

Agent Orange/Dioxin &
Other Toxic Substance
Committee

Subject: Mixtures of Chemicals in Vietnam Awareness Brief 1/1/2010

Happy New Years to everyone. Since the founding of VV A. Agent Orange and the other tactical herbicides used in Vietnam have been key issues for research and advocacy efforts. The TCDD Dioxin in Agent Orange is the most toxic dioxin known to man. The wide use of these herbicides containing the potent TCDD Dioxin made it easy for the government, veterans' organizations and veterans themselves to focus almost solely on these tactical herbicides and their health impacts.

Until the 1990's the focus of research including the Air Force Ranch Hand Study was directed almost exclusively to the TCDD dioxin. Even the Agent Orange Act of 1991 charged the Veterans Agent Orange (VAO) Review Committee to look at herbicides and their components. This essentially set the stage so that for the next 18 years the VAO Reviews has not looked at other non-herbicide toxic exposures or the possible combined effects of a mixture of exposures.

The Gulf War showed that mixtures of chemicals can impact the health and well being of veterans. For the first time total exposure of troops to toxic mixtures became an important research issue. One of the Gulf War research problems is how to identify who was exposed to what combination of toxins and when. In the Gulf War there were some wide spread common chemicals exposures such as the vaccines, anti-malaria drugs, insecticides, insect repellents, solvents and fuels. Then there were the more limited exposures where troops were exposed to Nerve Agent like Sarin Gas or to toxic output from bum pits.

Researchers find it difficult to evaluate the impact of a combination of chemicals in situations where exposures and dosages are not controlled like in a lab. Years later how do you figure out who was actually exposed to the various toxins, in what order the exposure occurred, the exposure dosage, and the length of time since the last toxic exposure till the next? This is especially true with the TCDD dioxin in the tactical herbicides where the military formulation varied up to 1,000 times.

We do know that as time goes by more and more diseases are officially being associated with exposure to tactical herbicides. Many other diseases may be associated with service in Vietnam but are not officially recognized as service connected... The lack of research and the failure to consider other toxins or combinations of toxins and their interaction with tactical herbicides provide the main reasons that more diseases are not service connected.

In the latest Veterans Agent Orange Review (VAO), it is clearly pointed out that they will not consider toxic exposures other than the tactical herbicides and the components of those herbicides. The VAO Review Committee points out "Given the rather broad spectrum of environmental exposures that epidemiologic studies have found to be associated with PD (Parkinson's disease), it has been hypothesized that interactions may play a prominent role in this disease's etiology. This would be compatible with PD arising from other exposures experienced during service in Vietnam (insecticides for instance) interacting with the herbicides. The charge of this committee, however, is limited to the herbicides sprayed in Vietnam: an extension to consideration and evaluation of the limitless universe of interactions is not feasible for a single health outcome, much less the full spectrum of adverse outcomes for which the committee is responsible. This limited look at what is making Vietnam Veterans sick is a concern to the AO/DOTS Committee.

The VAO Committee also points out VA's failures to act upon recommendations of studies that need to be undertaken. "The committee notes that, despite the fact that its predecessors have made quite similar recommendations, there has been little or no action toward implementing several investigations that the committee regards as imperative."

The past VAO Committees have not reviewed many diseases simply because a disease has not been selected for review. Something needs to happen to put the disease on their radar for an individual review. If the health issue is caused by non-herbicide exposures then it may never get on the VAO Committee's radar screen. Even if it is on their screen, the committee will only look for an association with the tactical herbicide.

The Agent Orange/Dioxin and Other Toxic Substance Committee would like to bring a higher awareness to the issues of "Other Toxic Substances". We believe that these other toxic exposures and their combinations especially with the tactical herbicides play a major role in health issues Vietnam Veterans experience.

One toxin that was used on a wide spread basis in Vietnam was the organophosphate. Malathion. Malathion is an insecticide used to combat the mosquitoes. Attached to this awareness brief is a commentary on "Operation Flyswatter". This commentary details the spraying of Malathion in Vietnam over the troop areas every 9 to 11 days. This resulted in routine reoccurring exposures to Malathion.

The combined impact of an exposure to Malathion and tactical herbicides are unstudied. As we look for answers to the health issues of not only Vietnam Veterans but their offspring, these other toxins like Malathion by themselves and in combination with each other and tactical herbicides have to be considered.

I pointed out in a number of interviews that "Current research shows that battlefield toxin result in military casualties' decades after the war and expand those casualties to the future generation of veterans' offspring" We can no longer ignore these other toxins or the possible combined effects on veterans, their children and grandchildren.

The purpose of this brief is to bring more awareness to this issue within the VVA.

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