



# GulfNEWS

A bimonthly newsletter serving the interests of Gulf War veterans

## Veterans needed for medical trials across US

By Diana Berardocco  
Public Affairs

The Department of Defense and the Department of Veterans Affairs will continue to recruit participants until April 2000 for two medical treatment trials which began last spring. Researchers hope the studies will advance current understanding of the illnesses affecting some veterans and explore possible treatment options.

"We have had a universally good veteran turn-out for these studies, said Army Lt. Col. Charles Engel, M.D., chief, deployment health clinical center at Walter Reed Army Medical Center in Washington, D.C. "We are on track, but we are still actively seeking Gulf War veterans who are concerned about their health."

The two treatment trials, EBT for Exercise-Behavioral Therapy

and the Antibiotic Treatment Trial, are being conducted at 36 different Veterans Affairs and DoD medical facilities nationwide. The EBT study examines whether aerobic exercise and cognitive behavioral therapy will improve the life for ill Gulf War veterans. The Antibiotic Treatment Trial tests the theory that ill Gulf War veterans who test positive for an organism called *Mycoplasma fermentans incognitus* will feel better after receiving antibiotic treatment with doxycycline.

The response from veterans has been geographically broad-based. Engel said he is pleased that veterans are volunteering from around the country, often after receiving mailings from participating sites or attending local DoD and VA-sponsored meetings.

"Through these programs we've been able to reach out to

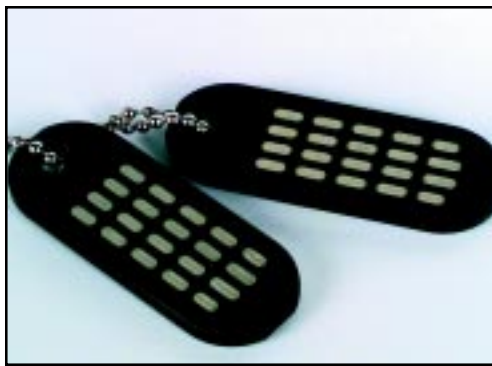
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## *Soldiers test new technology*

By Priscilla Baird  
Public Affairs

Individual medical records for U.S. service members are going high tech. In addition to the standard military metal identification tag, service members will be issued another tag – approximately the same size as the dog tag – bearing computerized medical records to wear around their necks. The Army was selected last fall as the first service to test the device, after trial studies were completed in 1998.

Personal Information Carriers – known as PICs – provide computerized information of



- file photo

The new personal information carriers prototypes will give medical personnel access to a soldier's medical records stored on a computer memory chip.

the service member's shot record and data on allergies and surgical history to field medical personnel. The PIC is part of the Composite Health Care System II, a computer system designed to allow providers to track health care services delivered to service members.

"Computerized medical records are a vision of the future," said Army Col. Frank O'Donnell, M.D., director of medical outreach and issues for the office of the special assistant for Gulf War illnesses. "As military forces deploy overseas in support of operational missions, PICs would be a portable, convenient method of record keeping. We would no longer depend on conventional paper-based documents. One focus of force health protection is improving medical record management, and PICs could support that mission."

A data storage device, the PIC uses flash memory; the same as that found in disks which store images in digital computers. This technology is five to 10 times more durable and reliable than most disk drives. Currently, the new tag can store up to eight megabytes of data, such as text, images, audio, and so on. Future versions of the PIC will provide higher capacities to enable the storage of large files such as X-rays and MRIs. The PICs could replace paper medical records, analog audio/visual recordings and film images.

The PIC is an extension of the Force Health Protection initiatives resulting from

lessons learned from the Gulf War. Pentagon officials began working on the project after redeployment, when service members' battlefield medical records were unavailable, and incomplete medical records complicated investigations into the Gulf War illnesses. Defense Department officials found differing medical record keeping practices and policies between the services. For example, the Army and the Air Force deployed their personnel with abbreviated versions of their medical records while Navy and Marine Corps personnel deployed with their complete individual health record.

