



GulfNEWS

A bi-monthly newsletter serving the interests of Gulf War veterans

Special Oversight Board Holds Open Meeting

By Austin Camacho
Public Affairs

An independent panel recently held its first public hearings here to determine how well the Defense Department is responding to the concerns of Gulf War veterans.

The Presidential Special Oversight Board for the Department of Defense Investigations of Gulf War Chemical and Biological Incidents is a seven member panel tasked with providing guidance to the Office of the Special Assistant for Gulf War Illnesses, and overseeing the DoD's investigations into those illnesses. The open hearings helped the board's members finalize their strategy for overseeing the DoD's investigations.

The board's chairman, former Senator Warren Rudman, started the sessions by making it clear that they would not be making scientific judgements. Their job, he said, was to make sure our government is doing everything it can for Gulf War veterans. He said their primary focus would be "the Defense Department's conduct of ongoing investigations and efforts in implementation of the Presidential Advisory Committee recommendations." The public hearings allowed him and the other board members to hear from Defense Department officials, veterans support groups and the Gulf War veterans themselves.

In fact, the Special Oversight Board opened its hearings with testimony from a number of interested Gulf War veterans from both active and Reserve components. They voiced concerns about depleted uranium exposure, mycoplasma incognitus and several other suspected causes of their illnesses. Some questioned if DoD was listening to all the input it got from outside medical experts. Some told their personal stories of the difficulties they encountered getting medical care and compensation. And they offered a wide range of suggestions to help find the cause of their illnesses, such as making registration in the Department of Veterans Affairs' Persian Gulf Registry mandatory, and offering new medical screenings for veterans. Comments were scheduled for five minutes each, but the panel granted each veteran more time, in one case 20 minutes, in order to hear what they had to say.

Board members had the chance to question many of the people who are driving the effort to help Gulf War vets. That included Bernard Rostker, the special assistant to the deputy secretary of defense for Gulf War illnesses. Rostker discussed his office's ef-

forts to date, including 17 case narratives, four information papers and two environmental exposure reports. He told the board about his group's outreach program, which



Office of Gulf War Illnesses' Navy Capt. Michael Kilpatrick (l.) speaks with Bernard Rostker during a break in the Special Oversight Board meeting held recently in Washington.

had answered nearly 5,000 e-mail inquiries and more than 3,500 telephone inquiries. Outreach includes the Gulflink web site, the GulfNEWS newsletter and personal visits. Dr. Rostker and his team have held 13 town hall meetings and visited five military bases, with more scheduled. Through those efforts,

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Three States Continue Gulf War Vet Bonuses

Special from
American Forces Information Service

Service members who served during the Gulf War and were legal residents of Minnesota, Massachusetts or Illinois are still eligible for cash bonuses from their home state. Minnesota is offering bonuses not only to service members who served in the Gulf, but outside the Gulf as well. Scottie Campbell, an information officer with the Minnesota Department of Veterans Affairs, offers details on the program.

"If, in fact, the person served in the war zone and received the Southwest Asia Service medal," Campbell said, "he or she will be entitled to a \$600 bonus from the state."

Campbell said service members from Minnesota who served in locations other than the Gulf, including National Guard members and Reservists who were called up for active duty, are eligible for a \$300 bonus. He said the deadline to file applications to the state of Minnesota is June 30, 1999.

Campbell said the state of Minnesota voted to award the bonus as a way to recognize the sacrifices of the men and women who served during the Gulf War.

"This is one way of honoring them—providing them with a bonus for their time," he said.

In Massachusetts, service members are eligible for a payment of \$500 if they served in the Gulf. National Guard and Reserve members who did not serve in the Gulf, but had their unit called up for duty there, are eligible for a \$300 bonus. The state of Illinois offers a \$100 bonus to service members who served in the Gulf theater of operations only.

Officials say all service members must be able to prove they were residents of either of the three states when they entered the service and remained residents during the war.

