

MEMORANDUM

TO: Admiral Zumwalt

FROM: Priscilla

DATE: August 31, 1998

SUBJ: Angela Lee

The attached letter from Ms. Lee was received in today's mail.

Background

Dick Christian received a call from Ron Rossani asking if at next AOCC Ms. Lee could speak on DSS for 30 minutes. Dick told him 1-2 minutes.

Ms. Lee then called me for our address and sent attached letter.

I believe she is unaware you are involved with DSS Oversight Board.

Do you see any problem with letting her come to AOCC and speak for a moment or two?

Dick and I agree we shouldn't get the AOCC involved in such a big issue as DSS. Another thing to consider is we could get "experts" to come speak on the issue of DSS (which we have done in the past).

Dist.

August 27, 1998

Admiral Elmo Zumwalt

Dear Admiral Zumwalt:

Further to my telephone conversations with Mr Ron Rossani and Ms. Priscilla Barry of your office, I am sending to you two enclosures pertinent to this cover letter.

As the mother of two Gulf War veterans, both of whom only have minor symptomology of 'Gulf War Illness,' I developed an interest and concern in the strange manifestations of the syndrome commonly called Persian Gulf Disease/Gulf War Illness.

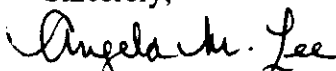
A few months ago, I learned that Walter Reed Research had, at some time in the past, contracted with McKesson Corporation to maintain a sera repository here in Maryland. This repository is to act as a form of secondary medical record for all active and reserve members of the military (please see details in the ANSR Program enclosure). It occurs to me that, this being the case, it should offer an excellent opportunity at minimal cost/time factor for testing of the individual sera samples of those who served in the Gulf War and who now manifest illness. With the numerous hearings that have taken place, commissions that have been set up, and varied new research into Gulf War Illness that has been conducted or is ongoing, I am sure that the existence of this repository program has been overlooked as a probable source of excellent diagnostic information.

Further, since the concern for biological terrorist attacks has now placed the Department of Defense in the position of electing to vaccinate all members of the military against anthrax, it seems to me that the answer as to whether or not the administration of anthrax vaccine to our Gulf War troops contributed to their sickness afterward may well also be resolved by utilizing this same route of inquiry. The resistance and controversy that currently swirls around the ongoing military anthrax vaccination program could then, perhaps, also be put to rest.

I would very much appreciate it if you would give the foregoing some thought. If you agree with me that this is a valid route worth pursuing, perhaps you would kindly do whatever is within your power to activate such an investigation.

Thank you for considering this request. If I can provide you with any further information, please do not hesitate to contact me.

Sincerely,


Angela M. Lee

PROJECT: Army-Navy Serum Repository (ANSR)

CLIENT: US Army Center for Health Promotion and Preventive Medicine (CHPPM), formerly Walter Reed Army Institute of Research

DESCRIPTION:

The ANSR contains over 18,000,000 sera specimens collected from active duty and reserve personnel. The repository is the world's largest collection of normal human sera representing all race and ethnic groups, and all geographic areas in the US. The ANSR supports the clinical and research programs of the CHPPM, which serves the health needs of over 1.5 million military and civilian personnel stationed throughout the world. The ANSR provides the Army with a powerful capability to assess exposures to infectious and toxic agents during deployment; to estimate immunity prevalence for such diseases as AIDS, Hepatitis, Dengue, Q Fever, Measles, and Cancer; and to determine the causes of, risk factors for, and determinants of acute and chronic diseases associated with military operations. The CHPPM provides world-wide scientific expertise and services in the areas of: Preventive Medicine, Environmental and Occupation Health, Health Promotion and Wellness, Epidemiology, and related laboratory sciences. The CHPPM's mission is to strengthen the military capabilities by rapidly detecting and minimizing health risks through programs focused on improving health and countering man made or natural occurring medical threats. The Command develops, implements, and evaluates programs that permit the US Army to be on the leading edge of disease prevention. The CHPPM maintains an up-to-date personnel and medical event surveillance system. Through the operations of the Command's Medical Surveillance Activity, personnel information and potential high risk exposure and medical event data are maintained over the course of the soldier's career. This provides a database for a comprehensive soldier medical surveillance system that is summarized in a monthly publication of CHPPM's The Medical Surveillance Monthly Report. ANSR sera are collected from Military Entry Processing Stations, active duty personnel and their dependents, the Navy, the Army Reserve, National Guard, and the US Coast Guard. MBS' repository operations are in compliance with current Good Manufacturing Practice and current Good Laboratory Practice guidelines and include: transport of specimens from sites throughout the US; cataloging specimens using a highly accurate computer double-data entry system; employing a relational database for processing, storing, shipping, and documenting sera transactions; providing a specimen retrieval within 48 hours; and providing weekly on-line sera transaction reports and quarterly data summary reports.

