

# The Gulf War's Troubling Legacy - Part 2

by Gary Null

## A Half-Decade of Cover-Up

From 1991 to 1996, the Pentagon basically took a see-no-evil approach regarding the causes of Gulf War syndrome. In a document entitled "Memorandum for Persian Gulf Veterans," released on May 25, 1994, Defense Secretary William Perry and Joint Chiefs of Staff chairman General John Shalikashvili assured veterans that there was no evidence, classified or unclassified, suggesting that chemical or biological weapons were used in the Gulf, while a June 23, 1994, report by the Pentagon's science board attempted to reinforce that argument, asserting that servicemen were not exposed to chemical or biological elements at any level. During the initial stages of the Reigle investigation, Senator Riegle inquired as to the possibility that allied exposure to chemical and biological agents was responsible for the manifestation of post-war illnesses. Walter Reed's Major General Blanck responded that the issue had not been addressed because military intelligence maintained that such exposures never occurred.

But consider this: Official documents at Defense Department headquarters reveal that several American soldiers participating in Desert Storm were commended for their role in ascertaining the presence of hazardous chemical agents. For example, Army Private Allen Fisher was awarded the bronze star for the first confirmed detection of chemical-agent contamination in the theater of operations, while Captain Michael Johnson of the Nuclear, Chemical, and Biological Branch of the Army was given the Meritorious Service Medal for a similar action. A question naturally arises as to why these men were commended for pointing out chemical-agent threats, if the powers that be really thought there weren't any!

On Oct. 8, 1994, after reviewing the Pentagon's service records and considering the accounts of soldiers who had witnessed the events in the Gulf firsthand and had received official commendations for their heroic actions, Senator Riegle berated the Defense Department for its inconsistency.

## Other Countries' Experience

Lieutenant Louise Richard of the Canadian Navy served as an operating room nurse in the Gulf, where she treated numerous American and British servicemen, as well as Iraqi prisoners of war. In September 1995 Richard was discharged after eight years of lauded service because her health had deteriorated significantly subsequent to her overseas service. Richard's symptoms mimicked those of many other combat veterans, but when she complained to her superiors regarding the lack of acknowledgment of her combat-related illness and threatened to seek redress in the media, she was warned that she would be jeopardizing her career and her pension. "We were valued individuals when we were sent there," she says, but "now we're back, and we're not valued individuals at all."

It's important to remember that United States troops have not been the only victims of governmental callousness. Other allied governments, including those of Canada, Great Britain, and Kuwait, also disavowed evidence of chemical and biological warfare for a long period. According to an Oct. 10, 1995, article in the British newspaper *Today*, the British Ministry of Defense instituted a policy of denying the existence of what is known in that country as desert fever, for fear of big compensation claims. In an interview with the paper, a British Defense spokesperson alleged, "We have no evidence that this illness exists." This was an odd declaration when you considered that over 1000 of the 43,000 British veterans deployed to the Gulf reported that they were suffering from the syndrome.

Corporal Richard Turnball, an 18-year member of the Royal Air Force who participated in the Gulf conflict, asserts that a multitude of British veterans returned home suffering from various acute symptoms. Turnball, who was stationed in Dhahran, Saudi Arabia, during the war, aided in the construction of nuclear, biological, and chemical shelters, and educated British troops as to the correct use of chemical monitors and protective gear. According to Corporal Turnball, the use of chemical and biological weapons by the Iraqis was

deemed inevitable by British intelligence reports prior to the war. During the conflict, Turnball claims that the inevitable came to pass many times; he personally witnessed casualties suffering from chest and eye ailments, infections, and skin irritations. But despite a multitude of warnings and reliable documentation by highly advanced equipment, the British Ministry of Defense denied the incidences, asserting that the alarms were activated by aircraft fuel.

Another British veteran, Corporal Terry Walker, recalled the sounding of chemical monitoring devices at approximately 2:30 a.m. on Jan. 20, 1991, after several Scud missiles exploded overhead. Military officials attempted to attribute the alarms and the explosions to supersonic aircraft, but Walker explains that their justification seemed ridiculous for two reasons: First, alarms within a 15-mile radius had been activated almost simultaneously, and second, the alarms had never been triggered by aircraft in the past. Corporal Walker, who had difficulty donning his gas mask during the attack, recalls experiencing an ammonia-like smell and a burning sensation on his body. Since his return from active service he has been plagued by a multitude of ailments, including chest infections, rashes, and headaches, and his wife and daughter have been afflicted as well.

The British medical establishment has begun, recently, to look into the Gulf War's repercussions for their veterans. According to the British Medical Association, a pilot study was conducted on 14 veterans, 12 men and two women, with an average age of 34. These veterans, who were randomly selected from a long list of many with unexplained illnesses, underwent a variety of tests, and the results were compared with those of a group of 13 healthy civilians. The tests included established techniques assessing the function of nerve function in the limbs, transmission of impulses between nerves and muscles, and movement of nerve signals through pathways in the brain and spinal chord. The researchers concluded that the tests revealed evidence of problems in the nervous systems of the veterans, particularly in the nerves of the arms and legs.<sup>35</sup>

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Kuwaiti sources have also reported new health problems since the war. At the Kuwaiti Ministry of Public Health, Dr. Saleh Al-Harbi has verified that a significant number of Kuwaiti citizens are suffering from a variety of chronic illnesses evidently induced by exposure to either chemical or biological agents. Since the war's conclusion a variety of inexplicable diseases, such as rare blood disorders, have surfaced, and the rate of birth defects has increased dramatically. Dr. Al-Harbi, like many of his American peers, believes that the syndrome is a form of multiple chemical sensitivity. The Kuwaiti government, however, continues to emulate the official policies of their Western saviors by downplaying the problem.<sup>25</sup>

### A Cover-Up Condemned

The Riegle report essentially accuses the Department of Defense of lying to the American public, and condemns it for abandoning the servicemen who were willing to die for their country. Senator Riegle referred to the heartlessness and irresponsibility of the military bureaucracy, concluding that there is no more serious crime than a cover-up of facts that could facilitate the diagnosis and treatment of sick US veterans.<sup>25</sup> The military establishment was fully aware that Sadaam possessed biological weapons, was willing to use them, and, in fact, did use them; but despite concrete evidence, John Deutch, director of the CIA, and General John Shalikashvili, chairman of the Joint Chiefs of Staff, continued to deny the use of biological or chemical weapons by either side.

