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Agent Orange Review

www.VA.gov/AgentOrange

Information for Veterans Who Served in Vietnam and For Their Families

Vol. 22, No. 1

October 2005

LATEST RANCH HAND STUDY RESULTS PROVIDES ADDITIONAL EVIDENCE OF LINK BETWEEN AGENT ORANGE AND DIABETES

In July 2005, the most recent results of the Air Force Health Study of Ranch Hand personnel included more evidence showing that Agent Orange is associated with type 2 diabetes. The results support the finding from earlier Air Force reports in 1992 and 1997, and this was one of about nine studies that VA based its 2001 decision to provide service-connection for Vietnam veterans with type 2 diabetes. The recent study, the Ranch Hand Study update, summarized results from the 2002 physical examination of 1,951 veterans. This was the final examination of this study.

The Ranch Hand Study was named after the operation (Project Ranch Hand) responsible for spraying herbicides in Vietnam between 1962 and 1971. Beginning with the initial health examination in 1982, Air Force investigators have looked for long-term health problems in the Ranch Hand pilots and ground crews that can be from herbicides used in Vietnam, primarily Agent Orange and its contaminant, dioxin. The report, along with many other studies, will be reviewed by the National Academy of Sciences, under a contract with Department of Veterans Affairs (VA), to assist VA in determining what conditions should be recognized for service connection.

The results from the 2002 physical examination suggest that as dioxin levels increase, not only are the presence and severity of Type 2 diabetes increased, but the time to onset of the disease is decreased.

A 1.7 fold increase in diabetes requiring insulin control was seen in those individuals with the highest levels of dioxin. This is consistent with evidence found in animal studies.

VA officially added type 2 diabetes to the list of conditions presumptively recognized for service-connection in May 2001.

Cardiovascular Findings Inconsistent

Cardiovascular disease findings were harder to interpret but separate studies have found an increased risk of cardiovascular death in Ranch Hand enlisted ground crews, the subgroup with the highest average dioxin levels.

Ranch Hand pilots and ground crews examined in 2002, did not show a significant increase in heart disease relative to the comparison group. Associations between measures of heart function and history of heart diseases and herbicide or dioxin exposure were not consistent and didn't seem to show a heart connection.

Other Findings

Other findings included an increase acne after service in Vietnam in Ranch Hand enlisted ground crew members, but the lack of corresponding patterns of acne problems during the examination made this difficult to interpret. Several blood tests of liver function and of blood lipids were elevated and tended to increase with dioxin level. However, these tests may be elevated for many reasons, and are not a disease by themselves.

At the end of the 20 years of follow-up, Ranch Hand pilots and ground crews as a group exhibited **no** statistically significant increase in the risk of cancer. Differences by military occupation were inconsistent. The Ranch Hand enlisted ground crews, the subgroup with the highest dioxin levels and presumably the greatest herbicide exposure, had a 14 percent **decreased** risk of cancer. These results do not suggest that herbicides or dioxin exposure are related to cancer in these veterans.

The report notes three major weaknesses of the study. First, the results cannot be generalized to other groups, such as all Vietnam veterans or Vietnamese civilians, who have been exposed in different ways to different levels of herbicide. Second, the size of the study makes it difficult to detect increases in rare diseases, thus small increases in rare diseases may be missed by the study. Third, other factors that were not considered in this report could be mixing up the results.

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Report Availability

The report is available on the Air Force Health Study web site at: www.brooks.af.mil/AFRL/HED/hedb/default.html.

WHAT DO OUR READERS THINK?

In the April 2005 issue, readers were encouraged to “take a few minutes” to offer feedback about the Agent Orange Review newsletter. Specifically, they were asked to provide “comments, suggestions, recommendations, and advice for future issues of the newsletter.” This is part of our ongoing effort to make the newsletter more useful to veterans.

Readers were asked: What do you think of the Review? Does it meet your needs? Why or why not? What changes would you like to see in this publication? Additions? Deletions? Additional comments or suggestions?

Many individuals chose to write VA a letter (some quite lengthy) about how they felt about the newsletter. The volume of responses was overwhelming and very positive in tone. Readers called the newsletter informative, impressive, very helpful, comprehensive, excellent, very good, well written, very informative, great, outstanding, first class. “I was sincerely gratified by the volume of replies and the highly positive nature of the response we received,” commented editor Donald J. Rosenblum. “Based on the response from previous surveys, we expected only 75-100 or slightly more responses.” Instead Rosenblum indicated that more than 700 had already been received and more are arriving daily.

