THE WHITE HOUSE

WASHINGTON

August 13, 1995

MEMORANDUM FOR HILLARY RODHAM CLINTON

FROM: **Diana Zuckerman**

RE: **Briefing for August 14, 1995**

Testimony at the First Meeting of the Presidential Advisory Committee on Gulf War Veterans' Illnesses

- Briefing
- Draft Copies of Secretaries' Prepared Testimony
- Testimony/Remarks

August 11, 1995

ADVISORY COMMITTEE MEETING ON GULF WAR VETERANS' ILLNESSES

DATE:	Monday, August 14, 1995
TIME:	9:40
LOCATION:	Congressional Room, 2nd floor Capital Hilton 16th and K
FROM:	Diana Zuckerman

I. PURPOSE

To address the first meeting of the President's Advisory Committee on Gulf War Veterans' Illnesses.

II. BACKGROUND

This is the first meeting of the President's Advisory Committee on Gulf War Veterans' Illnesses. The President announced that he would create the Advisory Committee at a VFW speech in March, and he announced the members just before Memorial Day.

You will be the first speaker. You will be introduced by Dr. Joyce Lashof, the Chair of the Advisory Committee. Robyn Nishimi, the staff director, will escort you into the room. Secretary Jesse Brown, Secretary Donna Shalala, and Deputy Secretary John White will speak after you. You are scheduled to leave before they speak.

You will address your remarks to the Advisory Committee members, although you also welcome the veterans in the audience at the beginning of your talk. The Committee meeting is open to the public, and we are expecting an audience of several hundred, although it could be considerably fewer. The audience will include at least two Gulf War veterans whom you have met with (Nancy Kapplan and Steve Robertson), and several others who have written to you. The latter include Betty Zuspann, whose husband is extremely ill, and Gina Whitcomb, whose son is very ill. Col. Herb Smith is in the hospital and therefore unable to attend, but his testimony will be presented by another Gulf War veteran. The press will be located behind the audience.

Monday's agenda for the meeting includes your remarks, followed by remarks and Q's & A's for the two Secretaries and the Deputy Secretary, and more detailed talks by Dr. Ken Kizer (VA Under Secretary for Health), Dr. Stephen Joseph (DOD Asst. Secretary for Health) and Dr. Henry Falk (Director of the Division of Environmental Hazards and health Effects at CDC). They will also answer questions after their presentations. After lunch, there is a public comment session, which will include brief presentations by veterans, a few researchers and health care providers, and the man who conducted Sen. Riegle's investigation of the use of biological and chemical weapons in the Gulf War.

Meet and Greet

After your remarks, you will have a few minutes to greet the Secretaries and the Advisory Committee members. This will include a photo op. If you choose to do so, you may go to the rope line to greet veterans and other audience members. Unfortunately, they are seated at some distance away so it may be difficult to greet them unless they go to the rope line.

III. PARTICIPANTS

Advisory Committee Attendees
Dr. Joyce Lashof, Chair
Dr. John Baldeschwieler
Dr. Art Caplan
Dr. Don Custis (Ret. Admiral)
Gen. Fred Franks (Gulf War veteran)
Dr. David Hamburg
Marguerite Knox, R.N. (Gulf War veteran)
Dr. Phil Landrigan
Dr. Elaine Larson
Rolando Rios
Dr. Andrea Kidd Taylor

IV. SEQUENCE OF EVENTS

- HRC arrives and proceeds to podium
- Dr. Lashof introduces HRC
- HRC gives remarks
- HRC thanks everyone, walks over to greet Secretaries
- HRC proceeds to meet & greet (10 minutes) members and rope line
- HRC departs

V. PRESS

Open press, photo op with Secretaries, Committee members, and possibly rope line

Wotecki

Statement by

Donna E. Shalala

Secretary of Health and Human Services

at

Meeting of the Presidential Advisory Committee

on Gulf War Veterans' Illnesses

Washington, D.C.

August 14, 1995

Thank you, Dr. (Joyce) Lashof.

I want to join my colleagues in thanking all of you for dedicating your energy and expertise to our veterans and our country.

Five years ago, hundreds of thousands of American men and women left their families, friends, jobs, and homes behind to defend freedom half a world away.

While most of our citizens returned safely from the Persian Gulf War, the journey for some has been fraught with pain and illnesses.

Today, we in the Administration are renewing our promise to these Americans and their families: We are committed to finding the answers.

All of us -- whether we serve on the panel, or in the Cabinet -- are here because President Clinton is determined to get to the bottom of these medical issues.

The President has made it very clear -- we must "leave no stone unturned" in our efforts to identify what these illnesses are, how we can help the victims and their families, and what we can do to prevent similar maladies from afflicting veterans in the future.

At HHS, we have taken these challenges very seriously.

Our involvement with this issue began when we examined the environmental impact of the oil well fires that occurred in the early days of the war.

Since that time, we've provided support to the VA and the DOD for laboratory diagnosis of leishmania infection.

Through the NIH, we've convened a scientific panel to review health effects of the Gulf War and define future research needs.

We've conducted studies of illnesses reported by some Gulf War veterans in a Pennsylvania Air National Guard unit...

...And we've investigated birth defects reported by others in two National Guard units from Mississippi.

Today, we're proud to be part of the interagency Persian Gulf Veterans Coordinating Board.

And I'm pleased to say that HHS, through the Centers for Disease Control and Prevention, will soon be collaborating with the Iowa Department of Public Health to conduct a telephone survey examining the health of Iowa Gulf War veterans and their families.

In a few minutes, Dr. Henry Falk, of the National Center for Environmental Health, at CDC, will provide you with more details about our work.

All of these are important steps -- but we need you to help us do even more.

The commemoration of the 50th anniversary of World War II and the dedication of the Korean War Memorial remind us all of the enormous contributions our veterans have made.

Time and time again, they have sacrificed their lives so that others could be free.

Our veterans must know that long after the battle has ended, long after the mission has been accomplished, long after the last enemy stronghold has been captured, and long after the flag of victory has been planted...

...their country will be there for them and their families.

Again, I want to thank members of the committee for helping us give our veterans and their families the answers and the assistance they deserve.

Thank you.

DRAFT

Remarks
Hon. Jesse Brown
Secretary of Veterans Affairs

Presidential Advisory Committee
on Gulf War Veterans' Illnesses

Washington, DC
August 14, 1995
****

Dr. Lashof and distinguished members of the Committee;

Colleagues from other Departments and agencies;

Fellow veterans;

Honored Guests;

Ladies and gentlemen:

I am very happy to be here today.

More importantly, I am very happy that YOU are here today.

This is a very significant moment for our veterans and their families.

Today's first meeting of this Committee elevates the health problems of our Persian Gulf veterans to the highest possible level.

You -- ladies and gentlemen -- represent the best and the brightest our nation has to offer in a complex area of health and public policy.

Your work has been given top priority.

I think it is also very important that this Advisory Committee will look into reports of the possible detection of chemical or biological agents.

VA will continue to evaluate whether any of these veterans health problems might be the result of exposure to these agents.

We are also looking into the inoculations and medications they received to protect them from chemical and biological weapons.

And we are concerned about the long-term effects of the enormous stress that many of our Gulf War veterans experienced.

So there are clearly many reasons for concern.

Now --

-- Many veterans are reporting symptoms;
-- Some have undiagnosed illnesses; and
-- Nearly all have questions.

All of us have been looking for answers. But the information is incomplete and some answers have been elusive.

When I made this issue a top priority nearly two and a half years ago, only one thing was known for sure --

--Persian Gulf veterans were suffering.

They were suffering from fatigue, memory loss, painful joints, and other physical and psychological problems.

That is why I committed VA to doing everything possible to assist those who were suffering right then.

For the longer term, we not only launched our own research efforts, but teamed up with other Departments to focus our search for scientific answers.

There are a number of basic elements in our comprehensive approach to the problem:

The first step is evaluating immediate problems, and providing care.

• We offer a Special Health Examination -- which includes a free, complete physical with basic lab studies.

This is available to all Persian Gulf veterans concerned about their health, whether they are ill or not.

48,000 veterans have been examined so far, and the results have been entered in our Persian Gulf Registry.

We continue to monitor the Registry to identify any patterns of illnesses and complaints.

And this centralized registry allows us to provide veterans on the Registry with updates on health issues, research findings and new compensation policies.

• At our four Persian Gulf Referral Centers, experts evaluate the cases which are most difficult to diagnose. These are located at Washington, DC, Houston, Los Angeles and Birmingham.

• We offer veterans priority access to VA care for any disability that might be related to an environmental hazard or toxic exposure in the Gulf.

Clearly, this is important to Persian Gulf veterans with serious health problems. So we obtained special authority to augment VA's regular eligibility rules to treat them.

Following evaluation and treatment, our second step in responding to Persian Gulf veterans' concerns deals with disability compensation.

We supported, and worked hard to enact, legislation to pay compensation to Persian Gulf veterans with chronic disabilities --

-- even though their conditions are undiagnosed and have not yet been traced to their military service.

We felt veterans deserved the benefit of the doubt. The Congress agreed, and the President signed this law late last year.

In February, I was proud to join President Clinton in presenting one of the first compensation checks awarded under the new law to a veteran from Illinois.

We are contacting every Persian Gulf veteran who has had a VA registry exam, and urging them to file a claim for compensation benefits.

We are reviewing claims for every Persian Gulf veteran who had filed a claim based on environmental hazards.

The third step in our basic approach is one which I believe will most concern this committee: the matter of getting definitive answers.

This obviously involves research. We have already begun a large and ambitious effort in this direction.

- There are now over 30 government research projects looking into areas including general health, environmental effects and chemical agents.