Proof contradicting the official government position exists in the Nuclear, Biological, and Chemical (NBC) logs maintained by General Schwartzkopf at Central Command. These records indicate that US forces were able to confiscate chemical and biological weapons, and cite the specific days on which the acquisition of weapons took place. In addition, the NBC logs detail plans for the destruction of the confiscated materials, and reveal that the military did not want to destroy the weapons in bulk, as such an action may have precipitated an international incident. Many of the NBC logs for the Gulf War have been smuggled out of the Department of Defense by veterans, who were able to circulate them and prove to the public that the US government had full knowledge of the presence of biological warfare agents in Iraq.

Unfortunately, assessment of the magnitude of Gulf War syndrome has been made more difficult by the military's unbelievable ability to misplace essential information. While some of the documents may have been legitimately lost or misplaced, others seem to have been intentionally destroyed in an attempt to conceal information from the public. For instance, a request to view documents by the Gulf War Veterans of Georgia was rejected by Lieutenant Richard I. Neal, deputy commander of the US Central Command, who justified his response by referring to national security interests. Two months after the initial request was filed, additional inquiries to view the documents were also declined, but this time, veterans groups were informed that the documentation no longer existed.

All branches of the armed forces have been implicated in the destruction of vital records. Corporal Patrick Weissenfluh and Sergeant Todd See, two Marines who were stationed at Camp Pendleton, San Diego, witnessed the burning of hundreds of medical records, while Navy Captain Julia Dyckman experienced a similar situation, in which records sent overseas were mysteriously lost. Despite the excuses of faulty record keeping that were given, Senator Riegle's investigative committee found the pattern of misplaced files and service records within the Department of Defense to be highly irregular.<sup>21</sup>

In addition to exposing governmental negligence and illegal business activities, Senator Riegle's two-year study disclosed information pertaining to the 12 biological, 18 chemical, and four nuclear facilities within Iraq that were destroyed by coalition forces. After the attacks, atmospheric currents transported malignant airborne debris to the vicinity of Allied troops; this is documented in US satellite photos. Prior to the destruction of Iraqi facilities, former Soviet chemical-biological warfare expert Ivan Yevstafeyev, as well as scientists from several prominent laboratories, including Sandia, Los Alamos, and Livermore National Laboratories, warned of the danger of chemical fallout, but their advice was ignored. General Raymond Germanos of the French Ministry of Defense prepared a report that in February 1991 confirmed the presence of chemical fallout in the region, while in July 1993 a report by the Czech Ministry of Defense revealed traces of dangerous

nerve gases, including sarin and Yperite.<sup>21</sup> In a classified briefing on October 28, 1993, the Pentagon acknowledged the Czech report, but refused to comment. After a few weeks of silence, Defense Secretary Les Aspin did finally accept the possibility of low-level exposure to mustard gas and sarin, but nevertheless maintained that a correlation still could not be established between chemical agent exposure and any of the ailments that had arisen in the approximately 9000 vets that had already registered with the VA for examination of their symptoms.

At a Senate Veterans Affairs Committee hearing shortly thereafter, Aspin's see-no-evil attitude was challenged by Chief Warrant Officer Joseph P. Cottrell of the Marine Corps. According to Cottrell, his unit, while in Kuwait, had employed a highly sophisticated German chemical detection vehicle known as the Fox, which had detected the release of a chemical agent capable of inducing severe blistering. The Department of Defense attempted to counter Cottrell by attributing the detection to the presence of airborne oil debris, but further investigation by Congressman Joseph Kennedy discredited the Pentagon's rebuttal by disproving the possibility of system malfunction.

A similar scenario was documented by Gulf veterans William Hicks and Sterling Sims of the Alabama National Guard in testimony before the Senate Armed Services subcommittee on military health care. Hicks attested to the release of chemical weapons by the Iraqis on the first day of the war, January 17, 1991. He recalled experiencing a burning sensation as he and other members of his unit rushed to don protective suits after emergency alarms went off. Sims showed those at the hearing the red welts with which he'd been afflicted since returning from active service. He then explained to the committee how the VA medical center in Birmingham, Alabama, had attempted to recommend a psychiatrist to help him cope with his problem.<sup>36</sup>

### The Pentagon Begins to Come Clean

It was at a Washington press conference on June 21, 1996, that the Pentagon finally began to drop its know-

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nothing stance. They admitted that the demolition of an Iraqi ammunition depot, just after the war's end, may have released chemical agents, including mustard gas and sarin.<sup>37</sup> According to Defense Department officials, United Nations inspectors who had visited the site at the Kamisiyah ammunition depot in southern Iraq in May 1996 had verified traces of these deadly gases at the ruins of a bunker destroyed in March 1991. At the press conference, Pentagon spokesperson Kenneth Bacon also admitted that documentation of this incident had existed as early as 1991, but that it had been temporarily misplaced in the abundance of Pentagon paperwork. The lost-paperwork excuse, though, was too familiar. Commented Senator John D. Rockefeller of West Virginia, "The guy [Bacon] was incoherent because he was faced with having to tell the truth. He was distinctly uncomfortable...They've known all along. How could they possibly not have known all along?"<sup>34</sup>

In that June '96 press conference, the Pentagon did admit that some illnesses may have resulted from the Kamisiyah incident. At that time they spoke of, at most, a couple of hundred soldiers being exposed to chemical weapons gases. From there, though, the numbers of exposed troops changed and the story seemed to worsen practically every day. During the second half of '96, and beyond, there was a cascade of revelations about our Gulf experience and today, you didn't have to be a conspiracy theorist – simply a reader of the mainstream media – to understand that our government has been trying to hide important facts from us for most of this decade.