Rosenblum noted that many readers encouraged him to “keep up the good work.” The writer/editor expressed regret that he could not personally reply to each to those who responded to the survey. He is using the newsletter to express his appreciation for their support. “You know who you are,” said Rosenblum.

Most readers wrote that it met their needs and offered no suggestions for change. In fact, many indicated that the newsletter should remain as is. Some readers made suggestions that are currently under consideration.

The few negative comments were typically aimed at some aspect of service or benefits; for example, some complained that they did not get the disability rating or the compensation they felt they deserved. Only a few wrote negative comments about the newsletter itself.

SPECIALIZED VA CENTERS PROVIDE SECOND OPINION ON UNEXPLAINED ILLNESSES THROUGH EXTENSIVE TESTS, CAREFUL EVALUATIONS

Several years ago, the Department of Veterans Affairs established a special program to help veterans, who suffer from real, but undiagnosed illnesses. After a complete examination at their local VA medical center, veterans may be referred to one of the War Related Illness and Injury Study Centers (WRIISCs), pronounced “risks.” There they will undergo an extensive medical evaluation, with enough time to express their concerns, tell their story, and receive individualized recommendations for treatment.

WRIISCs Established in 2001

Secretary of Veterans Affairs Anthony Principi approved the establishment and funding of two WRIISCs in May 2001. The centers, located at VA Medical Centers in Washington, DC and East Orange, NJ, were founded to provide service to combat veterans, families, and health care professionals through clinical care, education, risk communication, and research addressing potential environmental exposures and adverse health outcomes.

Established to address the health problems of combat veterans who serve in past and future conflicts, these centers were a recommendation of the National Academy of Sciences (NAS), under Public Law 105-368, Veterans Program Enhancement Act of 1998. The centers replaced the Gulf War Referral Centers, and now offer wide-ranging clinical care to all those who served in combat, not just during the Gulf War. Dr. Han Kang is the director of WRIISC-DC, and Dr. Gudrun Lange heads WRIISC-NJ.

While not all veterans have persistent and unexplained symptoms following deployment in a combat zone, today we know that some do return home with undiagnosed illnesses. After thoroughly being evaluated at their local VA Medical Center, the veteran may be eligible to participate in an in-depth evaluation and examination, which serves as a second opinion, at one of the WRIISCs.

Criteria for Referral

Eligibility to participate in the WRIISC program depends on a thorough referral process from the VA medical center where a veteran normally gets care, and coordinated by VA Central Office. Once a veteran has undergone a complete evaluation their local VA Medical Center, their VA primary care provider may refer them to the WRIISC National Referral Program. However, veterans first must meet the following criteria:

- Served in an area of combat as defined by DoD;
- Have an undiagnosed illness;
- Be medically and psychiatrically stable; and
- Be willing to participate in treatment and evaluation recommendations.

Accepting a referral, according to WRIISC-DC’s Risk Communication Specialist, Aaron Schneiderman, Ph.D., “is dependent upon eligibility, necessity, and the agreement that the veteran has something to gain from the evaluation.” Once accepted by the WRIISC National Referral Program, the veteran will be assigned to either the WRIISC in Washington, DC, or the center in New Jersey.

Program Specifics

After arriving at a WRIISC, the evaluation period is from 1 to 5 days. A major positive of the WRIISC National Referral Program is that travel arrangements are paid for by the referring VA Medical Center and the appointed WRIISC. It is the responsibility of the referring VA Medical Center to arrange the veteran’s travel to the designated WRIISC. The WRIISC provides travel arrangements for the veteran’s return trip home.

The purpose of the veteran's visit to a WRIISC is to evaluate war-related health concerns, while providing the veteran with information about his or her condition and potential war-related exposures. "The WRIISCs offer an option to veterans who have not been able to find answers from other providers," stated Dr. Schneiderman.

While the WRIISCs are not designed to offer extended treatment on site, the centers communicate their recommendations and findings to the veteran and his or her hometown VA primary care providers for implementation and follow-up. The WRIISCs are proud of their ability to attend to one patient at a time, which allows for an individualized, specific plan of action, unique to every veteran that attends the program.

