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For Release 11 a.m. EST, November 17, 2008
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Gulf War Research Panel Finds 1 in 4 Veterans Suffers from Illness Caused by Toxic Exposure

Washington, DC – (Nov. 17, 2008) – At least one in four of the 697,000 U.S. veterans of the 1991 Gulf War suffer from Gulf War illness, a condition caused by exposure to toxic chemicals, including pesticides and a drug administered to protect troops against nerve gas, and no effective treatments have yet been found, a federal panel of scientific experts and veterans concludes in a landmark report released Monday.

The Congressionally-mandated Research Advisory Committee on Gulf War Veterans' Illnesses presented the report today to Secretary of Veterans Affairs James Peake at VA headquarters in Washington.

Scientific staff support to the Committee is provided by the Boston University School of Public Health (BUSPH). **The full report is posted at: http://sph.bu.edu/insider/racreport**

"The extensive body of scientific research now available consistently indicates that Gulf War illness is real, that it is the result of neurotoxic exposures during Gulf War deployment, and that few veterans have recovered or substantially improved with time," the report says.

The 450-page report brings together for the first time the full range of scientific research and government investigations on Gulf War illness and resolves many questions about the condition.

"Veterans of the 1990-1991 Gulf War had the distinction of serving their country in a military operation that was a tremendous success, achieved in short order. But many had the misfortune of developing lasting health consequences that were poorly understood and, for too long, denied or trivialized," the Committee's report says.

The report found that Gulf War illness fundamentally differs from stress-related syndromes described after other wars. "Studies consistently indicate that Gulf War illness is not the result of combat or other stressors, and that Gulf War veterans have lower rates of posttraumatic stress disorder than veterans of other wars," the Committee wrote.

The report concludes: "A renewed federal research commitment is needed … to achieve the critical objectives of improving the health of Gulf War veterans and preventing similar problems in future deployments. This is a national obligation, made especially urgent by the many years that Gulf War veterans have waited for answers and assistance."

Panel Chairman James H. Binns, a former Principal Deputy Assistant Secretary of Defense, said the report "provides a blueprint for the new Administration to focus resources on improving the health of Gulf War veterans and avoiding similar consequences in future military deployments."

Committee Scientific Director Roberta White, PhD, associate dean for research at Boston University's School of Public Health, stated: "Veterans of the first Gulf War have been plagued by ill health since their return 17 years ago. Although the evidence for this health phenomenon is overwhelming, veterans repeatedly find that their complaints are met with cynicism and a 'blame the victim' mentality that attributes their health problems to mental illness or non-physical factors."

White said the Committee's findings "clearly substantiate veterans' beliefs that their health problems are related to exposures experienced in the Gulf theatre. It provides a state-of-the-art review of knowledge about Gulf War veterans' health concerns that can guide clinicians and researchers, and offers a scientific rationale for the new Administration to further our understanding of these health problems -- most importantly, by funding treatment trials to develop effective treatments of the veterans' symptoms."

Large numbers of British Gulf War veterans also are ill. "Recognition of the full extent of the illnesses suffered by these veterans of the conflict and the obligation owed to them is long overdue," said Marshal of The Royal Air Force Lord David Craig, Chief of the Defence Staff (the British equivalent of Chairman of the Joint Chiefs) during the 1990-1991 Gulf War. "They are victims of the war, as much as any one struck by a bullet or shell. Moreover, medical treatments for their conditions are needed to protect current and future military personnel at similar risk."

The Committee evaluated evidence related to a broad spectrum of Gulf War-related exposures. Its review included hundreds of studies of Gulf War veterans, extensive research in other human populations, studies on toxic exposures in animal models, and government investigations related to events and exposures in the Gulf War.

Gulf War illness is typically characterized by a combination of memory and concentration problems, persistent headaches, unexplained fatigue and widespread pain, and may also include chronic digestive problems, respiratory symptoms and skin rashes.

The new report says that scientific evidence "leaves no question that Gulf War illness is a real condition," and it cites dozens of research studies that have identified "objective biological measures" that distinguish veterans with the illness from healthy controls. Those measures relate to structure and functioning of the brain, functioning of the autonomic nervous system, neuroendocrine and immune alterations, and variability in enzymes that protect the body from neurotoxic chemicals.

The panel cited two Gulf War exposures consistently found to be causally associated with Gulf War illness: (1) the drug pyridostigmine bromide (PB), given to troops to protect against nerve gas, and (2) pesticides that were widely used, and often overused, during the Gulf War.

The Committee found that an association between Gulf War illness and several other exposures could not be ruled out. These included low-level exposures to nerve agents, extended exposure to smoke from oil well fires, receipt of large numbers of vaccines, and combinations of neurotoxic exposures.

Department of Defense reports indicate that about 100,000 U.S. troops were potentially exposed to low-level nerve agents as a result of large-scale U.S. demolitions of Iraqi munitions near Khamisiyah, Iraq in 1991. In 2007, a federally funded study led by White, chair of Environmental Health at the Boston University School of Public Health, found evidence that low-level exposure to nerve gas could have caused lasting brain deficits in Persian Gulf troops. The extent of the changes – less brain "white

matter" and reduced cognitive function -- corresponded to the extent of the exposure, that study found.

In addition, the Committee said, Gulf War veterans have significantly higher rates of amyotrophic lateral sclerosis (ALS) than other veterans, and troops who were downwind from the Khamisiyah demolitions have died from brain cancer at twice the rate of other Gulf War veterans.

The report found that historically, federal Gulf War research programs have not been effective in addressing Gulf War illness. While the Committee applauded promising new programs at VA and DOD, it noted that overall federal funding for Gulf War research had declined dramatically in recent years. The panel urged policymakers to devote $60 million annually for such programs.

The Committee further recommended that the VA instruct the Institute of Medicine (IOM) to re-do its previously completed Gulf War and Health reports, saying the IOM's series of reports have been "skewed and limited by a restrictive approach to the scientific tasks mandated by Congress, an approach directed by VA in commissioning the reports."

The Research Advisory Committee on Gulf War Veterans' Illnesses is a panel of prominent scientists and veterans, charged with reviewing federal research on the health of Gulf War veterans. The Committee was mandated by Congress and appointed by the Secretary of Veterans Affairs. Additional information about the Committee and its activities can be found on its website: www.va.gov/RAC-GWVI.

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