Details for the bonus programs are available from the Veterans Service offices in each state or at the following websites:
Minnesota — www.mdva.state.mn.us
Massachusetts — www.state.ma.us/sec/cis/cisvet/vetbonus.htm
Illinois — www.state.il.us/dva/bonus.htm



We recently completed our second year of operations. In the past twelve months, we have investigated and published reports on topics ranging from depleted uranium to oil well fires to reports of chemical alarms by the 11th Marines. We have pressed forward with a positive outreach program on military installations and in town hall meetings spanning the country. We have strengthened our ties with the Department of Veterans Affairs, and we have taken on the daunting—but rewarding—task of helping veterans obtain hard-to-find health records. Most importantly, we continue to pay unwavering attention to Gulf War veterans and their families.

In August, the Senate Committee on Veterans' Affairs released the report of its Special Investigation Unit on Gulf War Illness. While the report pointed out some areas of needed improvement for both the DoD and the VA, we were heartened by the SIU's finding that there was no government cover-up, "conspiracy of silence," or attempt to mislead the public.

The accomplishments of 1998 reflect our commitment to work directly with the Gulf War veterans and their families, and also to continue our efforts to earn the public's confidence in our honesty and integrity. As I mentioned in our first annual report, the loss of public credibility in the Department of Defense's ability to get the facts out in the open set our standards very high. But we made a good start to earn back the public's confidence and trust in 1997, and we did even better last year.

Of significant importance to our efforts this year is the continued confirmation by the United Nations Special Commission that there is no evidence that Iraq deployed chemical or biological weapons south of Khamisiyah, Iraq. The UNSCOM findings were endorsed by the Senate report, which also noted the lack of evidence supporting allegations of Iraqi chemical and biological warfare agent deployment. Our own investigations into reports of CW/BW agents present in southern Iraq or in Kuwait are consistent with both UNSCOM and the Senate Special Investigative Unit positions.

The UNSCOM and Senate reports refute, in large part, the conclusions published by the Presidential Advisory Committee on the Gulf War, which supported some allegations of Iraqi weapons development without the exhaustive analysis that characterizes our work. The PAC expressed a number of concerns about our work, concerns which were subsequently, and appropriately addressed in a hearing on Capitol

*From the desk of
Bernard D. Rostker
Special Assistant for
Gulf War Illnesses*



Hill before the Senate Armed Services Committee in September, and repeated to the Presidential Oversight Board for Department of Defense Investigations in November.

My office was designed around a three part mission Statement which emphasized our commitment to service personnel and veterans who served in the Gulf and focused on operational impacts on health and future force protection.

The Assistant Secretary of Defense for Health Affairs continued the specific responsibility of care for service men and women still on active duty, while the Department of Veterans Affairs is the primary health care provider for those who have left the service. We included, however, "care of those who served in the Gulf" in our mission statement to remind us that the health of our people must come first. Our mission charges us to do everything possible to understand and explain Gulf War illnesses, to inform the Gulf War veterans and the American public of our progress and then to ensure that DoD makes whatever changes are required in equipment, policy and procedures. This is not limited to just the possibility of chemical and/or biological agent exposure, but includes a broader inquiry into other possible cause of illnesses.

Over the past two years our emphasis has shifted from a focus on chemical weapons to a more balanced inquiry that includes work on pesticides, oil well fires and depleted uranium. We have listened to our veterans and initiated a program to assist them in obtaining their inpatient medical records which were filed in such a way that it was almost impossible for an individual to retrieve his or her records. We have recently reorganized to provide more emphasis on developing the lessons we need to learn and on becoming a proponent for change within the DoD. All this occurs against the backdrop of an aggressive outreach program that centers around GULFLINK, GULFNEWS, our case narrative series, our veterans contact managers, briefings, displays and military base visits and town hall meetings. It is hoped that our accomplishments of the last two years have helped to clear some of the mystery away from the Gulf War. However, the true value of our efforts can only be assessed by our veterans and the American people.

