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IF YOU WERE EXPOSED TO AGENT ORANGE READ THIS!

Leukemia and other issues resulting from the 2002 report released in January 2003 from the National Academy of Sciences (NAS). The fourth biennial update. Agent Orange first used in Vietnam in February of 1961 and used thereafter until the end of 1971 has beleaguered surviving Vietnam veterans more than any other issue. From the early months of the 1970s returning Vietnam veterans reported a multitude of conditions out of the normal realm of illness which seemed to be from a common source. That source was Agent Orange.

For many years we fought an uphill battle, which is still far from won. Currently we are in the midst of a bureaucratic argument of charging Vietnam veterans co-payment of medicines related to conditions the veterans knows is related to their Agent Orange exposure. Congress can mandate all of the laws and regulations they want and VA lawyers will interpret them to satisfy the VA budget. Thus three decades after the last use of the poisonous herbicide Agent Orange we are still fighting the system.

Again, a report from the National Academy of Sciences regarding leukemia and Agent Orange. If you recall the last report regarding leukemia and Agent Orange was flawed and another birth defect issue was trashed. That aroused joy in the hearts of the VA bureaucrats who are budget driven.

The Institute of Medicine, the National Academy of Sciences connected thorough research Agent Orange with Chronic Lymphocytic Leukemia (CLL). In the past reports Veterans and Agent Orange mention of this condition was made as not significant. Now it has been upgraded and the results will be sent to the VA lawyers to finalize the rules the victims will be subjected to for benefits. The research has indicated CLL is sharing characteristics with Hodgkin's Disease and Non-Hodgkins Lymphoma. Well, why not admit the facts that nearly all cancers are related. Most especially the people exposed to herbicides. Many cancers are the result of Agent Orange. As a matter of fact it has been very difficult for the NAS scientists definitely rule out any cancer, being a residual of the exposure to the deadliest of synthetic chemicals. In 1994 it was determined that soft tissue sarcoma was a residual of exposure to Agent Orange. Since that time the Central Office redefined what soft tissue sarcoma is and had been considered. Thus it was restricted to certain organs rather than sarcoma of soft tissue in general.

Today, we still find many unbelievers in our midst. Even veterans in some cases that were in Vietnam feel if it did not affect them it just did not happen.. In the early 1990s my job had again been threatened over the stance taken regarding leukemia and cancers attacking those exposed to 2,3,7,8-TCDD or Agent Orange. Also it is very important to remember arsenic was used in herbicides as well as TCDD. Now, would you spray to kill undesirable weeds or rats around your home with arsenic? I doubt it. You may carefully set out bait with that substance; but I seriously doubt if you would spray your yard! We need the NAS to concentrate on issues that are making Vietnam and certain Korea veterans ill with multiple cancers and other conditions. The birth defect issues as cerebral palsy which have a very high rate of incidence be explored. Renal cancer was upgraded in 1998 and where is a recent report on that killing condition? It would seem as if a condition that was upgraded would also have a high priority.

Another question comes to mind in the resolve of this issue. Those that died from Agent Orange before May 11, 1988 are statistics of the past. We see no evidence that their autopsies have been considered in the formula used in determination. I specifically recall veteran clients dying of cancer in the very early 1980s and their claim were denied, the appeals denied and the widows went on and the claim was forgotten by the VA. That issue did not make the cause and effect go away. It only made the statistics reflect other than the true facts. When these issues are brought to the attention of the veterans community some scoff, some deny, some ridicule, and some listen and make up their own mind.

One fact is important above all others after over thirty years of complaints, we are still far from the final analysis, so this fact bears repeating: The research has indicated CLL is sharing characteristics with Hodgkin's Disease and Non-Hodgkins Lymphoma. Well, why not admit the facts that nearly all cancers are related. Most especially the people exposed to herbicides. In 1988 none of these conditions were accepted.

I am certain there are those who criticize the eagerness of Vietnam veterans who want answers. However, this has been going on for nearly four decades.

THE HEART OF AGENT ORANGE

Trivia: The US used 19 million gallons of herbicides between 1962 and 1971 during Operation Ranch Hand.

Agent Orange Seminar in Napoleon held Saturday, April 6, 2003. The following is partial copy and paste from my report on the seminar the Ohio AMVET News. "The seminar was jointly sponsored by AMVETS Post 1313 of Napoleon and the United Auto Workers local union at the Tenneco plant.

There was plenty of audience interaction with the presenter, AMVETS Department of Ohio State Service Officer (SSO) David Barker who is stationed at the Chillicothe VAMC.

