U.S. and Vietnam Officials Meet to Pursue Joint Research on Agent Orange

Early this year, representatives of the U.S. National Institute of Environmental Health Sciences (NIEHS) held a series of meetings with officials of the government of Vietnam to explore cooperative research efforts between our two countries.

The U.S.-Vietnam Scientific Conference on Human Health and Environmental Effects of Agent Orange/Dioxin was held March 3-6, 2002, in Hanoi, Vietnam. On March 7, a select panel of international scientists identified data gaps in our understanding of the health and environmental effects of dioxin in Agent Orange, and recommended general areas of research in Vietnam that would help fill these gaps. On March 8, senior scientists from several Vietnamese and U.S. government agencies met in Hanoi to establish an agreement for future research activities using the findings from the 4-day conference and 1-day workshop as a guide.

As a result, on March 10, 2002, Dr. Anne Sassaman, Director of NIEHS Extramural Research and Training, and Dr. Nguyen Ngoc Sinh, General Director of the National Environmental Agency for Vietnam, signed a document outlining future joint research on human health and the environmental effects of Agent Orange/dioxin. Additional discussions will further establish the process and will facilitate the continuing exchange between our two countries.

“This agreement and the scientific conference that preceded it mark a new step forward in our relations with Vietnam. It is too soon to predict what the eventual benefits will be, but it is certain that Americans and Vietnamese working together

Jesse Brown, a “Veteran’s Veteran” Dies at 58; Former VA Secretary Expanded Benefits for Veterans with Illnesses Associated with Agent Orange Exposure

On August 15, 2002, former Secretary of Veterans Affairs died after a long illness.

“Jesse Brown was the veteran’s veteran – a man of unceasing commitment and advocacy for all who have served their country, especially those who were disabled in service,” declared Secretary of Veterans Affairs Anthony J. Principi. “He leaves behind many friends at VA and throughout the veterans community. We are saddened not only by this personal loss but also by the stalling of his staunch voice and good counsel.”

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The scientists from both countries who hammered out this agreement deserve a great deal of credit for keeping their common goal clearly in focus as they worked to craft a document in which they can all take pride.

“‘This framework for collaboration is an important step forward,’” commented Dr. Sassaman. “The real difficulties lie ahead; agreeing to do research is the easy part. The more difficult task will be to develop research studies that are definitive and address the underlying causes of disease in Vietnam.”

The NIEHS, part of the Department of Health and Human Services’ National Institutes of Health, has been the lead U.S. government agency in establishing for the U.S. a cooperative research program on Agent Orange/dioxin with the Vietnamese government agencies. Dr. Christopher Portier, Director, NIEHS’ Environmental Toxicology Program, chaired the U.S. organizing committee for the March 3-6 joint scientific conference. The conference was one of two projects agreed upon at a U.S.-Vietnamese government meeting in Hanoi in July 2001.
One joint project is a pilot study on screening for dioxins in soil and sediments. As of mid-August, 10 soil samples had been recently sent from Vietnam to Hawaii, where they will be transported to NIEHS in Research Triangle Park, NC. The samples are from a single site in Danang, the airport.

For additional information about the conference and/or research planned or ongoing within Vietnam, see www.niehs.nih.gov. The agreement document, known as a memorandum of understanding, with its attachments can be viewed at this site.

(Jesse Brown...continued from page 1)

Brown served as Secretary of Veterans Affairs from January 1993 until July 1997. Under his leadership, VA decentralized its health care structure, began to offer more outpatient, primary care services and expanded benefits for former POW’s and for veterans who suffered from Agent Orange and Gulf War-related illnesses. He is also credited with increasing VA services to homeless veterans and expanding programs for women veterans and veterans suffering from post-traumatic stress disorder.

Before coming to VA, Brown spent a career with the Disabled American Veterans, serving as Executive Director of its Washington, DC office from 1989 to 1993. He was injured by enemy fire while serving as a Marine in Vietnam.

