

**Perlin on Challenges Facing VA in 2005**

*Foremost among the challenges we face in 2005 is our continuing effort to improve the service we provide to our Nation's newest veterans, especially those who return ill or injured from Iraq and Afghanistan.*



Excerpt from a letter, dated January 4, 2005, to all Veterans Health Administration employees from Jonathan B. Perlin, Acting Under Secretary for Health (the top ranking medical official in VA).

**Jonathan B. Perlin**  
 Acting Under Secretary for Health

**New Report on Health Effects from Fuels, Combustion Products, and Propellants**

On Monday, December 20, 2004, the independent National Academy of Sciences' Institute of Medicine (IOM) issued the third volume in a series of reports called Gulf War and Health. The 500+ page report looked at scientific evidence to reach conclusions about possible connections between certain exposures and health problems.

**Background**

In 1998, Congress passed legislation (actually two separate laws: Public Laws 105-277, and 105-368), which directed VA to contract with the National Academy of Sciences for an evaluation of the scientific and medical literature regarding associations between illness and exposure to toxic agents to environmental or wartime hazards, and medicines or vaccinations associated with service in the 1990-91 Gulf War. While Congress had veterans of the 1990-91 conflict in mind when the legislation was enacted, we have included this information on the OIF/EF Review because it is likely that many of the more recent veterans had similar exposures.

The IOM completed two earlier comprehensive reviews: Gulf War and Health, Volume 1: Depleted Uranium, Pyridostigmine Bromide, Sarin, and Vaccines and Gulf War and Health (2000); and Volume 2: Insecticides and Solvents (2003). More recently, IOM also conducted and released an update of the sarin review, entitled Gulf War and Health: Updated Literature Review of Sarin.

The latest release examines the possible health effects of hydrazines and red fuming nitric acid (used in rocket fuel), hydrogen sulfide, oil-fire byproducts, diesel-heater fumes, and fuels (for example, jet fuels, and gasoline).  
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## Committee Conclusions

The committee established by IOM to consider these exposures concluded that there is some evidence linking combustion products (such as “smog”) and lung cancer. The committee found limited evidence linking combustion product exposure and cancers at several other sites (oral, nasal, laryngeal, and bladder), asthma, and two reproductive outcomes after exposure during pregnancy: preterm birth and low birthweight or intrauterine growth retardation.

For the propellant components of Scuds, only hydrazines were found to have a suggestive association with lung cancer, although these were apparently not used as fuels during the 1991 war in Iraq. For additional information regarding these conclusions, see their website: [www.nap.edu](http://www.nap.edu).

## VA Response

VA is currently examining the report in the form of “prepublication copy-uncorrected proofs” to determine what action is warranted by the report, that is whether the regulations governing disability compensation or other aspects of VA policy need to be modified in light of their conclusions.

## Further Reports

In accordance with the laws mentioned above, IOM is planning further reports on potential health hazards encountered by U.S. troops in Southwest Asia.

## Two New VA Brochures Highlight Health Care and Assistance for Iraqi Freedom/Enduring Freedom Veterans

In December 2004, VA released two brochures for veterans of the military conflicts in Iraqi and Afghanistan. The 6-page Iraqi Freedom publication describes some of the health risks to U.S. service members serving in Iraqi in 2003-2004 and beyond. These include environmental health hazards, infectious diseases, such as, leishmaniasis, preventive measures, pesticides and health, deployment stress, and deployment-related health effects.

This fact sheet also includes information about VA health care services, research, and disability compensation. It also provides information about other sources of information on this subject. The publication is formally known as Information Bulletin (or IB) 10-166 Revised, December 2004, Iraqi Freedom Veterans: Information for Veterans Who Served in Iraq in 2003-2004 and Beyond and Their Families. It replaces a similar brochure on veterans of the first Gulf War. It has been available online at [www.VA.gov/GulfWar](http://www.VA.gov/GulfWar). Copies can also be obtained at the local VA medical centers, VA regional Office, and the Vet Centers.

The Afghanistan brochure contains similar information about veterans who served in Operation Enduring Freedom. It is entitled, Enduring Freedom Veterans: Information for Veterans Who Served in Afghanistan and For Their Families. It is identified as IB 10-71 Revised, December 2004. Copies are on the internet at [www.VA.gov/EnvironAgents](http://www.VA.gov/EnvironAgents), and at most VA facilities.

Both publications are available from the Environmental Agents Service (131), 810 Vermont Avenue, N.W, Washington, DC 20420. Please indicate which publication you want, and the quantity sought. There is no charge for these publications.