While the traditional metal "dog tag" – worn by service members since 1906 – will still serve as the primary means of identification on the battlefield, the PIC will give medical personnel access to the soldier's medical history via laptop computers at battlefield aid stations. Later, information about treatment received in the field can be transmitted and recorded to a central database. This central database guarantees, if the PIC becomes damaged or destroyed, that the data is still available and retrievable. Another added benefit from the PIC is that the central database could be valuable for future epidemiological studies and offer a way to methodically evaluate if suspected events such as environmental exposures or immunizations are associated with subse-

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*From the desk of  
Bernard D. Rostker  
Special Assistant for  
Gulf War Illnesses*



In November, our team completed its 14th Total Force Outreach to Fort Benning, Ga. As we met with veterans, I was reminded of a problem that we've seen since we held the first outreach at a military installation nearly two years ago – veterans are toughing it out, rather than seeking treatment.

The Department of Defense established the Comprehensive Clinical Evaluation Program – the CCEP – to provide in-depth medical evaluations for Gulf War veterans currently serving in the active or Reserve components, or those who are retired. Personnel who have served in Southwest Asia during the war or since that time, and their eligible family members, who want medical examinations are encouraged to make an appointment.

To schedule an appointment, call toll-free at (800) 796-9699 or DSN 878-3261. For those overseas who do not have DSN access, the direct line for the CCEP is (408) 583-2500 between the hours of 6 a.m. and 4 p.m. Pacific time, Monday through Friday.

The Department of Veterans Affairs offers a similar program for veterans no longer affiliated with the military. To schedule an exam with the VA's Persian Gulf Registry, call (800) 749-8387.

If you have health concerns, don't tough it out. We want you to receive the care you deserve. I encourage you to call either the CCEP or the VA's Persian Gulf Registry program today.

We will continue to try and reach as many veterans as we can to brief the total force on our efforts and to bring the message of "force health protection" to service members over the next year. To date, we have met with almost 60,000 service members. Our one-on-one approach seems to be working very well at both dispelling rumors and providing accurate information.

## Volunteers for trials still needed

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veterans and make them aware of issues impacting the health of Gulf War veterans," he said.

To be eligible for either study, veterans must have served in the Gulf War between August 1990 and August 1991 and currently have at least two of three unexplained symptoms – debilitating fatigue, joint and muscle pain, or memory and thinking problems. The symptoms must have been present for more than six months.

More than 1,300 volunteers are being recruited for the EBT study where the focus is rehabilitative rather than curative. This study will use methods proven to improve the lives of people with a variety of illnesses such as chronic fatigue syndrome, fibromyalgia and even multiple sclerosis. The study seeks to improve a person's capacity to cope with functional challenges and symptoms, Engel said. After seven months, more than 1,200 veterans have been screened, 350 people have been selected and the numbers are climbing.

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**“ We’ve been able  
to reach out to veterans and  
make them aware of issues  
impacting the health of  
Gulf War veterans. ”**

*- Army Lt. Col. Charles Engel, M.D.*

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Engel explained that a pattern has surfaced among potential volunteers that has made the target numbers for the exercise-behavioral therapy trial slower to achieve. Interested volunteers often prefer the option of medical treatment and choose to participate in the antibiotic study.

Engel said he is confident that both studies will achieve the needed participation even though it has been harder to enroll patients in the EBT than the antibiotic treatment trial.

“Whatever we learn from the studies, the results will significantly inform the medical community on how to help Gulf War veterans,” Engel said.

Both treatment trials promise to increase the medical community's understanding of chronic multi-symptom illnesses. The void in medical knowledge for these conditions has often led veterans to become dissatisfied with medical practitioners' inability to prescribe curative treatment, Engel said.

The trials have another benefit.

“It exemplifies the spirit of veterans helping veterans,” Engel said.