Understood and Took Action on Agent Orange Concerns

As Secretary, Brown recognized the following conditions for presumptive service-connection based on exposure to herbicides in Vietnam: multiple myeloma, Hodgkin’s disease, porphyria cutanea tarda, respiratory cancers, acute and subacute transient peripheral neuropathy, and prostate cancer.

Also, he sent legislation to Congress (enacted with minor changes) that authorizes VA to provide benefits and services to Vietnam veterans’ children who have spina bifida.

Final Regulations on Monetary Benefits for Women Vietnam Veterans’ Children with Birth Defects Published

On July 31, 2002, the first of three final rules implementing provisions of Public Law 106-419 that relate to the benefits and services available for women Vietnam veterans’ children with certain birth defects were published in the Federal Register. The published final rule provides for payment of a monetary allowance for an individual with disability from one or more covered birth defects who is a child of a woman Vietnam veteran.

Three proposed regulations (providing health care and vocational training, as well as monetary benefits) were published in the Federal Register on January 2, 2002, for public comment. VA officials carefully considered the comments received. Publication of the remaining two final rules is anticipated in the near future. All three of the final rules are or will be retroactive to December 1, 2001.

IOM Fourth Biennial Update on Health Effects Expected in Spring 2003

VA officials are awaiting completion of the National Academy of Sciences’ (NAS) Institute of Medicine (IOM) fourth update on the health effects of Agent Orange and other herbicides used in Vietnam. VA has been told by IOM officials that this report will be completed in March 2003.

The pending report, which will be identified as Update 2002, will be the seventh report generated by the IOM under Public Law 102-4, the Agent Orange Act of 1991. The IOM previously released an initial report, three updates, and two special reports (one on diabetes, and a second one on acute myelogenous leukemia in the children of Vietnam veterans).

Public Law 102-4 directs VA to obtain from the NAS an independent scientific review of the evidence regarding associations between diseases and exposure to herbicides used in support of military operations in the Republic of Vietnam during the Vietnam War.
That law indicates that for each disease reviewed, it should be determined: (a) whether there is an association between the disease and herbicide exposure; (b) the increased risk of the disease among those exposed to herbicides during service in Vietnam during the Vietnam era; and (c) whether there exists a plausible biological mechanism or other evidence of a causal relationship between herbicide exposure and the disease. The Academy is required to include in its report to VA a full discussion of the scientific evidence and reasoning that led to its conclusions.

In its initial report in this series, *Veterans and Agent Orange: Health Effects of Herbicides Used in Vietnam*, released on July 27, 1993, IOM assigned each of the diseases considered to one of four evidentiary categories. The distinctions between categories were based on the weight of the “association.” The four evidentiary categories were: (1) sufficient evidence of an association, (2) limited/suggestive evidence of an association, (3) inadequate/insufficient evidence to determine whether an association exists, and (4) limited/suggestive evidence of no association. The NAS used the same categories to characterize health outcomes in all of its subsequent Agent Orange reports. It is anticipated that they will continue to use these categories.

Under Public Law 102-4, whenever VA determines that a positive association exists between exposure to an herbicide agent and the occurrence of a disease, the Secretary of Veterans Affairs shall prescribe regulations providing a presumption of service connection for that disease. In making the determination, VA must consider reports received from the NAS and all other credible medical and scientific information. To be considered a “positive association” the credible evidence in favor of an association must be equal to or greater than credible evidence against an association. In evaluating studies for this purpose, Public Law 102-4 directs VA to consider whether the findings of an association are statistically significant, are capable of replication, and withstand peer review.

**Reports Have Impact on Policy**

As mandated in Public Law 102-4, VA has given great weight to IOM conclusions. All of the health conditions associated with Agent Orange exposure categorized by IOM as “sufficient evidence of an association” or “limited/suggestive evidence of an association” have been recognized by VA for presumptive service-connection.

On July 27, 1993—the day the first IOM report was released—Secretary Jesse Brown announced that VA would recognize Hodgkin’s disease and porphyria cutanea tarda for service connection, in addition to soft tissue sarcoma, chloracne, and non-Hodgkin’s lymphoma already recognized by VA.