## Registry Statistics

### *Operation Iraqi Freedom Veterans*

Initial Examinations through 2003 – 80

Initial Examinations through 2004 – 1,125

Total Examinations, including followup examinations through 2004 – 1,128

Total Examinations in January 2005 – 33

Total Agent Orange Registry Examinations – 415,461

January 2005 Agent Orange Registry Examinations – 2,115

*Operation Enduring Freedom Veterans are not eligible for a Registry examination, but may qualify for a similar examination. Contact the nearest VA medical center for details.*

## Research Advisory Committee Issues Report, VA Announces Additional Funding for Research on Gulf War Veterans Illnesses

On the day following Veterans Day 1994, Secretary of Veterans Affairs Anthony J. Principi announced approval for up to \$15 million in additional research funding for Gulf War illnesses. “We still don’t have a definite cause for Gulf War illnesses.” Principi said. “There has to be a reason why some of our veterans came home healthy, while others serving along side them did not.”

Principi’s announcement coincided with the release of a 143-page report, entitled Scientific Progress in Understanding Gulf War Veterans’ Illnesses: Report and Recommendations of the Department of Veterans Affairs Research Advisory Committee on Gulf War Veterans’ Illnesses.

The Committee, authorized by Section 4, Public Law 105-368, and appointed by Secretary Principi in 2002,

offered 10 findings and more than 4 dozen recommendations, including a recommendation that 15 million dollars be specifically added to VA's current research and development budget in support of a Gulf War illnesses research program.

The funding commitment represents the VA's single largest set-aside of research funding for a specific area of investigation and could make up about 20 percent of VA's new research grants awards for FY 2005. During the past decade, VA has spent more than \$50 million for research into Gulf War veterans' illnesses. Much of that research is still ongoing. While VA is still examining the report, Principi added, he is convinced that there is sufficient justification for further scientific research.

"I appreciate the hard work done during the last two and a half years, led by Jim Binns," Principi said. "I know they share my commitment to solve this mystery. The full report and additional information about the Committee is available at the following web site: [www.VA.gov/rac-gwvi](http://www.VA.gov/rac-gwvi).

## **VA Vet Centers Break Down Barriers to Care for Veterans with Readjustment Problems**

*The below article was drafted by Connie Torres, who spent 10 weeks in the Environmental Agents Service as a Hispanic Association of Colleges and Universities intern in the Summer of 2004. Ms. Torres conducted the necessary interviews and wrote the story.*

For many combatants, war is hell!!! No man or woman returns from war the same as when they left. And yet they are expected to pick up where they left off, to go on as if little has changed. As studies have described, many veterans need a little --some need a lot --of help readjusting to civilian life. For many, asking for help may be seen as a sign of weakness, instead of recognition that a problem exists, and it requires the commitment to do something about it. Getting help requires strength.

Since 1979, VA's Vet Centers have been providing counseling to combat veterans and their families. The program now has 206 locations across the Nation and in Guam, Puerto Rico, and the U.S. Virgin Islands.

Originally set up to assist Vietnam-era veterans with their transition from combat to civilian life, the program's scope has expanded and currently serves veterans of the Korean War, World War II, Lebanon, Grenada, Panama, Persian Gulf, Somalia, Kosovo/Bosnia, veterans of Operations Enduring Freedom (OEF), Iraqi Freedom (OIF) and operations within the Global War on Terrorism (GWOT).

As the scope expanded, so did the number of sites where veterans could get help. In 1980, only a year after the centers first opened, there were 91 vet centers. Ten years later, in 1990, there were a total of 201 vet centers.

Five additional locations subsequently were added. VA Vet Center officials indicate that the program has helped more than 1.1 million veterans since October 1992.

## **PTSD and Military Service**

The Vet Centers' priority is readjustment counseling, not only to veterans but also families of veterans. Readjustment counseling is aimed at helping veterans adjust to feelings of anger, unfamiliarity, or isolation that they might experience returning from military service. Readjustment problems also can include post-traumatic stress disorder (PTSD).

PTSD is a normal reaction that usually comes after a person experiences or witnesses a trauma such as war or sexual assault. Loneliness, isolation, and change in environment while in combat can also cause PTSD. When not dealt with, an individual with PTSD can experience a range of sometimes disabling emotions and experiences such as grief, anxiety, paranoia, and difficulty trusting others. About 25 percent of soldiers involved in combat and 15 percent of soldiers who were not directly involved in combat experience PTSD or PTSD-like problems.

Although it is not known when or if an individual will overcome problems associated with PTSD, the Vet Centers make sure that some healing is achieved. "We may not cure people, but we make a lot of people's lives better," said Dr. Jerry Clark, Team Leader of the Vet Center in Alexandria, VA.

## **Veterans Helping Veterans**

About 80 percent of the Vet Center counselors working with veterans are former veterans themselves, and 60 percent of them have been in combat. According to Dr. Clark, a Vietnam veteran himself, veterans feel more comfortable knowing that they are talking with someone who knows of the ordeals and distress that sometimes comes with being involved in combat. "That counts to them," said Dr. Clark.

