



## Vietnam Veterans' Mortality Study

64/97

5 May 1997

The Federal Government will implement a comprehensive program of health research, education and counselling to supplement existing benefits and services available to Vietnam veterans, the Minister for Veterans' Affairs, Bruce Scott announced today.

The Minister was speaking at the launch of the *Mortality of Vietnam veterans - the veteran cohort study*, also known as the Vietnam Veterans' Mortality Study.

The Study found that between 1980 and 1994, the overall mortality of Vietnam veterans was 7 per cent higher than the rest of the Australian male population. This elevated rate appears to be due chiefly to lung, prostate and certain cancers of the head and neck, and possibly, suicide.

"The Federal Government accepts that there is a very real problem with the health of veterans from the Vietnam War.

"Many of the conditions highlighted in the Mortality Study are already covered by existing health and compensation benefits.

"There will be further consultations with the Vietnam veteran community about what additional measures we could put in place to improve their overall health.

"The focus must now be on what can be provided to living veterans in addition to the extensive range of benefits, treatment services and counselling which is already available.

"We will embark on a broadly based awareness program to encourage General Practitioners and other health providers to monitor all aspects of their patients' health more closely. All GPs will be contacted to alert them to the specific findings of the Study.

"We will also look at the feasibility of conducting further research on how lung cancer and suicide can be prevented in the Vietnam veteran community. There can never be an acceptable level of suicide and this is an issue of great concern to me and this Government.

"I will be making an announcement in the near future concerning a survey of all Vietnam veterans and their families' health. This national survey, developed in collaboration with the Vietnam veteran community, will identify existing health problems and their prevalence."

The Mortality Study found that 53,391 of the 59,036 male Vietnam veterans on the Nominal Roll were alive at the end of 1994, 499 died in combat, 3,341 died after their

return from Vietnam and 1,805 could not be traced.

Other findings include:

- the death rate from all types of cancer was about 20% higher than would be expected, given the rates in the Australian population;
- 224 veterans had died of lung cancer since the war which represented a 30% increase over what would be expected;
- there were 36 deaths from prostate cancer - 24 of them among Regular Army veterans;
- the death rate from cancers in the head and neck was 50% higher than was anticipated - between 1980 and 1994 deaths from head and neck cancers numbered 41;
- Vietnam veterans may have an increased risk of death by suicide. 241 veterans had committed suicide. If compared with the relevant population group in the general community, this number appears at the high end of what would be expected.

A follow-up Mortality Study will be conducted to cover the period 1995 to 2000.

**Media contact: Melissa McKerihan 06 277 7820 or 0419 607 783**

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## MINISTER ANNOUNCES VIETNAM VETERAN HEALTH STUDY

76/97

May 20, 1997

A major survey of the health of all Australian Vietnam veterans, their partners and their children was announced by the Minister for Veterans' Affairs, Bruce Scott, today.

"The Vietnam Veterans' Health Study will gather data from the whole Vietnam veteran community so that an accurate assessment of the current state of health of the veterans themselves, their partners and children can be obtained.

"This will enable the Federal Government to better target veterans' services and ensure that assistance is provided to Vietnam veterans and their families when they need it.

"A four-page questionnaire has been mailed out today to every living Vietnam veteran with the request that they fill it out personally and return it by the end of this month.

"The study aims to establish veterans' views on their own health and their opinion of any direct effect their service in Vietnam may have had on the health of their partners or children."

The Minister strongly urged all Vietnam veterans to complete and return the questionnaire as the integrity and usefulness of the results depended on a high level of veteran response.

The cost of the study will be more than \$250,000 and the results will be published in aggregated form at the end of November this year.

Development of further phases of the study will be dependent on the results and indications from this first stage.

All personal information will remain strictly confidential.

A special telephone help line for inquiries about the survey has been set up - 1800 555 048.

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## CLOSING DATE FOR HEALTH STUDY EXTENDED

85/97

4 June 1997

Vietnam veterans have been given more time to respond to a survey of their health, the Minister for Veterans' Affairs, Bruce Scott, said today.

The Vietnam Veterans' Health Study is the most comprehensive study of Vietnam veterans' health ever carried out in Australia. A questionnaire has been mailed out to all Vietnam veterans with the request that it be personally filled out and returned.

The purpose of the Study is to obtain an accurate assessment of the current state of health of Vietnam veterans, their partners and children.

"The closing date for the return of the questionnaire has been extended until June 30," the Minister said today.

"Already, 52 per cent of questionnaires have been returned but I would strongly encourage all Vietnam veterans to respond.

"The information gathered will assist in identifying the health issues affecting Vietnam veterans and ensure that appropriate assistance is provided to those who need it.

"The integrity and usefulness of the results are very much dependent on a high rate of response."

The Minister emphasised that the Government would not have access to personal information supplied through the questionnaire. The results will be published in an aggregated form which precludes the identification of any particular veteran.