Two months later, Secretary Brown announced that multiple myeloma and respiratory cancers would also be added to the list of conditions presumed to be service connected based on exposure to a herbicide containing dioxin. VA did not, at first, recognize prostate cancer, although it had been classified in the “limited/suggestive evidence of an association” category by IOM.

In 1996, 2 months following release of the first IOM update, President Clinton and Secretary Brown announced recognition of acute and subacute transient peripheral neuropathy, which the IOM had elevated to its Category 2, and prostate cancer, for which there was additional evidence of an association. VA also asked and received authority from Congress to provide benefits and services for Vietnam veterans’ children born with spina bifida. *Update 1998* provided no significant changes in the top two categories.

In 2000, in a special report requested by VA, IOM found that there is “limited/suggestive evidence of an association” between exposure to herbicides used in Vietnam and Type 2 diabetes. VA promptly recognized that condition in Vietnam veterans.

*Update 2000*, like *Update 1998*, had no changes (except reaffirming the diabetes conclusion) in the top two categories for Vietnam veterans, but did have a finding about acute myelogenous leukemia (AML) in their children. IOM concluded that there is “limited/suggestive” evidence of an association between exposure veterans’ exposure to herbicides and AML in their children. This prompted Secretary Principi to order VA officials to begin setting up benefits for affected children. The
Secretary indicated that he would seek congressional authority to provide benefits and services for these children as soon as possible.

However, shortly after release of the IOM report, VA officials learned that there could be a problem with one of the studies that the IOM and VA conclusion was based on. In fact, the investigators admitted their mistake, issued a revision and an apology. In light of this development, Secretary Principi asked the IOM to reassess the AML finding. The IOM reassessment report, released in February of this year, concluded that there is “inadequate or insufficient evidence” to determine if an association exists between exposure to the herbicides used in Vietnam and AML in the children of Vietnam veterans. This ended VA action on AML.

Copies of the IOM reports are available from the National Academy Press, 2101 Constitution Avenue, N.W., Box 285, Washington, DC 20055. The telephone numbers are 1-800-624-6242 and 202-334-3313. Additional information and copies of some of the reports are on the National Academy Press home page www.nap.edu. Readers can learn more about the IOM on the IOM’s home page www.iom.edu.

NAS is a private, nonprofit society of distinguished scholars engaged in scientific and engineering research, dedicated to the furtherance of science and technology and to their use for the general welfare. Upon the authority of the charter granted to it by Congress in 1863, the Academy has a mandate that requires it to advise the federal government on scientific and technical matters. Dr. Bruce M. Alberts is president of NAS.

In 1970, NAS established IOM to secure the services of eminent members of appropriate professions in the examination of policy matters pertaining to public health. IOM operates under the responsibility given to NAS by its charter to be an adviser to the Federal Government and, upon its own initiative, to identify issues of medical care, research, and education.

Agent Orange Brief Fact Sheet Series Updated

The Environmental Agents Service (EAS) in VA Central Office in Washington, DC, recently updated a series of Agent Orange fact sheets, known as “Agent Orange Briefs.” The updated fact sheets, dated August 2002, have been sent to all VA medical centers and to many other interested parties.

All of the fact sheets have been placed on the World Wide Web at www.va.gov/agentorange. The revised “Briefs” describe a wide range of Agent Orange-related matters. The following twenty-one “Briefs” are available:

A1. Agent Orange - General Information
A2. Agent Orange Class Action Lawsuit

B1. Agent Orange Registry
B2. Agent Orange - Health Care Eligibility
B3. Agent Orange and VA Disability Compensation
B4. VA Information Resources on Agent Orange and Related Matters

C1. Agent Orange - The Problem Encountered in Research
C2. Agent Orange and Vietnam Related Research - VA Efforts
C3. Agent Orange and Vietnam Related Research - Non-VA Efforts

