

Subj: **Lessons Learned**

Date: 12/16/2002

Hon. Leo S. Mackay, Jr., PhD
Deputy Secretary of Veterans Affairs
Department of Veterans Affairs
Washington, DC

RE: "Lessons Learned"

Dear Mr. Deputy Secretary,

At the recent meeting of the Research Advisory Committee on Gulf War Veterans Illnesses, you asked if the Committee had recommendations regarding the prospective conflict with Iraq based on lessons learned from the Gulf War Illnesses experience.

Because the request came at the end of our meeting, these observations did not in all cases go through the formal process for recommendations of a public advisory committee and they are not comprehensive. However, we appreciate your interest, and offer these observations for consideration as time is of the essence.

1. DoD should retain health and locational records for future conflicts. Even if security considerations require classification of personnel records, they should be retained for health reasons.
2. Predeployment physicals should be standardized.
3. Military exit physical examinations should be conducted in accordance with procedures that meet VA standards.
4. There should be a single comprehensive DoD/VA patient record.
5. Good immunization records should be maintained.

6. [The following recommendation was formally deliberated and adopted by the Committee.]

"Substantial questions remain about the possible contribution of vaccines, including the anthrax vaccine, to chronic ill health experienced by veterans of the 1991 Gulf War. Evaluation of the contribution of vaccines in the 1991 conflict would have been aided by proper and extant vaccination records including specifics of vaccine lots received and dosage schedules. Should such health problems recur after future deployments or after civilian vaccination programs, VA's ability to evaluate and treat affected veterans would require access to comprehensive vaccination records. To fill this gap of knowledge we recommend that stringent efforts be made to generate and keep such records and to perform active surveillance of both short term and long term adverse health effects of all biodefense vaccines, including the anthrax vaccine. We therefore recommend to the Secretary of Veterans Affairs that he initiate discussions with the Secretary of Defense to ensure that this is achieved."

7. Several members of the Committee pointed out that most of these recommendations were enacted into law in the Force Health Protection statute, PL 105-85. They report, however, that a recent GAO study and Congressional hearings indicate that compliance with this law is weak at the operational unit level. Thus, a core recommendation would be to encourage you and Secretary Principi to work with your counterparts at the Department of Defense to ensure that these laws are implemented.

Respectfully submitted,

James H. Binns
Chair
Research Advisory Committee on Gulf War Veterans Illnesses

cc: Hon. Anthony J. Principi
Secretary of Veterans Affairs