Those veterans who have not returned their questionnaire will shortly receive a reminder letter.

Any Vietnam veteran who has not received a questionnaire should telephone the special inquiry number - 1800 555 048.

**Media Contact: Melissa McKerihan 06 277 7820 or 0419 607 783**

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# THE MORTALITY OF VIETNAM VETERANS: THE VETERAN COHORT STUDY

## BACKGROUND

### Who was included in the study?

The study was of all Australian male personnel — army, navy, air force, the Citizen Military Force and civilian — who served in Vietnam. It covers the period from the end of the Vietnam War until 31 December 1994.

### What did the study aim to achieve?

The study aimed to:

- list all Australians who served in Vietnam in a nominal roll;
- determine the mortality rates of male Vietnam veterans; and
- compare the mortality rates of male Vietnam veterans with those of Australian males.

### How was the study done?

With the assistance of the Department of Defence and several other organisations the study identified over 95 per cent of the men and women who fitted the study's definition of a Vietnam veteran. The names of these veterans were compiled into a nominal roll. As well as names, the roll contains additional data, such as date of birth and service details. The nominal roll was published in June 1996.

To determine which veterans were alive, the nominal roll was compared with:

- the Australian electoral roll;
- veterans receiving a payment from the Department of Veterans' Affairs; and
- people who are currently using the Medicare system.

To determine which veterans were dead the nominal roll was compared with:

- the National Death Index which has an entry for each death registered in Australia since 1980; and
- deaths recorded by the Department of Veterans' Affairs

All of this matching was done using computer programs. Great care was taken to ensure

the privacy of individual veterans.

Once the number of veterans who were alive and the number who had died were known death rates for each cause of death were calculated.

### **How is mortality measured?**

This study measured mortality in two different ways. In the first method, mortality is expressed as a standardised mortality ratio (SMR). These compare the death rates of Vietnam veterans with rates for the Australian male population. The second method calculated standardised relative mortality ratios (SRMRs) that compare one SMR with another SMR for the same group or type of veterans. SRMRs describe proportional differences in death rates within the Vietnam veteran cohort *not* absolute differences with the Australian male population.

Results in the study are tested to determine if they are statistically significant, that is, whether the death rates differ from the expected and that the variation is unlikely to be due to chance alone.

### **What did the mortality study find?**

Of the 59,036 male Vietnam veterans on the roll the study found that:

- 53,391 were alive at the end of 1994;
- 499 died in combat;
- 3,341 have died since they returned from Vietnam; and
- 1,805 could not be traced.

Of the 1,805 veterans who could not be traced the study estimated that approximately;

- 380 may have died;
- 1,190 may have emigrated; and
- 235 were assumed to still be alive.

The study found that there was evidence of increased mortality in Vietnam veterans compared with the rest of the Australian male population.

**What evidence?** Between 1980–94, the overall mortality rate of Vietnam veterans was 7 per cent higher than for the comparable Australian male population. However, it is difficult to say if this estimate is exact because of the continuation of a 'healthy worker effect' and a readjustment in the method of estimation.

This increase was despite the presence of a persisting but diminishing 'healthy worker effect'. The 'healthy worker effect' occurs because men who were sick or likely to die early in their life were not allowed to enlist in the army, navy or air force. This means that veterans should have decreased mortality from certain causes of death in future years.

A statistical adjustment to take into account missing veterans was made because the study needed to compensate for the deaths among the 1,805 veterans who could not be traced. If this was not done the mortality rates for Vietnam veterans compared with those for the Australian male population would have been underestimated. The death rates compared to Australian males (SMRs in the report) should be interpreted with caution.

Because the effects of these two factors could not be measured, the principal findings of the study are expressed cautiously, and there is concern that the overall figures may not

be a precise estimation of the mortality experience. However, there is more confidence that the broad direction of the findings are correct. That is to say, the overall mortality of Vietnam veterans does appear to be elevated, but it may not be exactly 7 per cent. Similar reservations also apply to the other estimates of mortality compared with Australian male rates (SMRs).

### **What did the study find about cancer?**

The study found that the death rate from all types of cancer was 21 per cent higher than would be expected given the death rate in the Australian male population. Also, as a proportion of all deaths, the number of deaths from cancer was 19 per cent higher than expected. This 19 per cent difference may reflect that there were fewer deaths from other causes because men who would have died from these causes were not allowed to enlist.

The study found that for individual cancers there was evidence that lung cancer, prostate cancer and cancers of the head and neck played a part in the excess mortality among Vietnam veterans.

The study found that 224 veterans died of lung cancer since the Vietnam War. In the period 1980–94, this represented a 30 per cent increase over what would be expected. As a proportion of all cancer deaths, lung cancer was elevated but it was not statistically significant. However taking these results together, the study was able to conclude that there was evidence of increased mortality from lung cancer.