D1. Agent Orange and Birth Defects
D2. Agent Orange and Chloracne
D3. Agent Orange and Non-Hodgkin’s Lymphoma
D4. Agent Orange and Soft Tissue Sarcomas
D5. Agent Orange and Peripheral Neuropathy
D6. Agent Orange and Hodgkin’s Disease
D7. Agent Orange and Porphyria Cutanea Tarda
D8. Agent Orange and Multiple Myeloma
D9. Agent Orange and Respiratory Cancers
D10. Agent Orange and Prostate Cancer
D11. Agent Orange and Spina Bifida
D12. Agent Orange and Diabetes

Changes in law, research developments, and compensation policy have necessitated changes in the “Briefs”. The revised fact sheets include information about the most recent reports of the National Academy of Sciences’ Institute of Medicine on Agent Orange, VA’s decision to provide service-connection to Vietnam veterans with diabetes, the decisions to open the Agent Orange Registry to certain Vietnam-era veterans who served in Korea and others who were exposed to herbicides during testing, transportation or spraying for military purposes, and the enactment of Public Law 106-419, which will provide monthly disability allowances, vocational training, health care to women Vietnam veterans’ children born with certain medical problems. Some statistical information was also updated.

Earlier versions of the “Briefs” were released in October 1988, October 1989, September 1990, July 1991, February 1992, January 1993, September 1994, January 1997, December 1997, August 1999, and January 2001. Donald J. Rosenblum, editor of the Agent Orange Review, founded the fact sheet series and has been responsible for all of the updates. For the most recent version, he was assisted by Hispanic Association of Colleges and University Summer intern Irene Vasquez of Walnut, California. Copies of these outdated issues are no longer available.

For additional information or a copy of some or all of the updated fact sheets, contact the Agent Orange Registry Coordinator at the nearest VA medical center, write to Agent Orange Briefs, Environmental Agents Service (131), VA Central Office, 810 Vermont Avenue, NW, Washington, DC 20420, or go to the following Web site, www.va.gov/agentorange.

New Publications for Gulf War and Afghanistan War Veterans

In addition to this newsletter and other publications regarding Agent Orange, the VA Environmental Agents Service has produced numerous informational items for veterans who may have been exposed to a variety of health hazards during service in the Gulf War or in Afghanistan.

Materials available on Gulf War veterans’ illnesses include research reports (in English and Spanish), a questions-and-answers brochure (in English and Spanish), reports on specific environmental hazards, and a continuing medical education independent study guide for health care providers.

Materials for Afghanistan veterans include a questions-and-answers brochure and a fact sheet on health care and assistance.

Interested veterans can visit our Web pages at www.va.gov/gulfwar and www.va.gov/environagents or contact the nearest VA medical center, or the Environmental Agents Service (131), VA Central Office, 810 Vermont Avenue, N.W., Washington, DC 20420.

Q’s and A’s

The Q’s and A’s (Questions and Answers) feature of the “Review” responds to questions and concerns that have been received from various sources. Questions for future issues should be sent to Mr. Donald J. Rosenblum, Deputy Director, Environmental Agents Service (131), VA Central Office, 810 Vermont Avenue, N.W., Washington, DC 20420. We cannot guarantee that all questions will be used in this column, but we will respond to as many as we can.

Q. EW asked: Is a veteran who served in 1976 on the U.S.S. Enterprise eligible for the Registry examination?

A. Senior Registry Coordinator Helen Malaskiewicz, Environmental Agents Office, VA Central Office, responds: No, unless the veteran was exposed to dioxin or other toxic substances in a herbicide or defoliant during the testing, transporting, or spraying of herbicides for military purposes. VA policy and procedure handbook 1302.1 expanded the Agent Orange Registry Program to provide registry examination eligibility to all U.S. veterans who may have been exposed to dioxin and other toxic substances in a herbicide or defoliant during the testing, transporting, or
Address Changes and Duplicates

If you have recently moved, please use this form to update our mailing list. Send completed form to the Agent Orange Review, Austin Automation Center (200/397A), 1615 Woodward Street, Austin, TX 78772-0001. Thank you.

