

**Department of Defense Report to Congress Outreach to Gulf War Veterans Calendar Year
2002
Executive Summary**

Statutory Requirement

The National Defense Authorization Act for Fiscal Year 1995 (Public Law 103-337) was enacted October 5, 1994. Section 721 of this law requires an annual report to Congress on three main points:

- Revision of Physical Evaluation Board criteria;
- Review of records and reevaluation of the ratings of previously discharged Gulf War veterans; and,
- Outreach to Persian Gulf War veterans.

Overview of Previous Effort

Within 18 months of the Gulf War deployment, the Department of Defense partnered with the Department of Veterans Affairs to revise the Physical Evaluation Board criteria. A comparison of the Board dispositions between Gulf War and non-Gulf War veterans is contained in this report. Since the Physical Evaluation Board has long since completed their criteria revision, and discharged Gulf War veterans receive multiple reviews of records and reevaluations of ratings throughout the discharge rating process, this report will focus primarily on the actions taken by the Department of Defense to inform Gulf War veterans and their families about medical care and information and services available to those experiencing symptoms that may be related to service in the Gulf War.

Overview of Outreach Effort

The channels of communication established with Gulf War veterans include a wide array of ongoing printed, telephonic, and electronic media, such as the *Deployment Quarterly* magazine, the *GulfLINK* and *DeploymentLINK* web sites, and meetings conducted by the Deployment Health Support Directorate, formerly the Office of the Special Assistant for Gulf War Illnesses, Medical Readiness and Military Deployments.

The establishment of the Veterans Affairs Registry Program in 1992 and the Department of Defense's Comprehensive Clinical Evaluation Program in 1994 were important initiatives requiring both agencies to work together to assess patient care needs. Both programs followed the Gulf War deployment by using comparable examination procedures and data fields. This theme of partnership across federal agencies was followed by the joint Department of Defense, Department of Veterans Affairs, and Department of Health and Human Services Research Working Group of the Persian Gulf Veterans Coordinating Board. The Research Working Group continues to inform the Departments' health care providers of the unique clinical characteristics of Gulf War veterans.

The work of the Office of the Special Assistant for Gulf War Illnesses, Medical Readiness and Military Deployments played a key role in the Department of Defense's outreach program. It actively clarified anecdotal events with interagency investigation and harnessed the efforts of other working groups in developing clear and candid messages for veterans. This office will continue to serve the active duty and reserve forces, and veterans and their families with its expanded mandate as the Deployment Health Support Directorate.

Department of Defense Report to Congress

Revision of Physical Evaluation Board Criteria

Background

This section of the report responds to Section 721(h) of the National Defense Authorization Act for Fiscal Year 1995 (Public Law 103-337), which requires a report on efforts taken to revise the Physical Evaluation Board (PEB) disability rating criteria and interim efforts to adjudicate cases before the revision of the criteria.

The Act requires the Secretary of Defense, in consultation with the Secretary of Veterans Affairs and the Secretary of Health and Human Services, to ensure that the case definitions and the PEB criteria used for members no longer medically qualified for continuation on active duty be established as soon as possible to permit accurate disability ratings for a diagnosis of a Gulf War-related illness. To date, a case definition of Gulf War-related illness has not been developed because the broad spectrum of research has shown no unique cluster of symptoms related to a definite exposure of any kind. All PEB ratings have been based on existing known medical diagnoses.

The Act required the Secretary of Defense to ensure that active duty Gulf War veterans suffering from a Gulf War-related illness be given continued military medical care. All Gulf War veterans who presented for evaluation or treatment through the Comprehensive Clinical Evaluation Program (CCEP) received medical care commensurate with their conditions. The Act also required that any active duty Gulf War veteran found by a PEB to be unfit for continuation on active duty as a result of a Gulf War-related illness for which the board had no rating criteria (or inadequate rating criteria) be placed on the Temporary Disability Retired List until suitable discharge rating criteria is developed.

In a memorandum for the Secretaries of the Army, Navy, and Air Force, signed on June 2, 1994, the Under Secretary of Defense for Personnel and Readiness clarified Department of Defense (DoD) policy on the discharge of members with symptoms of an illness following service in the Gulf War. The memorandum stated that no servicemember who showed symptoms associated with an illness following Gulf War-service be retired or separated unless:

- The member requested retirement or separation in writing;

- The member could be medically retired or separated through the disability system with an established diagnosis recognized by the Veterans Affairs Schedule of Ratings and Disabilities (VASRD).