• VA and the Defense Department have contracted with the National Academy of Sciences to review existing information in this area.

VA is also moving forward with our own research.

• For example, we established three special research centers focused specifically on the effects of exposure to environmental hazards.

• Our mortality rate follow-up study will compare causes of death for Persian Gulf veterans, with the cause of death for veterans serving in the same era, who were not deployed to the Gulf.

• Another of our studies will survey symptoms, illnesses and exposures of 15,000 Persian Gulf veterans. It will compare their experiences with those of a similar size group who served at the same time, but did not go to the Gulf. This study will also evaluate the health status of veterans' family members.

The final step in our approach is getting the word out.

• We are working closely with our nation's veterans service organizations, to reach out to Persian Gulf Veterans and their families.

• Our Persian Gulf Information Center -- operates a nation-wide, toll free information line staffed by trained operators.

We also provide 24-hour-a-day information through electronic bulletin boards.

• The Persian Gulf Review newsletter goes out periodically to everyone on the Persian Gulf Registry, providing them with the latest information on research and other developments.

• We are conducting a series of Persian Gulf Health Days at a number of our VA medical centers around the country. These seminars allow concerned veterans to get direct answers to their questions.

• And finally, VA officials -- from myself and Deputy Secretary Gober, to facility directors -- have participated in hundreds of media interviews, describing VA programs for Persian Gulf veterans.

There are too many things going on for me to describe them all in this setting, but that is a good part of the picture.

The Persian Gulf Veterans Coordinating Board -- which includes the VA, the Departments of Defense and Health and Human Services -- continues to coordinate extensive work on research, clinical issues and disability compensation.

In the end, I believe -- as the President has promised -- that no stone will be left unturned.

But I want to state in the strongest terms possible -- something I have said to many others: If there is anything we are not doing that you would like to see us do, let me hear from you.

Your counsel is very important to us.

And I believe you understand --

-- that we cannot send our men and women in uniform to foreign battlefields, have them put their lives on the line for national security, and then ignore them when they need us.

You, ladies and gentlemen, have a most important responsibility. I pledge to you VA's total cooperation.

Any records, data or other information you feel you need will be available to you. All you need to do is ask. We will respond fully and promptly.

I wish you good luck, and Godspeed in your work.

Thank you.

DRAFT 8/10/95,5:49 PM Gibson/Denny

Remarks by Deputy Secretary White
Presidential Advisory Committee on Gulf War Veterans' Illness
14 August 1995

Want to thank Secretary Brown, Secretary Shalala for leadership, sharp focus & hard work in helping DoD help Gulf War veterans and families who suffered illnesses after the war.

Together, we are aggressively carrying out President Clinton's commitment to address this serious problem.

- And we are energized by his personal attention to the plight of these veterans.
- Goals:
  1) Take care of our service members
  2) Openness; people have right to know;
  2) We don't have a corner on knowledge; want process of investigating and understanding the illness to be interactive.

Dr. Stephen Joseph, Assistant Secretary of Defense for Health Affairs, will brief you on the details of the Defense Department's actions.

- Secretary Perry has asked me to give personal and high-level attention to issue;
- I would like to provide highlights of our initiative.

Many of our Gulf War veterans are ill, and belleve it's a result of their service.

- That's all the proof <u>we</u> need to give them the medical attention <u>they</u> need.
- Proust: "Pain we obey."

- The pain of our veterans we will obey.
- It's the least we can do for the men and women who put their lives at risk for our country.
- It's the right thing to do, our duty to do it, we have been doing it and we will continue to do it.

Secretary Perry and General Shalikashvili communicated to all service members on active duty who served in Persian Gulf urging them to come forward, report illnesses -- won't hurt career.

- Following up with four-part program:

1. Treat the illnesses.

- Fundamental and initial emphasis.
- Last June launched Comprehensive Clinical Evaluation Program for Gulf War Veterans.
- Have 23,000 who responded to SECDEF & Chairman's encouragement.
- August 1 report: Review of 10,020 of our in-depth medical exams shows no evidence of unique "Persian Gulf Illness";
- But rather, multiple illnesses with overlapping symptoms.
- Study is clinical, not perfect research nor final word.
- Will continue to provide care and review all records.

2. Understand the illnesses.

- DoD, VA, HHS also funding in-depth medical research into problem.
- In FY95 DoD dedicated $12 million.

- Research is being done by both government and non-governmental entities.

3. Investigate the illnesses.
- DoD, VA & HHS are aggressively gathering clinical information.
- In March, established Investigative Team to analyze Persian Gulf classified and unclassified DoD and non-DoD documents related to actions and incidents that could have had impact on health.
- Set up "1-800" number for people to report incidents and theories that may help investigation.
- Declassifying and analyzing operational and intelligence records.

4. Inform people about the illnesses and possible causes.
- Making all operational and intelligence documents relative to possible causes of illnesses available to the public.
- August 3, announced initial release of 3,700 pages of records, including defense intelligence and captured Iraqi documents.
- All Information should be available by December '96.
- Making public access easier to information about illnesses and what we're doing about them by putting documents on 2 on-line databases on Internet.
- First, GULF-Link for the declassified documents.
- People can click onto this file, browse the data, move it around, put things together, analyze it anyway they like.
- Tried it myself; easy and informative to use.

- We'll update GULF-Link as we receive and declassify more documents.
- Second database for documents we publish, including the clinical report on the medical exams we conducted, press releases, fact sheets and research results.

Dr. Joseph will elaborate on these initiatives on 11 o'clock panel, but I want to reiterate the bottom line:

- As we have for the past year, we will continue our aggressive effort to treat, investigate, understand, and inform people about the illnesses.
- This Administration is committed to caring for our ailing veterans.

STATEMENT OF FIRST LADY HILLARY RODHAM CLINTON

TO THE

PRESIDENT'S ADVISORY COMMITTEE ON GULF WAR VETERANS' ILLNESSES

AUGUST 14, 1995

On behalf of the President, I want to thank the Chair and members of the President's Advisory Committee on Gulf War Veterans' Illnesses for your willingness to perform this public service. I also want to welcome all the veterans, their friends and families, who are here to talk about their personal experiences and to hear from the Administration officials who have been working diligently on the issues raised in the President's Executive Order creating this Committee.

I want to emphasize how proud we are of our victory in the Gulf War. Because of the enormous skill and bravery of our troops, we put an end to Saddam Hussein's brutal and illegal occupation of Kuwait. Because of the strength of U.S. leadership, the international community came together to stop and reverse unprovoked aggression against an innocent nation.

This Presidential Advisory Committee is an important example of the President's commitment to leave no stone unturned in the Administration's efforts to understand Gulf War veterans' illnesses and to make sure that the government is responsive to veterans' needs.

In his announcement, the President assured Gulf War veterans that we are grateful for their bravery, and we are as proud of them today as we were when they returned victorious in 1991. And most important, the President made it clear that just as we relied on our troops when they were sent to war, we must assure them that they can rely on us now.

The President and I have heard from many Gulf War veterans and their family members about their illnesses. We have received letters from all over the country, and have had the privilege of meeting with many veterans and family members in person. Several of these men and women, such as Steve Robertson and Nancy Kapplan, will be speaking to you this afternoon.

Veterans have told me about their frustrating efforts to find out why they are ill and how their illnesses can be treated. They have shared moving stories of the devastating effects on families when fathers and mothers become disabled and unable to work. They have described what it was like to serve their country in a desert land where oil well fires turned the day to night, and where sandstorms made it difficult to breathe. Some described scud missile attacks, or told of frequent use of insecticides to protect them from insect-born diseases.

Many Gulf War veterans have been outspoken in seeking and

Committee will determine whether the experiences these veterans describe in the Persian Gulf, and in receiving medical care, have been adequately addressed or whether there are additional actions that need to be taken.

When Secretary Jesse Brown and I met with veterans at the local VA Hospital, and when then Deputy Secretary of Defense John Deutch and I met with active duty soldiers at Walter Reed Hospital, the stories we heard touched us deeply, and provided important information as well. I know you will be working closely with veterans, who will be an invaluable resource in your deliberations, and I am pleased you will begin by hearing directly from Gulf War veterans today.

I have also met with the physicians, nurses, and other health care professionals from the VA and the Department of Defense who have worked with Gulf War veterans who are ill. They too express great frustration about the difficulties they have faced in helping some of the veterans and their family members whose illnesses remain undiagnosed. I know you will also work closely with these dedicated men and women, and learn from their experiences.

When the men and women of the U.S. military, Reserves, and National Guard were called to war in 1990, our Nation knew that we could rely on them. They served our nation honorably.

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When we look back to the euphoric parades for returning U.S. troops in 1991, we can still remember a great feeling of relief. We had won the war, and most Americans had returned home safely.

But throughout 1991 and 1992, there was increasing concern about some of our Gulf War veterans. There were veterans who described symptoms that did not respond to treatment, and did not go away as expected. When my husband became President and learned that the numbers of veterans with chronic symptoms seemed to be increasing, he took an active interest in helping our veterans.

Because of the leadership and dedication of the Departments of Veterans Affairs, Defense, and Health and Human Services, this Administration has already made unprecedented efforts to help Gulf War veterans. For example, never before has an Administration moved so quickly to conduct research aimed at helping returning soldiers who are ill. This year alone, the three Departments will spend approximately $15 million to study possible environmental hazards, to determine whether illnesses

have been transmitted to spouses and children, and to develop improved treatment programs.

With the leadership of the VA, this Administration strongly supported laws to ensure that compensation is available to those who are disabled, even if the direct causes of the illnesses stemming from their military service are unknown. The VA is also providing priority medical care to Gulf War veterans, and both VA and the Defense Department have established special treatment centers to help veterans whose illnesses are particularly difficult to diagnose.