As the Center's Team Leader, Dr. Clark has the responsibility of meeting with veterans and seeing that they are placed with counselors who are suited to help them adjust. The matching may be based on who the veteran feels more comfortable with, which in turn may be based on gender, race, or similar experience in combat. Centers stress the importance of veterans feeling comfortable with the atmosphere and people they are with. If that's accomplished then veterans are more

likely to continue with their counseling. Dr. Clark has been counseling in Vet Centers for 10 years; he spent 8 years in Des Moines, IA, and has been working 2 years in Alexandria, VA. Dr. Clark said that the centers are good areas for social work and that his “respect for the VA population” influenced him to work at the centers.

Christopher Reed, Veterans Service Representative of VA’s Central Office in Washington DC, is another example of a veteran extending his services to help other veterans. Reed makes regular trips to Walter Reed Army Medical Center in Washington, DC, where he spends time with veterans. As a “mentor,” he informs veterans about the various counseling services of the Vet Centers. A veteran from the 1993 War in Somalia, Reed is aware of the difficulties that sometimes come with adjusting to everyday life. Upon his discharge, Reed was unaware of the services of Vet Centers. Today he believes that if he had known to take advantage of the program it “would have changed my life in several aspects.” That’s why he makes sure to recommend Vet Centers to those he feels may need the assistance.

The Centers also provide bereavement counseling to spouses, parents, and children of Armed Forces personnel who died while serving in combat. The counseling services for families consist of extensive transition services, such as outreach and referral services. Like readjusting counseling, bereavement counseling is provided free of charge.

The Vet Center’s programs for veterans include trauma counseling, special populations, networking, wellness, leadership, management, and transitional assistance. These are managed through individual, group, or marital and family counseling, medical referrals, assistance in applying for VA benefits, employment counseling, guidance and referral, alcohol/drug evaluations, information and referral to community resources, sexual trauma counseling and referral, and community education. Participants in Vet Centers often receive additional assistance from VA medical centers or regional offices. For additional information regarding this program and the nearest Vet Center, call toll- free **1-800-827-1000** or go to [www.VA.gov/rcs](http://www.VA.gov/rcs).

## **VA Gulf War Programs Recognized for Outstanding Service to Veterans**

In March 2004, the Office of Public Health and Environmental Hazards in VA Central Office sent the first Environmental Hazard Center of Excellence Awards to 13 field facilities. The award, based on a non-scientific survey mailed in August 2003, gave veterans the opportunity to evaluate the Environmental Health Registry staff.



Dr. Kurt Schlegemilch, Director, VAMC poses with award winning team at Grand Junction.

The veterans receiving the survey were those who had been involved in the Agent Orange, Gulf War, and Ionizing Radiation Registry Program.

According to Environmental Agents Service (EAS) Director, Dr. Mark Brown, the award was intended to “recognize outstanding service to veterans.” He also emphasized that the facilities that did not receive an award were not criticized. In fact, overall the responses were positive and those not chosen in this round of awards received many excellent reports from the veterans they serve.

The survey asked veterans to name a VA Registry clinician or coordinator that has provided them with “outstanding customer service.” However, respondents generally choose to acknowledge the facility rather than a particular individual.

The facilities received the new award certificate, entitled “Environmental Health Center of Excellence Award,” in recognition of the expertise, patience and dedication displayed by the VA staff. The exceptional centers were:

- VA Medical Center (VAMC) Boise, ID;
- VAMC Cheyenne, WY;
- VAMC, Durham, NC;
- VAMC Fargo, ND;
- VAMC, Fresno, CA;
- VAMC, Grand Junction, CO;
- VAMC Manchester, NH;
- VAOPC, Oakland Park, FL;
- W.G. (Bill) Hefner VAMC, Salisbury, NC;
- VAMC, San Francisco, CA;
- VAMC White River Junction, VT;
- VA Community Based Outpatient Clinic (OPC) Williamsport, PA; and
- VAOPC, Winston-Salem, NC.

The significance of the award and the uniqueness in which the recipients were chosen makes the award much more valuable. This was the first time veterans were given a survey that allowed them to evaluate the Registry services and staff of their medical center. Honorees were unaware of the survey and were overwhelmed to know that the award was based on the evaluation by veterans. “It makes the award much more

meaningful,” said Daniel Duffy, VAMC’s clinical coordinator for Special Programs in White River Junction, VT. For Cindy Force, Network Program Support Unit Manager/ Environmental Health Coordinator of the VAMC in Durham, NC, the veteran’s input was a positive boost. “It makes you feel as though you’ve done your job well,” said Force.

Despite the surprise of the award, facilities are aware of their capabilities, which they attribute to the staff’s friendliness and knowledge. Jim Nelson, administrative officer of the VAOPC in Winston-Salem, NC, described the staff as “very personal and friendly with patients,” two essential qualities other facilities also associated with their success. The VAMC in Manchester, NH, takes great pride in positive feedback it has received. “We seldom have complaints,” said Timothy Dorgan, Eligibility Coordinator.

Recipients of the award also mentioned that because of their great staff, they feel confident that they will receive the award again. Program Assistant Marj Doescher, of the VAMC in Boise, ID, acknowledged the employees’ impressive work, and offered advice for other facilities. Doescher stressed the importance of being aware of programs: “Knowing the program and being able to clarify is vital,” said Doescher.