The program began with a brief review of the speakers credentials followed by a review of the book In Search Of The Truth For The Vietnam Combat Veteran. There was in-depth coverage, of the diabetes type 2 and leukemia issues. SSO Barker reminded the veterans it was in 1991 that Army Scientist studies had linked diabetes and dioxin exposure. SSO Barker explained diabetes type 1 is usually referred to as juvenile diabetes and diabetes type 2 is often referred to as adult onset diabetes.

The Ohio AMVETS News had published an article on diabetes and herbicide exposure written by SSO Barker in 1986. The National Academy of Sciences did a comprehensive study again in 1998 and former Secretary Togo West rejected the study and had the issue revisited. The diabetes type 2 was again presented to the Acting, VA Secretary Herschel Gober in October of 2000 and Secretary Gober approved the condition November 9th of 2000.

After review of the book, SSO Barker brought several ignored issues to the forefront. He discussed the United States Air Force study released in 2000 which proves the Ranch Hand Study was severely flawed and showing a 26% higher rate of heart disorders in those veterans in the study comparison. SSO Barker has maintained for over a decade the probability of a direct relation of heart disorders and herbicide exposure.

There was also comparison of the birth defect issue which still remains stalled, even though the studies from the National Academy of Science, Institute of Medicine clearly show a higher ratio of incidence for Cerebral Palsy which has been ignored.

There are several issues regarding Agent Orange and additional birth defects, which more than likely, will be brought to the forefront in the next several years of study. Many people do not understand that birth defects are reported to the authorities, at the birth of the child. Thus many defects such as learning disabilities; or sensory impairments may not be discovered for months or years. As a result many birth defects go unreported and these children suffer as a result.

The current dioxin levels and profound health problems existing today in Vietnam was reviewed and the 2002 World Health Organization report was made available to those present. SSO Barker strongly recommended those with Internet access to use the available research on line, to obtain information to assist them in learning about the dangers of dioxin."

PRESENTATION TO THE NATIONAL ACADEMY OF SCIENCES

David Barker brief background:

While earning my degree at Morris Harvey College, the University of Charleston, then graduate work at Marshall University, I worked at the DuPont plant in Charleston, WV.

Included in my duties was periodic assignment to the Research and Development "Small Lots Production." This is where DuPont developed herbicides.

My last year employed by DuPont, I was a Detail Foreman in the construction of a new herbicide manufacturing site. I learned first hand the dangers of herbicides. DuPont chose wisely not to manufacture this herbicide, as they considered it to risky.

I am employed by Ohio AMVETS representing veterans before the VA. I have filed over 15,000 Agent Orange related claims since February 1983. In 1984 I filed a claim for service connected compensation for a heart condition as a residual of exposure to Agent Orange for several clients.

After all I had in my possession reports of the tests results of rats exposed to herbicides 2,3,6,7-Tetrachlorodibenzo-p-dioxin. There was mention of heart damage as well as other recognized conditions. Those claims were denied.

Any condition not recognized by the Secretary of Veterans Affairs (then Administrator of the Veterans Administration), will by law be denied.

Also, I feel the issues of carcinoma have been to long ignored and should be addressed immediately for those still surviving. If the cancer diagnosis is other than one of the very few recognized the VA denies the claim. Carcinoma claims are routinely rejected as those cancers do not meet VA required specifics.

Finally a scientific study was done in Vietnam to determine the affects on human population regarding the use of Agent Orange. The study at my last review has not been developed in this nation for the benefit of those veterans exposed while on active duty.

It is apparent to me there has been significant downplay to, outright ignoring the studies.

In my solitary office, there appears an extreme imbalance of Vietnam veterans, suffering from peripheral neuropathy who are denied if the veteran was not diagnosed with diabetes type 2. It is time to reopen the study of neurological conditions.

We shall review briefly these studies made by independent sources. Dr. Hoang Dinh Cau, chairman of the government-supported National Committee for Investigation of the Consequences of Chemicals used in the Vietnam War, known as the 10-80 Committee, has studied the effects of Agent Orange on Vietnamese people over two decades.

Dr. Cau is not as guarded as others at Tu Du Hospital in discussing the use of the herbicide, which contained dioxin, a contaminant many Western researchers called the most toxic chemical discovered by mankind so far. This is also stated in my book IN SEARCH OF THE TRUTH FOR VIETNAM COMBAT VETERANS. The original essay "Poison: Agent Orange" published by The Ohio AMVET in 1983 is the chapter with that statement.

"We have recognized many kinds of birth defects associated with dioxin," Dr. Cau said, opening up a book with photographs of Vietnamese civilians identified as Agent Orange victims.