You can't get more mainstream than *The New York Times*. From page 1 of the Aug. 28, 1996 issue<sup>38</sup> we learned that top echelons of government, i.e., the Pentagon, the White House, the CIA, and the State Department, had been informed in 1991 that chemical weapons were in fact stored at the Kamisiyah site. Yet an official line of no use, exposure, or presence of chemical weapons in the Gulf War had been upheld until '95.<sup>39</sup> During the next few months, the number of exposed troops kept rising. On Sept. 7, '96, the *Associated Press* reported that a presidential panel was upping the

number of troops exposed to toxic gas at the Kamisiyah demolition from a few hundred to 1100.<sup>40</sup> September 19 saw that number rise dramatically, to 5000, raising with it, as even *The Times* admitted, new questions about the Pentagon's credibility.<sup>41</sup>

In October, the military's medical records were assailed as being of poor quality by a National Academy of Sciences panel. This obviously hampers our understanding of Gulf veterans' health problems, as the group's chairman noted. The number of troops that might have been exposed to chemical weapons gases at Kamisiyah had been raised to 15,000 by this time.<sup>42</sup> Also in October '96 came news that the White House panel studying Gulf veterans' illnesses found the Defense Department's attitude toward veterans "patronizing or dismissive."<sup>43</sup> Plus it was widely reported that the Czechs, participants with us in Operation Desert Storm and world-recognized chemical detection experts, had warned American commanders about low levels of nerve and mustard gas during the war, but had been ignored. Many Czech veterans have also become sick, it was reported.<sup>44</sup> And in a lengthy Oct. 30, 1996 *Times* story,<sup>25</sup> two ex-CIA employees asserted that that agency had evidence of up to 60 Gulf War incidents of American troop exposure to chemical weapons. Tens of thousands of our people in the Gulf may have been exposed, said Patrick Eddington, who had specialized, before resigning from the CIA, in analyzing aerial photographs from that region. His wife, Robin Eddington, who has also resigned, reported having seen, during her CIA tenure, classified information to the effect that trace exposure to chemical weapons, over an extended period, can cause illness. The Defense Department has officially denied this possibility.<sup>45</sup>

In November '96, the Pentagon figure for soldiers who might have been at risk in the Kamisiyah demolition was reported at 20,000.<sup>46</sup> And the White House panel was calling for the independent investigation of more than 15 additional Gulf War incidents of chemical weapons detection, and accusing the Pentagon of poor medical record-keeping.<sup>47</sup>

### Are Gulf Vets Really Sicker?

For years now, there has long been the idea that while Gulf War syndrome illnesses may exist, they're really an old problem – a response to stress – with a

new name, and that Gulf veterans are in reality no sicker than other vets. But in November '96, the chairwoman of a federal panel investigating the issue contended that Gulf conflict participants are in fact sicker than other soldiers.<sup>48</sup> Prominent toxicologist Eula Bingham concluded that, clearly, Gulf vets were suffering from a disproportionate level of ailments. One of the reasons this had been unclear probably had to do with what investigators were looking at. While government reports had shown that our Gulf troops were not dying or falling seriously ill at disproportionate rates, many of the vets' ailments – such as gastrointestinal symptoms, chronic fatigue, and aching joints – do not usually result in what researchers had been looking for – hospitalization or early death. Thus, the vets' symptoms were not taken into proper account.

Dr. Bingham and other members of the Persian Gulf Expert Scientific Committee of the Department of Veterans Affairs, feel that chemical exposure has to be looked into, both from weapons and from other sources, such as the Kuwaiti oil-well fires. A point that panel members emphasized was that battlefield stress has been overrated as a causative agent of the symptomatology.

Two government reports substantiated Dr. Bingham's conclusion that Gulf vets are sicker than others. Both the Centers for Disease Control and the Navy, it was reported in November '96,<sup>49</sup> had the same finding, citing significantly raised rates of chronic diarrhea, joint pain, skin rashes, fatigue, depression, headaches, and memory loss for Gulf vets, compared to troops who had served elsewhere. And memory loss was the subject of research made public in spring '97. Rats injected with the family of chemicals that includes the nerve gas sarin and pesticides exhibited brain damage similar to that in people with memory loss. The Pentagon described these findings as important but, typically, said it was too early to draw firm conclusions.<sup>50</sup>

Underscoring the complexity of the problems that vets are experiencing was the January 1997 issue of the *Journal of the American Medical Association*. It featured four studies on Gulf War syndrome, one of which concluded that the syndrome is actually six syndromes, the most serious of which is characterized by problems in thinking and reasoning, confusion, and dizziness.

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Congress to rescind her firing – temporarily. A half year later she did lose her job.

“This is a very dark era for federal medicine,” Dr. Leisure feels. “It’s a new disease with new problems combined with chemical warfare, biological warfare, and unknown agents in the desert. But federal officials think the enemy is the veterans and the people who are trying to help them.” ▶

Another syndrome is marked by joint pain, muscle fatigue, tingling, and numbness. Another study of sick Gulf War vets found evidence of subtle neurological damage compatible with exposure to combinations of cholinesterase-inhibiting chemicals.<sup>51</sup>

### Missing Log Pages...and Credibility

Echoes of Watergate seemed to resound in December '96, when it was revealed that military records from a 7-day period right after the Gulf War (Mar. 4-10, 1991) were reported lost by the Pentagon. It was within this time frame that the Kamisiyah arms depot was blown up.<sup>52</sup> Former Senate investigator James Tuite voiced the skepticism of many when he said, “This was the historical record of what was supposedly the brightest moment in the last 50 years of American military history, and now they say they’ve misplaced part of the historical record?”<sup>52</sup> Subsequent information (from March '97) provided by the Pentagon estimates that 80% of the logs are missing. According to the Department of Defense, they had managed to track down only 36 pages of the known 200 pages of log material. The 36 pages show repeated warnings that Iraqi chemical weapons were detected, but these were all called false at the time by commanders. The logs for the destruction of Kamisiyah were still unfound.<sup>53</sup>

Tuite did get some information recently, through the Freedom of Information Act, that shed light on Kamisiyah. He obtained a report given to the Air Force by the Livermore National Laboratory three months before the war, the essence of which was that bombing Iraq’s arsenals would release deadly nerve agents that could endanger our troops, given the direction of prevailing winds.<sup>54</sup> The Livermore predictions had been kept under wraps for seven years.

“This latest bombshell is no surprise,” commented Representative Christopher Shays (R.-Connecticut), chairman of the House Subcommittee on Human Resources. In other words, cover-up is par for the governmental course.