Please print your:

First Name ____________________________
Middle________________________________
Last __________________________________
SSN: __________________________________

New Street/RFD/Military Unit:
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APO/FPO: ______ (Indicate which if applicable)
City: _________________________________
Alpha State/or APO/FPO Code: ____________
ZIP Code: _____________________________

If you are receiving more than one copy of the newsletter, please let us know. Write to the Agent Orange Review, Austin Automation Center (200/397A), 1615 Woodward Street, Austin, TX 78772-0001. Thank you

spraying of herbicides for military purposes. Previously, eligibility was restricted to veterans who served in Vietnam between 1962 and 1975, and veterans who served in Korea between 1968 and 1969.

Q. Is there a provision in the Nehmer decision that the last date veterans have to file for conditions that are affected by that decision is July 10, 2002. If they file after that date they are not entitled to retroactive benefits?

A. David Barrans of our Office of General Counsel answered as follows: There is no such deadline for filing claims to receive retroactive payments under Nehmer. The retroactive payment is based on the fact that a claim for benefits filed during a certain period in the past (generally between September 25, 1985, and the effective date of the regulation authorizing the benefit sought). Thus, a veteran who files his or her first claim for benefits for a herbicide-related condition today will not be entitled to retroactive payment, because there was no prior claim. However, if the veteran did file a prior claim during the relevant past period, he or she may qualify for the retroactive payment under Nehmer whenever the claim is reopened and granted – there is no time limit on filing the new/reopened claim.

(For additional information about the Nehmer Case, see the “Legal Notice “ and “What Does It Mean” articles in the May 1990 issue pages 3-4, and the August 1990 issue, pages 5-6, of the Agent Orange Review, available on-line at www.va.gov/agentorange. Also see the “Nehmer Case Revisited” article in the August 1999 issue of the Agent Orange Review.

Q. Can a Vietnam veteran get an Agent Orange Registry examination for his son?

A. Ms. Malaskiewicz replied: Children of Vietnam veterans are not eligible for VA Registry examinations. However, if a child of a Vietnam veteran has spina bifida, he/she is eligible for health and other benefits. Furthermore, under Public Law 106-419, children born to women Vietnam veterans may be eligible for similar benefits if they have certain covered birth defects. For additional information, please call 1-800-827-1000.

Independent Study Guide on Vietnam Veterans/Agent Orange Health Issues on the Web

The recently completed Continuing Medical Education independent study program entitled “Vietnam Veterans and Agent Orange Exposure,” prepared by the Department of Veterans Affairs (VA) Environmental Agents Service in conjunction
with the Employee Education System, is now on the World Wide Web. The Agent Orange program is at www.va.gov/agentorange/docs/vhiagentorange.pdf.

The module is one of ten available so far as part of the Veterans Health Initiative (VHI). The VHI program is an effort to help health care professionals understand the unique concerns of veterans, including the health problems associated with Agent Orange. In addition to Agent Orange, independent study guides are available on the following topics:

- Cold Injury
- Gulf War
- Hearing Impairment
- Post-Traumatic Stress Disorder
- Prisoners of War
- Radiation
- Spinal cord Injury
- Traumatic Amputation and Prosthetics
- Visual Impairment and Blindness

The modules feature photos of military scenes, illustrations, bibliographies, and in some cases, moving testimonials by veterans, in addition to a review of medical management of the condition. At the end, readers can take an online test on their knowledge of the subject. All of these program can be seen at www.va.gov/VHI.

“Having a better understanding of how certain health problems are linked to military service and the recommended evaluation and treatment approaches will enhance care for veterans,” explains Dr. Susan Mather, VA’s Public Health and Environmental Hazards Chief Officer, whose staff is spearheading the VHI with the help of experts in and outside VA and in collaboration with the VA’s Employee Education System.

“Health care providers from VA and the Department of Defense can earn continuing education credits for completing the modules, but all health care professionals who care for veterans will gain from reading the material,” she adds.