Susan H. Mather, M.D., M.P.H., Chief Public Health and Environmental Hazards Officer, signed each certificate. Each one, marked with a gold seal, was mailed to the Director with the request that it be displayed in an area where it could be easily recognized, preferably with the Agent Orange, Gulf War, and Ionizing Radiation posters and newsletters.

Due to the positive responses, the Office of Public Health and Environmental Hazards looks forward to conducting this survey and offering this special recognition again in the near future. “I felt it was a success, it was well received by coordinators,” said EAS Program Analyst Michelle Foster.

Foster was responsible for arranging the survey and for announcing the results at the national EAS quarterly conference call. A survey is planned for this year and should continue in the upcoming years.

*The above article was drafted by Connie Torres, Hispanic Association of Colleges and Universities summer intern in EAS.*

## Readers’ Survey

The editor of this newsletter is seeking feedback on the three issues published to date. Please take a few minutes to provide your comments, suggestions, recommendations, and advice for future issues of the newsletter.

In completing the brief questionnaire we ask that you not critique the VA health care system, explain the difficulties you may have encountered in getting financial benefits from VA, or discuss your health problems.

Rather, we want your ideas with regard to the newsletter. You are welcome and even encouraged to bring those other problems to our attention in another letter. Please send your survey response to **Mr. Donald J. Rosenblum, Environmental Agents Service (131), ATTN: OIF/OEF Survey, Department of Veterans Affairs, 810 Vermont Avenue, N.W., Washington, DC 20420.** You can use this paper or write on your own.

Thank you in advance for your cooperation.

Are you a veteran? Yes No

Are you the spouse of a veteran? Yes No

Are you a first time reader of this newsletter? Yes No

What do you think of the Review? \_\_\_\_\_

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Does it meet your needs? Why or why not? \_\_\_\_\_

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What changes would you like to see in this publication? Additions? Deletions? \_\_\_\_\_

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Additional comments or suggestions? \_\_\_\_\_

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For the greatest impact, please respond as soon as possible.

## Conclusions from the First Gulf War: After More than 10 Years of Gulf War Veterans Medical Evaluations, What Have We Learned?

Veterans have suffered a wide range of health problems since returning from the first Gulf War. However, health care registry data and epidemiologic (population) studies of health care use have revealed no unique Gulf War syndrome nor identified specific exposures that might explain these health problems.

That was a major conclusion of a team of scientists from the U.S., Great Britain, and Canada in a recent issue of the *American Journal of Preventive Medicine* (*Am J Prev Med* 2004;26(5):443-452). They observed that Gulf War veterans have had an increase in injury, mental health, and multi-symptom condition diagnoses similar to those that have affected other military populations. Despite the expenditure in excess of \$1 billion in understanding and treating Gulf War veterans during the past decade, scientists have been unable to fully understand and explain these diagnoses.

This paper focused on the health care experience of veterans included in VA's Gulf War Veterans Health Registry, Department of Defense's Comprehensive Clinical Evaluation Program; United Kingdom Ministry of Defence's Gulf War Medical Assessment Programme; and Canada Department of National Defence's Canadian Gulf War Registry. Using multiple search techniques, the authors reviewed health care usage data from these four national Gulf War Registries.

The authors suggested that in addition to evaluating possible therapies for multi-symptom conditions, researchers should work to identify risk factors for the development of such conditions. They commented that if military personnel likely to develop multi-symptom conditions can be identified early in their service, special training and interventions might be used to reduce the impact of these conditions.

They added that DoD seems to be moving in that direction in studying military personnel who served in the recent deployment in Afghanistan and Iraq. Predeployment, in theater, and postdeployment data are being evaluated to identify predictors of postdeployment symptom-based illnesses. Personnel at high risk of developing multi-symptom conditions may benefit from cognitive behavior therapy, coping skill training, or other interventions to help them prepare for intensive stresses of war.

The authors also praised DoD for improved disease and injury surveillance and freely reporting occurrences that may be associated with military service. "Such close surveillance with rapid public reporting is commendable."

The authors are Gregory C. Gray, formerly director, Center for Deployment Health Research, Naval Health Research Center, San Diego, now with the Department of Epidemiology, University of Iowa; Gary D. Gaskstetter of the Uniformed Services University of the Health Sciences; Han K. Kang, Director, Environmental Epidemiology Service, Department of Veterans Affairs; John T. Graham, British Liaison Officer, Defence Staff, British Embassy; and Ken C. Scott, Deputy Chief of Staff, Medical Policy, Canadian Forces.

Individuals with questions or comments for the authors or who wish to respond to something in the article should address their correspondence to: Gregory C. Gray, M.D., University of Iowa College of Public Health, 200 Hawkins Dr. C21K GH, Iowa City, IA 52242. Dr. Gray email address is [gregory-gray@uiowa.edu](mailto:gregory-gray@uiowa.edu).