## Treatment Trial Sites

### Exercise & Cognitive Behavioral Therapy Trial

#### VA Medical Centers

Albuquerque, N.M. .... (505) 265-1711 x 2587  
Birmingham, Ala. .... (205) 933-8101 x 5550  
Boston, Mass. .... (617) 232-9500  
Brooklyn, N.Y. .... (718) 636-6600 x 6588  
Burlington, Vt. .... (802) 864-4492 x 19  
Dayton, Ohio .... (937) 268-6511 x 1212  
East Orange, N.J. .... (800) 248-8005  
Fargo, N.D. .... (701) 239-3700 x 302  
Houston, Texas .... (713) 791-1414 x 5030  
Philadelphia, Pa. .... (215) 823-5952  
Portland, Ore. .... (503) 220-8262 x 57338  
Richmond, Va. .... (804) 675-5000 x 3038  
St. Louis, Mo. .... (314) 289-6554  
San Antonio, Texas .... (210) 617-5300 x 4061  
San Francisco, Calif. .... (415) 221-4810 x 2287  
San Juan, PR .... (787) 758-7575 x 11179  
Seattle, Wash. .... (206) 764-2795  
West Haven, Conn. .... (203) 932-5711 x 3990  
White River Junction, Vt. .... (802) 295-9363 x 5562

### Antibiotic therapy trial

#### VA Medical Centers

Albany, N.Y. .... (518) 462-3311 x 3080  
Albuquerque, N.M. .... (505) 265-1711 x 2396  
Augusta Ga. .... (706) 733-0188 x 2305  
Birmingham, Ala. .... (205) 933-8101 x 5550  
Boston, Mass. .... (617) 232-9500 x 4340  
Bronx, N.Y. .... (800) 877-6976  
Brooklyn, N.Y. .... (718) 630 2875  
Charleston, S.C. .... (843) 577-5011 x 7376  
Dayton, Ohio .... (937) 268-6511 x 1212  
Durham, N.C. .... (919) 286-6950  
East Orange, N.J. .... (973) 676-1000 x 2157  
Fargo, N.D. .... (701) 239-3700 x 3024  
Hines, Ill. .... (708) 202-8387 x 24509  
Houston, Texas .... (791) 794-766  
Manchester, N.H. .... (603) 624-4366 x 6898  
Milwaukee, Wis. .... (414) 384-2000 x 1958  
Montgomery, Ala. .... (334) 272-4670 x 4466  
Nashville, Tenn. .... (615) 327-4751 x 7925  
New Orleans, La. .... (504) 568-0811 x 5490  
Oklahoma City, Okla. .... (405) 270-0501 x 5201  
Omaha, Neb. .... (402) 977-5632  
Providence, R.I. .... (401) 457-3045 x 3460  
Richmond, Va. .... (804) 675-5000 x 3038  
Salt Lake City, Utah .... (801) 582- 1565 x 1466  
San Francisco, Calif. .... (415) 221-4810 x 2287  
San Juan, PR .... (787) 641-7582 x 13131  
White River Junction, Vt. .... (802) 295-9363 x 6054

#### DoD Medical Centers

Naval Health Research Center  
San Diego, Calif. .... (619) 524-0069  
Walter Reed Army Medical Center  
Washington, D.C. .... (202) 782-3473

# Study finds Canadian Gulf War vets have similar symptoms

By Bob Dunlap  
Public Affairs

Canadian Gulf War veterans are reporting similar symptoms at about the same frequency as United States and British Gulf War veterans, survey said.

In 1997, the Canadian Department of National Defense retained Goss Gilroy, Inc. to conduct a health survey of Canadian Forces personnel to compare Gulf War veterans with service members who served in other theaters and the civilian population. The information appears to parallel studies done by the Center for Disease Control and the British military that showed Gulf War veterans reporting symptoms at a rate three times higher than service members deploying elsewhere.

The report concluded that, in comparison with the control group, Canadian Gulf War veterans reported a higher prevalence of symptoms of chronic fatigue, cognitive dysfunction, multiple chemical sensitivity, major depression, post-traumatic stress disorder, chronic dysphoria, anxiety, fibromyalgia and respiratory diseases. Further, combined health outcomes are distributed among many Gulf War veterans. The report also found a higher prevalence of reported birth defects of babies of Gulf War veterans conceived before, during and

after the Gulf War.

“The report did not shed any new light on the causes of Gulf War illnesses,” said Michael Kilpatrick, M.D. “It did help confirm that the symptoms are present in greater numbers among Gulf War veterans.”

The survey data was collected from June to September 1997. Goss Gilroy mailed surveys to all Gulf War veterans and a comparison group of similar Canadian Force personnel – the control group – selected from the Department of National Defense human resource files. Of the 9,947 surveys mailed, 3,113 Gulf War veterans and 3,439 from the control group responded. The overall response rate, 64.5 percent, was made up of 73 percent of Gulf War veterans, and a control response rate of 60.3 percent. The information for the civilian population was drawn from the 1990 Ontario Health Survey.