Agent Orange Registry Statistics

Here are some figures, as of August 26, 2002, from the Agent Orange Registry health examination program. In 1978, VA initiated this examination program in response to concerns expressed by Vietnam veterans and their families regarding the possible long-term health consequences of exposure to Agent Orange and other herbicides used in Vietnam.

Total Number of Veterans Examined Since the Program Started – 305,924
Total Number of Follow-Up Examinations Since the Program Started – 36,791
Total Registry Examinations – 342,715
Total Agent Orange Registry Examinations Reported in Most Recent Month – 1,327

Updated VA Benefits Book Available

The 2002 edition of the Department of Veterans Affairs’ popular handbook Federal Benefits for Veterans and Dependents updates the rates for certain federal payments and outlines a variety of programs and benefits for American veterans.

Most of the Nation’s 25 million veterans qualify for some VA benefits, which range from health-care program enrollment, educational and housing assistance, to burial in a national cemetery. In addition to describing benefits provided by VA, the latest edition of the 100-page booklet provides an overview of programs and services for veterans provided by other federal agencies.

Federal Benefits for Veterans and Dependents includes resources to help veterans access their benefits, comprising a listing of various toll-free phone numbers, World Wide Web sites and a directory of VA facilities throughout the country. The handbook can be downloaded free from VA’s Web site at www.va.gov/opa/feature/.

The handbook is one of the U.S. Government Printing Office’s (GPO) top selling consumer publications. GPO accepts credit card orders for the publication at 1-866-512-1800 (toll-free) for a cost of $5 each to U.S. addresses, $6.25 for international customers. It can be ordered by mail from the Government Printing Office at Superintendent of Documents, P.O. Box 371954, Pittsburgh, PA 15250-7954 (stock #051-000-00225-3), or on the World Wide Web at bookstore.gpo.gov.
In addition to health-care and burial benefits, veterans may be eligible for programs providing home loan guarantees, educational assistance, training and vocational rehabilitation, income assistance pensions, life insurance and compensation for service-connected illnesses or disabilities. In some cases, survivors of veterans who received benefits may also be entitled to continuing benefits.

The handbook describes programs for veterans with specific service experiences, such as prisoners of war or those concerned about environmental exposures in Vietnam or in the Gulf War, as well as special benefits for veterans with severe disabilities.

**Health Conditions Presumptively Recognized to Date**

The following health conditions are presumptively recognized for service connection. Vietnam veterans with one or more of these conditions do not have to show that their illnesses are related to their military service to get disability compensation. VA presumes that their condition is service-connected.

1. Chloracne (must occur within 1 year of exposure to Agent Orange)
2. Non-Hodgkin’s lymphoma
3. Soft tissue sarcoma (other than osteosarcoma, chondrosarcoma, Kaposi’s sarcoma, or mesothelioma)
4. Hodgkin’s disease
5. Porphyria cutanea tarda (must occur within 1 year of exposure)
6. Multiple myeloma
7. Respiratory cancers, including cancers of the lung, larynx, trachea, and bronchus
8. Prostate cancer
9. Acute and subacute transient peripheral neuropathy (Must appear within 1 year of exposure and resolve within 2 years of date of onset)
10. Type 2 diabetes

For compensation purposes, Vietnam veterans are presumed to have been exposed on their last day in Vietnam.

**Conditions Recognized in Children of Vietnam Veterans**

1. Spina bifida (except spina bifida occulta)
2. Certain other birth defects in the children of women Vietnam veterans (health care and vocational training regulations are still pending)

**New Area Offices Set Up to Improve VA Services to Veterans**

The Department of Veterans Affairs (VA) recently announced a new system for supervising the administration of financial benefits for veterans. This new organization stresses accountability and will promote consistency in operations as VA moves to implement reforms in claims processing to speed up services for veterans.

VA developed four subdivisions for its national network of regional offices that administer veterans’ benefits in compensation, pension, vocational rehabilitation and employment and other financial benefits. Four offices will be based in the field, each coordinating operations of 12 to 16 regional offices in their territory. The directors of the new area offices will report to the Associate Deputy Under Secretary for Field Operations in Washington, DC.