The policy applies to all members serving in the Armed Forces, including those who are already in the Disability Evaluation System (DES).

Effective February 3, 1995, the Department of Veterans Affairs (VA) promulgated final regulations establishing a disability rating, based on analogous diagnoses, for illnesses reported following service in the Gulf War. This rating method used signs and symptoms for illnesses for which disability ratings already existed in the VA's ratings schedule. As DoD is required by law to use the VASRD to rate disabilities, this regulation allowed the DoD disability evaluation system to more appropriately assess those servicemembers with medical illnesses following service in the Gulf War.

In a memorandum for the Secretaries of the Army, Navy, and Air Force, signed on May 22, 1995, the Under Secretary for Personnel and Readiness again clarified DoD policy on the discharge of members with symptoms of a Gulf War-related illness in view of the new VA disability rating criteria for undiagnosed illness. The memorandum stated that illnesses following service in the Gulf War be considered by the DES under normal DES rules and procedures with the following special provisions:

- For any member found unfit for duty based on a physical condition classified by a Medical Evaluation Board (MEB) as an undiagnosed illness following service in the Gulf War, the PEB will use the VASRD evaluation by analogy rule adopted by the VA to make a disability rating;
- Whenever a MEB determines that a case should be referred to a PEB based on a physical condition involving an undiagnosed illness following Gulf War service, the MEB will include in its review of the member's condition the results of the CCEP or a comparable military medical system evaluation.

Review of Records and Re-rating of Previously Discharged Gulf War Veterans Section 721(f) of the Act required the Secretary of Defense, in consultation with the Secretary of Veterans Affairs, to insure a review of the health and personnel records of each Gulf War veteran who before October 5, 1994, was discharged from active duty or was medically retired as a result of the PEB process. This review ensured a re-evaluation and, if appropriate, re-

rating of former Gulf War veterans who may have been suffering from an illness following service in the Gulf War at the time of discharge from active duty prior to the criteria established under section 721(e).

The PEB performs multiple reviews of health and personnel records to determine fitness for continued military service. Because of the efficiency and effectiveness of this review process, a re-rating of those members previously separated for medical illnesses following service in the Gulf War is unnecessary. Once separated from the service, the veteran is eligible to apply to the VA for a separate second evaluation of disability in the civilian workplace. Servicemembers who were discharged without the MEB and PEB evaluation (therefor, fit for continuation on active duty at the time of discharge) are eligible to apply for disability and be examined and rated for disability by the VA.

The Department believes the purpose of section 721(f) — that all Gulf War veterans medically separated or retired from active duty due to illnesses following service in the Gulf War have accurate disability ratings — has been achieved. Any such veteran who desires a re-rating may obtain it from the VA.

These positions remain unchanged from the previous report.

Outreach to Gulf War Veterans

Background

Because of concerns about the reported medical problems of Gulf War veterans and to better understand the nature of the diverse symptoms being reported, DoD established several research, health assessment, and communication initiatives in 1994. The DoD's efforts have been coordinated and integrated with similar efforts within the Departments of Health and Human Services (HHS) and Veterans Affairs. These combined efforts have investigated the possible health effects of potential sources of exposure during the Gulf War experience: smoke from oil well fires, chemical and biological warfare agents, vaccines and medications, depleted uranium, indigenous infectious disease, pesticides, sand, and stress.

Following the DoD revelation in 1996 that U.S. and coalition forces may have been exposed to low-level nerve agents from the destruction of Iraq's ammunition stores at Khamisiyah, Iraq, Dr. John White, then Deputy Secretary of Defense established the Office of

the Special Assistant for Gulf War Illnesses, now called the Deployment Health Support Directorate (DHSD). Dr. White granted DHSD broad authority to coordinate all aspects of the Department's program for Gulf War veterans. In addition to conducting full-scale investigations of the events of the Gulf War, the office operated under a three-part mission under which they endeavored to:

- Investigate events and circumstances of the Gulf War that may be relevant to the illnesses of Gulf War veterans;
- Ensure that veterans were receiving proper care, and;
- Recommend to the Secretary of Defense changes in doctrine, policy, and procedures to reduce the risks to servicemembers during future deployments.