The Defense Department has also recently initiated a new program that will declassify documents and other information about the Gulf War, and make them available on Internet.

All these efforts will serve our veterans well, and most were accomplished with bipartisan support from the 103rd Congress, under the leadership of then Chairmen of the Veterans Affairs Committees, Sen. Jay Rockefeller and Rep. Sonny Montgomery, and their Committee members.

As President Clinton stated when he first announced this Advisory Committee, he is determined to do whatever it takes to respond to the concerns of Gulf War veterans.

This Administration has convened several other panels of outside experts to examine various issues pertaining to Gulf War veterans' illnesses, but came to realize that the issues are so complex that they require a more comprehensive, sustained effort.

And so the President established this Advisory Committee, to be independent and appropriately staffed, with the relevant experience and expertise that you represent. This Advisory Committee is unique because, as the President outlined in his executive order, you will review all aspects of the Federal governments' programs and policies that affect Gulf War illnesses, telling us what we are doing right and what we should be doing better.

The Executive Order specifies that you will provide "advice and recommendations" based on your review of the following: research; medical treatment; risk factors from service in the Gulf War, including possible environmental factors, and drugs and vaccines; reports of the possible detection of chemical and biological weapons; coordinating efforts that have been established by Federal agencies; external reviews by other expert panels; and outreach to veterans.

As you can see from that list, your mandate is broad. In your efforts to review all these programs and policies, the Secretaries are pledged to assist you, and you will find their

doors open to you. And the President has made it absolutely clear, in this Executive Order and in his announcement of this Advisory Committee, that when you consider your task, no issue is off limits and every reasonable inquiry should be pursued.

There are many opinions about how many Gulf War veterans are ill, what has caused those illnesses, and how they can best be treated. In talking to veterans and to those who are trying to serve them, it is clear that those opinions are as strongly held as they are diverse.

And so, your task is a difficult one. There are many unanswered questions, and we are counting on you to make sure that this Administration is doing all it can to catalog relevant questions and, in so far as possible, answer them.

For that reason, you were selected on the basis of your wide range of expertise in medical issues, scientific research, policy, and military matters. The veterans on the panel will contribute their invaluable perspectives from their military experiences, and it is particularly important that two of you served in the Gulf War. You all were selected because you do <u>not</u> have pre-conceived notions about the scope of the problem of Gulf War illnesses, or the causes and treatment.

None of us knows what the research now being conducted or called for in the future will tell us. So far, the research that the government has conducted indicates that thousands of veterans who were healthy when they left for the Gulf War are now ill. Many veterans believe that these symptoms cluster together into a "Gulf War Syndrome" that is unique. Based on the research to date, however, experts have concluded that there is not enough evidence to call this a syndrome. This is an issue that will continue to be studied as more research is completed.

There are disagreements about the likely causes and the best treatments for these symptoms. These issues also will continue to be studied as more research is completed.

The President has appointed this Advisory Committee because we do not yet have the answers to these important questions. These are complicated scientific questions that deserve careful scientific scrutiny.

In his Executive Order, the President has entrusted you to make sure that the Federal government is supporting appropriate research, and that, whenever possible, the results are being used to inform treatment, compensation, and priorities for future research. You are also entrusted to examine the wide array of Federal programs and policies to make sure that they not only

make sense, but also that they are being administered effectively and humanely.

I want to leave you with the image of an open door. Perhaps your most important tool as you serve on this Committee is your ability to be open-minded, to take advantage of our open-door policy to seek out the information you need to evaluate all existing programs and policies, and to make recommendations to ensure that this Administration will continue to be responsive and responsible to our veterans. We owe them that much, and more.

Presidential Advisory Committee on Gulf War Veterans' Illnesses

To: KAREN FINNEY
Phone: 456·2960
Fax: 456·7805
Date/Time: 8/9 4:30 pm
Number of Pages (including cover sheet) 3

From: D. DEW HYKES
Phone: 761·0066

Please call 202.761.0066 if there is a transmission problem.

Re: media advisory for your review –

has been ok'd by DOD/VA/HHS – Office of Cabinet Affairs – waiting on NSC + OSTP

thanks!
dave

DRAFT*DRAFT*DRAFT

MEDIA ADVISORY
Thursday, August 10, 1996

FIRST LADY HILLARY RODHAM CLINTON AND CABINET SECRETARIES TO ADDRESS FIRST MEETING OF PRESIDENTIAL ADVISORY COMMITTEE ON GULF WAR VETERANS' ILLNESSES

First Lady Hillary Rodham Clinton, Secretary of Health and Human Services Donna Shalala, Veterans Affairs Secretary Jesse Brown and Deputy Secretary of Defense John White will address the first meeting of the Presidential Advisory Committee on Gulf War Veterans' Illnesses. The two-day meeting will be held on Monday, August 14, and Tuesday, August 15 in Washington, D.C. at the Capital Hilton Hotel, 16th and K Streets, NW (Congressional Room).

President Clinton appointed the Presidential Advisory Committee on Gulf War Veterans' Illnesses on May 26, 1995. The Committee, which will report to the President through the Secretaries of Defense, Health and Human Services, and Veterans Affairs, is to review and provide recommendations on the full range of government activities relating to Gulf War veterans' illnesses. Joyce Lashof, MD, former Dean and Professor Emerita of the School of Public Health at the University of California at Berkeley, chairs the 12-member panel of scientists, health care professionals, veterans, and policy experts. .

Members of the public are invited to comment during the afternoon of the Monday session. Among those expected to testify are:

Name, title, organization

Tuesday's session will include briefings from the Institute of Medicine of the National Academy of Sciences.

The tentative agenda is as follows:

Monday, August 14, 1995

9:30 am Call to Order
Remarks by First Lady Hillary Rodham Clinton

10:00 am Briefing
Panel I
The Honorable Donna E. Shalala, Secretary, Department of Health and Human Services
The Honorable Jesse Brown, Secretary, Department of Veterans Affairs
The Honorable John P. White, Deputy Secretary, Department of Defense,

Panel II
The Honorable Stephen C. Joseph, M.D., M.P.H., Assistant Secretary, Health Affairs, Dept. of Defense
The Honorable Kenneth W. Kizer, M.D., M.P.H., Under Secretary for Health, Dept. of Veterans Affairs
Henry Falk, M.D., M.P.H., Director, Division of Environment, Hazards, and Health Effects, Centers for Disease Control and Prevention, Department of Health and Human Services
Robert H. Roswell, M.D., Executive Director, Persian Gulf Veterans Coordinating Board

12:30 pm Lunch
1:45 pm Public Comment
3:15 pm Break
3:30 pm Public Comment
5:00 pm Meeting Adjourned

Tuesday, August 15, 1995

9:00 am Opening Remarks
9:15 am Briefing
Institute of Medicine, National Academy of Sciences
Committee to Review the Health Consequences of Services During the Persian Gulf War
Karl T. Kelsey, M.D., M.O.H., Harvard School of Public Health, Committee member, accompanied by Diane J. Mundt, Ph.D., Study Director
Committee on the DoD Comprehensive Clinical Evaluation Program
Gerard Burrow, M.D., Yale University School of Public Health, Committee chair, accompanied by Kelley Brix, M.D., M.P.H., Study Director

10:15 am Discussion of Advisory Committee Goals/Objectives/Strategies
12:15 pm Lunch
1:30 pm Discussion of Advisory Committee Goals/Objectives/Strategies (continued)
2:30 pm Future Meeting(s)
3:00 pm Meeting Adjourned

Members of the media are asked to have all equipment in place 30 minutes prior to the beginning of each session: 9:00 a.m. on Monday, August 14, 8:30 a.m. on Tuesday, August 15.
For further information, please contact Diane Dewhirst or Robyn Nishimi at 202/761-0066.

STATEMENT OF FIRST LADY HILLARY RODHAM CLINTON

TO THE

PRESIDENT'S ADVISORY COMMITTEE ON GULF WAR VETERANS' ILLNESSES

AUGUST 14, 1995

On behalf of the President, I want to thank the Chair and members of the President's Advisory Committee on Gulf War Veterans' Illnesses for your willingness to perform this public service. I also want to welcome all the veterans, their friends and families, who are here to talk about their personal experiences and to hear from the Administration officials who have been working diligently on the issues raised in the President's Executive Order creating this Committee.

I want to emphasize how proud we are of our victory in the Gulf War. Because of the enormous skill and bravery of our troops, we put an end to Saddam Hussein's brutal and illegal occupation of Kuwait. Because of the strength of U.S. leadership, the international community came together to stop and reverse unprovoked aggression against an innocent nation.

This Presidential Advisory Committee is an important example of the President's commitment to leave no stone unturned in the Administration's efforts to understand Gulf War veterans' illnesses and to make sure that the government is responsive to veterans' needs.

In his announcement, the President assured Gulf War veterans that we are grateful for their bravery, and we are as proud of them today as we were when they returned victorious in 1991. And most important, the President made it clear that just as we relied on our troops when they were sent to war, we must assure them that <u>they</u> can rely on <u>us</u> now.

The President and I have heard from many Gulf War veterans and their family members about their illnesses. We have received letters from all over the country, and have had the privilege of meeting with many veterans and family members in person. Several of these men and women, such as Steve Robertson and Nancy Kapplan, will be speaking to you this afternoon.

Veterans have told me about their frustrating efforts to find out why they are ill and how their illnesses can be treated. They have shared moving stories of the devastating effects on families when fathers and mothers become disabled and unable to work. They have described what it was like to serve their country in a desert land where oil well fires turned the day to night, and where sandstorms made it difficult to breathe. Some described scud missile attacks, or told of frequent use of insecticides to protect them from insect-born diseases.