Total Force Outreach Efforts Continue

By Diana Berardocco
Public Affairs

The Office of the Special Assistant for Gulf War Illnesses will conduct an ambitious outreach to major military installations across the United States in 1999 to raise awareness of the issues surrounding Gulf War illnesses among the total force – active duty, Reserve/National Guard, retired and separated military personnel, DoD civilian personnel, Gulf War veterans and their families. The outreach is part of a program initiated in 1998 by Bernard Rostker, the special assistant, to listen to the concerns of veterans, servicemembers and their families and to communicate how the Department of Defense is applying lessons learned from the Gulf War. During this past year, Rostker's team traveled to Fort Sill, Oklahoma; Fort Riley, Kansas; Fort Campbell, Kentucky; Camp Lejeune, North Carolina; and Camp Pendleton, California, and met with more than 6,000 veterans, their family members and concerned citizens.

"We want to educate the total-force on our investigation, inform them on how we will apply our findings to future deployments and solicit their assistance," said Rostker.

This year Rostker and his team plan to visit Fort Bliss, Texas, in January; Fort Polk, Louisiana, in February; Fort Hood, Texas, in April; Fort Stewart, Georgia, in May; Fort Bragg, North Carolina, and Fort Carson, Colorado, in June; Fort Knox, Kentucky, in August; and Twentynine Palms Marine Corps Base, California, in September. More visits may be added later in the year.

The installation outreach agenda includes a multi-day information campaign beginning with a series of briefings and ending in a town hall meeting. Briefing topics include investigation results on reported chemical or biological warfare events and potential environmental exposures, DoD's force health protection efforts and resources available to Gulf War veterans and their families. Rostker addresses each Town Hall meeting and answers questions regarding investigation findings. A convention-style Gulf War illness information display is placed at high traffic areas on the installation during the days preceding the meeting where team members answer questions, provide information and demonstrate DoD's Internet web site.

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Gulf War Symptoms Defy Diagnosis; Doctors Frustrated

By Austin Camacho
Public Affairs

The Department of Defense recently completed an exhaustive study of many of the toxic substances to which Gulf War veterans report being exposed, looking for the possible connections between those substances and Gulf War illnesses.

A civilian epidemiologist and two experts at the Uniformed Services University of the Health Sciences in Bethesda, Maryland conducted the study and recently published their findings in the *Journal of Occupational and Environmental Medicine*. The project took a hard look at the symptoms of more than 18,000 Gulf War veterans and what they said they were exposed to during extensive examinations in DoD's Comprehensive Clinical Evaluation Program. Researchers examined an impressive list of hazards including diesel and other fuels, passive cigarette smoke, tent heater fumes, oil fire smoke, personal pesticides, non-U.S. foods, anthrax immunization, solvents or other petrochemicals, chemical agent resistant coating paint, microwaves, non-U.S. water, botulism immunization, contaminated food, malaria prophylaxis, depleted uranium, nerve gas/agents, and mustard gas/blistering agents.

The study highlights the fact that 40 percent of the symptoms veterans show first appeared more than a year after reported exposures. It says this long latency of symptom onset and the lack of association with any self-reported exposures makes illness related to toxic exposure less likely.

Dr. (Maj.) Michael Roy, the lead internist for investigation of symptoms at the CCEP, says he and other doctors are frustrated by not being able to give veterans definite answers about the causes of their illnesses.

"We like to say 'this is what caused your symptoms and this is what we can do about it.' Unfortunately, many times it's not that simple," he says. "Patients like to have answers, but I think they appreciate honesty and sincerity. If you don't know, they don't want you to try to pull the wool over their eyes so it's important to say you don't know if you really don't know."

Roy began working with Gulf War veterans at Walter Reed Army Medical Center during the war.

"I was actually a resident at the time," he says, "so I spent many a night on call here taking the planeloads full of folks coming back. We saw a variety of things, a diverse population."

