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NEWS
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ALAN K. SIMPSON

(R) Wyoming

STATEMENT OF ALAN K. SIMPSON BEFORE THE SENATE COMMITTEE ON VETERANS' AFFAIRS HEARING ON VETERANS AGENT ORANGE EXPOSURE. JUNE 22, 1983.

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The purpose of this hearing is to consider proposed legislation concerning compensation for veterans whose disabilities may be related to exposure to Agent Orange. These bills are S. 374, which would provide a "presumption" of service connection for the occurrence of certain diseases in veterans who were exposed to phenoxy herbicides while serving in the Armed Forces in Southeast Asia during the Vietnam era; S. 786, which would establish a service-connection presumption for certain diseases caused by exposure to herbicides or other environmental hazards or conditions in veterans who served in Southeast Asia during the Vietnam era; and S. 991, which would require regulations providing for the resolution of Veterans' Administration benefits claims based on certain exposures to herbicides containing dioxin, to ionizing radiation from detonations of nuclear devices, and to certain other hazardous substances.

I would wish to reaffirm my commitment, the commitment of the members of this Committee and the commitment of the witnesses -- all of us here in Congress -- to assemble every possible bit of present knowledge pertaining to the exposure of veterans to Agent Orange and the dioxin which contaminated it. Only then shall we fulfill our obligation to all veterans who served their country during the Vietnam war. The difficult task is to be assured that the crisis atmosphere and emotional pronouncements which surround the Agent Orange issue do not mask the problem we face: Which is to determine if exposure to Agent Orange that was sustained by veterans during their service in Vietnam resulted in injury or illness which they could or would not otherwise have suffered. Certainly if these veterans of Vietnam suffered immediate or delayed injury or illness resulting from their service, each of us agrees they should receive the same compensation gratefully and generously given to others who were injured in service to our Nation. Our commitment to our Vietnam veterans is as strong as to veterans of other eras. A review of actual legislation in force will verify that basic fact.

However, it is quite clear that we face obstacles in our efforts to scientifically determine the specific effects of Agent Orange exposure. The illnesses which many veterans and scientists feel result from exposure to dioxin in Agent Orange are the same diseases which other scientists say all of us are at risk of as we go

through our "normal" lives. We heard again last week how little yet is known about these diseases, their causes and cures, in spite of the great progress demonstrated in pursuing this information.

Some have argued to Congress that since the Federal government has "bought out" the property rights of residents at Times Beach through its "Superfund" monies set aside by chemical and oil manufacturers to clean-up toxic wastes -- that veterans exposed to Agent Orange should now automatically receive service-connected compensation. However, the central similarity between the Times Beach situation and the Vietnam problem is the exposure to the chemical compound dioxin itself and yet the purposes of the expenditure of funds in the two cases are quite different -- Superfund is pro-active: let us "clean up" toxic wastes before some person becomes ill; VA compensation is reactive: let us provide monetary compensation to a veteran for a disability which occurred in, was aggravated by or resulted from service.

The prospect of damage to health in the two cases also differs since the exposure levels are thought to be very different: first, we have evidence of a difference in concentration -- 2 parts per million sprayed in Vietnam compared to 350 parts per million in the oil sprayed at Times Beach; second, in duration, there was a finite period of service for the Vietnam veterans compared to what would likely have resulted in an indefinite period of exposure if the "Buy out" had not occurred for Times Beach; and third, in intensity, the dioxin sprayed in Southeast Asia when once exposed to sunlight, rain and water, apparently dissipated much more swiftly than the dioxin mixed in oil spread upon and then absorbed in the soil of Missouri. The residents of Times Beach, just as with Vietnam veterans, are currently being examined, studied and monitored to determine if they have sustained adverse health effects as a result of their exposure. Neither they nor Vietnam veterans have received any compensation for personal health problems which may have been caused by dioxin. Compensation for those residents of Times Beach has not yet been addressed; and yet compensation for Vietnam-era veterans is being closely studied as we all are so well aware.

Legislative proposals which would allow compensation for Agent Orange exposure by establishing new presumptions are all targeted to the existing list of presumptive diseases in title 38 of the United States Code as being a proper legislative precedent. However, under current law, the presumptive chronic diseases itemized have a finite time-limit, the presumptive tropical diseases covered are considered likely to have been service-connected since they are so rarely contracted in this country, and the presumptive Prisoner of War (POW) diseases listed are agreed upon by a vast majority of medical experts to be related to the extraordinary service experience of only this group of veterans. Therefore, in the case of proposed presumptions for three diseases which are suggested to be related to dioxin exposure in Southeast Asia it can well be concluded there is not yet strong enough evidence upon which to act. Legislation should not be impressed upon

the statutes until these diseases have been shown clearly, unemotionally, medically and honestly to be related to military service soley in Southeast Asia until we understand the medical time frame for their likely appearance after any exposure.

So, where are we at this moment? Science in not able to guide us as to the intensity of exposure to dioxin which would be associated with any one of a wide range of human diseases. Science cannot yet clearly inform us as to what results we might expect from the exposure of veterans to Agent Orange in Vietnam. The process of mandating that non-existent scientific knowledge be applied through a long public hearing process as proposed in S. 991 would not provide us with suitable answers.

Some persons do say stridently that our veterans must not be asked to wait for compensation until we have more facts than we do opinions. I agree wholly and humanely that it is most difficult to wait, but I do not see the intent and equity of immediately compensating certain veterans for three arbitrarily selected and relatively rare diseases found in all humans simply because we are all justifiably frustrated with the length of time for the scientific studies, which is required by the very nature of the studies. That to me would not be a responsible action. Public Law 97-72 now provides health care for all veterans who feel that their illnesses may be related to Agent Orange, so in this legislative interim, not one veteran's illness will go untreated in our direct VA health care system pending the final review of results of the effects of Agent Orange exposure.

I would hope we might remove or defuse the aura of emotionalism and the screen of awesome crisis. Let us hone carefully to our statutory obligation to all of our nation's veterans of all wars to compensate them fairly and generously with a consistent and equitable approach. Do we not owe all of our veterans and their families the benefits of the results of the thorough Agent Orange epidemiology study which the Congress has mandated? This study will not be able to tell us unequivocally what diseases dioxin may cause in humans, but it will assuredly furnish to us the needed information as to which, if any, health effects appear more frequently in our veteran population who were exposed while serving our country. How can we as legislators in good conscience compensate from our nation's treasury on the basis only of a raw but yet unfounded fear of dioxin exposure? That would seem to be irresponsible and could only serve as an expedient and carefully-crafted, politically popular response to a very real and wrenching human problem that so deeply vexes us all.

I promise only one thing -- when all facts are in we shall respond -- just as we always have. We have never failed our deserving veterans of any war. Ever.