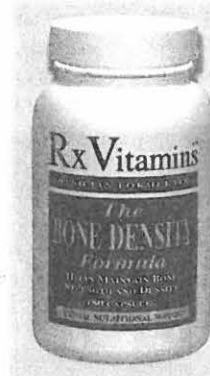
So are outspoken doctors who end up losing their jobs. This is an issue that keeps surfacing. Indeed, in December '96, the leader of a Congressional investigation into Gulf vets’ illnesses accused the Department of Veterans Affairs of trying to rid that agency of doctors who questioned official

government positions.<sup>55</sup> According to Representative Shays, the veterans’ agency threatened to fire doctors who gave voice to the ideas that exposure to chemical agents in the Gulf made Americans sick, or that there was an infectious agent endemic to the region responsible for our soldiers’ illnesses. For instance, one of the first doctors to notice a pattern of health problems among Gulf vets, Dr. Katherine Murray Leisure, was informed that she was to lose her job. It took protests from veterans’ groups and members of

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▶ Dr. William Baumzweiger, who has testified in Congress that low doses of Iraqi nerve gas probably led to veterans' ailments, was another physician slated for dismissal and then saved, through protests by Congress people who had heard his testimony. Said Representative Shays: "If you have a contrary view that maybe the Congress or the public needs to hear, you are silenced."<sup>55</sup>

The truth will out, though. Recent evidence of American troops' exposure to nerve gas has led Nobel-prize-winning scientist Dr. Joshua Lederberg to call for a new study to determine if low-level nerve gas exposure can lead to long-term disease.<sup>56</sup> This was the same Dr. Lederberg who headed a 1994 Pentagon study that said there was no chemical weapons link with Gulf War syndrome, but the new information coming out on Kamisiyah has made him an advocate of a second look. Lederberg is also paying attention to recent reports by Israeli scientists that anti-nerve-gas agents given to allied troops during the

Gulf conflict may be having physical repercussions today.

Issues of credibility came to the fore in illuminating December '96 Congressional testimony from two American soldiers who had served in the Gulf War.<sup>57</sup> Major Michael F. Johnson and Gunnery Sergeant George J. Grass, of the Army and the Marines, respectively, had worked in a Fox – the kind of vehicle that functions as a chemical-detector lab – during the war. They reported that chemical weapons were found in Kuwait, both during and after the war. This contradicted the Pentagon's previous line about false alarms and no chemical weapons presence in Kuwait. The soldiers' chemical detections were ignored at the time, and Sergeant Grass noted that many of the chemical-agent shells spotted appeared to be American-made.

Also providing riveting testimony at that hearing was Major Randy Hebert, a Marine suffering from amyotrophic lateral sclerosis (Lou Gehrig's disease), a condition he suspects is linked to low-level chemical exposure during his Gulf service. Hebert's words, which, because of his condition, had to be translated by family members, were to the effect that

the Pentagon did not want to accept its responsibility for sick veterans.<sup>57</sup>

Other news from the end of '96: Britain joined the US, the Czech Republic, and Slovakia in expanding its inquiry into the conditions plaguing coalition forces.<sup>58</sup> Our Department of Veterans Affairs said it was slow in investigating vets' health complaints because of previous false assurances by the Pentagon that no chemical weapons exposure had occurred.<sup>59</sup> And an ex-investigator – he was fired – working with the Presidential Advisory Committee on Gulf War Veterans' Illnesses said he'd been told to limit his investigation to government agencies. Dr. Jonathan B. Tucker had been instructed that actual Gulf War veterans were off-limits as information sources in the committee's investigation of veterans' illnesses!<sup>60</sup> Also off-limits were government whistle-blowers.

Regarding the number of Americans exposed to gas at the Kamisiyah demolition, the Pentagon estimate seems to have topped off at 100,000, up from the few hundred of mid-'96! In December '96, when the number had reached 20,000<sup>61</sup> a panel reported that we will probably never know how many

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Americans were exposed, due to uncertainty about weather conditions at the time, as well as other factors. Noted *The New York Times* about this bit of news: "The news release was made available at the Pentagon late on Friday afternoon, too late for television networks to include it in their evening broadcast, and without any notification to news organization that routinely cover the department. It is the latest in a series of incidents in which the Pentagon has released bad news about this and other issues late on a Friday afternoon or in the evening."<sup>61</sup>

### Preliminary Panel Report

By January '97, about 80,000 of our 700,000 Gulf veterans had requested special medical examinations keyed to Gulf-related illness.<sup>62</sup> At that point, governmental response to this large segment of our Gulf service population was a White House panel report saying that the group could find no evidence that exposure to chemical weapons hurt soldiers' health. But that's like saying – as was said for years – that there's no evidence cigarette smoke causes cancer. You have to know how to find such evidence, because it's going to involve statistical correlation over long periods of time, rather than easy, short-term experimentation.

The panel mentioned stress as a contributing factor to veterans' ailments. But as John D. Rockefeller IV put it, "it's not just a stress syndrome." Rockefeller

underscored the fact that there are 50,000 or more people who went over to the Gulf completely healthy and came back "very, very sick," and he complained of the "massive indifference of the whole military establishment."<sup>62</sup>

On the plus side – for veterans – of the panel's report was that it did also say that the Pentagon's long-standing reluctance to research the health effects of low-level chemical agent exposure had done the country a disservice. And it called for more investigation of other possible Gulf syndrome factors, such as oil-well fires and pesticides.<sup>62</sup> Other early 1997 news came from Senator Tom Harkin (D.-Iowa) and the Centers for Disease Control and Prevention. They reported that Iowa's Gulf veterans were indeed sicker than that state's other veterans.<sup>62</sup>

### The Power of Synergy

More and more truths are being acknowledged about the Gulf War syndrome picture, and one of the most important is that our troops were exposed not just to a single toxin, but to a whole variety. So we can't lose sight of the power of synergy. That is, when two or more relatively weak illness-causing factors are combined, they can be quite harmful. This was underscored by a January '97 paper by researchers who had studied both experimental animals and Gulf War vets at the University of Texas Southwestern Medical Center in Dallas. Their findings: Harmless levels

of two or more chemicals can combine to cause precisely the symptoms reported by Gulf War syndrome sufferers. These symptoms appear to be a type of organophosphate poisoning, report the researchers. What's more, they note that the subtle nerve damage caused by organophosphate poisoning can be missed by physicians unfamiliar with the phenomenon.<sup>63</sup>

Dr. Robert W. Haley, head of epidemiology at Southwestern Medical Center and leader of the research team, spoke of the severe symptoms being experienced by a group of vets who had been at Khafji, near the Saudi-Kuwait border, on Jan. 20, 1991, during the air war. This was a day when Czech chemical experts had detected sarin and mustard gas. The hard-hit vets seem to have taken pyridostigmine nerve gas antidote tablets after, rather than before, chemical exposure, which can be particularly damaging.

