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Agent Orange May Boost Vietnam Vets' Hypertension Risk

(HealthDay News) -- Exposure to the defoliant herbicide Agent Orange during the Vietnam War may be raising blood pressure levels for the aging veterans of that conflict. That's the biggest change in the latest of a series of reports from the U.S. Institute of Medicine on the long-term health effects of Agent Orange. The report was released Friday.

The IOM's Committee to Review the Health Effects in Vietnam Veterans of Exposure to Herbicides last issued its updated findings in 2005; this report is based on data collected up to 2006. The reports are compiled at the request of the U.S. Department of Veterans Affairs.

"In two new studies, Vietnam veterans with the highest exposure to herbicides exhibited distinct increases in the prevalence of hypertension; the prevalence of heart disease was also increased," the report found, although the IOM committee stopped short of suggesting that wartime exposure to Agent Orange is currently raising veterans' risk of ischemic heart disease.

The group said the latest data on hypertension risk is of a much higher quality than prior research looking at links between Agent Orange and heart disease or heart disease risk factors. However, the new findings are "consistent" with those gleaned from prior research.

There were other changes to the IOM's latest update of Veterans and Agent Orange: Health Effects of Herbicides Used in Vietnam, which is issued every two years (this is the seventh such report).

As new data have emerged, a few important cancer types -- malignancies of the brain, stomach, colon, rectum and pancreas -- were moved from a category labeled "limited or insufficient evidence of no association [with Agent Orange]" to a more neutral category -- "inadequate or insufficient evidence to determine association."

The committee was deadlocked and indecisive on whether to move two more tumor types - breast cancer and melanoma -- as well as ischemic heart disease, from the "inadequate or insufficient evidence to determine association" category up to a category that implies there might be a connection to Agent Orange exposure -- "limited or suggestive evidence of association."

According to the report, "the committee could not reach consensus about the strength of the evidence" on those issues.

Finally, data on an illness linked to multiple myeloma, called amyloidosis, did satisfy the criteria needed to include it in the "limited or suggestive evidence of association" category, associating it for the first time with exposure to the herbicide.

All of these category changes are important, since the VA often consults the committee's reports when making medical or disability coverage decisions for Vietnam veterans. Certain conditions -- sarcomas, non-Hodgkin's lymphomas, chronic lymphocytic leukemia, and Hodgkin's disease -- have been found by the committee to be clearly associated with Agent Orange exposure, for example. The status of other conditions remains more ambiguous.

That ambiguity continues to rile veterans advocates such as Phil Kraft, executive director of the Darien, Conn.-based National Veterans Services Fund. He said that while he "admires the perseverance" of the IOM committee, too many sick Vietnam vets are still fighting for proper care.

"How hard is it to say, 'We're here for you, because you offered your life, and now we're going to help you,' " said Kraft, himself a Vietnam veteran.

He applauded the inclusion of hypertension within the "limited or suggestive evidence" category, but said he wasn't surprised, since, in his opinion, heart disease is rampant among veterans. "I talk to a lot of [veterans'] wives, and they will say, 'Everything was fine until my husband had his heart attack," Kraft said. "And it's not just because we are now all in our 50s and 60s."

Kraft said the evidence-based "bump up" for a number of cancers is also significant, since it may mean better access to medical and disability care for affected veterans. "Anything that is going to add to the list of compensations is a step in the right direction," he said. "I just wish [the committee] would be bolder."

That's because too many veterans are still battling the Veterans Administration for needed coverage, Kraft said. He used the example of a fellow veteran diagnosed with myeloma. The man did end up getting 100 percent disability and care, "but he had to fight for almost three years, while he was sick, because the VA was saying, 'Well, we don't know.' "

With American troops fighting now on a new front, Kraft hopes tomorrow's veterans will be wiser. One big problem for veterans from the Vietnam War is that they have no blood or other samples to demonstrate their baseline level of health before they went off to fight. That means it is often tough to prove that wartime exposures are the cause of an unhealthy change in their genetics or tissue toxicity levels, Kraft said.

"But I know that this time round, soldiers going to Iraq are being told to get a blood sample taken and preserved beforehand," Kraft said. "Guys that are still [in Iraq] are advising the younger guys to do that."

Kraft said it's disheartening that any veteran has to fight another, often lifelong battle to stay healthy and to get the coverage he or she deserves. As for the Institute of Medicine report, Kraft believes its recommendations remain far too cautious.

"I just wish they would loosen up a bit and come down with a recommendation that says, 'Do the right thing for veterans,' " he said. "That's all we have ever wanted."

Source: Steve Burns