### Q's and A's

The "Review" occasionally includes a questions-and-answers feature in which VA officials respond to inquiries from readers and others regarding possible health problems and concerns of Operations Iraqi Freedom, and Enduring Freedom veterans and their families and about programs initiated by VA and other Federal departments and agencies to help these veterans. Dr. Mark A. Brown, Director, Environmental Agents Service, answered the first question.

**Q.** I've heard that a parasite *Schistosoma haematobium*, found in Iraq has caused health problems for some Iraqi Freedom Veterans and may eventually lead to bladder cancer. Is that correct?

**A.** Schistosomiasis is found in Iraq, but not Afghanistan, and infection is thought to be not very common. *Schistosoma haematobium*, which causes urinary schistosomiasis, is the only species of *Schistosoma* reported in Iraq. Western personnel would not be at risk of schistosomiasis unless they waded or swam in infested water. We will probably not have many cases of long-term chronic infection with this parasite among OIF veterans because the disease is treatable. If schistosomiasis is suspected in a veteran, the first step would be to send urine specimens to the laboratory to look for characteristic eggs of this parasite. If a veteran had medical evidence of long-term infection with this parasite and they developed bladder cancer, then they might have a basis for a compensation claim.

Another question that has been received from several sources is:

**Q.** Are Iraqi Freedom and Enduring Freedom veterans eligible for Gulf War Registry health examinations offered at VA health care nationwide? And what is involved in the Registry exam program?

A. For the answer, we turned to Helen Malaskiewicz, Senior Program/Management Analyst in the Environmental Agents Service, and National Registry Coordinator. She has been in that position for more than a decade.

According to Ms. Malaskiewicz: For Operation Iraqi Freedom veterans, the answer is definitely “yes.” We encourage all Gulf War veterans, which includes everyone who has served in the war in Iraq, to contact the nearest VA medical center for an appointment.

Under the Registry program, VA Environmental Health Clinicians conduct a comprehensive physical examination. Participating veterans are given the following baseline studies: a complete blood count, blood chemistries, enzyme studies, and urinalysis. A chest x ray is taken if medically necessary. Additional appropriate diagnostic studies are performed and consultants are obtained as indicated by the patient’s symptoms and physical and laboratory test result. Laboratory and other finding are filed in the veteran’s permanent record, maintained by the VA medical system.

In gathering each veteran’s medical history, the examiner records the time of onset of symptoms or conditions, the intensity of symptoms or conditions, the degree of physical incapacitation, and details of any treatment received. The examiner pays special attention to conditions and diagnoses that may be associated with service in the Operation Iraqi Freedom. Following the examination, the VA Environmental Health Clinician is responsible for personally discussing with each individual veteran the findings of the examination and completed diagnostic studies. In addition, each veteran will receive a followup letter explaining these finding and advising him or her of future actions or recommendations.

Operation Enduring Freedom veterans are not eligible for the Gulf War Registry health exam and may not be included in the Registry. However, VA health care providers are equally concerned about the medical difficulties that those who served in Afghanistan have experienced, and have welcomed concerned Afghanistan veterans to come to VA for a medical examination similar to that offered to Iraqi Freedom veterans.

Since 1998, VA has been authorized to provide a broad range of health care services to U.S. veterans who served on active duty in a designated theater of operations, which would include Afghanistan. Such veterans are eligible for 2 years after leaving the military for VA hospital care, medical services, and nursing home care for any illness, even if there is insufficient medical evidence to conclude that their illness was a result of their combat service. Dental services are not

included in the 2-year program. What this means is that combat veterans have access to high quality health care at VA medical facilities for 2 years after their separation from military service, based on their service in combat, without having to prove that their health problems may be related to their combat service or to toxic exposures during their active service.

After the 2 years have ended, the veteran’s copayment status will depend on whether the medical condition was officially found by VA to be service-connected or whether the veteran is otherwise qualified for care. He or she will be enrolled in the appropriate priority group level. For information regarding enrollment, see [www.VA.gov/elig/](http://www.VA.gov/elig/) or contact the nearest VA medical center.

For locations of VA facilities, consult the local telephone directory under “U.S. Government” listings, see [www.VA.gov](http://www.VA.gov) or call **877-222-VETS** (or **8387**).

Additional questions should be sent as follows:

**Mr. Donald J. Rosenblum**

Deputy Director, Environmental Agents Service (131)  
Attn: OIF/EF REVIEW –Q’s & A’s  
Department of Veterans Affairs  
810 Vermont Avenue, NW  
Washington, DC 20420

*We will answer as many questions as possible and will not identify the questioner. Questions about personal, medical problems are not generally considered appropriate for inclusion in the newsletter.*

## **Ionizing Radiation Fact Sheets Available, One on Depleted Uranium**

A series of fact sheets known as “Ionizing Radiation Briefs” has recently been prepared and released by the Environmental Agents Service. Each stand alone fact sheet covers an aspect or concern of veterans who were exposed to ionizing radiation.