The Deployment Health Support Directorate changed the way DoD had approached the issue of illnesses experienced by Gulf War veterans. DHSD:

- Focused on the Gulf War veterans and listened to their concerns and problems in order to incorporate what they were saying into its investigations;
- Developed an outreach program to effectively communicate with Gulf War veterans;
- Expanded the formal investigation process to determine whether or not Gulf War veterans were exposed to chemical or biological agents in theater; and
- Expanded the investigations to include potential exposures of Gulf War veterans to environmental and occupational sources.

To date, DHSD has published forty-four case narratives including updates, ten environmental exposure reports and twelve information papers as a result of its investigations into possible chemical and biological incidents and into environmental factors that may have contributed to adverse health outcomes. In calendar year 2002, DHSD published four final reports. In summary, DHSD has devoted considerable effort to providing veterans, military personnel, and the public with timely and accurate information.

The Aftermath of War: What History and Research Have Taught Us

Since the Civil War, physicians have documented chronic, enigmatic, and disabling postwar physical symptoms among veterans. Unexplained physical symptoms became an

especially challenging issue for veterans, policy makers, scientists, and clinicians after the Gulf War. More than 43 percent of the first 18,000 veterans seeking DoD care for Gulf War health concerns were diagnosed with an “ill-defined” condition, and nearly 18 percent had an ill-defined condition as a primary diagnosis.

As a supplement to the Comprehensive Clinical Evaluation Program established in 1994, the Gulf War Veterans’ Illnesses research program continues to:

- Enhance the understanding of the illnesses experienced by Gulf War veterans;
- Seek enhanced diagnostic capabilities and efficacious treatment modalities for all veterans; and,
- Support the establishment of policies and preventive measures that minimize the risk of such illnesses during future military operations.

Competition and independent peer review are used to secure the research performers, hypotheses, and experimental designs from all possible sources, including the Federal, civilian, national and international communities.

The strategy of the joint DoD, VA, and HHS research program involves a multidisciplinary approach along many different scientific lines by scientists and clinicians in Federal, academic, and private institutions. Efforts within the Departments to care for Gulf War veterans have reinforced appreciation of the seriousness of their health complaints and recognition that these veterans require careful evaluations and appropriate therapeutic programs. The specialized care center at the Walter Reed Army Medical Center continues to offer a more intensive therapeutic program for those veterans on active duty or in the reserves with more disabling health problems. Since February 1999, veterans enrolled in the specialized care center at Walter Reed have been invited to visit DHSD’s offices. The visits continue on a monthly basis and include an orientation briefing, a meeting with the Director and a tour of the DHSD facilities.

Current Force Health Protection initiatives reflect the lessons learned during and since the Gulf War. The Department has implemented policies and programs to improve the health of all who serve our nation, now and in the future. Ten years after the Gulf War, however, we have not relaxed our commitment to care for those veterans and their families who are ill and believe that the illnesses are related to Gulf War service. To date:

- No unique, previously unrecognized illness has been discovered among Gulf War veterans.

- VA and DoD data systems do not demonstrate a higher incidence of hospitalizations or deaths among Gulf War veterans compared to non-deployed veterans.
- The incidence of birth defects in children and the incidence of health problems among spouses are not higher for Gulf War veterans than for other veterans.
- There is a higher prevalence of symptoms reported among veterans who served in the Gulf War as compared to non-deployed veterans. The most common symptoms include fatigue, difficulty concentrating, memory loss, skin rash, headache, and muscle and joint pain.
- For some veterans, the symptoms are severe enough to be disabling; others experience milder symptoms that still allow normal daily activity; still others report no symptoms at all.
- Veterans' symptoms have not shown correlation with exposure to any particular physical or psychological stimulus.

Total Force Outreach Program

The Total Force Outreach Program, developed by DHSD in 1998, is the Department's major comprehensive effort to respond to the needs and concerns of Gulf War veterans, active duty members, reservists and their families. Through the Total Force Outreach Program, DHSD has reached nearly 130,000 veterans, servicemembers, their families, and members of the general public. In 2002, at the request of Congressman Putnam, DHSD staff participated in a roundtable discussion on Gulf War illness issues in Bartow, Florida. DHSD again provided a team with display to the Joint Forces Open House and Air Show at Andrews Air Force Base, Maryland where informational handouts and a demonstration of the GulfLINK and DeploymentLINK web sites were made available to the 275,000 attendees over the three-day event. DHSD also provided a briefing to the Army's Sergeants Major Academy students and staff that encompassed the lessons learned from the Gulf War and the initiatives being employed during subsequent operations.