Roy says the study does not point to a relationship between any particular symptoms and any specific toxic substances, but it doesn't actually rule anything out either. One reason he says his study can't

be more definite is that his exposure data isn't specific enough. The surveys vets filled out really only ask yes or no questions like "were you exposed to oil well fires?"



Army researcher
Maj. Michael Roy

"One person may say 'yes' if they saw some smoke in the distance," Roy says, "and another may have been right there in the middle of the fires covered with soot."

He says the passage of time is also a factor. Most veterans received quite a number of vaccinations and it might be asking a lot to expect them to remember which ones and how many of each they received.

Furthermore, it's very difficult to prove a negative, Roy says. However, he believes the year spent on this research will help Gulf War veterans.

"I think it can be of some comfort that a lot of the different exposures that veterans have been concerned about don't really seem to pan out as significant sources of illness," Roy says.

He also says many veterans have conditions that can be treated successfully even if the causes are unknown.

Roy realizes his research doesn't offer the definite answers so many service members want, but he hopes they don't think he and his fellow researchers are part of some cover up.

"We're just here to help," he says. "Nobody's telling me what to say or what to do or controlling what I say or anything. We're just here to try to help people get better. It doesn't matter what caused it or anything. The fact of the matter is people are suffering these symptoms. The question is how to get better."

To learn more, Dr. Roy and others researchers are analyzing the data again, breaking it down by many other factors such as rank, race and number of symptoms. He expects those findings to be published early next year.

The Defense Department has invested more than \$130 million in studies related to the health of Gulf War veterans. Currently, there are more than 160 projects and clinical evaluations underway to find explanations for the symptoms reported by military members who served in the Gulf War.

(Outreach – from page 2)

Since his office was established in 1996, Rostker has emphasized the importance of listening to Gulf War veterans. The office is staffed by trained professionals, many of whom are veterans. A team of 18 veterans work directly with individuals who call to report on incidents that occurred during the war. Information gathered by these "contact managers" is forwarded to respective analysts for incorporation into case narratives, detailed reports summarizing the results of Gulf War investigations to date. Their toll-free line (800-497-6261) is only one of the

several ways veterans can contact Rostker or his staff.

Veterans and their families who are interested in receiving medical evaluation are encouraged to call DoD's Comprehensive Clinical Evaluation Program at 800-796-9699 or the comparable Veterans Affairs Persian Gulf Registry at 800-PGW-VETS. Both provide physical examinations and evaluation.

Other resources available to Gulf War veterans include GulfLINK, the DoD home page (<http://www.gulflink.osd.mil>), where news articles, reports, transcripts of press conferences and case narratives are made

available to the public. An e-mail capability (brostker@gwillness.osd.mil) provides more personal and timely responses to the public world-wide. The bi-monthly newsletter, GulfNEWS, is available for those veterans who do not have Internet access. Veterans can request a free subscription by calling 800-754-2132.

The outreach efforts give Rostker and his team the opportunity to talk to the military community and get their immediate feedback. The meetings are open to the public.

Resources for Veterans

Your ticket to the information highway — visit our GulfLINK web site at:
<http://www.gulfink.osd.mil>

Gulf War veterans seeking information on VA benefits of all types should call the Persian Gulf Helpline at:
1-800-749-8387

Anyone with information on Gulf War incidents should call the DoD Incident Reporting Line at:
1-800-472-6719

Are you a Gulf War veteran (or know of one) with health problems? Call the DoD Gulf War Veterans Hotline at:
1-800-796-9699

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he said his staff has made contact with almost 150,000 Gulf War veterans.

Rostker said he was anxious for guidance from the board for future actions.

“Having gotten this wrong before when the department was incorrect in its conclusion that no American troops were exposed to chemical agents, the department cannot make the final determination of when the stones are too small to bother to turn over,” he said.

Senator Rudman assured him that guidance would be forthcoming.

“The debate at some point ought to stop,” Senator Rudman said. “Continuing it only delays what the veterans really need most.” He said what they need is medical treatment for the wide variety of symptoms they exhibit.