Many Gulf War veterans have been outspoken in seeking and providing information about their illnesses. This Advisory Committee will determine whether the experiences these veterans describe in the Persian Gulf, and in receiving medical care, have been adequately addressed or whether there are additional actions that need to be taken.

When Secretary Jesse Brown and I met with veterans at the local VA Hospital, and when then Deputy Secretary of Defense John Deutch and I met with active duty soldiers at Walter Reed Hospital, the stories we heard touched us deeply, and provided important information as well. I know you will be working closely with veterans, who will be an invaluable resource in your deliberations, and I am pleased you will begin by hearing directly from Gulf War veterans today.

I have also met with the physicians, nurses, and other health care professionals from the VA and the Department of Defense who have worked with Gulf War veterans who are ill. They too express great frustration about the difficulties they have faced in helping some of the veterans and their family members whose illnesses remain undiagnosed. I know you will also work closely with these dedicated men and women, and learn from their experiences.

When the men and women of the U.S. military, Reserves, and National Guard were called to war in 1990, our Nation knew that we could rely on them. They served our nation honorably.

When we look back to the euphoric parades for returning U.S. troops in 1991, we can still remember a great feeling of relief. We had won the war, and most Americans had returned home safely.

But throughout 1991 and 1992, there was increasing concern about some of our Gulf War veterans. There were veterans who described symptoms that did not respond to treatment, and did not go away as expected. When my husband became President and learned that the numbers of veterans with chronic symptoms seemed to be increasing, he took an active interest in helping our veterans.

Because of the leadership and dedication of the Departments of Veterans Affairs, Defense, and Health and Human Services, this Administration has already made unprecedented efforts to help Gulf War veterans. For example, never before has an Administration moved so quickly to conduct research aimed at helping returning soldiers who are ill. This year alone, the three Departments will spend approximately $15 million to study possible environmental hazards, to determine whether illnesses have been transmitted to spouses and children, and to develop improved treatment programs.

With the leadership of the VA, this Administration strongly supported laws to ensure that compensation is available to those who are disabled, even if the direct causes

of the illnesses stemming from their military service are unknown. The VA is also providing priority medical care to Gulf War veterans, and both VA and the Defense Department have established special treatment centers to help veterans whose illnesses are particularly difficult to diagnose.

The Defense Department has also recently initiated a new program that will declassify documents and other information about the Gulf War, and make them available on Internet.

All these efforts will serve our veterans well, and most were accomplished with bipartisan support from the 103rd Congress, under the leadership of then Chairmen of the Veterans Affairs Committees, Sen. Jay Rockefeller and Rep. Sonny Montgomery, and their Committee members.

As President Clinton stated when he first announced this Advisory Committee, he is determined to do whatever it takes to respond to the concerns of Gulf War veterans.

This Administration has convened several other panels of outside experts to examine various issues pertaining to Gulf War veterans' illnesses, but came to realize that the issues are so complex that they require a more comprehensive, sustained effort.

And so the President established this Advisory Committee, to be independent and appropriately staffed, with the relevant experience and expertise that you represent. This Advisory Committee is unique because, as the President outlined in his Executive Order, you will review all aspects of the Federal governments' programs and policies that affect Gulf War illnesses, telling us what we are doing right and what we should be doing better.

The Executive Order specifies that you will provide "advice and recommendations" based on your review of the following: research; medical treatment; risk factors from service in the Gulf War, including possible environmental factors, and drugs and vaccines; reports of the possible detection of chemical and biological weapons; coordinating efforts that have been established by Federal agencies; external reviews by other expert panels; and outreach to veterans.

As you can see from that list, your mandate is broad. In your efforts to review all these programs and policies, the Secretaries are pledged to assist you, and you will find their doors open to you. And the President has made it absolutely clear, in this Executive Order and in his announcement of this Advisory Committee, that when you consider your task, no issue is off limits and every reasonable inquiry should be pursued.

There are many opinions about how many Gulf War veterans are ill, what has caused those illnesses, and how they can best be treated. In talking to veterans and to

those who are trying to serve them, it is clear that those opinions are as strongly held as they are diverse.

And so, your task is a difficult one. There are many unanswered questions, and we are counting on you to make sure that this Administration is doing all it can to catalog relevant questions and, in so far as possible, answer them.

For that reason, you were selected on the basis of your wide range of expertise in medical issues, scientific research, policy, and military matters. The veterans on the panel will contribute their invaluable perspectives from their military experiences, and it is particularly important that two of you served in the Gulf War. You all were selected because you do not have pre-conceived notions about the scope of the problem of Gulf War illnesses, or the causes and treatment.

None of us knows what the research now being conducted or called for in the future will tell us. So far, the research that the government has conducted indicates that thousands of veterans who were healthy when they left for the Gulf War are now ill. Many veterans believe that these symptoms cluster together into a "Gulf War Syndrome" that is unique. Based on the research to date, however, experts have concluded that there is not enough evidence to call this a syndrome. This is an issue that will continue to be studied as more research is completed.

There are disagreements about the likely causes and the best treatments for these symptoms. These issues also will continue to be studied as more research is completed.

The President has appointed this Advisory Committee because we do not yet have the answers to these important questions. These are complicated scientific questions that deserve careful scientific scrutiny.

In his Executive Order, the President has entrusted you to make sure that the Federal government is supporting appropriate research, and that, whenever possible, the results are being used to inform treatment, compensation, and priorities for future research. You are also entrusted to examine the wide array of Federal programs and policies to make sure that they not only make sense, but also that they are being administered effectively and humanely.

I want to leave you with the image of an open door. Perhaps your most important tool as you serve on this Committee is your ability to be open-minded, to take advantage of our open-door policy to seek out the information you need to evaluate all existing programs and policies, and to make recommendations to ensure that this Administration will continue to be responsive and responsible to our veterans. We owe them that much, and more.

STATEMENT OF FIRST LADY HILLARY RODHAM CLINTON

TO THE

PRESIDENT'S ADVISORY COMMITTEE ON GULF WAR VETERANS' ILLNESSES

AUGUST 14, 1995

On behalf of the President, I want to thank the Chair and members of the President's Advisory Committee on Gulf War Veterans' Illnesses for your willingness to perform this public service. I also want to welcome all the veterans, their friends and families, who are here to talk about their personal experiences and to hear from the Administration officials who have been working diligently on the issues raised in the President's Executive Order creating this Committee.

I want to emphasize how proud we are of our victory in the Gulf War. Because of the enormous skill and bravery of our troops, we put an end to Saddam Hussein's brutal and illegal occupation of Kuwait. Because of the strength of U.S. leadership, the international community came together to stop and reverse unprovoked aggression against an innocent nation.

This Presidential Advisory Committee is an important example of the President's commitment to leave no stone unturned in the Administration's efforts to understand Gulf War veterans' illnesses and to make sure that the government is responsive to veterans' needs.

In his announcement, the President assured Gulf War veterans that we are grateful for their bravery, and we are as proud of them today as we were when they returned victorious in 1991. And most important, the President made it clear that just as we relied on our troops when they were sent to war, we must assure them that <u>they</u> can rely on <u>us</u> now.

The President and I have heard from many Gulf War veterans and their family members about their illnesses. We have received letters from all over the country, and have had the privilege of meeting with many veterans and family members in person. Several of these men and women, such as Steve Robertson and Nancy Kapplan, will be speaking to you this afternoon.

Veterans have told me about their frustrating efforts to find out why they are ill and how their illnesses can be treated. They have shared moving stories of the devastating effects on families when fathers and mothers become disabled and unable to work. They have described what it was like to serve their country in a desert land where oil well fires turned the day to night, and where sandstorms made it difficult to breathe. Some described scud missile attacks, or told of frequent use of insecticides to protect them from insect-born diseases.

Many Gulf War veterans have been outspoken in seeking and providing information about their illnesses. This Advisory Committee will determine whether the experiences these veterans describe in the Persian Gulf, and in receiving medical care, have been adequately addressed or whether there are additional actions that need to be taken.

When Secretary Jesse Brown and I met with veterans at the local VA Hospital, and when then Deputy Secretary of Defense John Deutch and I met with active duty soldiers at Walter Reed Hospital, the stories we heard touched us deeply, and provided important information as well. I know you will be working closely with veterans, who will be an invaluable resource in your deliberations, and I am pleased you will begin by hearing directly from Gulf War veterans today.

I have also met with the physicians, nurses, and other health care professionals from the VA and the Department of Defense who have worked with Gulf War veterans who are ill. They too express great frustration about the difficulties they have faced in helping some of the veterans and their family members whose illnesses remain undiagnosed. I know you will also work closely with these dedicated men and women, and learn from their experiences.

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But throughout 1991 and 1992, there was increasing concern about some of our Gulf War veterans. There were veterans who described symptoms that did not respond to treatment, and did not go away as expected. When my husband became President and learned that the numbers of veterans with chronic symptoms seemed to be increasing, he took an active interest in helping our veterans.

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MEDIA ADVISORY
Thursday, August 10, 1996

FIRST LADY HILLARY RODHAM CLINTON AND CABINET SECRETARIES TO ADDRESS FIRST MEETING OF PRESIDENTIAL ADVISORY COMMITTEE ON GULF WAR VETERANS' ILLNESSES

First Lady Hillary Rodham Clinton, Secretary of Health and Human Services Donna Shalala, Veterans Affairs Secretary Jesse Brown and Deputy Secretary of Defense John White will address the first meeting of the Presidential Advisory Committee on Gulf War Veterans' Illnesses. The two-day meeting will be held on Monday, August 14, and Tuesday, August 15 in Washington, D.C. at the Capital Hilton Hotel, 16th and K Streets, NW (Congressional Room).