Additional work done at the Southwestern Medical Center shows stronger evidence that chemical synergy – not stress – is what's making vets sick. Professor of clinical neurology Jim Hom was a principal investigator on this study. He explained that the researchers compared a broad range of brain-related psychological functions of ill and well veterans from the 24th Naval Mobile

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Construction Battalion. The scientists were blinded as to which group was which until the end of the work.<sup>64</sup>

"The ill veterans performed worse on 59 of the 71 brain-related measures," Hom reported, adding that the affected vets' psychological profile was similar to that of individuals with general medical problems and did not include psychopathology. "Clearly, the ill veterans demonstrated a neuropsychological pattern of impairment that is indicative of generalized brain damage, not psychological reactions."<sup>65</sup>

What was particularly noteworthy about Hom's study was that it refuted the results of an earlier study done at the Birmingham VA Medical Center by researchers who used many, but not all, of the same neuropsychological tests. In that study, 55 Gulf vets with cognitive difficulties were tested, and the VA researchers concluded that exposure to neurotoxins did not come into play, attributing the vets' symptoms to "intentional exaggeration of problems" or "emotional distress," and going as far as to say that some of the vets were faking.

But there was a problem with the Birmingham study, Hom explained: It had no control group. The Dallas study, by contrast, had a control group of veterans from the same unit who were not reporting any problems. "When you stack all the results of our tests together it is clear that something is wrong. The brain is an organ that integrates all types of functions. You can't isolate and test just one thing. The tests have to be complementary. Our tests were designed to be a package – they complemented each other. This is what makes our study different than others."

Thus, Hom discounts psychological disorders, including post-traumatic stress disorder, as being responsible for the veterans' symptoms. He says, rather, that affected vets suffer from one of three syndromes: The first is characterized by thought, memory, and sleep difficulties; the second by more significant thought problems, as well as by confusion and imbalance; and the third by joint and muscle soreness and by tingling and numbness in the hands and feet. And these three syndromes are *variations of organophosphate-induced delayed polyneuropathy*, which results

from exposure to certain chemicals that inhibit cholinesterase, an enzyme necessary for proper nervous system functioning.

Commented Hom's co-researcher Dr. Robert Haley, "This study supports our overall theory that the syndrome we identified represents neurological damage from combinations of chemicals."

And Hom said, when asked about the psychological aspects of Gulf War syndrome, "Psychological issues are important – but they don't cause brain damage."

### Strong Insecticides Used

Hom and Haley's studies, as well as others done recently with Duke University scientists, are finally demonstrating that chemical synergy, rather than combat stress, is the underlying factor in Gulf War syndrome. Because of all the toxins to which troops were exposed – including pesticides; insect repellent, sometimes used in the form of flea collars worn by soldiers, and including DEET; nerve gas; anti-nerve-gas medication; experimental vaccines; burning-oil-well fumes; and depleted uranium—the potential for synergistic damage is extensive, and hard to fully comprehend.

Use of insect repellent is a mundane factor that nevertheless ought not to be overlooked when considering synergistic damage. *Stars and Stripes* reports<sup>64</sup> that while the insecticide DEET was deemed safe in concentrations of less than 31%, Desert Storm participants received DEET in strengths between 33 and 75%. The combination of DEET and PB – those pyridostigmine bromide anti-nerve gas pills that servicemen and women were ordered to take – is being studied at the University of Florida at Gainesville for their combined effects. Also, the insecticide permethrin, sprayed on soldiers' uniforms, was used in strengths exceeding safe levels, and may have exacerbated the effects of other substances.

In Dr. Garth Nicolson's view, some Gulf War illness patients are sick due to chemical exposure, others are sick due to biologic exposure, and some are sick due to both types of exposure.<sup>66</sup> "This last group are often the sickest," he says. "In fact, many of these people have probably died, although it's very difficult to get the true numbers. The estimates are somewhere between 12,000 and 15,000, but we don't have accurate figures on this because they're not being released."

Nicolson points out that new information reveals that soldiers may have been subjected to far more of these toxins than is publicly admitted. One of the most interesting revelations comes from a group of former CIA employees who stumbled on aerosol generators that were probably used as sprayer units to spread biologic agents. These were designed to fit onto any vehicle – from jeeps to trucks to helicopters to small aircraft – and used to contaminate large areas. In fact, some generators were found with their contents still intact. A further source of pollution may come from Scud weapons that were equipped with chemical and biological warheads. Iraqis were operating under a Soviet war doctrine that suggests mixing together chemical and biological agents. One CIA report indicates that 40 or more of these Scuds were loaded with both chemical and biological weapons. Reports circulating on the Internet site known as Gulfink said these weapons were ready to use, although whether or not they were actually used remains in question. Nicholson believes these weapons probably were used and that they were low-explosive warheads that blew up at 2000 to 5000 feet in the air. Reserve units observed warheads that exploded, dispersing a purplish blue vapor. During this time, chemical alarms sounded. People exposed to these vapors subsequently become very sick, and many have died.

Nicolson summarizes the various modes of toxin transmission: "In our testimony to Congress, we indicated that there were several possible ways in which soldiers could have been exposed to chemical and biologic agents in the Gulf War. Number one among those was contaminated vaccines. The second was the sky-burst warheads used on some of the Scuds that could have delivered biological and chemical weapons. The third was the presence of exclusionary zones in southern Iraq in which...the sprayers were found. These are the principle ways, we feel, that soldiers could have been exposed during their service in the Persian Gulf theater of operations."

As mentioned previously, Nicolson has spoken of a genetically altered version of a mycoplasma as a disease-causing factor for Gulf War veterans. He says that antibiotics have been effective in treating this problem, which is, he says, highly contagious. Being airborne, Nicolson explains, this microorganism can be picked up without intimate

## Gulf War Legacy

### What Clinton Says

In November 1997, President Clinton issued a statement on Gulf War Veterans' illnesses.<sup>72</sup> Reiterating his panel's call for compensation and care for all affected veterans, whether or not the cause of illness is fully understood, he said he is asking the National Academy of Sciences to review the ongoing research on the connections between all the reported illnesses and Gulf War service. He also plans to help Congress pass laws guaranteeing that veterans' benefits will continue during future administrations.