Several of the photos depict badly deformed infants. The children in Vietnam suffer a broad range of birth defects: many have unformed limbs, others are mentally handicapped and those with extremely enlarged heads.

Vietnamese scientists and government officials believe the children, along with hundreds of thousands of other Vietnamese are victims of the massive amounts of Agent Orange herbicide that US forces dumped on South Vietnam during the Vietnam War.

Vietnamese researchers, as well as some of their Western colleagues, know that the more than 11 million gallons of Agent Orange that the US military introduced to South Vietnamese ecosystems created a public-health nightmare from which Vietnam has not recovered.

Vietnamese scientists believe the dioxin contamination has caused not only birth defects, but also respiratory cancers, heart problems and diabetes.

In 2000 the US Air Force released a study indicating a link between Agent Orange exposure, diabetes and heart disease.

It has been well over 30 years since the United States stopped using Agent Orange. Thus many seriously ill patients have already died.

Pilot surveys conducted by Vietnamese researchers in December 1998 found that between 800,000 and 1 million Vietnamese had Agent Orange related health problems, in a report released in 1999 by Dr. Le Cao Dai, executive director of the Agent Orange Victims Fund of the Vietnam Red Cross.

As much as 100,000 of those affected by the herbicide suffered some form of birth defect, the surveys found.

The United States thus far has nothing to do with research, into the connection between Agent Orange spraying and health problems among Vietnamese.

The US government has dismissed without review the accuracy and reliability of Vietnamese studies on Agent Orange.

The Dr. Cau 10-80 Committee was so named because it was founded in October 1980.

It is the only Vietnamese organization to attempt systematic research into the effects of Agent Orange.

Dr. Cau said the Vietnamese government had tried studying the mysterious herbicides that the United States used as far back as 1965, but lacked the resources and knowledge to do so effectively.

"The Vietnamese Army never used Agent Orange, so they had no experts to study it," he said.

Vietnamese researchers now know that the dioxin from Agent Orange continues to affect Vietnamese born long after the war because it moves up the food chain, accumulating in higher concentrations as it goes.

According to Dr. Dai's report, 85 to 90 percent of the dioxin detected in the Vietnamese comes from contaminated food.

After an area was sprayed, the report explains, the dioxin from Agent Orange contaminated organic matter in soil as well as river and lake mud.

Animals, fish and shrimp then ingested some of the soil and mud and became contaminated.

Humans, in turn, were exposed to dioxin when they consumed contaminated animal, fish or shrimp products.

Testing for dioxin is a difficult and expensive procedure. One dioxin test costs about \$700 in Vietnam, which can quickly destroy budgets of Vietnamese researchers.

People living in sprayed areas as well as the Northern Vietnamese who served in the South during the war have higher levels of dioxin in their bodies than those who have always lived in non-sprayed areas in the North.

A study of human fat tissue in 1984-'85 found that dioxin levels in people who lived in sprayed areas of South Vietnam were 10 times higher than in people living in the North, and two to three times higher than in people residing in industrialized nations.

A 1988 World Health Organization study comparing levels of dioxin in breast milk worldwide found that nursing South Vietnamese women had significantly higher levels of the contaminant in their breast milk than their counterparts in Hanoi and in industrial countries. Breast milk from one heavily sprayed area had a level of dioxin eight times higher than samples taken from those in Hanoi, and almost five times higher than samples taken from women in the United States.

According to Dr. Dai's report, more recent tests have shown that dioxin levels in the environment and human tissues have decreased over time, while dioxin in commonly used foods has returned to normal. Dr. Dai wrote in his report that areas around former US air bases remain dioxin hot spots. His concerns about base sites are predicated partly on a 1998 environmental assessment of an area around a former US Special Forces base in Aluoi province.

In a report release by the United States Air Force in 2000 stated "this research, constituted the first systematic environmental assessment of residual dioxin's in Vietnam." This was according to David Levy, a scientist involved in the Vietnam study who is vice president for Hatfield Consultants Ltd.

"In one area around the site of the former base, dioxins are present in duck fat and fish fat at high levels," Levy said. Similar concentrations in Canada trigger a regulatory response, such as food consumption advisories and closure of commercial fisheries.

Levy also supports more outside help for research on the effects of Agent Orange in Vietnam.

He said that Vietnam, with the contrast between the unsprayed North and sprayed South, provides what may be the best natural laboratory in the world to study links between exposure to the herbicide and health problems.

It was in 1991 that Army Scientist studies had linked diabetes and dioxin exposure. As you well know diabetes type 1 is usually referred to as juvenile diabetes and diabetes type 2 is often referred to as adult onset diabetes.