The entire report is based on survey responses without confirmation of the information provided. It is different from the CDC and British studies because there were no medical exams or testing completed.

The survey also offers the opportunity for more focused research. Kilpatrick noted that a joint team of Canadians, British and United States scientists is currently trying to make a comparison of the information available.

## Veteran Spotlight: *Whitehead credits office with finding medical records*

By Priscilla Baird  
Public Affairs

When Rod Whitehead deployed to the Persian Gulf, he was an able-bodied, vigorous athlete who could bench-press 200 pounds. He returned a sickly, sluggish image of his former self, no longer the member of a weight-lifters club. His life changed forever.

During the Gulf War, Whitehead served with the Army National Guard 776<sup>th</sup> Maintenance Company as a nuclear, biological and chemical staff sergeant. Following the Iraqi surrender, his unit moved to Kuwait City to assist with the recovery of many Iraqi vehicles from the wreckage.

During his six-month deployment,

Whitehead was hospitalized twice due to respiratory distress and chest pain that was followed by a severe headache. The doctors who treated Whitehead diagnosed him with a breathing impairment and annotated the diagnosis in his medical records along with the two hospitalizations.

Whitehead's health continued to deteriorate even after returning home. In 1994, he made the decision to separate from the Army National Guard. At that time, he realized that he was missing information from his medical records. Without that information, it would be impossible to determine a correlation between his deployment to the Gulf and his poor health.

In August 1998, Whitehead learned that the office for Gulf War illnesses was helping

veterans locate missing medical records. After calling the office to search for his inpatient hospital records, Whitehead received a copy of inpatient records from his hospitalization during the Gulf War.

“You are the only place that veterans can call and get the straight scoop,” said Whitehead, 61, who credits the office for Gulf War illnesses with helping him retrieve his medical records. “All I did was call your toll-free, 800-number, and I got results. Your office helped locate my records in storage in Missouri.”

Last year, with the reconstruction of his medical records, his disability rating was upgraded to 40-percent. Whitehead continues to receive treatment for joint pain, breathing problems and stress at the local Veterans Affairs medical center. Not a day goes by that he doesn't experience some pain.

Whitehead, who now resides in Johnson City, Tenn., said that he receives regular updates from the office for Gulf War illnesses through e-mail and shares this information with fellow Gulf War vets.

Although Whitehead no longer jogs four miles a day or lifts weights, he maintains a positive attitude by staying active with The Gulf War Group, Inc., an information-sharing organization that he helped found.

If there's one bit of advice Whitehead recommends to retrieve missing medical records, it's “listen more than you talk, make notes, and contact the office for Gulf War illnesses. They are there to help.”

## Medical records go high tech

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quent health problems in service members. Medical support is provided on a required basis and some records – such as hospitalization records – stay with the treatment facility, not the individual's outpatient record.

Following the Gulf War, investigators found that medical treatment or services such as routine immunizations given to service members deployed to the region were often not entered into the individual's permanent health record back at their home

installation. Some Gulf War veterans have experienced difficulty locating their medical records or finding documentation of all care received in the Gulf. The PIC may solve some of the problems associated with medical recordkeeping during contingencies.

“The PIC brings an opportunity to document exposures or treatments in the field,” said O'Donnell, “and will facilitate the periodic updating of such information to a soldier's medical record throughout an entire career.”



# Resources for Veterans

Your ticket to the information highway — visit our GulfLINK web site at:  
<http://www.gulfink.osd.mil>

Are you a Gulf War veteran (or know of one) with health concerns? Call the CCEP at:  
**1-800-796-9699**

Anyone with information on Gulf War incidents should call the Direct Hotline at:  
**1-800-497-6261**

Gulf War veterans seeking information on VA benefits of all types should call the Persian Gulf Helpline at:  
**1-800-749-8387**

## New mask design offers better protection

By John Slepetz  
Public Affairs

Lightweight, comfortable and improved protection may sound like a Madison Avenue pitch for athletic shoes, but if you're in the military, think mask. These three attributes are just a few of the design goals set for the new Joint Service General Purpose Mask under development at the Army's Soldier and Biological Chemical Command at Aberdeen Proving Ground in Maryland.