In an effort to educate the many people that care for veterans at the various VA medical facilities, the WRIISCs are implementing an employee education campaign that involves a conference series, a new Veterans Health Initiative (VHI) book that will be produced using conference materials, and an employee training module that will be accessible at all hours on the VA intranet. Dr. Schneiderman emphasized that, "education is extremely important because the primary care provider acts as a gatekeeper to the local VA Medical Center and is the veteran's lifeline to optimal medical care."

Patients should leave the WRIISCs with a plan of action for his or her health care provider that includes recommendations for medications, treatments, and better ways to live. The WRIISCs engage in activities that involve education and outreach to both veterans and health care professionals. In addition to evaluating patients, WRIISCs also conduct research on deployment-related health concerns and practice risk communication to translate scientific findings in response to veterans' concerns. More information about this program and how to get involved can be seen online at :

www.VA.gov/EnvironAgents

WRIISC-DC: www.va.gov/wriisc-dc/

WRIISC-NJ: www.wri.med.VA.gov/

Primary care providers who would like to refer a veteran with undiagnosed illnesses can request an evaluation at one of the Centers. VA health care providers who wish to request a referral must contact:

Ms. Helen Malaskiewicz
Sr. Environ. Health Coordinator
Environmental Agents Service (131)
VA Central Office
810 Vermont Ave., NW
Washington, DC 20420

www.va.gov/EnvironAgents

Tiffany A. Anzalone, Summer 2005 Hispanic Association of Colleges and Universities' Intern for the VA's Environmental Agents Service, conducted interviews, researched, and prepared this article. Tiffany is a graduate of Boston College and is currently in graduate school at Louisiana State University.

TAX-FREE COMPENSATION AVAILABLE FROM DoD FOR DISABLED MILITARY VETERANS

The following article was submitted on behalf of the Air Force, Army, Navy, Marines, and Coast Guard by Barry W. Craigen, Combat Related Special Compensation Program Manager, HQ Air Force Personnel Center.

Military retirees have funded their own disability compensation from within their military retired pay for the 100 years preceding 1999. Congress approved the Combat Related Special Compensation (CRSC) program for implementation in June 2003 to replace some or all of the monies offset from military retirees' pay by the VA for disability compensation for qualifying disabilities.

In determining basic program eligibility, retired members should answer the following questions:

- Am I retired with 20 (or more) years of active duty or retired at age 60 from the Guard or Reserve?
- Am I receiving retired pay?
- Do I have a compensable VA disability of 10 percent or higher?
- Is my retired pay offset by VA disability payments (VA waiver)?

If you answered "yes" and have not submitted your CRSC application, you could be missing an opportunity for **additional tax-free** compensation.

The program focuses on "combat-related" disabilities incurred from armed conflict as well as hazardous service (aircrew, EOD, parachuting, diving, etc.), under conditions simulating war, or through instrumentalities of war (military-unique vehicles, munitions, Agent Orange, etc.). The amount payable is directly related to the evaluation(s) assigned to VA service connected combat-related disability(ies) that qualify under CRSC criteria, but cannot exceed the amount of withheld retired pay.

Eligible retirees may also receive Individual Unemployability (IU) payments, Special Monthly Compensation (SMC), and an adjustment for dependents.

It costs you 37 cents and a few minutes of your time to apply--let your Service CRSC experts make the call on your eligibility. Many people are extremely surprised to learn their disabilities qualify under the program! Since 2003, the Services have processed over 84,439 applications as of mid-August 2005 with an average approval rate of 63 percent.

Your CRSC team needs your DD 214(s)/retirement order as well as your VA rating decision letter(s) and any other available documentation to support your claim for combat-related disabilities. CRSC applies to all of the military services and the Coast Guard. Any of the service teams can explain the program and discuss the documentation required.

The application is available online through the DefenseLink Web site or by contacting any of the Services for a paper copy. **Note:** For those retirees under the Concurrent Retirement and Disability Payment (CRDP) program, you may only be under one program--CRDP or CRSC at a time. The Defense Finance and Accounting Service will initially determine which program is most financially advantageous to you--and you'll have the option of changing between the two every year.

DoD DefenseLink

<http://www.defenselink.mil/prhome/mppcrsc.html>

AIR FORCE

HQ Air Force Personnel Center

<http://www.afpc.randolph.af.mil/disability/CRSC/CRSCnew.htm>

1-866-229-7074 Toll Free or 210-565-1600.