Now when a physician diagnoses adult onset insulin dependent diabetes as type 1 that claim is most often turned down as the NAS study indicates only diabetes type 2 is related to Agent Orange exposure. The Ohio AMVETS News had published an article on diabetes and herbicide exposure written by me in 1986. The National Academy of Sciences did a comprehensive study again in 1998 and former Secretary Togo West rejected the study and had the issue revisited. The diabetes type 2 was again presented to the Acting, VA Secretary Herschel Gober in October of 2000 and Secretary Gober approved the condition November 9th of 2000. The United States Air Force study released in 2000 proved the Ranch Hand Study was severely flawed and showing a 26% higher rate of heart disorders in those veterans in the study comparison. I have maintained for over a decade the probability of a direct relation of heart disorders and herbicide exposure.

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There are several issues regarding Agent Orange and additional birth defects, which more than likely, will be brought to the forefront in the next several years of study. Many people do not understand that birth defects are reported to the authorities, at the birth of the child. Thus many defects such as learning disabilities; or sensory impairments may not be discovered for months or years. As a result many birth defects go unreported and these children suffer as a result.

In terms of epidemiology, both prospective studies, similar to the US Air Force Ranch Hand study, and retrospective studies, similar to those carried out by Vietnamese medical scientists, should be done, Levy said. Dr. Cau of Vietnam's 10-80 Committee is not too optimistic about the possibility of establishing causal links that would measure up to Western scientific standards. "A long time has already passed," he said. "Mitigation of Agent Orange's effects on human health and the environment is the goal now."

It is time the Secretary of Veterans Affairs to request the National Academy of Sciences of the Institute of Medicine, to complete research on effects of Agent Orange and the heart. Then properly assist those exposed, or their survivors, to receive just compensation.

VETERANS AND AGENT ORANGE UPDATE 2004 (2005)

The report has been released with little change. We have gone through a two year period of study and research with the National Academy of Sciences, for the VA and the net result was a clarification on insulin dependent diabetes type 2. To me it was extremely disappointing, that so many subjects remained untouched and new conditions were not added. Those exposed to Agent Orange, must again wait on those who have little sense of urgency. The now aging Vietnam veterans, find their ranks starting to thin. Many Agent Orange exposed veterans have met premature death, as a result of conditions many strongly believe are the result of the exposure.

The VAO Update 2004 has supposedly clarified the insulin dependent diabetes type 2 as a result of my personal testimony before the NAS committee in July 2004. In discussions with committee members it was stated they (the committee) were unaware the VA was denying claims for some veterans, due to insulin dependent being classified as diabetes type 1. The VA position was diabetes type 1 was juvenile onset, rather than adult onset which is known as diabetes type 2.

The report defined the conditions "diabetes mellitus is a group of heterogeneous metabolic disorders characterized by hyperglycemia and quantitative or qualitative deficiency of insulin action (Orchard et al., 1992). Although all form share hyperglycemia, the pathogenic processes involved in its development differ. Most diabetes fall into two categories: Type 1 diabetes is characterized by an absolute deficiency of insulin caused by the destruction of insulin producing cells. In the pancreas.; type 2 diabetes is characterized by a combination of resistance to the actions of insulin and inadequate secretion of insulin, called relative insulin deficiency. In the old classification systems type 1 diabetes was called insulin dependent diabetes mellitus or juvenile onset diabetes mellitus; type 2 diabetes was called non-insulin dependent diabetes mellitus

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The etiology of diabetes type 2 is unknown, but three major components have been identified: peripheral insulin resistance (thought by many to be primary) in target tissues (muscle, adipose tissue, liver) a defect in β -cell insulin secretion; and hepatic glucose overproduction. In states of insulin resistance, insulin secretion is initially higher for each concentration of glucose, compared with that for people without diabetes. That hyperinsulinemic state is a compensation for peripheral resistance and can often maintain normal glucose levels for years. Eventually, β -cell compensation become inadequate and there is

progression to overt diabetes with concomitant hyperglycemia. The reason the β -cell cease to produce sufficient insulin is not known.

A lawsuit was entered in the U.S. District Court, Brooklyn, by the Vietnamese government, relating to Agent Orange and the suit was dismissed. This suit could have well been exactly what the Vietnam veteran needed, to substantiate the claims of many diseases and birth defects. Ironic but true, this is the same court which let the chemical companies off the hook for \$180 million dollars back in the 1980's!

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Dave Barker's updated website:

<http://davebarker.portalone.us/>

-also-

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