President Clinton appointed the Presidential Advisory Committee on Gulf War Veterans' Illnesses on May 26, 1995. The Committee, which will report to the President through the Secretaries of Defense, Health and Human Services, and Veterans Affairs, is to review and provide recommendations on the full range of government activities relating to Gulf War veterans' illnesses. Joyce Lashof, MD, former Dean and Professor Emerita of the School of Public Health at the University of California at Berkeley, chairs the 12-member panel of scientists, health care professionals, veterans, and policy experts. .

Members of the public are invited to comment during the afternoon of the Monday session. Among those expected to testify are:

George Hobbs
Wilmington, DE

Teresa A Huschart, B.S.N., O.C.N.
Medenica Clinic and
Cancer Immuno-Biology Laboratory
Hilton Head, SC

Nancy and Barry Kapplan
Southington, CT

Steve Robertson
American Legion
Washington, D.C.

Reverend Doctor Barry M .Walker
East Palestine, OH

Albert Donnay
MCS Referral and Resources
Baltimore, MD

Gina Whitcomb
Desert Storm Justice Foundation
Guthrie, OK

Captain Julia Dyckman
Harrisburg, PA

Wendy Wendler
Dallas, TX

Major Richard Haines
New Albany, IN

Betty Zuspann
Desert Storm Veterans' Coalition
Hewitt, TX

Christopher Brown, Esq.
Brown & Ceil, P.A.
Glen Burnie, MD

David Addlestone
National Veterans Legal Services
Washington, D.C.

Tom Hennessy, Jr.
President, RESCIND, Inc.
Potomac, MD

Captain Charles Hamden
Ft. Meade, MD

James Tuite
Washington, D.C.

Aubrey Leager
Clayton, DE

Denise Nichols,
Wheat Ridge, CO

Reina M. Duval
Alexandria, VA

Tuesday's session will include briefings from the Institute of Medicine of the National Academy of Sciences.

The tentative agenda is as follows:

Monday, August 14, 1995

9:30 am	Call to Order Remarks by First Lady Hillary Rodham Clinton
10:00 am	Briefing Panel I The Honorable Donna E. Shalala, Secretary, Department of Health and Human Services The Honorable Jesse Brown, Secretary, Department of Veterans Affairs The Honorable John P. White, Deputy Secretary, Department of Defense, Panel II The Honorable Stephen C. Joseph, M.D., M.P.H., Assistant Secretary, Health Affairs, Dept. of Defense The Honorable Kenneth W. Kizer, M.D., M.P.H., Under Secretary for Health, Dept. of Veterans Affairs Henry Falk, M.D., M.P.H., Director, Division of Environment, Hazards, and Health Effects, Centers for Disease Control and Prevention, Department of Health and Human Services Robert H. Roswell, M.D., Executive Director, Persian Gulf Veterans Coordinating Board
12:30 pm	Lunch
1:45 pm	Public Comment
3:15 pm	Break
3:30 pm	Public Comment
5:00 pm	Meeting Adjourned

Tuesday, August 15, 1995

9:00 am	Opening Remarks
9:15 am	Briefing Institute of Medicine, National Academy of Sciences Committee to Review the Health Consequences of Services During the Persian Gulf War Karl T. Kelsey, M.D., M.O.H., Harvard School of Public Health, Committee member, accompanied by Diane J. Mundt, Ph.D., Study Director Committee on the DoD Comprehensive Clinical Evaluation Program Gerard Burrow, M.D., Yale University School of Medicine, Committee chair, accompanied by Kelley Brix,.M.D., M.P.H., Study Director
10:15 am	Discussion of Advisory Committee Goals/Objectives/Strategies
12:15 pm	Lunch
1:30 pm	Discussion of Advisory Committee Goals/Objectives/Strategies (continued)
2:30 pm	Future Meeting(s)
3:00 pm	Meeting Adjourned

Members of the media are asked to have all equipment in place 30 minutes prior to the beginning of each session: 9:00 a.m. on Monday, August 14; 8:30 a.m. on Tuesday, August 15. A mult box will be available in the broadcast area.

For further information, please contact Diane Dewhirst or Robyn Nishimi at 202/761-0066.

Presidential Advisory Committee on Gulf War Veterans' Illnesses

PUBLIC MEETING

Capital Hilton
16th and K Streets, N.W.
Congressional Room, 2nd Floor
Washington, DC

August 14-15, 1995

TENTATIVE AGENDA

Monday, August 14, 1995

9:30 a.m. Call to Order
Opening Remarks

First Lady Hillary Rodham Clinton

10:00 a.m. Briefing

Panel I

The Honorable Donna E. Shalala, Secretary, Department of Health and Human Services

The Honorable Jesse Brown, Secretary, Department of Veterans Affairs

The Honorable John P. White, Deputy Secretary, Department of Defense

11:00 a.m. *Panel II*

The Honorable Stephen C. Joseph, M.D., M.P.H., Assistant Secretary, Health Affairs, Dept. of Defense

The Honorable Kenneth W. Kizer, M.D., M.P.H., Under Secretary for Health, Dept. of Veterans Affairs

Henry Falk, M.D., M.P.H., Director, Division of Environment, Hazards, and Health Effects, Centers for Disease Control and Prevention, Department of Health and Human Services

Robert H. Roswell, M.D., Executive Director, Persian Gulf Veterans Coordinating Board

12:30 p.m. Lunch

1:45 p.m. Public Comment

3:15 p.m. Break

3:30 p.m. Public Comment

5:00 p.m. Meeting Adjourned

Tuesday, August 15, 1995

9:00 a.m. Opening Remarks

9:15 a.m. Briefing

Institute of Medicine, National Academy of Sciences

Committee to Review the Health Consequences of Service During the Persian Gulf War
Karl T. Kelsey, M.D., M.O.H., Harvard School of Public Health, *Committee member*
accompanied by Diane J. Mundt, Ph.D., *Study Director*

Committee on the DoD Persian Gulf Syndrome Comprehensive Clinical Evaluation Program
Gerard Burrow, M.D., Yale University School of Medicine, *Committee chair*
accompanied by Kelley Brix, M.D., M.P.H., *Study Director*

10:15 a.m. Discussion of Advisory Committee Goals/Objectives/Strategies

12:15 p.m. Lunch

1:30 p.m. Discussion of Advisory Committee Goals/Objectives/Strategies

2:30 p.m. Future Meeting(s)

3:00 p.m. Meeting Adjourned

Advisory Committee Members

Joyce C. Lashof, M.D., *Committee Chair*

is former Dean and Professor Emerita of the School of Public Health at the University of California at Berkeley. Dr. Lashof was Assistant Director of the Office of Technology Assessment from 1978-81 and Deputy Assistant Secretary for Health Programs and Deputy Assistant Secretary for Population Affairs at the Department of Health, Education, and Welfare from 1977-78. She served as President of the American Public Health Association in 1991-92.

John Baldeschwieler, Ph.D.

is Professor of Chemistry and former Chair of the Division of Chemistry and Chemical Engineering at the California Institute of Technology. From 1971-73, Dr. Baldeschwieler served as Deputy Director of the White House Office of Science and Technology Policy. He is an expert on national security issues, having served on numerous scholarly panels, commissions, and committees.

Arthur Caplan, Ph.D.

is Director of the Center for Bioethics at the University of Pennsylvania. Dr. Caplan was Director of the Center for Biomedical Ethics and Professor of Philosophy and Professor of Surgery at the University of Minnesota from 1987-94. He is an authority on ethics and medicine, and serves as the first President of the American Association of Bioethics.

Adm. Donald Custis, M.D.

is the Senior Medical Advisor to the Health Policy Department of the Paralyzed Veterans of America. From 1980-84, he served as Chief Medical Director for the Veterans Administration, having joined VA in 1976. During his career, he served as Commanding Officer of the Naval Combat Hospital in Danang, Vietnam (1969), followed by command of the National Naval Medical Center in Bethesda, Maryland. He retired in 1976 as the U.S. Navy Surgeon General with the rank of Vice Admiral.

Gen. Frederick M. Franks, Jr.

is a Vietnam and Gulf War veteran. From 1991-94, Gen. Franks was Commander of the Training and Doctrine Command. He served as the Commanding General of VII Corps, U.S. Army Europe, from 1989-91 and as VII Corps Commander during Operation Desert Shield and Desert Storm in 1990-91. During the Vietnam War, he served as S3, 2nd Squadron, 11th Army Cavalry, where he was wounded in action. He retired in 1994.

David A. Hamburg, M.D.

is President of the Carnegie Corporation. Dr. Hamburg was President of the Institute of Medicine, National Academy of Sciences from 1975-80, and Director of the Division of Health Policy Research and Education and John D. MacArthur Professor of Health Policy at Harvard University from 1980-82. He served as President, then Chairman of the Board, of the American Association for the Advancement of Science, between 1984-86.

James A. Johnson

is Chairman and Chief Executive Officer of the Federal National Mortgage Association in Washington, DC. Mr. Johnson was a managing director at Lehman Brothers from 1985-90, and Executive Assistant to Vice President Walter Mondale from 1977-81. He is Chairman of the Board of Trustees of the Brookings Institution and also serves on the Boards of the Carnegie Endowment for International Peace and the Carnegie Corporation.

Capt. Marguerite Knox, M.N., R.N.C., C.C.R.N.

is a Clinical Assistant Professor at the College of Nursing of the University of South Carolina in Columbia. As a member of the U.S. Army Nurse Corps, Capt. Knox was stationed with the 251st evacuation hospital at King Khalid Military City during Operation Desert Shield and Desert Storm. From 1988-93, she was a Special Nurse, Peripheral Vascular Lab at the William Jennings Bryan Dorn Veterans Hospital in Columbia, South Carolina. She is a member of the South Carolina Army National Guard.