ARMY

Army Human Resources Command

<http://www.crsc.army.mil/>

1-866-281-3254 toll free

COAST GUARD

Commanding Officer (RAS)

U.S. Coast Guard Personnel Service Center

<http://www.uscg.mil/hq/psc/customerconnection/crsc.htm>

1-866-772-8724

NAVY AND MARINE CORPS

Naval Council of Personnel Boards

<http://www.hq.navy.mil/nepb/CRSCB/combatrelated.htm>

1-877-366-2772 toll free (prerecorded)

HOW TO APPLY FOR VA DISABILITY COMPENSATION

Like all veterans, Vietnam veterans are eligible for monthly payments, called disability compensation, from VA if they are suffering with any service-connected illnesses or injuries. The disability must have been incurred or aggravated during active military service. Vietnam veterans also have special access to disability compensation for illnesses or injuries related to exposure to Agent Orange and other herbicides used in Vietnam. Furthermore, the service of the veteran must have been terminated from 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). The amounts paid change every year. In 2005, a veteran with a disability rating of 10 percent receives \$108; a veteran with disability rating of 50 percent gets \$663; 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 \$136, and for each child, \$19 to \$65. (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 the determination before the veteran can get these benefits.

Survivors of veterans who died in service or from a service-connected disability are eligible for monthly compensation called dependency and indemnity compensation (DIC).

Presumptive Service-Connection

Any veteran who served in Vietnam between January 9, 1962, and May 7, 1975, and has one or more of the diseases on the list of presumptive conditions that VA maintains is presumed by VA to have been exposed to herbicides, and therefore that his or her disease is recognized for service-connection if rated as 10 percent or more disabling. The current list is provided in this issue. This list and information about the diseases associated with Agent Orange also are available online at www.VA.gov/AgentOrange.

Must Apply to Be Considered

Compensation is not automatically given to any veteran or survivor. VA veterans service representatives (VSRs) can provide the necessary application and assist claimants who need help in completing it. VSRs 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**. Alternatively, a claimant may file an application on-line at www.va.gov. The claimant must complete an application to be considered for VA benefits.

Other Benefits

In addition to the compensation program described above, individual 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, Gulf War veterans and other interested parties can visit the VA home page <http://www.VA.gov>, or call **1-800-827-1000**.

HEALTH CONDITIONS PRESUMPTIVELY RECOGNIZED TO DATE

The following health conditions are presumptively (nearly automatic; veterans still need to apply to get benefits) recognized by VA for service connection. (For more information, go to www.VA.gov/AgentOrange.) Vietnam era veterans who served in Vietnam who now suffer with one or more of these conditions do not have to show that their illness is related to their military service to get disability compensation. VA presumes that their condition is service-connected.

Conditions Recognized in Veterans

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
11. Chronic lymphocytic leukemia

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 (these defects are linked to military service rather than to exposure to Agent Orange or other herbicides)

Conditions Briefly Described

In Vietnam Veterans

Chloracne: A skin condition that looks like common forms of acne seen in teenagers. The first sign of chloracne may be excessive oiliness of the skin. This is accompanied or followed by numerous blackheads. In mild cases, the blackheads may be limited to the areas around the eyes extending to the temples. In more severe cases, blackheads may appear in many places, especially over the cheek bone and other facial areas, behind the ears, and along the arms.

Non-Hodgkin's lymphoma: A group of malignant tumors (cancers) that affect the lymph glands and other lymphatic tissue. These tumors are relatively rare compared to other types of cancer, and although survival rates have improved during the past 2 decades, these diseases tend to be fatal. The common factor is the absence of the certain cells (known as giant Reed-Sternberg cells) that distinguish this cancer from Hodgkin's disease.

Soft tissue sarcoma: A group of different types of malignant tumors (cancers) that arise from body tissues such as muscle, fat, blood and lymph vessels, and connective tissues (not in hard tissue such as bone or cartilage). These cancers are in the soft tissue that occurs within and between organs.

Hodgkin's disease: A malignant lymphoma (cancer) characterized by progressive enlargement of the lymph nodes, liver, and spleen, and by progressive anemia.

Porphyria cutanea tarda: A disorder characterized by liver dysfunction and by thinning and blistering of the skin in sun-exposed areas.

Multiple myeloma: A cancer of specific bone marrow cells that is characterized by bone marrow tumors in various bones of the body.

Respiratory cancers: Cancers of the respiratory system, that is cancer of the lung, larynx, trachea, and bronchus.