The new field structure replaces a former “service delivery network” of 9 groupings of the 57 regional offices reporting to two officials in Washington, one for the eastern part of the country, and the other for the west.

The changes were recommended by a task force commissioned last year to improve efficiency. The task force called for the new structure to provide clear lines of communication and to ensure uniform implementation of directives. The task force found that the loose organization of the prior groupings of regional offices did not provide an effective span of control. By contrast, the new area directors will have line authority over their group of regional offices to ensure greater accountability.
Where to Get Help

Vietnam veterans with questions or concerns about Agent Orange – contact VA’s Gulf War/Agent Orange Helpline. The national toll-free telephone number is 800-749-8387. A great deal of information is also available on our new Web page. It is located at http://www.va.gov/agentorange

Vietnam veterans (plus veterans who served in Korea in 1968 or 1969), and other veterans who may have been exposed to Agent Orange or other herbicides elsewhere during the testing, transporting or spraying of herbicides for military purposes and who are concerned about possible long-term health effects of Agent Orange exposure – contact the nearest VA medical center and request an Agent Orange Registry health examination. More than 300,000 Vietnam veterans have already participated in this program.

Vietnam veterans who need medical treatment for conditions that may be related to their exposure to Agent Orange or other herbicides used in Vietnam – contact the nearest VA medical center for eligibility information and possible medical treatment or call the following toll-free telephone number for information about eligibility and enrollment: 1-877-222-8387.

Vietnam veterans with illnesses that they believe were incurred or aggravated by exposure to Agent Orange or other aspects of military service – contact a VA veterans services representative at the nearest VA regional office or health care facility and apply for disability compensation. The counselors have information about the wide range of benefit programs administered by VA. The national toll-free number is 1-800-827-1000.

Vietnam veterans who encounter difficulties at a VA medical center – contact the “patient advocate” or “patient representative” at that facility for assistance in resolving the problem. Ask the medical center telephone operator for the patient advocate or representative.

Vietnam veterans with children who have spina bifida – contact the VA national toll-free hotline at 1-888-820-1756, or the nearest VA regional office by calling toll-free: 1-800-827-1000. Additional information on spina bifida is available from the Spina Bifida Association of America at 4590 MacArthur Blvd., N.W., Suite 250, Washington, DC 20007-4226; toll free telephone: 800-621-3141; e-mail address: sbaa@sbaa.org; and web site: www.sbaa.org/.

Representatives of veterans service organizations, including The American Legion (1-800-433-3318), Paralyzed Veterans of America (1-800-424-8200), Veterans of Foreign Wars of the United States (1-800-VFW-1899), Disabled American Veterans (1-877-426-2838), AMVETS (1-877-726-8387), Vietnam Veterans of America (1-800-882-1316), and others, have also been very helpful to Vietnam veterans seeking disability compensation. (These organizations are cited as examples. There are many other excellent veterans service organizations. VA does not endorse or recommend any specific group over another.)

County Veteran Service Officers also have been of great help to many military veterans, including Vietnam veterans, seeking benefits they earned through their service to the Nation.
Readers’ Survey

In the August 2000 issue of the *Agent Orange Review*, we included a survey of our readers to learn more about their needs and how we might improve this publication. In response, we received numerous suggestions for improving the newsletter and other aspects of our program.

We have decided to again formally solicit your comments and ideas. Please send your suggestions to Mr. Donald J. Rosenblum, Deputy Director, Environmental Agents Service (131), ATTN: Agent Orange Review Survey, VA Central Office, 810 Vermont Avenue, N.W., Washington, DC 20420, or fax them to 202-2743-9080. You can use this sheet or write to us separately.

1) What do you think of the “Review?”

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2) Does it meet your needs? Why or why not?

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3) What changes would you like to see in this publication? Additions? Deletions?

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Additional comments or suggestions?

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Thank you for your comments.