GulfLINK, www.gulflink.osd.mil, has provided the public and especially the veterans' community with a valuable resource for furthering its understanding of illnesses following service in the Gulf War. The user-friendly site has received several awards and has been rated as one of the best federal government web sites. *GulfLINK* averages more than 1,084,000

visitors per month and offers a wide array of information as well as hyperlinks to other web sites. Visitors can access speeches, all DHSD publications, and a host of other data. The direct email connection on the *GulfLINK* site facilitates queries or comments (more than 3,200 annually). *GulfLINK* will remain in operation and updates on Gulf War-specific issues will continue to appear on *GulfLINK* in addition to archived material.

On June 18, 2002, DHSD launched a new web site called *MedSearch*. This site is the result of collaboration between the Departments of Defense, Health and Human Services, and Veterans Affairs. The three departments have worked together to create a library of government-sponsored Gulf War related research. The library was developed to help service members, veterans, families and the public learn about research efforts into health concerns related to service during the Gulf War. This web site will also provide scientists and medical professionals information about initiatives and findings in Gulf War-related medical research. The site's sections contain details about the more than 200 research projects funded by the government, plain language summaries of important issues, and a listing of government reports. The site is periodically updated as new projects are funded and research results are published. Another 2002 addition to the web site is the depleted uranium library. The depleted uranium library was created in response to the general interest and numerous queries this office received from the news media and general public. It provides a comprehensive research tool on all aspects of depleted uranium that is easily understood by anyone interested in this issue.

GulfLINK is also linked with the *DeploymentLINK* web site, which is devoted to contemporary medical readiness and deployment health issues. This web site contains deployment health information for servicemembers and their families. A unique feature in *DeploymentLINK* is a site specifically tailored to children. Kids Information on Deployment Stuff (KIDS) contains useful information to help children learn about military deployments in an age-specific format that is easily understood. Another feature of *DeploymentLINK* is the section on country fact sheets where visitors can obtain information on countries to which U.S. forces could deploy. The information includes health issues, geography, population, and climate. *DeploymentLINK* averages more than 127,000 visitors per month.

DHSD continues to produce the quarterly magazine, *Deployment Quarterly*, in print and electronic versions. Four issues of *Deployment Quarterly* were published in 2002. The magazine has a section devoted to events of interest to Gulf War veterans and their families.

The magazine also includes timely features based on ongoing or released case narratives, information papers, and environmental exposure reports. *Deployment Quarterly* also has a section that allows Gulf War veterans and their family members to get medical questions answered by the doctors and pharmacist on staff at DHSD. The magazine has a mailing list of approximately 14,000, with a readership of close to 25,000.

Veterans' Correspondence and Hotline

During calendar year 2002, DHSD logged 6865 outreach-related contacts through email (2766), phone calls (3454), and letters (645). Veteran contact managers staffing the toll-free phone line, Monday through Friday, 9:00 a.m. to 9:00 p.m. Eastern Time, continue to respond to individual inquiries and conduct interviews supporting ongoing investigations of possible chemical warfare agent exposures, environmental hazards, and other related health issues.

Notifications

DHSD continues to notify individual veterans in conjunction with the release of certain case narratives, information papers, and environmental exposure reports. These letters of notification include requests for veterans to provide additional information to aid in the investigation effort. In 2002, four letters relating to the Khamisiyah incident were sent out. We also continue to provide medically related information to veterans who have a personal interest in an incident.

Liaison with Veterans and Military Service Organizations

The DHSD has established direct and frequent communication with the Veterans Service Organizations (VSOs) and Military Service Organizations (MSOs). VSOs and MSOs regularly receive updates and briefings on DHSD and other Gulf War veterans initiatives, such as the comprehensive treatment program offered at Walter Reed Army Medical Center. The DHSD leadership meets regularly with VSO and MSO leadership and DHSD regularly sends information and veteran contact managers to VSO and MSO national and regional conventions.