Additionally, Clinton spoke of dedicating \$13.2 million for research on how low-level exposure to chemical agents can cause illness, and on other possible causes. He said that former Senator Warren Rudman will be leading an oversight board to ensure that the Defense Department's research meets high standards.

Also, "to apply the lessons we have learned for the future," Clinton said, "I am directing the Departments of Defense and Veterans Affairs to create a new Force Health Protection Program. Every soldier, sailor, airman, and Marine will have a comprehensive, life-long medical record of all illnesses and injuries they suffer, the care and inoculations they receive, and their exposure to different hazards. These records will help us prevent illness and identify and cure those that occur."

contact.<sup>67</sup> It should be noted that some Desert Storm veterans' groups dispute Nicolson's claims, terming them alarmist. They point out that if the public perceives Gulf vets as carriers of a contagious disease, they could be discriminated against.<sup>68</sup>

### Uncompassionate Care

Our servicemen and women work hard for their country and take tremendous risks. This is all part of being in the military. But what happens when they suffer physically in the process and subsequently need medical care? Shouldn't they receive the very best care possible?

In June 1997, the Department of Veterans Affairs admitted that its doctors had given less than adequate attention and care to many of the men and women who have become ill after serving in the Gulf. The department's undersecretary for health, Dr. Kenneth W. Kizer, told a Congressional committee that "While we believe that our programs have been well designed, we also know that they are neither uniformly delivered, nor perfect."<sup>69</sup>

"We also recognize that some veterans have not received the kind of reception or care at VA medical facilities that we can be proud of," Kizer added. He was referring to the many reports that veterans complaining of fatigue, muscle and joint pain, memory loss, shortness of breath, and other common Gulf War syndrome symptoms are treated with little sympathy, cursory examinations, and little or no follow-up, the idea being that their problems exist "only in their head." Said Stephen P. Backhus, of the General Accounting Office, Congress's investigative branch, "Veterans who expect treatment designed for those suffering from Gulf War illnesses appeared more likely to express frustration and disappointment with the care they receive."

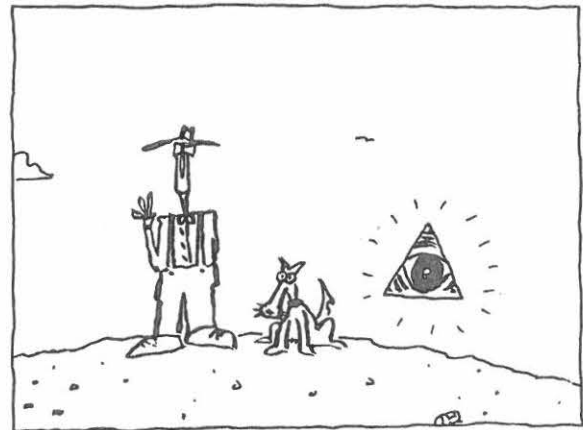
Kizer expressed the intention of improving VA service to Gulf vets.

Will vets in fact receive the kind of care and compensation that they need? In September 1997, the Presidential Advisory Committee on Gulf War Veterans' Illnesses, which had studied vets' health problems for two years, made its final recommendations, which held out some hope for affected veterans. The most important recommendation was a call for a permanent statutory program of benefits and health care for service people experiencing post-Gulf problems. The organization of such a

plan, and financial arrangements, would be matters for the Department of Veterans Affairs and Congress to work out. Congressional representatives involved in implementing such benefits, and in pushing for further research, include Senator John D. Rockefeller IV (D.-W. Virginia), Representative Bernard Sanders (I.-Vermont), and Representative Cliff Sterns (R.-Florida), among others.<sup>70</sup>

In a previous report (the preliminary one of January '97), the presidential committee had said it could not find a causal link between the symptoms referred to as Gulf War syndrome and the suspected causes. That report had mentioned stress as a probable factor, a finding that was left intact in the panel's final report, to the dismay of many veterans' groups. On the positive side, the advisory committee expressed the opinion that free care for veterans should not be linked to whether or not we understand the cause of their illnesses. Also, the panel called for more research into chemical causation and felt that the Pentagon had lost credibility with the public by denying that there were chemicals on the battlefield. While the Pentagon had been doing research into the effects of low-level exposure to chemical and biological warfare agents, the committee called for independent review of the research in light of the Pentagon's seeming lack of objectivity.

Arthur Caplan, noted bioethics professor at the University of Pennsylvania and a member of the advisory committee, described his distrust of Pentagon research this way, "The Pentagon is not credible to continue inquiries that veterans and the public do not find persuasive....Pentagon officials are inclined to see things from the point of view at which they started: Deny that there were chemicals on the battlefield. The Pentagon sees the burden of evidence as falling on those who argue otherwise. I find that not a credible stance. I find it distasteful. I find it unpersuasive. I find it, in fact, unbelievable."<sup>71</sup>



~MORTY, OLD BLUE, AND THE EYE OF GOD...~



## Gulf War Legacy

► What Clinton says sounds good. But we should keep in mind that the panel he appointed was the one that dragged its feet on getting rid of the stress explanation for Gulf War syndrome. In fact, it still hasn't, although its call for research into physical causes was a step in the right direction.

### We Need to Learn More

There is still a lot to understand about our Gulf experience and its aftermath. One field of inquiry involves Garth Nicolson's contention that a genetically altered mycoplasma is responsible for some Gulf War illness. Another centers on the role of depleted uranium. And an emerging question involves the Kamisiyah arms depot demolition. Was this action carried out recklessly? Pentagon officials have asserted that the obliteration of the Iraqi bunker was supervised by experts trained in chemical warfare, but according to several US servicemen who were present at the scene, this was not the case. According to Corporals Brian Martin and Chris Tullius, whose recollections of the Kamisiyah incident have been corroborated by their executive officer, Major Randy Riggins, chemical specialists were never present and testing that was supposedly conducted prior to and after the demolition of the bunker did not occur. Martin, who had videotaped the entire proceedings at the bunker, revealed that chemical detection devices were not even taken out at the site, while Riggins indicated that his troops did not examine the inside of the bunkers because the entrances had been mined by the recently departed Iraqis.