Between 1980–94, two-thirds of the 36 deaths from prostate cancer occurred among the regular army veterans. Consequently, the SMR for this group was the only statistically significant finding for this cancer. As a proportion of all cancer deaths, there was a non-statistically significant elevation in mortality from prostate cancer in the army and navy. Considering these results, the study was able to conclude that there was evidence of increased mortality from prostate cancer.

An unexpected result from this study the death rate for a group of cancers that form in the head and neck. Compared to all other types of cancer, the death rate for this group of cancers was 50 per cent higher than expected and this result was statistically significant. 41 deaths were recorded for this group between 1980–94.

### **What did the study find about suicide?**

There was evidence that Vietnam veterans may have an increased risk of death by suicide.

The study found 241 veterans had committed suicide since the end of the war in Vietnam. Compared with the general population this appears to be above or at the high end of the range of what would have been expected.

In more recent years, the rate of suicide among Vietnam veterans shows some increase over previous years.

While the study is inconclusive, on the statistical significance of the suicide results, there can never be an acceptable level of suicide.

**Is the overall increase in mortality due to Agent Orange?** This study was not designed to determine the underlying cause of any changes in mortality. Thus, there were no measures of possible exposure to Agent Orange, or any of the other chemicals that were used in Vietnam. It is possible that the detected elevation was due to some factor in Vietnam, such as the herbicides that were used there. It is also possible that it is due to some factor in the lifestyle of Vietnam veterans. For example, perhaps Vietnam veterans smoke more than the Australian population.

## **The results for the navy**

The study found that death rates (SMRs) for navy veterans were generally higher than those for the army and air force. However, a number of factors suggest that this general increase is not a true result. It was probably caused by imperfections in the adjustment to compensate for the deaths among the veterans who could not be traced. The adjustment appears to have over-estimated the number of deaths among navy veterans. There is confidence that the broad direction of the findings are correct but not in the actual variations from the norm.

## **Previous claims**

There have been claims that up to 10,000 Australian Vietnam veterans have died since they returned from Vietnam and that 5,000 of these committed suicide. This study shows that these claims are wrong.

## **What is the Government doing already for Vietnam veterans?**

- There is a broad range of treatment programs in place for veterans who suffer from PTSD and other psychiatric diseases. These include both inpatient and outpatient courses of treatment.
- There is a dedicated Vietnam Veterans Counselling Service. This provides professional counselling to Vietnam veterans and their families.
- Compensation, in the form of disability pension for veterans and War Widows' pension for spouses of deceased veterans, is available for lung cancer and prostate cancer (as well as other cancers) on the basis of herbicide exposure in Vietnam. Similar benefits are generally available for cancers of the head and neck where veterans' smoking is caused by their service.
- Treatment is available for all malignant disorders (cancers), and emergency medical care is available for all Vietnam veterans.
- An emergency after-hours line is available.
- An understanding has been reached with police services on how to deal with disturbed veterans.
- A booklet and a video on prostate health are available.
- Income support, in the form of Service Pension, is available for all entitled Vietnam veterans.
- There is a broad range of other benefits, such as the Veterans' Children Education Scheme, that are available to certain Vietnam veterans.

## **What more will the Government do?**

- A broad program of awareness raising among the health care providers, particularly GPs, on the concerns that this study has raised.
- A health survey of all Vietnam veterans, their spouses and their children will be carried out in the next few weeks.
- New research will be undertaken, such as a study of the mortality experience 1995-2000.
- The after-hours crisis care line will be expanded.
- There will be discussions with the Vietnam veteran community on what additional measures, particularly relating to lifestyle, may be appropriate.

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# US ambassador denies Agent Orange victims link

**EXCLUSIVE**  
by Ha Thang

THE United States' ambassador to Vietnam has said there's not enough scientific evidence to link US chemical warfare with victims of Agent Orange in Vietnam.

Douglas "Pete" Peterson's discouraging com-

ments about the defoliant, used by the US military during the war between the two countries, came amid growing calls world-wide to determine the exact effects of the dioxin-based chemical on the human population in Vietnam.

"It will take a long time to clarify the exact consequences of Agent Orange,"

Peterson told Vietnam Investment Review.

The ambassador's comments are a marked contrast to figures released by the National Committee For Investigation of the Consequences of the chemical used during the Vietnam War, which claim the number of people affected by the dioxin stands at

around one per 1,000 of Vietnam's total population.

"I don't think anyone knows for sure whether there is a link between these figures and US weapons used during the war," said Peterson.

"I think we need to have global scientific research which will automatically lead us to a con-

clusion on the matter."

Vu Trong Huong, Director of the War Crimes Investigation Department, pounced scorn on Peterson's comments, citing official figures that put the number of people exposed to Agent Orange at two million.

"International research has proven that during the whole war, 72 million

litres of chemicals were poured onto Vietnam," Huong said. "Over 40 million litres of that were dioxins. We have over 50,000 children that have been born with horrific deformities. There is a link."

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