Philip Landrigan, M.D.

is Director of the Division of Environmental and Occupational Medicine at the Mount Sinai School of Medicine in New York. Dr. Landrigan is an expert on toxic environmental and occupational exposures, and is Editor-in-Chief of the *American Journal of Industrial Medicine* and former Editor-in-Chief of *Environmental Research*. In 1988, he served as Chair of the science committee that reviewed the health effects of Agent Orange for the American Legion. Dr. Landrigan served as an epidemiologist with the Centers for Disease Control and Prevention from 1970-1985.

Elaine L. Larson, Ph.D., R.N., F.A.A.N., C.T.C.

is Dean of the Georgetown University School of Nursing. Dr. Larson was Professor and Nutting Chair in Clinical Nursing at the Johns Hopkins University School of Nursing and Director of the School's Center for Nursing Research from 1985-92. She is a member of the Health Sciences Policy Board of the Institute of Medicine, National Academy of Sciences, and is a Trustee of the Research Foundation of the Association of Practitioners in Infection Control. She has been a consultant in infection prevention in the U.S., Kuwait, Singapore, South America, Australia, Ghana, and Europe.

Rolando Rios

is a public interest attorney in private practice in San Antonio, Texas. From 1969-72, Mr. Rios served in the U.S. Army. He earned the rank of First Lieutenant and was disabled while serving at Cam Ranh Bay during the Vietnam War.

Andrea Kidd Taylor, Dr.P.H.

is an industrial hygienist and occupational health policy consultant for the International Union, United Automobile, Aerospace and Agricultural Implement Workers of America (UAW) in Detroit, Michigan. Dr. Taylor is a health representative on the National Advisory Committee for Occupational Safety and Health. From 1984-89, she was an industrial hygiene consultant for the Maryland Committee on Occupational Safety and Health.

August 1995

FACT SHEET

PRESIDENTIAL ADVISORY COMMITTEE ON GULF WAR VETERANS' ILLNESSES

"This independent Advisory Committee will help ensure that we are doing everything possible to determine the causes of the illnesses being reported by Gulf War veterans and to provide effective medical care to those who are ill. Its members have real expertise in all the areas relevant to Gulf War veterans' illnesses, including research, diagnosis and treatment."

-President Clinton
May 26, 1995

On May 26, 1995, President Clinton established the Presidential Advisory Committee on Gulf War Veterans' Illnesses through Executive Order 12961. The President had announced his intention to appoint such a committee in a speech to the Veterans of Foreign Wars on March 6, 1995.

The 12-member panel, made up of scientists, health care professionals, veterans and policy experts, is to review and provide recommendations on the full range of government activities relating to Gulf War veterans' illnesses, including:

- research,
- coordinating efforts,
- medical treatment,
- outreach,
- reviews conducted by other governmental and non-governmental bodies
- risk factors, and
- chemical and biological weapons.

The Advisory Committee will report to the President through the Secretaries of Defense (DOD), Health and Human Services (HHS), and Veterans Affairs (VA). It will provide an interim report within six months of its first meeting and a final report by no later than December 31, 1996. The first meeting will be held August 14 and 15 in Washington, D.C.

This is not the first or only effort by the Clinton Administration to address the issue of Gulf War veterans' illnesses, but it is the first independent panel to have a long term mission to analyze and review a wide range of topics in an interdisciplinary, cross-agency fashion.

SUMMARY OF GOVERNMENT ACTIVITIES

Approximately 877,000 U.S. service men and women served in the Persian Gulf from August 1990 through the end of 1993. Shortly after serving in the Gulf War, some military men and women reported a variety of symptoms, including fatigue, muscle and joint pain, memory loss and severe headaches. In response to these reports, the U.S. Government undertook several initiatives, *all of which will be reviewed by the Advisory Committee*. Such efforts include:

In 1992, VA began the Persian Gulf Registry Health Examination Program: Every Gulf War veteran who has health concerns, whether or not the veteran is healthy or has health complaints, is eligible for a free, complete physical exam. More than 48,600 veterans have had examinations. In June 1994, VA expanded the examination guidelines; such examinations are now the same as those conducted by DOD.

In 1993 and 1994, President Clinton signed into law legislation that changes standard eligibility rules to enable veterans to obtain free medical care for illnesses that may be related to service in the Persian Gulf. (PL 103-210 and PL103-452) To date, VA reports more than 489,400 Gulf War veterans have received medical care in VA facilities.

The Persian Gulf Veterans Coordinating Board was established in January of 1994 to address the health concerns of Gulf War veterans. The board, headed by the Secretaries of the Departments of Defense, Health and Human Services, and Veterans Affairs oversees and coordinates working groups focused on three broad areas: research, clinical issues, and disability compensation.

Also in 1994, President Clinton signed a bill allowing compensation for veterans suffering from undiagnosed illnesses. (PL103-446). Under traditional VA disability compensation programs, veterans receive compensation for diagnosed disabilities connected to their service. For the first time, VA will compensate veterans who are disabled even if their illnesses are not fully diagnosed. VA reports it has approved 19,237 compensation claims of Gulf War veterans for service injuries or illnesses of all kinds, including 742 claims in which the veteran asserts the cause was an environmental hazard, plus 212 claims approved under the new provision.

DOD instituted the Comprehensive Clinical Evaluation Program in June 1994 to provide in-depth medical evaluation to all eligible beneficiaries who are experiencing illnesses following service in the Gulf War. DOD's August report on over 10,000 participants indicates that, rather than a new or unique illness or syndrome, affected veterans are suffering from multiple illnesses with overlapping symptoms.

Also in June 1994, DOD began to release some previously classified documents related to the Gulf War, in hopes of providing data to help answer questions and concerns about chemical and biological agents. By the end of 1995, DOD also says it will have the capability to match the wartime location of individual service members with possible detection of chemical or biological weapons.

In August 1994, a National Institute of Health Technology Assessment Workshop Panel reported that the complex biological, chemical, physical, and psychological environment of the Gulf War appears to have produced complex adverse health effects.

In 1995, DOD established a Specialized Care Center in Washington, D.C., which provides care for individuals who need additional testing or treatment after completing comprehensive medical examinations. DOD has a second specialized care center in San Antonio, TX, prepared to open should the need arise. Also in 1995, VA opened an additional Persian Gulf referral center in Birmingham, AL--this in addition to the centers located at VA medical centers in Washington, D.C., Houston, TX, and Los Angeles, CA.

DOD and VA have set up toll-free telephone hotlines to assist those who served in the Gulf War. DOD operates two hotlines: one for all military and civilian members who wish to report details first-hand of incidents they believe could have led to a medical problem they or others have experienced relating to their service in the region. DOD also operates a separate toll-free hotline for active duty military and eligible family members to call to register for medical examination and treatment. Since February 1995, VA has operated a similar hotline for those who have left active service. Both departments also publish and disseminate newsletters and other informational materials.

At Congressional request, the Centers for Disease Control and Prevention is conducting a health survey of Gulf War veterans from Iowa, comparing a random selection of those who served in the Gulf War with a random selection of those who served elsewhere during the same period. This study includes a detailed assessment of veterans' health concerns as well as those of their families.

Currently, DOD and VA fund more than 30 research projects to try to determine the causes of Gulf War veterans' illnesses. The studies include epidemiological investigations, environmental hazards research, psychological and neurological studies, studies of the effects of the anti-nerve gas drug pyridostigmine bromide, research on the tropical disease leishmaniasis, and research on the effects of exposure to depleted uranium. In 1995, VA and DOD are spending $8-13 million on new research, including enhanced epidemiological research, research on drugs and vaccines, medical evaluations of spouses and children, and research to improve treatment for Gulf War veterans.

THE ADVISORY COMMITTEE'S WORK

In addition to reviewing these efforts, the Advisory Committee will review the government's implementation of recommendations made by other private and public studies--e.g., including--but not limited to--the work of two committees of the Institute of Medicine, National Academy of Sciences and the congressional Office of Technology Assessment.

All meetings of the full Advisory Committee are open to the public and will be announced in the *Federal Register* at least 15 days prior to the meeting. Transcripts of these meetings will be available at the Committee's offices for viewing approximately two weeks following each meeting. In the near future, electronic access via the Internet will be available as well.

The Advisory Committee's office is located at 1411 K Street, NW, Suite 1000, Washington, DC, 20005-3404. The phone number is 202/761-0066 and the fax number is 202/761-0310.

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THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release May 26, 1995

PRESIDENT APPOINTS ADVISORY COMMITTEE

ON GULF WAR VETERANS' ILLNESSES

President Clinton today signed an Executive Order establishing the Presidential Advisory Committee on Gulf War Veterans' Illnesses and announced the appointment of its chairperson and members. The 12 members include scientists, health care professionals, veterans, and policy experts.

"This independent Advisory Committee will help ensure that we are doing everything possible to determine the causes of the illnesses being reported by Gulf War veterans and to provide effective medical care to those who are ill," the President said. "Its members have real expertise in all of the areas relevant to Gulf War veterans' illnesses, including research, diagnosis and treatment."

The Committee is to review and provide recommendations on the full range of government activities relating to Gulf War veterans' illnesses. It will report to the President through the Secretaries of Defense, Veterans Affairs, and Health and Human Services. The Committee will provide an interim report within six months of its first meeting and a final report by no later than December 31, 1996.

The chairperson of the Advisory Committee is Joyce Lashof, M.D., former Dean and Professor Emerita of the School of Public Health at the University of California at Berkeley. Dr. Lashof was Assistant Director of the Office of Technology Assessment from 1978-81 and Deputy Assistant Secretary for Health Programs and Deputy Assistant Secretary for Population Affairs at the Department of Health, Education, and Welfare from 1977-78. She served as President of the American Public Health Association in 1991-92.

