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Corporate Author	
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April 29, 1982

Memorandum

Deputy Administrator (001)

Agent Orange Epidemiology

Study Design

The most recent draft of the University of California at Los Angeles (UCLA) Agent Orange epidemiology protocol proposed that two cohorts be selected and studied. These two groups would be comprised of Army and Marine Corp troops who served in Vietnam from 1967 - 1969.

One cohort would be comprised of subjects with a high likelihood of exposure to Agent Orange, as described in the exposure likelihood appendix to the UCLA protocol. The other cohort would be comprised of subjects with a low likelihood of exposure to Agent Orange.

Twelve thousand individual's names would be selected initially by the Department of Defense (DOD) for each cohort. This list would include the names of deceased servicemen as well as those still living. The life status and location of each individual would have to be determined. Prospective subjects would then be contacted and recruited, up to 6,000 subjects in each cohort.

The Office of Technology Assessment (OTA) and the Agent Orange Working Group's (AOWG) Science Panel have reviewed the UCLA protocol and have both recommended that a third cohort be added to the study design to determine whether or not service in Vietnam has caused any health problems not directly related to exposure to Agent Orange. The third cohort would be comprised of 6,000 veterans of the same time period who did not serve in Vietnam. The health of these veterans would establish a baseline for comparison with Vietnam veterans. This third cohort would allow researchers to evaluate possible effects of service between those who served in Vietnam and those who did not serve in Vietnam, in addition to the possible effects of exposure to Agent Orange. Since the health status of subjects in all three cohorts would be evaluated in exactly the same way, the addition of a third cohort would increase the cost of the study by one half.

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Deputy Administrator (001)

Comments and recommendations made by the review groups have been forwarded to UCLA for their consideration and final revision of the protocol. The revised UCLA protocol, due to be returned to the VA today, will be reviewed again by the committees already mentioned, as well as by the National Academy of Sciences (NAS) and the VA Advisory Committee. UCLA's recommendations regarding the cohorts will be carefully considered by all of the reviewing committees. The final decision on this and all matters relating to the epidemiology study will be made by the VA.

MAURICE LEVOIS

Director, Agent Orange Research and Education Information

Maurice Tellois