From: "Carl Shires" <carls@usit.net>
To: "GWVM" <gwvm@structured.net>
Cc: "Gulf-Chat" <gulf-chat@structured.net>
Subject: gulf-chat ANTHRAX MAY CAUSE "GULF WAR ILLNESS"
Date: Wed, 26 Aug 1998 20:29:47 -0500
MIME-Version: 1.0
X-Priority: 3
Sender: owner-gulf-chat@structured.net
Precedence: bulk
Reply-To: "Carl Shires" <carls@usit.net>

*****THE MILITARY ACCORDING TO MEYER*****

ANTHRAX MAY CAUSE "GULF WAR ILLNESS"

The Pentagon ignored health complaints from veterans of the 1991 Persian Gulf war until 1996. As a result, a Presidential advisory panel and a committee from the House of Representatives recommended that an organization "independent" of the Pentagon take over the investigation into the mysterious "Gulf War Illness." Many members were unsatisfied with Pentagon claims that biological agents were not detected during the Persian Gulf war. Certain facts support this doubt.

First, there were no portable biological detectors available for DESERT STORM. The Army is attempting to develop a method of field detection, but the most advanced equipment still requires 48 hours to confirm. Therefore, all Persian Gulf vets may have been exposed to biological weaponry, but there is no "proof".

The only hard evidence was released in 1993 when the History and Museums Division of Headquarters Marine Corps printed and publicly distributed a book, "U.S. Marines in the Persian Gulf 1990-1991, with the First Marine Expeditionary Force". On page 87, during the first day of the ground offensive, it states: "...at 11:16 the U.S. Army reported a positive anthrax sample from lab and dead sheep in the area of King Khalid Military City." When asked about this book, the Pentagon declared the report to be false.

Several publicly available books also shed light on this topic. "Gassed in the Gulf" provides hard evidence that NBC weapons were used by Iraq. "Clouds of Secrecy, the Army's Germ Warfare Experiments", by Leonard A. Cole, published in 1988, states that the easiest biological weapon to produce is anthrax. Although anthrax is very deadly to hoofed animals, primates are considered immune. However, on page 48 of his book he states that anthrax is known to be transmissible to humans, but is generally considered harmless. He also noted that studies have proven that anthrax (*Bacillus subtilis*) "may cause infections and invade the blood streams causing debilitating diseases and has an unusual capability of genetic transformations, which may affect offspring."

Another oddity with anthrax is that it may remain dormant for years inside the body, and that spores can survive for decades in the open air and spread until they come in contact with moist tissue (e.g., eyes, mouth, lungs). Another book, "Biological and Toxin Weapons Today", published in 1986 by the Oxford University Press, also noted that anthrax is not harmless to humans. It said that anthrax infections are "difficult to diagnose because the symptoms cannot easily be clinically distinguished from other infections", and noted that few doctors are trained to recognize the DNA alterations caused by anthrax, and most are ignorant of its unique characteristics.

The mysterious "Gulf War Illnesses" sound like anthrax. Keep in mind that this was not information created by Gulf war veterans groups, but from books pulled off a public library shelf. Anyone who doubts that a problem

exists should research the case of an Army graves registration unit, from Fort Drum in New York, which served in Saudi Arabia. These soldiers had the nasty duty of handling the bodies of dead GIs. It seems obvious that they "processed" some contaminated bodies because 16 of 17 members of this unit have died, and the survivor is on VA disability.

The Pentagon investigated claims that offspring of Gulf war vets had higher rates of birth defects. A study was conducted which compared healthy births at U.S. military hospitals between Persian Gulf vets and other servicemen, and found no differences among offspring. However, its methodology was severely flawed. Sickly Gulf War vets were discharged after the war, so their children were not born at U.S. military hospitals. Second, most U.S. military hospitals only perform uncomplicated births. If a military doctor suspects any problem with a fetus, the patient is referred to a civilian specialist and the birth occurs at a private hospital.

Obviously, the federal government needs to continue studies. However, researchers must avoid the previous path of asking medical doctors to explain what common human ailments may cause "Gulf War Illness." It is time to consult our nation's experts on biological weapons. Although our military halted experiments with biological weapons in 1984, some of these scientists must still be living.

Once the Pentagon accepts that Persian Gulf vets may have been exposed to biological weapons, they may begin to uncover the cause of many mysterious "Gulf War Illnesses". However, the Pentagon may already know that vets were exposed to anthrax. This would explain the sudden rush to vaccinate all troops against anthrax early in 1998, when another conflict with Iraq seem certain. There are many theories about what caused "Gulf War Illness", but anthrax seems the most likely.

-- Carlton Meyer
(cmeyergo@yahoo.com)

DEFENDING AMERICA, August 26, 1998
<http://www.hackworth.com>