the cover-up. Evacuation of the area began three days later.

Over 900 people were eventually evacuated, 1,500 children sent to state camps for the remainder of that summer. Two hundred eighty-three acres were turned into a wasteland. Numerous strikes by factory workers, decontamination workers, students, and teachers followed. Abortions, which are illegal in Italy, became a focal issue throughout the country.

On May 19, 1977, Dr. Guiseppe Ghetti, the local health official, was shot in the legs because of inadequate protection for workers and residents against industrial pollution. On July 10, 1977, the home of a Hoffman-La Roche corporate executive was bombed. Residents of the area filed suit against Hoffman-La Roche, but none has yet been brought to court. Meanwhile, attempts to decontaminate the town of Seveso continue.

## Organizations

Agent Orange Victims International  
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Winter Soldier Archives  
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Clark Smith, Director

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