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### Minutes - Agent Orange Working Group (AOWG) Science Panel Meeting January 26, 1984

The Science Panel convened at 9:30 A.M. in Room 729G of the Hubert Humphrey Building on January 26, 1984. Members present were as listed on the attached.

Several announcements were made as follows:

- 1) The Ranch Hand II Morbidity Report is on schedule to be released February 24, 1984.
- 2) Two distinguished visitors from Australia will be in Washington during late February and early March. We will have an opportunity to meet with them at the AOWG meeting scheduled for March 5, 1984.
- 3) Our review of the Australian Birth Defects Study has been approved and forwarded to Congress and the Australian Embassy.
- 4) The designated Subcommittee Review of International Studies on the Possible Association Between Dioxin and Soft Tissue Sarcoma is in progress.

The main agenda item was a discussion of the revised protocols for Epidemilogic Studies of the Health of Vietnam Veterans and CDC's response to various reviewers suggestions.

Two items which were suggested by more than one review group and which the investigators felt otherwise inclined were discussed as follows:

- 1) It had been suggested that the inclusion of studies of chromosome aberrations using cytogenetic techniques on at least a sample of the Agent Orange Study examinees could be useful to distinguish individuals who may have suffered chemical damage. The CDC investigators felt that these techniques were very expensive, that it would be difficult to locate sufficient reliable laboratory facilities to do the work and that results of past efforts of a similar nature had not been productive. Although members of the science panel did not offer scientific evidence to the contrary, they still felt such tests could be useful. Perhaps technological developments in cytogenetic methodology in the near future may make it more feasible to include such tests on some of the Agent Orange Study subjects.
- There has been some concern over the choice of controls for the selected cancers case-control study, specifically that a set of cancer controls be selected from the same registries being used for case selection in order to assure that the control group is similar. It is expected that the SEER registries probably underascertain cases in a small segment of the population as does random digit dialing to select controls.

The investigators felt that this could be handled analytically and that a more overriding argument against selecting cancer controls is the lack of knowledge of what cancers may be associated with the potential chemical exposures in the age group under investigation. The Science Panel members recognized that any ascertainment bias is likely to be small in well run registries and had no objections to the use of population controls.

Brief discussions of each of the recommendations of the Science Panel were as follows:

- 1) The COC investigators have already initiated the beginning stages of the Vietnam Experience Study as had been recommended by the Science Panel.
- They have been in contact with other investigators who are studying the possible association between soft tissue sarcomas and dioxin exposure. Following an expressed concern by Dr. Al Young that the proposed study may be redundant to other efforts in progress, it was pointed out that additional studies of any epidemiological association are generally considered sound scientific practice. In addition, the use of subjects diagnosed with soft tissue sarcomas and other cancers after 1983 should provide a reasonable minimum latency period of about 15 years following possible exposure during the heaviest herbicide applications in Vietnam.
- 3) The CDC investigators have indicated that they will solicit advice as to whether there is sufficient evidence for assigning ground troups to high and low exposure cohorts after unit selection and before proceeding with the full scale Agent Grange Study. However, there is no provision for outside evaluation of this assignment in the protocol.
- 4) They have not received adverse comments from either veterans groups or Congress concerning their decision to study Army veterans following explanation of why this decision was made.

Members of the Science Panel agreed that the CDC Investigators had responded satisfactorily to the major concerns and recommendations expressed by reviewers and unanimously recommended that the Epidemiologic Studies of the Health of Vietnam Veterans should proceed according to the revised protocols. Some items, such as the timing of reports and the final selection of interview and examination instruments, are most suitable for consideration in conjunction with the Advisory Committee on Special Studies which has been assigned to oversee the studies.

#### Page 3

While it had been the intention of the Science Panel to discuss the Research Agenda Subcommittee Report dated December 15, 1982, Dr. Brandt has initiated a request that each member of the Working Group offer their review of this report directly to him by February 25, 1984. It was pointed out that the Research Agenda Subcommittee was a subcommittee of the Working Group rather than of the Science Panel and that comments should be directed to AOWG.

The current status of the Fat Biopsy Subcommittee Report was discussed at some length. A Retrospective Study of Dioxins and Furans in Adipose Tissue initiated by the VA in conjunction with EPA and utilizing samples from the Archives of the National Human Adipose Tissue Survey has been in the planning and development stages since 1982. Members of the Science Panel from several agencies indicated that further development of analytic techniques using blood rather than adipose tissue should be more feasible for conducting large scale surveys to determine background levels as recommended in the Fat Biopsy Report. Dr. Houk reported that considerable resources are being devoted to this effort in the CEH at present. Dr. Barnes reported that the EPA is reorganizing and coordinating their programs relating to the dioxin issue and are scrutinizing individual research programs with respect to their overall effort. It was the consensus of the Science Panel that the particular study being developed by the VA should be discussed when a protocol has been developed and submitted for review.

The meeting adjourned at 12:30 P.M.

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