According to Riggins, the enormous explosion of the demolition caused a downpour of debris to fall upon himself and his troops. Riggins recalled that the immensity of the blast had triggered chemical detector alarms at the engineers' camp ten miles away. Unfortunately, the servicemen present at the Kamisiyah depot were not provided with ample warning, and consequently, their exposure to noxious fallout has since resulted in numerous reports of chronic disorders within the unit.<sup>10</sup>

One of the most important questions that will be researched is the extent to which low-level chemical exposure affects people over the long term. That there is an effect has in fact been documented years ago, i.e., in a 1974 study entitled *Delayed Toxic Effects of Chemical Warfare Agents*. This study, conducted by the director of the Institute of Chemical Toxicology of the East German Academy of Sciences, Dr. Karlbeinz Lohs, describes how workers at chemical-weapons plants were diagnosed with chronic disorders that were the same as symptoms currently being exhibited by Gulf War veterans. The whole gamut of problems – from neurological to gastrointestinal and cardiac problems, to memory loss, increased cancer incidence, and a higher birth defect rate – is the same. And further research has shown that exposure to organophosphate insecticides, which in essence are diluted forms of chemical warfare agents, can promote the onset of chronic health disorders.<sup>10</sup>

In short, the evidence is there. Gulf veterans are suffering from more than stress. And as the body of current research expands upon that of the past, no one will be able to deny that truth.

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## Gulf War Legacy

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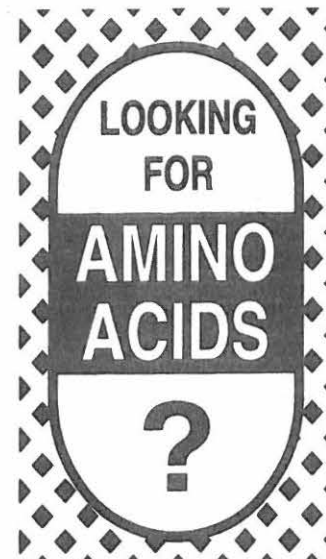
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Fax: 616-684-7882  
E-mail: DSVETERAN@aol.com

### Minnesota

Desert Storm Justice Foundation  
Contact: Jeff Zakula  
P.O. Box 186  
Buhl, MN 55713  
Voice: 218-258-3685  
Fax: 218-258-3363

### Missouri

Contact: Henry Minor  
26245 Rapier Road,  
Waynesville, MO 65583

### Mississippi

Gulf War Babies  
Contact: Aimee West  
P.O. Box 198  
Clara, MS 39324  
Voice: 601-735-9206 or 501-225-9437

### Montana

ODSSA Montana Group.  
Contact: Dale Carter  
570 Skalkho Highway  
Hamilton, MT 59840  
Voice: 406-363-5600

### New York

Gulf War Vets of Long Island  
Contact: Jackie Olsen  
100 Robinson  
E. Patchogue, NY 11772  
Voice: 516-289-1580  
Email: DStormMom@aol.com

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## Gulf War Legacy



### New York (continued)

Persian Gulf Veterans of New York/  
Storm Warning  
GWV of Upstate New York  
Contact: Brian Tornatorie  
418 Den Wit Terrace  
P.O. Box 578  
Canasota, NY 13032  
Voice: 315-697-7513

Persian Gulf Veterans, Inc.  
Contact: Beverly Place  
212 Garfield Ave.  
E. Rochester, NY 14445-1314  
Voice: 716-385-4097  
Fax: 716-924-2161

### North Carolina

Desert Storm Veterans of  
North Carolina, Inc.  
Contact: Kevin Treiber  
739 E. Haggard Ave.  
Ellon College, NC 27224  
Voice: 910-584-5038

Military Family Support Network  
Contact: Dorothy Brooks  
P.O. Box 2047  
Buies Creek, NC 27506

Gulf War Veterans of the Carolinas  
Contact: Joy Chavez  
895 Eastwood Drive  
Rock Hill, SC 29730  
Voice: 803-328-0410  
Fax: 803-328-0410 (Call First)

### North Dakota

ODSSA Dakota  
Contact: John Jacobsen  
330 Central Ave.  
Bismark, ND 58401-1778  
Voice: 701-255-0969

Contact: Carol & Tim Hoffman  
349 Continental Avenue  
Bismark, ND 58504  
Voice: 701-223-6632

### Ohio

Gulf War Veterans of Ohio  
Contact: Andrew Tracie Courtney  
620 Lake Ave.  
Ashtabula, OH 44004  
Voice: 216-964-8920 or 216-964-8980

Veterans and Families Support Network  
Contact: Gina Brown  
5488 State Route 7  
New Waterford, OH 44445  
Voice: 216-457-0641  
Fax: 216-457-1923  
Email: VFSN@AOL.com

Persian Gulf Veterans of NE Ohio  
Contact: Barry Walker  
600 N. Market St.  
East Palatine, OH 44413  
Voice: 216-426-3203  
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Kevin D. Wright  
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Southeast Ohio ODSSA  
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### Oklahoma

Desert Storm Justice Foundation  
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Desert Storm Justice Foundation  
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1003 E. 5th Place  
Tulsa, OK 74120  
Voice: 918-687-0983 or 918-587-8463  
E-mail: gwvet@sprynet.com

American Veterans Justice Foundation  
Contact: Dannie Wolf  
3908 NW Santa Fe  
Lawton, OK 73505  
Voice: 405-335-3811  
E-Mail: dwolf@sirinet.net

### Oregon

Northwest Vets for Peace  
Contact: Marvin Simmons  
811 E. Burnside St. #218  
Portland, OR 97214  
Voice: 503-656-9785 or 503-234-6242  
Email: NWVP@teleport.com

### Pennsylvania

Contact: Joe Grassifulli  
Voice: 610-566-8039

### South Carolina

Desert Storm Justice Foundation  
Contact: Michelle and Jim Brown  
1418-D Flintwood Dr.  
Rockhill, SC 29732  
Voice: 803-327-9838 or 803-325-6227 or  
803-325-6141

Desert Storm Veterans of South  
Carolina  
Contact: William Dowell  
245 Piney Grove, Rd.  
Columbia, SC 29210  
Voice: 803-772-8615