Prostate cancer: Cancer of the prostate; one of the most common cancers among men.

Peripheral neuropathy (transient acute or subacute): A nervous system condition that causes numbness, tingling, and muscle weakness. This condition affects only the peripheral nervous system, that is, only the nervous system outside the brain and spinal cord. Only the transient (short-term) acute and subacute forms of this condition, not the chronic persistent forms, have been associated with herbicide exposure.

Diabetes mellitus: Often referred to as Type 2 diabetes; it is characterized by high blood sugar levels resulting from the body's inability to respond properly to the hormone insulin.

Chronic lymphocytic leukemia: A disease that progresses slowly with increasing production of excessive numbers of white blood cells.

In Children of Vietnam Veterans

Spina bifida: A neural tube birth defect that results from the failure of the bony portion of the spine to close properly in the developing fetus during early pregnancy.

Disabilities other than spinal bifida in the children of women Vietnam veterans: Covered birth defects include a wide range of conditions. Eighteen defects are specifically included and others not specifically excluded are covered. For more information, contact a veteran services representative at **1-800-827-1000**, or see page 10, "Agent Orange Review," July 2003.

2006 IOM REPORT AGENT ORANGE HEALTH EFFECTS UPDATE COMING SOON

Historically, most conditions that VA now presumptively (automatically) recognized for service connection were identified by the National Academy of Sciences' (NAS) Institute of Medicine (IOM) during their biennial (once every two years) review of the scientific evidence of association with Agent Orange and other herbicides used in Vietnam.

Public Law 102-4, the Agent Orange Act of 1991, directed VA to attempt to enter into an agreement with the NAS to a series of complete literature reviews which VA would use to determine what conditions should be recognized presumptively or without a requirement for additional proof that the condition is related to exposure to herbicides in Vietnam.

Under Public Law 102-4, whenever the Secretary of Veterans Affairs determines that the credible evidence of an association with herbicide exposure is equal to or greater than the evidence against such an association, he/she must presumptively recognize that condition for service connection.

Some of these presumptions have been enacted into law in Federal statute and thus are known as statutory conditions. These conditions cannot easily be changed. (Only an act of Congress could change their status.)

Update 2004 Hardbacks Available

Hardback copies of Veterans and Agent Orange: Update 2004 are now available for sale from the National Academies Press, 500 Fifth Street, N.W., Box 285, Washington, DC 20055. The telephone number is **800-624-6242**. Requestors in the Washington metropolitan area can call **202-334-3313**. The National Academies Press can be reached on the internet at www.nap.edu. For purchase information, contact the National Academy of Sciences directly.

The text of this report can also be downloaded from that site.

ABOUT THE "REVIEW"

The "Agent Orange Review" is prepared by VA's Environmental Agents Service (EAS). The "Review" is published to provide information on Agent Orange and related matters to Vietnam veterans, their families, and others with concerns about herbicides used in Vietnam. It is also available on-line at www.VA.gov/AgentOrange. Back issues are also available at that site. The first issue was released in November 1982. The most recent issues are dated November 2004 and April 2005. This issue is the 44th. It was completed in late September 2005 and does not include developments that occurred since that time.

Comments or questions about the content or design of the "Review" are encouraged. Suggestions and ideas for future issues should be sent to Donald J. Rosenblum, Agent Orange Review, Deputy Director, Environmental Agents Service (131), AO Review, VA Central Office, 810 Vermont Avenue, NW, Washington, DC 20420. Requests for additional copies of this and earlier issues should also be directed to Mr. Rosenblum. Please specify the issue date and the quantity sought. A limited supply of some issues is available.

VA updates the "Review" mailing address listing annually based on IRS records. "Review" recipients who have not been filing Federal income tax returns annually and have moved to another residence are encouraged to send their old and new addresses and Social Security number to the Agent Orange Review, Austin Automation Center (200/397A), 1615 Woodward Street, Austin, TX 78772-0001.

The national toll-free telephone number for information regarding VA benefits is **1-800-827-1000**. The toll-free helpline for Agent Orange concerns is **1-800-749-8387**.

QUESTIONS AND ANSWERS

The "Review" occasionally includes a question-and-answer feature in response to questions sent by our readers. Vietnam veterans and their families and friends often have questions and concerns regarding the possible long-term health consequences of exposure to Agent Orange and other herbicides used in Vietnam. We do our best to track down answers.