The members include:

John Baldeschwieler, Ph.D., is Professor of Chemistry and former Chair of the Division of Chemistry and Chemical Engineering at the California Institute of Technology. From 1971-73, Dr. Baldeschwieler served as Deputy Director of the White House Office of Science and Technology Policy. He is an

expert on national security issues, having served on numerous scholarly panels, commissions and committees.

Arthur Caplan, Ph.D., is Director of the Center for Bioethics at the University of Pennsylvania. Dr. Caplan was Director of the Center for Biomedical Ethics and Professor of Philosophy and Professor of Surgery at the University of Minnesota from 1987-94. He is an authority on ethics and medicine, and serves as the first President of the American Association of Bioethics.

Adm. Donald Custis, M.D., is the Senior Medical Advisor to the Health Policy Department of the Paralyzed Veterans of America. From 1980-84, he served as Chief Medical Director for the Veterans Administration, having joined VA in 1976. During his career, he served as Commanding Officer of the Naval Combat Hospital in Danang, Vietnam (1969), followed by command of the National Naval Medical Center in Bethesda, Maryland. He retired in 1976 as the U.S. Navy Surgeon General with the rank of Vice Admiral.

Gen. Frederick M. Franks, Jr. is a Vietnam and Gulf War veteran. From 1991-94, Gen. Franks was Commander of the Training and Doctrine Command. He served as the Commanding General of VII Corps, U.S. Army Europe, from 1989-91 and as VII Corps Commander during Operation Desert Shield and Desert Storm in 1990-91. During the Vietnam War, he served as S3, 2nd Squadron, 11th Army Cavalry, where he was wounded in action. He retired in 1994.

David A. Hamburg, M.D., is President of the Carnegie Corporation. Dr. Hamburg was President of the Institute of Medicine, National Academy of Sciences, from 1975-80 and Director of the Division of Health Policy Research and Education and John D. MacArthur Professor of Health Policy at Harvard University from 1980-82. He served as President, then Chairman of the Board, of the American Association for the Advancement of Science, between 1984-86.

James A. Johnson is Chairman and Chief Executive Officer of the Federal National Mortgage Association in Washington, DC. Mr. Johnson was a managing director at Lehman Brothers from 1985-90 and Executive Assistant to Vice President Walter Mondale from 1977-81. He is Chairman of the Board of Trustees of the Brookings Institution and also serves on the Boards of the Carnegie Endowment for International Peace and the Carnegie Corporation.

Capt. Marguerite Knox, M.N., R.N.C., C.C.R.N., is a Clinical Assistant Professor at the College of Nursing of the University of South Carolina in Columbia. As a member of the U.S. Army Nurse Corps, Capt. Knox was stationed with the 251st evacuation hospital at King Khalid Military City during Operation Desert

Shield and Desert Storm. From 1988-93, she was a Special Nurse, Peripheral Vascular Lab at the William Jennings Bryan Dorn Veterans Hospital in Columbia, South Carolina. She is a member of the South Carolina Army National Guard.

Philip Landrigan, M.D., is Director of the Division of Environmental and Occupational Medicine at the Mount Sinai School of Medicine in New York. Dr. Landrigan is an expert on toxic environmental and occupational exposures, and is Editor-in-Chief of the American Journal of Industrial Medicine and former Editor-in-Chief of Environmental Research. In 1988, he served as Chair of the science committee that reviewed the health effects of Agent Orange for the American Legion. Dr. Landrigan served as an Epidemic Intelligence Officer and then as a medical epidemiologist with the Centers for Disease Control and Prevention from 1970-85.

Elaine L. Larson, Ph.D., R.N., F.A.A.N., C.I.C., is Dean of the Georgetown University School of Nursing. Dr. Larson was Professor and Nutting Chair in Clinical Nursing at the Johns Hopkins University School of Nursing and Director of the School's Center for Nursing Research from 1985-92. She is a member of the Health Sciences Policy Board of the Institute of Medicine, National Academy of Sciences, and is a Trustee of the Research Foundation of the Association of Practitioners in Infection Control. She has been a consultant in infection prevention in the U.S., Kuwait, Singapore, South America, Australia, Ghana and Europe.

Rolando Rios is a public interest attorney in private practice in San Antonio, Texas. From 1969-72, Mr. Rios served in the U.S. Army. He earned the rank of First Lieutenant and was disabled while serving at Cam Ranh Bay during the Vietnam War.

Andrea Kidd Taylor, Dr.P.H., is an industrial hygienist and occupational health policy consultant for the International Union, United Automobile, Aerospace and Agricultural Implement Workers of America (UAW) in Detroit, Michigan. Dr. Taylor is a health representative on the National Advisory Committee for Occupational Safety and Health. From 1984-89, she was an industrial hygiene consultant for the Maryland Committee on Occupational Safety and Health.

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THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release March 6, 1995

REMARKS BY THE PRESIDENT
AT VFW MID-WINTER CONFERENCE

Sheraton Washington
Washington, D.C.

11:00 A.M. EST

THE PRESIDENT: Thank you very much, Commander Kent, for that introduction. Ladies and gentlemen, I can tell you from firsthand experience that the VFW is very lucky to have a leader as forceful and as thoughtful as Gunner Kent.

I also want to acknowledge the presence here of Secretary Brown and Deputy Secretary Gober, General Sullivan, your Adjutant General Larry Rivers, Charles Durning, who rode over here with me and regaled me with experiences. How lucky we are to have him going out and setting an example, visiting our hospitalized veterans all across the United States. And I appreciate the reception you gave him. (Applause.)

I want to recognize the president of your Ladies Auxiliary, Helen Harsh. I also want to recognize these young people over here from the Voice of Democracy contest, the winners there. I'm glad to see them. (Applause.)

I thank you for your support of the young people of this country and for this project. I very much enjoyed having my picture taken with the young people just before we came out and I got to shake hands with all of them. And they took about 10 years off my life, so I feel pretty spry standing up here. (Laughter.)

I want to thank whoever organized this for putting the delegates from my home state of Arkansas here close where I can keep an eye on them during my speech. (Laughter.) And they were all pretty well-behaved when I walked out. I was glad to see that. Thank you very much, ladies and gentlemen.

I want to recognize two veterans of the VFW -- Jimmy Gates of Alabama, who has given more than 50 years of service to this organization; and your past national commander, Bob Merrill of California. People like Bob Merrill, who piloted biplanes in World War I and devoted their lives to fighting for their fellow veterans, who have helped the VFW to make a difference in the lives of so many Americans -- those are the kinds of people that I think that we ought to keep in mind when we make the decisions that are being made here in Washington about what is in the interest of the veterans of the United States.

It also gives me great pleasure to tell you that just as soon as it comes across my desk, I will sign the bill that will allow the VFW to reform its charter and expand your membership even further. (Applause.)

This year, we mark the 50th anniversary of the end of World War II. Many of you fought in that great struggle. Meeting some of the men and women who sacrificed so much for our freedom,

whether I met them on the windswept beaches of Normandy, between the crowded rows of the cemetery in England or Italy, or inside the tunnels of the rock of Corregidor in the Philippines, meeting those people has been one of the greatest privileges I've had as President. America owes to them and to all of you a debt that we cannot fully repay.

With their lives before them, the World War II veterans left everything -- families, loved ones, home -- to fight for a just cause. From the Aleutians to Okinawa, from the Mediterranean to the North Sea, they watched so many of their friends fall. We lost more than 400,000, and 700,000 more were wounded. But still, our veterans never faltered. They gave everything so that future generations of Americans might be free. And we are all profoundly grateful.

But to honor their deeds and those of all the veterans who fought for freedom in World War I, Korea, Vietnam, the Persian Gulf and all around the world in between, gratitude and ceremonies are not enough. We must protect the benefits you have earned, address fully the dangers imposed by modern warfare, and preserve what you fought for: the American Dream at home and our leadership around the world.

I've said a lot in other places about preserving the American Dream at home in this new global economy, and I won't talk a lot about it today, except just to say that it is going to be a constant struggle for us to make sure that in the next century every American has the chance to get a good education, to have a good job, to do better than their parents, to pass along the values of opportunity to their children. And I'll be saying more about that in other places. Today, I want to talk a little about the tradition of America's leadership because that tradition is under siege.

If the new isolationists in our nation have their way, America would abandon policies backed by Republicans and Democrats that have guided us for half a century -- policies that won the Cold War and that won us unparalleled prosperity here at home.

I know that at this time we have to spend more attention and more energy and more investment on the problems we have at home. And, goodness knows, that's what I have been working to do for the last two years. But there are those who would back away from any of our commitments abroad; they would back away from institutions like the United Nations, which promotes stability around the world. They would have us give up our support for peacekeeping and for fragile democracies; support which enables others to share the burden with us, and which undermines the risks that we have to bear and makes us safer. They would cut deeply into our support for emerging market democracies. Even some would put our efforts to make peace in the Middle East on the chopping block.

Now, no one knows better than the veterans the grave dangers of simply withdrawing from the world. The last time isolationism held sway during the years after World War I, Europe and Asia slid into catastrophe, and we had to fight a second world war because we walked away from the world at the end of the first world war. Now, those of you in this room, whenever you served, wherever you served, you know what could happen if we retreat from today's turbulent world.

Yes, it is true that the Cold War is over, that the nuclear threat is receding. And I'm going to do everything I can to push it back even further this year, with a whole series of ambitious and aggressive efforts to push back the nuclear threat. Yes, nations on every continent -- (applause) -- yes, nations on every continent are embracing democracy and free markets. But open societies and free people still face many enemies. You know it as well as I do. The proliferation of other kinds of weapons of mass destruction;

aggression by terrorists, by rogue states; threats that go across national lines, like overpopulation and environmental devastation, drug-trafficking and other organized crime activities; terrible ethnic conflicts; and as we've seen recently in Mexico, just the difficulties that poor nations are going to face when they try to embrace democracy and free-market economics and relate well to the rest of the world.