Eleven veteran and military service organization meetings were held in 2002. To ensure that the VSOs and MSOs receive reports promptly, DHSD staff provides special briefings before publicly releasing case narratives, information papers, and environmental exposure reports. As part of the Total Force Outreach program, the office participated in 14 conferences, conventions, and other events hosted by VSOs and MSOs. Participation in such events provides important information about DoD's efforts to respond to Gulf War veterans' concerns to the nearly 10 million members these organizations represent.

Medical Records

In 2002 the Deployment Health Support Directorate continued to support veteran requests to locate and obtain copies of their Gulf War inpatient medical records using its inpatient records database.

Medical Outreach - Helping Veterans Obtain Care

The means by which we have reached out to veterans remains unchanged from previous years. However, we have improved our ability to communicate with even greater numbers of veterans, servicemembers, and their families. DHSD maintains channels of communication with VSOs and MSOs through regularly scheduled meetings and electronic mailings. We continue to disseminate information via our Internet portals and correspondence. We produced four issues of *Deployment Quarterly*, a publication that provides important deployment health information to servicemembers and their families. Timely and accurate information throughout the deployment cycle is vitally important to understanding the long-term physical and mental well-being of our dedicated fighting forces. We understand this, and have made every effort to reach out to our total force with open, honest, and forthright communications.

Representatives of the DHSD traveled to numerous locations within the Continental United States in 2002. The purpose of these visits was to reach out and communicate with veterans and their family members about unexplained illnesses that may have resulted from service in the Persian Gulf. We also addressed specific issues and concerns that were repeatedly forwarded to our office from various constituents. By discussing the lessons learned over the past decade, we strive to minimize potential precipitators of unexplained illnesses in future deployments.

As media attention to depleted uranium (DU) continued in 2002, DHSD experts were repeatedly asked provide interviews to address the health consequences of exposure to DU. We continue to be an advocate for Gulf War veterans and their families, providing health information, contacts, and assistance to veterans or family members in resolving various issues. Outreach travel to Corpus Christi, Texas, Tulsa, Oklahoma, Madison, Wisconsin, Atlanta, Georgia, Niagara Falls, New York, Bartow, Florida, Jacksonville, Florida, Denver, Colorado, and Long Beach, California were the result of this continuing endeavor. Major populations of military personnel, VSOs, National Guard and Reserve Units, military staff colleges, family member workshops, and various medical conferences were targeted for DoD's outreach efforts.

Internet web technology has proven to be an excellent avenue in reaching people throughout the United States and overseas. *GulfLINK* and *DeploymentLINK* continue to be successful and useful tools for communicating with our veterans of the Gulf War

Medical outreach in 2002 provided the Department of Defense numerous opportunities to get the word to Gulf War veterans and their family members about medical evaluation and care, access to available information, and promoting and integrating lessons learned from the Gulf War. We have traveled extensively throughout the United States and leveraged web-based Internet technology to provide a vast amount of information. DHSD continues its efforts to find answers for sick veterans of the Gulf War while moving forward and taking those steps necessary to minimize potential health risks in future deployments.

Summary

The Department of Defense believes that the intensive outreach activities described above have met the intent of Congress to communicate effectively with our Gulf War veterans and to offer compassionate care for those with unexplained illnesses or disabling symptoms. The in-person, printed, and electronic channels of communication established have benefited veterans and their families.

The success of DHSD in establishing a credible process to address the concerns of veterans following the Gulf War and to identify strategies that would improve future medical readiness and military deployments have led to an expanded role for DHSD in exploring the health of all deployments. The office will continue its ongoing communication with veteran

and military service organizations to assure that servicemembers and their families understand what is being done on their behalf. The organization is poised to build on the competence gained over the past years in working with veterans to provide proactive support for veterans of future deployments. The Department's established channels of communication — the toll-free phone line, interactive e-mail, web site and open forums—are a tested foundation for the future.

The establishment of the VA Registry Program in 1992, the DoD Comprehensive Clinical Evaluation Program in 1994, and the implementation of the Clinical Practice Guidelines for deployment health transformed the ability of both Departments to work together to assess patient care needs following a deployment by using comparable examination procedures and data fields. The professional relationships across the three federal agencies have had a synergistic effect in reaching out to veterans with the combined strength of the vast professional, clinical, scientific, and communication expertise of the three agencies. DHSD faced the investigation and communication challenges of the aftermath of the Gulf War and prepared the pathway for a systematic approach in support of Force Health Protection, before, during, and after deployments.