The new mask - intended to replace five different models currently used by soldiers, sailors, airmen and Marines - will be less bulky, provide lower breathing resistance and features an improved field of view. When approved, the Defense Department is expected to buy 3.5 million of the new masks.

A common mask for all the armed services is a sensible choice because they all experience the same type of environment when it comes to chemical and biological warfare. It also eliminates a logistics challenge that was highlighted during the Gulf War: the need to maintain a different parts inventory and separate service support for each type of



*- file photo*  
The new mask will be less bulky and features an improved field of view.

mask in use. The single mask approach dramatically simplifies logistical planning and helps to reduce cost.

"An important goal in any procurement is to have a product that is sustainable and cost-effective," said Rick Decker, the project manager. "And considering that operational sustainment costs are estimated at five times the procurement cost for each item, it can get very expensive."

The joint-service mask will simplify logistics, reduce costs and protect wearers from chemical and biological warfare agents on the battlefield and toxic industrial chemicals as well. It will feature a single eyepiece instead of the binocular aspect of older designs. This opens up the field of view. The new design is being tested for compatibility with night vision gear and weapons sighting systems.

New technologies are also being applied to the filter components. The goal is to reduce the effort of breathing through the mask by up to 50 percent. This should make working in the mask for extended periods far easier on the wearer.

Recent studies by the National Research Council have shown that combat effectiveness is significantly affected by wearing protective gear. Soldiers tested took up to three times longer to perform manual tasks, including firing weapons, than when unencumbered. Designers of the joint service mask believe that the reduced weight, ease of breathing and enhanced vision

attributes of the new mask will reduce the difficulties of performing in protective gear.

Designers are testing the new mask with soldiers, sailors, airmen and Marines. Tests are planned aboard an Aegis cruiser; at Eglin Air Force Base in Florida; during a Marine Corps amphibious exercise at Camp Lejeune, N.C.; and at Fort Polk, La. To learn more about the joint service general purpose mask and other equipment being developed for the future, go to the U.S. Army Soldier and Biological Command web site at

[www.sbccom.apgea.army.mil](http://www.sbccom.apgea.army.mil)



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Agencies assisting Gulf War veterans:

<http://www.afa.org/>  
Air Force Association  
1501 Lee Highway  
Arlington, VA 22209-1198

<http://www.legion.org/building.htm>  
American Legion  
1608 K St., NW  
Washington, DC 20006

<http://www.amvets.org/>  
AMVETS  
4647 Forbes Blvd.  
Lanham, MD 20706

<http://www.ausa.org/>  
Association of the U.S. Army  
2425 Wilson Blvd.  
Arlington, VA 22201

<http://www.dav.org/index.html>  
Disabled American Veterans  
807 Maine St., SW  
Washington, DC

<http://www.eangus.org/>  
Enlisted Association of the National Guard  
1219 Prince St.  
Alexandria, VA 22314

<http://www.fra.org/>  
Fleet Reserve Association  
125 N. West St.  
Alexandria, VA 22314-2754

<http://www.mcleague.org/>  
Marine Corps League  
8626 Lee Highway, #201  
Merrifield, VA 22031

<http://www.ngaus.org/>  
National Guard Assn of the US  
1 Massachusetts Ave., NW  
Washington, DC 20001

<http://www.navy-reserve.org/index.html>  
Naval Reserve Association  
1619 King St.  
Alexandria, VA 22314-2793

<http://www.navyleague.org/>  
Navy League  
2300 Wilson Blvd.  
Arlington, VA 22201

<http://www.ncoausa.org/>  
Non Commissioned Officers Association  
225 N. Washington St.  
Alexandria, VA 22314

<http://www.roa.org/>  
Reserve Officers Association  
1 Constitution Ave., NE  
Washington, DC 20002

<http://www.troa.org/>  
Retired Officers Association  
201 N. Washington St.  
Alexandria, VA 22314

<http://www.vfw.org/>  
Veterans of Foreign Wars  
200 Maryland Ave., NE  
Washington, DC 20002

<http://www.vva.org/>  
Vietnam Veterans of America  
1224 M St., NW  
Washington, DC 20005