### Tennessee

Persian Gulf Information Network  
Contact: Charlene Merryweather  
P.O. Box 10146  
Clarksville, TN 37042  
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615-431-9793 or 615-645-1766  
or 615-431-9584

ODSSA Knoxville Region  
Contact: Bill Bowman  
P.O. Box 157  
Kodak, TN 37764-0157  
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### Texas

Central Texas Gulf Group  
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Killeen, Texas  
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Desert Storm Justice Foundation  
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Waco, TX 76710  
Voice: 512-556-6373

Desert Storm Veterans Coalition  
Contact: Betty Zuspan  
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Hewitt, TX 76643  
Voice: 800-307-1330 or 817-666-0489

North Texas Gulf Group  
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431 Hallmark Dr.  
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Fax: 214-357-0807

Operation Desert Shield/Desert Storm Association (ODSSA)  
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ODSSA Regional Coordinator  
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El Paso, TX 79904-6217  
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Perot Group for Persian Gulf Veterans  
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Betty Taylor and H. Ross Perot, Sr.  
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Fax: 214-788-3091

South Texas Gulf Group  
Contact: Norma Solis  
801 W. Lindberg Ave.  
McAllen, TX 78501  
Voice: 210-630-4214  
Fax: 201-686-6949

American Gulf War Veterans Association  
Contact: Joyce Riley  
3506 Highway 6 South #117  
Sugar Land, TX 77478-4401  
Voice: 281-438-1699  
Fax: 281-438-4581

**Washington**  
Gulf War Illness  
Contact: David Monroe, PHD  
P.O. Box 265  
Freeland, WA 98249  
Voice: 906-331-2165

Contact: Roy Jones  
818 Berne Lane SE  
Olympia, WA 98513  
Voice: 206-412-1706  
Fax: 206-412-1706 (call ahead)

## Gulf War Legacy

**Washington, DC**  
National Vietnam / Gulf War Veterans Coalition  
Contact: J. Thomas Birch (Chairman)  
Persian Gulf Veteran Coordinator  
Denise Nichols  
1200 19th Street, N.W., Suite 401  
Washington, DC 20036  
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## Gulf War Legacy



### Britain

Trauma After Care Trust  
Voice: 011-44-242-890-306

Gulf War Veterans Association  
Contact: Paul Ash  
36 Loughrigg Avenue  
Picken Hill Grange  
Cramlington, Northumberland  
England, NE23-8DS  
Voice: 011-44-670-736-283

Gulf Vets Association - United Kingdom  
Contact: Hilary Jones  
Voice: 011-44-191-230-1065

### Canada

Contact: Collen Penny  
Box 110 - #3, 2401 Cliffe Ave.  
Courtenay, British Columbia  
Canada V9N 2L5  
Voice: 604-338-5651 or 604-338-0930

### Germany

Gulf War Veterans of Rottenbach,  
ODSSA  
Contact: Brian Bourne  
Lerchen St. 23  
91341 Rottebach Germany  
Voice: 011-49-919-599-4289

Contact: Marge Bourne  
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Cutback, Montana 59427  
Voice: 406-339-2690

### Gary Null, PhD

Author: Over 50 published books on health and nutrition topics as well as numerous articles published in leading magazines.

Publisher: Past publisher of *Natural Living Newsletter*, a monthly publication on health and nutrition. Publisher of the *Natural Living Journal*.

Broadcast Journalist: Host and Health and Science reporter on the nationally syndicated Gary Null Show on WBAI, as well as the former health and nutrition reporter for ABC Network Radio and WABC. Former commentator on a weekly medical and nutrition segment on the television show 9 Broadcast Plaza aired nationally over WOR-TV. Currently hosts his own Sunday evening health and nutrition radio program on WEVD in New York City, nationally syndicated on The Pacifica Network.

Host: Host of the popular syndicated Gary Null Show.

Published books on health and nutrition:

- *Complete Guide to Sensible Eating*
- *How to Keep Your Feet and Legs Healthy for a Lifetime*
- *Clearer, Cleaner, Safer, Greener*
- *Complete Guide to Health and Nutrition*
- *The Complete Handbook of Nutrition*
- *Vegetarian Cooking for Good Health*
- *Healing Your Body Naturally*

- *No More Allergies*
- *Reverse the Aging Process Naturally*
- *Nutrition and the Mind*
- *Who Are You Really?*
- *Alcohol and Nutrition*
- *Man and His Whole Earth*
- *Why Your Stomach Hurts*
- *The Handbook of Skin and Hair*
- *The Joy of Juicing*
- *The Egg Project*
- *Good Food, Good Mood*
- *New Vegetarian Cookbook*
- *Change Your Life Now*
- *The 90's Healthy Body Book*
- *Be Kind to Yourself*
- *The Women's Encyclopedia of Natural Healing*

Education: BS Human Nutrition, Edison State College; PhD Human Nutrition and Public Health Science, Union Graduate School.

Educator: Faculty member, adjunct associate professor of nutritional physiology and diplomate in the post graduate nutritional program at New York College of Chiropractic. Former faculty member, The New School for Social Research; founder and director of the Health and Nutrition Certificate Program at Pratt Institute and The School of Visual Arts.

Research Scientist: Research Fellow of The Institute of Applied Biology; Nutrition Research Division Director for the National Hypoglycemia Association; Researcher of Agricultural Sciences at the Fertile Earth Farm Project. Nutrition Director for the Nutrition Institute of America, Founder of the National Health Resources Council.

Investigative Reporter: Award-winning broadcast series. Originated and completed more than 100 major investigations on health issues resulting in the use of material by 20/20 and 60 Minutes. Mr. Null's research served as the source of information for a special report by Gabe Pressman of WNBC-TV on Alternative Cancer Therapies. Some documentaries include *The Pain, Profit and Politics of AIDS*; *Living with AIDS Naturally*; *Chronic Fatigue*; *Diet for a Lifetime*; *Cancer: A Natural Approach*; *AIDS: The Untold Story*; *Heart Disease: A Natural Approach*; *Stress Management*; *Arthritis: A Natural Approach* and *Pain: A Natural Approach*.

Athletics: Founder of the Natural Living Walking and Running Club. Trained over 10,000 runners and walkers; completed 300 races.