Included among the Briefs is a 4-page fact sheet on depleted uranium (DU), suspected by some individuals as the cause of some health problems experienced by some who served in the Gulf War or in Afghanistan. Other available briefs provide general information on ionizing radiation, describe the ionizing radiation registry, discuss the VA’s disability compensation program, identify information resources on radiation health effects, list illnesses linked to ionizing radiation, and offer further information on related topics.

Readers can get the DU brief or any other or all available ionizing radiation fact sheets from the Environmental Health Coordinator at the nearest VA medical center or from the Environmental Agents Service (131), ATTN: IR BRIEFS, VA Central Office, 810 Vermont Avenue, N.W., Washington, DC 20420. Also the Briefs are available online at [www.VA.gov/Irad](http://www.VA.gov/Irad).

## What's New in Depleted Uranium and Health

- Possible health problems from being exposed to depleted uranium (DU) have been a controversy and a concern ever since DU was used in the 1991 Gulf War.
- “Friendly fire” casualties who have DU shrapnel still in their bodies are being carefully followed at the Baltimore VA Medical Center DU Screening Program. Other than the wounds caused by the shrapnel itself, and continued high levels of DU in their urine, so far, no other health problems related to DU have been found in these veterans.
- In 2000, the independent National Academy of Sciences Institute of Medicine concluded that there was not enough scientific evidence to show that DU exposure caused any health problems for veterans of the 1991 Gulf War. Their report can be seen at [www.nap.edu](http://www.nap.edu).
- Published scientific research on veterans from the 1991 Gulf War has not shown any health effects to be clearly related to DU exposure, even among veterans with retain DU fragments in war wounds (other than the sometimes very serious shrapnel wound itself).
- For veterans who are concerned about DU exposure, VA offers a DU urine screening test through the Baltimore VA Medical Center. Every veteran of the 1991 Gulf War and the more recent conflicts in Southwest Asia is eligible for the DU screening program.
- As of December 31, 2004, VA has tested 327 veterans of the Gulf War for DU. Only a few of these had slightly elevated urine uranium levels which appear to have no health significance.
- Trace amounts of natural uranium are part of our environment, and all of us are exposed through food and water. This background exposure can be detected as uranium coming out in urine. But this is not considered to be a significant health concern, except perhaps in a few areas that have unusually high levels of background uranium in drinking water.
- The United Nations Environment Programme is reported to be studying a number of sites in Iraq. This group has published three studies examining DU use in the former Yugoslavia and concluded that “The levels of DU contamination were not a cause for alarm.”
- The World Health Organization 2003 DU fact sheet stated that there is “inadequate/insufficient” evidence of DU health effects in humans in previous conflict zones.
- Not all DU health questions have been conclusively resolved, although the bulk of past clinical evaluations and research has not shown it to be a major health risk. Therefore, the DU testing program in Baltimore will continue indefinitely.

- The latest report to Congress on Federal Sponsored Research on Gulf War Veterans’ Illnesses for 2002 listed ten studies on DU.

### About the “Review”

The “OIF and OEF Review” is produced by VA’s Environmental Agents Service (EAS) to provide information on long-term health and other concerns of Operation Iraqi Freedom and Operation Enduring Freedom veterans, their families, and others. The “Review” describes actions by VA and other Federal departments and agencies to respond to these concerns and gives updates on a wide range of VA programs for veterans. For other issues of this newsletter, and related information regarding the current conflict in Iraq, please see our Web site at [www.VA.gov/GulfWar](http://www.VA.gov/GulfWar).

EAS anticipates publication once or twice a year, depending on the amount of news on this subject and on budgetary considerations. This issue was completed in early February 2005. It does not include developments that occurred after that time.

Comments, questions, and suggestions for future issues are encouraged and can be sent to the Gulf War Review, Donald J. Rosenblum, Deputy Director, Environmental Agents Service (131), VA Central Office, 810 Vermont Avenue, N.W., Washington, DC. 20420.

*Requests for additional copies of this and/or future issues should also be sent to Mr. Rosenblum. Supplies are limited. Please specify the quantity and issue date requested.*

### Clarification

*The earlier issues of this publication included stories on the 2-year rule for recent combat veterans. Under this rule, military veterans who served in a combat zone or area of hostilities comparable to that seen during combat are eligible for 2 years of free medical care from VA for many conditions. That is to say, veterans do not have to prove that a medical problem is connected to their military service to receive free VA care for that condition, nor must they have relatively low incomes.*

*We want to clarify that the benefit does not cover treatment for medical problems clearly unrelated to military service and disorders that existed before the person joined the military unless the condition worsened during military service.*

*Furthermore, while the article correctly reported the above information, it neglected to explain that dental care eligibility is totally different from medical care, and*

that dental services are not covered by the 2-year rule. We regret any problems that our omission may have caused.

## Information on VA Disability Compensation

Like all veterans, Operation Iraqi Freedom and Operation Enduring Freedom veterans may be eligible for monthly payments, called disability compensation, from VA if they are suffering from service-connected illnesses or injuries. The disability must have happened or made worse during active military service. Furthermore, the veteran must have left military service through separation or discharge under conditions that were other than dishonorable.