Q. The first question concerns the skin disorder chloracne. HCM of New Mexico asked "What are the possibilities of (chloracne) affecting me later on in life?"

A. Veterans and Agent Orange: Update 2004 by the Institute of Medicine of the National Academy of Sciences concluded, "If chloracne occurs, however, it appears shortly after the chemical exposure, not after a long latency... Therefore, new cases of chloracne would not be the result of exposures during Vietnam."

Q. How do I register as a concerned Vietnam veteran? I do not have any of the symptoms listed at present but there are possible prostate problems.

A. All Vietnam-era veterans who served in Vietnam, who served in Korea 1968-69, and other veterans exposed to Agent Orange or other herbicides during the testing, transportation, or spraying of these herbicides for military purposes are eligible to receive an Agent Orange Registry health examination. More than 380,000 veterans have already received this examination and their names are recorded on the VA "Agent Orange Registry." Contact the nearest VA medical center to request an examination.

Q. GWM asks: As a Vietnam veteran tested for Agent Orange earlier this year, and placed on the Registry, what do I have to do, if anything, to qualify for service connection? The Agent Orange tests I took have all been "negative."

A. To be service-connected and receive disability compensation, you must first apply for this benefit. Participation in the Registry examination program is not the same as applying for disability compensation. VA adjudicators (the people who review and evaluate disability claims) may use your registry examination results, but you may be required to take a compensation examination as well. To qualify for disability compensation, a veteran must be disabled in some way. Many registry participants are not disabled at all. Some veterans choose not to apply for disability compensation even though they may be eligible.

The Registry exam does not test for Agent Orange. You said that you tested "negative" for Agent Orange. However, VA does not offer or recommend testing for Agent Orange. There is no test that can show if a veteran's health problems were caused by Agent Orange or other herbicides used in Vietnam. And, VA must, by law, presume that any Vietnam veteran was exposed to Agent Orange.

AGENT ORANGE FACT SHEETS REVISED

VA's Environmental Agents Service (EAS) recently released the latest edition of its Agent Orange Brief fact sheet series, dated August 2005. The series was first prepared in 1988 to answer the many questions that Vietnam veterans and their families raised about the possible long-term health effects of herbicides used in Vietnam. These fact sheets have been expanded and revised periodically to include various developments, including research updates, legal decisions, recognition of additional conditions for service connection, and other actions. Twenty-two Briefs are currently available.

These fact sheets can be found on the Internet at www.va.gov/AgentOrange. They are also available from the Environmental Agents Service (131), VA Central Office, 810 Vermont Avenue, Washington, DC 20420. Many VA medical centers, Vet Centers, and VA regional office also have these fact sheets.

The "Briefs" are divided into four categories: general information (including information about the class action lawsuit that doesn't involve VA), VA programs (except research), research (including non-VA research initiatives), and various medical conditions (including all those that have been presumptively recognized for service-connection).

The EAS has prepared the "Briefs" to inform Vietnam veterans and others about what is known about Agent Orange, explain what VA and other Federal departments and agencies have done or are doing on behalf of Vietnam veterans exposed to Agent Orange, report on relevant legal and legislative developments, and advise concerned veterans about what actions they can take.

The individual "Briefs" can be used together as a comprehensive packet of information about Agent Orange or as stand-alone documents to respond to various aspects of the Agent Orange issue.

The following "Briefs" are currently 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**
- D13. Agent Orange and Chronic Lymphocytic Leukemia**

ADDRESS CHANGES AND DUPLICATIONS

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| City: | |
| Two Letter State Abbreviation: | |
| Zip Code: | |

Receive the Review Via Email

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Also check the language that describes your situation.

- My address has changed, and I would like to continue to receive the newsletter by regular postal mail.
- My address has changed, and I don't need to get the newsletter by regular postal mail because I have signed up to receive it electronically.
- My address has not changed, and I don't need to get the newsletter by regular postal mail because I signed up to get it electronically.
- My address has not changed, but I am not interested in receiving future issues.

If you do not respond, you will continue to receive the newsletter through the regular mail.

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 while on military service 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 370,000 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**. To find where the nearest VA medical facilities are located see www1.VA.gov/directory/guide/home.asp?isFlash=1.

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 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.) State and 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.

Agent Orange Review
Information for Veterans Who Served
in Vietnam and For Their Families

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