DEPARTMENT OF THE ARMY
U.S. ARMY & JOINT SERVICES ENVIRONMENTAL SUPPORT GROUP
1730 K STREET N. W. ROOM 210
WASHINGTON, DC 20006-3868

REPLY TO
ATTENTION OF

June 7, 1990

No 46

JDPP-ESG

JUN 8 1990

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Admiral Elmo Zumwalt
1500 Wilson Blvd
Arlington, VA 22209

Dear Admiral Zumwalt:

My old boss Dick Christian suggested that maybe you could use a copy of this trip report.

Enclosed is a Memorandum For Record, Subject, Trip Report to CDC for Meeting between ESG and AOP, 24 July 1986 in Atlanta, Georgia, written by Major Max Tenberg, Chief, Scientific Support Division, that documents Dr. Robert Worth stating, "In my personal opinion, the results of the Blood Validation Study will not produce any substantial scientific data" and "would allow us (CDC) to get out of the Main Agent Orange study with honor."

Trusting we have been of assistance.

Sincerely,

Donald C. Hakenson
Director

Enclosure

DAAG-ESG 25 July 1986

MEMORANDUM FOR RECORD

SUBJECT: Trip Report to CDC for Meeting between ESG & AOP, 24 July 1986 in Atlanta, GA.

PURPOSE: To discuss issues related to a TCDD Blood Validation Pilot Study.

IN ATTENDANCE:

ESG: Mr. Richard Christian, Director
Major Maxie Tenberg, Chief, Scientific Support Division

AOP: Mr. Charles Adams, Supervisory Public Health Advisor
Mr. Drew Baughman, Statistician
Mr. Robert Delaney, Public Health Advisor
Mr. John Karon, Chief Statistician
Dr. Robert Worth, Chief Scientist

I. Discussions:

1. ESG provided AOP an update on the current status of the seven Battalions (2, 6, 10, 20, 22, 43, 50) that were the focus of the ESG Pilot Study. Mr. Karon requested that ESG forward the updated tracking data to CDC on the seven battalions used in the Pilot Study.

Mr. Christian stated the data would be sent to CDC when ESG received an approved Mission Order from DOD and when funds to complete the mission had been approved and transferred to ESG.

2. ESG stated the indirect estimates, specifically the "E-3" and "Area Concept", would lead to problems with misclassification and would cause delays in classifying study subjects in the "low" group.

After some discussion it was decided the "Area Concept" (Shelby Stanton's responsibility/idea) in the selection process was not appropriate.

3. There was also discussion by both parties concerning the effect of the "unknown" sprays in establishing the "low" group. It was decided the "low " group would have to be checked against all unknown sprays and some "consideration" given if study subjects received an opportunity for exposure to an unknown spray.

4. Dr. Robert Worth near the end of the meeting stated "In my personal opinion, the results of the Blood Validation study will not produce any substantial Scientific Data." He did say that the validation study should produce some scientific answers that, "would allow us (CDC) to get out of the Main Agent Orange Study with Honor."

5. Both groups present agreed that the study subjects used would come from the subjects qualified early in the study from the seven units used for the Pilot to insure all study subjects were qualified using the same criteria.

II. Tasks:

1. ESG will upon delivery and approval of a Mission Order Letter from Secretary of Health to DOD, and approval and transfer of funds to ESG for the work to be performed, copy and forward the most complete tracking tape covering the 7 pilot-study Battalions.

2. CDC will provide a list of approximately 300 subjects to ESG to verify "zero" hits (using both Agent Orange and unknown agents). ESG will specify format.

3. CDC will provide ESG a list of potential "high" (Approx. 500) subjects to verify hits from these battalions. ESG will specify format.

III. Time Frame:

1. Phase I of the Pilot Validation Study involves testing the blood samples taken from study subjects being given complete medical examination as part of the VN Experience Study. This phase should be complete by the end of August.

2. Phase II are the tasks to be performed by ESG. No specific time frame was mentioned as to when ESG would commence or complete Phase II. Start date will depend on Mission Order and funding approval by DOD. Dr. Worth said that within two weeks he would send us a Draft Letter that would be going from Secretary of Health to DOD requesting our help.

3. Phase III comparing all "high and low" Study Subjects with blood results, to be completed by CDC.

IV. Concluding Statements:

Mr. Christian stated once again as the meeting concluded that ESG would not begin work until funding and the mission order had been approved at all levels.

MAXIE M. TENBERG
Major, USA
Chief, Scientific Support
Division