Disability compensation varies according to the degree of disability and the number of dependents. Benefits are not subject to Federal or state income tax. The receipt of military retirement pay, disability severance pay, and separation incentive payments known as SSB and VSI (Special Separation Benefits and Voluntary Separation Incentives) also affects the amount of VA compensation paid.

The disability ratings range from 0 to 100 percent (in increments of 10 percent). For example, in 2005, an OIF or OEF veteran with a disability rating of 10 percent receives \$108; a veteran with disability rating of 50 percent gets \$646; and a veteran who is totally disabled and evaluated at 100 percent receives \$2,299 monthly.

Veterans with disability ratings between 30 and 100 percent are also eligible for monthly allowances for a spouse ranging from \$39 to \$130, and for each child, \$19 to \$66. (The amount depends on the disability rating.)

A veteran who is in need of regular aid and attendance of another person, or who is permanently housebound may be entitled to additional benefits. VA must make that determination before the veteran can get these benefits. Additional information including online applications can be seen at [www.VA.gov](http://www.VA.gov).

### Must Apply to be Considered

Compensation is not automatically provided to the OIF, OEF, or other veterans. VA veterans service representatives (VSR) can provide the necessary application and assist veterans who need help in completing it. VSR's are located at all VA Regional Offices, in VA medical centers, and at most VA clinics. For help in locating a VSR near you, call the following toll-free telephone number: **1-800-827-1000** or go online at [www.VA.gov](http://www.VA.gov).

### Other Benefits

In addition to the compensation program described above, individual OIF and OEF veterans may be eligible for the full range of other benefits offered

by VA, including education and training, vocational rehabilitation, home loan guarantees, life insurance, pension, burial benefits, and more.

To learn more about VA's programs, OIF veterans and other interested parties can visit the VA home page [www.VA.gov](http://www.VA.gov) or call **1-800-827-1000**.

*This information was provided by benefit experts in the Veterans Benefits Administration in VA Central Office.*

## Address Changes and Duplicates

If this newsletter has your old address, please use this form to update our mailing list. Send the completed form to the Gulf War Review, Austin Automation Center (200/397A), 1615 Woodward Street, Austin, TX 78772-0001. If you have access to the Gulf War Review via the VA Web site [www.VA.gov/GulfWar](http://www.VA.gov/GulfWar) and wish to discontinue receiving a copy by mail, please complete the above form and return it to the Austin Automation Center. If you are receiving more than one copy of the newsletter, please let us know. Write to the address above. Please provide your name, address, and social security number. Thank you.

Check or circle the language that describes your situation.

My address has changed, and I would like to continue to receive the newsletter.

I am receiving more than one copy, but I only want to get a single copy.

I don't need to get the newsletter by mail as I can read it at [www.VA.gov/GulfWar](http://www.VA.gov/GulfWar).

Other (explain) \_\_\_\_\_

Please print your:

First Name \_\_\_\_\_

Middle \_\_\_\_\_

Last \_\_\_\_\_

SSN: \_\_\_\_\_

New Street/RFD/Military Unit: \_\_\_\_\_

APO/FPO: \_\_\_\_\_ (Indicate which if applicable)

City: \_\_\_\_\_

Alpha State/or APO/FPO Code: \_\_\_\_\_

ZIP Code: \_\_\_\_\_

## **WRIISCs Are Ready to Help OIF and OEF Combat Veterans**

VA's War Related Illness and Injury Study Centers (WRIISCs) provide service to combat veterans who have difficult-to-diagnose disabling illnesses through clinical care, risk communication, education, and research that focuses on the potential environmental exposures and adverse health outcomes.

The Centers replaced the Gulf War Referral Centers several years ago, expanding their mission to offer comprehensive clinical care to combat veterans of all eras. The two current centers are located at VA medical centers in Washington, DC, and East Orange, New Jersey. Center officials work closely with Department of Defense personnel who are performing similar post-deployment health issues for active duty service members and veterans. Once a diagnosis is determined, treatment, based on the WRIISC's conclusions, is provided by the VA medical center that referred the veteran.

The WRIISCs were set up to respond to the health problems of veterans from both past and future conflicts. Improving the care of patients with war-related conditions require the same scientific rigor American health scientists have applied to other important problems.

Some veterans have persistent unexplained symptoms following deployment to a combat zone. Individual veterans who have completed a thorough medical evaluation at their local VA medical center may be eligible for an in-depth examination and evaluation at one of the WRIISCs. VA primary care providers of veterans with undiagnosed illnesses can request an evaluation at one of the WRIISCs. The referral process is coordinated by VA Central Office. Referral acceptance is a joint decision of VA Central Office, the WRIISCs, the referring providers, and the patient. More than 750 individuals have been treated at the two WRIISCs during the past 3 years.