Rear Adm. Michael Cowan, the Joint Chiefs of Staff deputy director for medical readiness, told the board about improvements in force health protection prompted by the lessons learned in investigating the Gulf War. He said those investigations prompted DoD to seek improved equipment for detecting low level biological, chemical and radiation hazards. And because of the difficulty in learning who was exposed to what possible toxins, he said DoD is undergoing a major overhaul of its military personnel tracking system. Cowan said he expects the current system to be completely replaced by the year 2003. A personal information carrier containing a service member’s entire medical record is planned

to be issued to each member starting next year.

Dr. John Mazzuchi, deputy assistant secretary of defense for clinical and program policy, led a team of Pentagon health affairs officials who testified about what DoD has learned from investigating Gulf War illnesses. They pointed to improved medical surveillance including better pre- and post-deployment medical screening. Also, the services attached a new priority to training all ground forces in how best to protect themselves from the hazards of depleted uranium. The special assistant’s office is monitoring that training.

As part of their testimony, Pentagon officials also responded to the Senate Special Investigation Unit’s report on Gulf War Illnesses. The report recognizes some good programs DoD and the VA have put in place to protect service members and help veterans. However, it says neither organization monitors its programs well enough, and that the two departments need to work together better to ensure effective service to Gulf War vets. Although the DoD believes that intelligence and knowledge of environmental risks was distributed during the Gulf War much better than the report implies, they are working to improve acknowledged shortfalls in preparedness and record keeping.

To complete their input and round out their knowledge, the oversight board heard from veterans’ advocates from around the country, and representatives of several major veterans’ service organizations including AMVETS, the American Legion, the Na-

tional Gulf War Resource Center and the Veterans of Foreign Wars. These speakers were able to share the experiences of some veterans, and in every case asked the board to ensure that federal efforts to help sick veterans would continue.

The Special Oversight Board will meet periodically and plans at least four more public sessions in Washington and elsewhere around the country. It is slated to report back to President Clinton through the Secretary of Defense next August with an interim report, and to render a final report in May 2000.



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Agencies assisting Gulf War veterans:

<http://www.afa.org/>
Air Force Association
1501 Lee Highway
Arlington, VA 22209-1198

<http://www.legion.org/building.htm>
American Legion
1608 K St., NW
Washington, DC 20006

<http://www.amvets.org/>
AMVETS
4647 Forbes Blvd.
Lanham, MD 20706

<http://www.ausa.org/>
Association of the U.S. Army
2425 Wilson Blvd.
Arlington, VA 22201

<http://www.dav.org/index.html>
Disabled American Veterans
807 Maine St., SW
Washington, DC

<http://www.eangus.org/>
Enlisted Association of the National Guard
1219 Prince St.
Alexandria, VA 22314

<http://www.fra.org/>
Fleet Reserve Association
125 N. West St.
Alexandria, VA 22314-2754

<http://www.mcleague.org/>
Marine Corps League
8626 Lee Highway, #201
Merrifield, VA 22031

<http://www.ngaus.org/>
National Guard Assn of the US
1 Massachusetts Ave., NW
Washington, DC 20001

<http://www.navy-reserve.org/index.html>
Naval Reserve Association
1619 King St.
Alexandria, VA 22314-2793

<http://www.navyleague.org/>
Navy League
2300 Wilson Blvd.
Arlington, VA 22201

<http://www.ncoausa.org/>
Non Commissioned Officers Association
225 N. Washington St.
Alexandria, VA 22314

<http://www.roa.org/>
Reserve Officers Association
1 Constitution Ave., NE
Washington, DC 20002

<http://www.troa.org/>
Retired Officers Association
201 N. Washington St.
Alexandria, VA 22314

<http://www.vfw.org/>
Veterans of Foreign Wars
200 Maryland Ave., NE
Washington, DC 20002

<http://www.vva.org/>
Vietnam Veterans of America
1224 M St., NW
Washington, DC 20005