Veterans may not refer themselves. Patients interested in a referral should work through their VA health care provider. For additional information, see [www.VA.gov/EnvironAgents](http://www.VA.gov/EnvironAgents) or call **1-800-PGW-VETS (1-800-749-8387)**.

## **Delays Enable Increased Printing and Distribution of Newsletter**

The headline of the lead article of the June 2004 issue of Operations Iraqi Freedom/Enduring Freedom (OIF/OEF) Review declared that it was being mailed directly to approximately 136,000 recently returned veterans of the wars in Iraq and Afghanistan. The article was true when written, but an interesting and unusual thing happened since its preparation. The roster of Gulf War and Afghanistan returned veterans continued to grow and reached about 180,000 before the newsletter was distributed. In response, VA printed and mailed tens of thousands of additional copies. Future issues are likely to go to even more veterans.

In addition, copies of all issues of this newsletter are continuing to be sent to all VA medical centers, VA regional offices, vet centers, veterans service organizations, and other interested groups and individuals.

Anyone who wants back issues and future editions of the newsletter can get them at [www.VA.gov/GulfWar](http://www.VA.gov/GulfWar). Copies of these newsletters are continuing to be listed under Gulf War Review, a separate newsletter also prepared by VA's Environmental Agents Service in Washington, DC.

The address for the Environmental Agents Service is: Environmental Agents Service (131), VA Central Office, 810 Vermont Avenue, N.W., Washington, DC 20420. The office can also provide you with additional copies if available.

## Where to Go for Information and Assistance

**Active duty military** personnel with questions or concerns about service in Southwest Asia (including Operations Desert Storm, Desert Shield, Iraqi Freedom, and Enduring Freedom) - contact your commanding officer or call the Department of Defense (DoD) Gulf War Veterans' Hotline (1-800-796-9699) for information. DoD also offers the "**Direct Veterans Hotline**," with the toll-free number 1-800-497-6261.

**Any Gulf War veterans (Included Operations Desert Shield, Desert Storm, and Iraqi Freedom veterans)** with concerns about their health should contact their nearest VA medical center. The telephone number can be found in your local telephone directory under Department of Veterans Affairs in the "U.S. Government" listings. Medical care is available, and a Gulf War Registry examination for veterans who served in Iraq is also available on request.

The VA Gulf War Information Helpline can also provide information and assistance. The toll-free telephone number is 1-800-PGW-VETS (1-800-749-8387).

Check our Web sites for more Gulf War information on health care and other benefits (including those for Operations Iraqi Freedom, Desert Shield, and Desert Storm veterans) at [www.VA.gov/GulfWar](http://www.VA.gov/GulfWar).

Gulf War veterans in need of **marital/family counseling** should contact the nearest VA medical center or VA Vet Center, also listed in your phonebook under Department of Veterans Affairs in the "U.S. Government" listings. For additional information about these programs call the Gulf War Information Helpline at 1-800-PGW-VETS (1-800-749-8387).

Gulf War veterans seeking disability compensation for illnesses incurred in or aggravated by military service can contact a Veterans Benefits Counselor at

the nearest VA regional office or health care facility at 1-800-827-1000, or call the VA Gulf War Information Helpline at 1-800-PGW-VETS (1-800-749-8387). You can also start a claim online at [www.VA.gov](http://www.VA.gov).

Gulf War veterans interested in learning about the wide range of **benefit programs** administered by VA should contact a Veterans Benefits Counselor at the nearest VA regional office or health care facility at 1-800-827-1000, or call the VA Gulf War Information Helpline at 1-800-PGW-VETS (1-800-749-8387).

Representatives of **veterans service organizations**, including the American Legion (1-800-433-3318), Veterans of Foreign Wars of the United States (1-800-VFW-1899), Disabled American Veterans (1-877-426-2838), etc., have been very helpful to Gulf War veterans, especially veterans who are seeking disability compensation. (These organizations are cited as examples. There are many other excellent organizations. VA does not endorse or recommend any one group over another.)

**County Veterans Service Officers** also have been of great help to many military veterans, including those who served in the Gulf War, who are seeking benefits they earned through their service to the Nation.

For additional Federal benefit information, see VA's **Federal Benefits for Veterans and Dependents** booklet. It is updated annually to reflect changes in law and policies. It is available for purchase from the U.S. Government Printing Office, Superintendent of Documents, Washington, DC 20402, Web site: [bookstore.gpo.gov](http://bookstore.gpo.gov). VA's World Wide Web pages are updated throughout the year to present the most current information. The VA home page ([www.VA.gov](http://www.VA.gov)) contains links to selections on compensation and pension benefits, health care benefits and services, burial and memorial benefits, etc.



**Department of  
Veterans Affairs**  
Central Office (131)  
810 Vermont Avenue, N.W.  
Washington, DC 20420

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**OPERATIONS IRAQI FREEDOM/  
ENDURING FREEDOM REVIEW**  
*Information for Veterans Who  
Served in Iraq and Afghanistan  
and Their Families*  
February 2005