Now, we cannot intervene everywhere; we can't be involved in solving all these problems. We shouldn't be. But we must be able to protect our own vital interests. And we must be able to work with other countries through multinational organizations to keep the world moving in the right direction. It is not an automatic; it is not given that 20 and 30 and 50 years from now we'll have more democracy, more prosperity, more peace and less danger. It is not an accident; we have to keep working for it.

Just think about the recent history. Consider what might have happened in the last two years alone if we had abandoned our responsibilities. If we hadn't pushed for expanding trade, trade wars could have erupted without our leadership on the GATT World Trade Agreement, which will open great new markets to America, generate hundreds of thousands of jobs, but also give people all around the world a chance to work together in peace.

Think what would have happened if we had not moved to try to help stem this crisis in Mexico; what could have happened on our borders in terms of an increase in illegal immigration and reduced ability to continue to fight the drug-trafficking that we fight every single week.

Think what might have happened if we hadn't stood up in Haiti for democracy and against the military dictators. We could have had thousands and thousands more immigrants at our borders -- people with no place to go because they couldn't stay home, living under oppression. Peace might not even have caught a foothold in the Middle East if we hadn't had the constant political and economic support there for the parties in the Middle East.

These events and others prove the timeless wisdom of the words Franklin Roosevelt set down in the last speech he wrote, when he said, "We have learned in the agony of war that great power involves great responsibility." President Roosevelt observed, "We as Americans do not choose to deny our responsibility, nor do we intend to abandon our determination that within the lives of our children and our children's children, there will not be a third world war. (Applause.)

Your devotion and the service of millions and millions of other veterans has helped to prevent that war and helped to bring an end to the Cold War. You helped to stop the spread of communist tyranny across the globe. You helped democracy and prosperity to grow for our allies in Europe and beyond. And when dictators raised their heads, you stood up and you stopped them.

We must be clear about this: In the understandable desire of millions of Americans to look first to our problems at home which are real, your legacy is being threatened -- a half a century of American leadership that you worked for and that you fought for. At all costs, we must preserve America's leadership so that our children can have the future they deserve. We simply cannot be strong at home unless we are also strong abroad. There is no dividing line in this global economy. There is no dividing line when terrorism and ethnic conflicts and economic problems and organized crime and drug trafficking spread across national lines. There is no place to walk away from.

As Commander in Chief, I have done everything in my power to protect and build on the legacy that you have left your country; to make certain that our country moves into the next century still the strongest nation in the world, still the greatest force for freedom and democracy. And that's exactly what we have to keep doing. (Applause.)

We will meet that goal only if first we protect and strengthen the armed forces. More than anything else, our armed forces guarantee our security and our global influence. They're the backbone of our diplomacy. They ensure our credibility.

Just take, for example, the Persian Gulf. Last year, where are troops deployed swiftly and convinced Saddam Hussein not to make the same mistake twice -- we would not have been able to do that had it not been for the lessons we learned from the Gulf War, the pre-positioning of our equipment, our continued efforts to be able to move our troops quickly and rapidly around the world wherever they needed to be.

Take Haiti, for example, when the news that our forces were poised to invade convinced the generals that they had to go. If it hadn't been for the military, for the year of planning for the most truly jointly planned military operation in American history, and for the planes in the air, it would not have happened. Or in the last few weeks, when our troops showed such great professionalism in transferring Cuban refugees from Panama to Guantanamo, and covering the safe withdrawal of United Nations peacekeepers from Somalia.

Time and again, the American military has demonstrated its extraordinary skills. As I pledged from the beginning of our administration, the United States will have the best-equipped, best-trained, best-prepared military in the world. We are keeping that promise every day. (Applause.)

Our forces are ready to fight. But to maintain that high state of readiness and to keep our military strong, I have asked the Congress to increase defense funding by $25 billion spread over the next six years. We have fewer troops today, and yet, we ask them to perform more and more different missions than ever before. So our combat pilots must fly as often as they need to fly to be properly trained. Our sailors must get the hands-on experience they deserve. Our ground forces must train so they can be at peak levels. And we also have to deal with the strains that all of these different missions put on the people who are in uniform today.

So some of this money will be used to raise military pay and to provide better housing and child care for those who serve and the families who stand by them. (Applause.) We simply must improve the quality of life in the military if we want to continue to draw educated and motivated Americans who can be trained into the high professionalism that we have sometimes come almost to take for granted from the American military.

Our men and women in uniform, some of them your sons and daughters, are clearly the finest fighting force in the world. And we must all be determined to keep them that way. (Applause.)

We must also recognize another simple truth: The troops of tomorrow will only be as good as our commitment to veterans today. The people in uniform look to us to see how we relate to you. Long after you have shed your uniforms, not just for a few months or a few years, but for your entire lives, our nation must meet its solemn obligations to you for the service you gave. (Applause.)

When I sought this office, I vowed to fight for the interests of our country's veterans, and our administration has kept that pledge. The White House doors have been open to veterans as

never before. Ask Commander Kent, who came to visit me recently, to discuss the case for protecting your benefits. We have consistently looked to veterans to help shape our policy for veterans. Much of your influence is due to the outstanding work of Secretary Jesse Brown. I thank him for that. (Applause.)

We've protected veterans' preference for federal jobs when your national commander wrote us last year and said it was in danger. When interest rates fell, we reached out to veterans all around America to tell you about opportunities to refinance homes bought under the G.I. Bill. We made sure that military retirees received their full cost of living adjustments when Congress approved them six months later than for civilian retirees. (Applause.)

And, of course, we have worked to improve health care for veterans. We expanded long-term care programs and established comprehensive care centers for women veterans. And we're working to process claims faster so that you can get the benefits you're owed.

Last year, we sent to Congress the only health plan that would have expanded your choices of health care, improved veterans health facilities and given those facilities the flexibility to serve you better. We have confronted head on the long-neglected problem of Agent Orange. We have reached out to 40,000 veterans who were exposed to Agent Orange and told them about expanded benefits now available to them. We made certain that when a U.S. delegation visited Hanoi, representatives of the VFW and other veterans groups were there to discuss the painful issues of MIAs. And we have continued to press for the fullest possible accounting for those lost while serving our nation. (Applause.)

Our administration has brought the voices of veterans to the highest councils of government, protected your interests when they've been threatened, and worked hard every day to improve the services you receive. We have done this even as we have cut the federal deficit by more than $600 billion; shrunk the federal government faster than at any time in modern history.

In the last two years we have cut more than 150,000 positions from the federal bureaucracy. We have cut spending in more than 300 federal programs. And this year, while we cut the budget of almost every federal agency, we still are able to say we are going to the mat for America's future and America's obligations to the past -- for Head Start for our children; for the school lunch program; for nutrition for pregnant women and their children; for immunizing kids in their early years; for programs for young people who don't go to college, but do need good training to get good jobs; for more affordable loans for middle-class young people; for 100,000 new police on our streets; for military readiness; and, yes, for better health care for America's veterans. (Applause.)

Our administration is pushing for $1.3 billion more for the Department of Veterans Affairs over the next five years -- $1 billion of that to the veterans health care system. (Applause.) That means care for 43,000 more veterans, two new hospitals, three new nursing homes, and other major improvements.

Sadly, some in Congress see that the need to improve your health care services is not very important. Indeed, legislation approved by the House Appropriations Committee just last week, if passed by the Congress, will cut very deeply. They seek to eliminate more than $200 million for veterans health, including money for veterans' outpatient clinics and millions of dollars for new medical equipment for veterans health services. And their cuts would also abolish a successful Department of Labor program that reintegrates homeless veterans by providing them with temporary housing, and would help with job training and job placement.

Now, I believe these cuts are unwise and unnecessary. They would harm the veterans who need their nation's help the most. I pledge to you today that I will fight for those interests and for you every step of the way. (Applause.)

But we need your help. You have to speak up. You have to speak out. Only your voices will make it clear. Caring for veterans is not a national option or a partisan program. It is a national tradition and a national duty. (Applause.)

Let me say again that fulfilling that duty means more than just meeting the promises of the past. It also means today making every effort we can to respond to the needs of today's soldiers.

Michael Sills of Villa Park, Illinois, is one of those soldiers. He's 34 years old, a veteran of America's victory in the Persian Gulf. He has a disabling illness. But neither he nor his doctors know how he got it. There are thousands of veterans like Michael Sills, thousands who served their country in the Gulf War and came home to find themselves ill. And neither they nor their doctors know how they got it.

Even though in so many of these cases we do not know the causes of their symptoms, we know their problems are real and cannot be ignored while we wait for science to provide all the answers. And that's why last year I supported and signed landmark legislation that for the first time in our history pays benefits to disabled veterans with undiagnosed illnesses that have not been scientifically linked to their military service, when we know good and well that's what happened. (Applause.)

Two weeks ago I met with Michael Sills, one of the first veterans to get benefits under this new law. I sat with him in the Oval Office for several minutes as I listened to his description of what happened to him and how he began to get sick and what the symptoms were and how it had affected his family. And then I listened to his plans about how he wanted to get on with his life. And I did my best to assure him that we will keep looking for the answers that he and his comrades deserve.

In the past few weeks, the First Lady has visited Gulf War veterans at Walter Reed and the Washington V.A. Medical Center. Some of them are here today. She met with Gunner Kent and Bob Currieo of the VFW and other groups to discuss these illnesses and what must be done.

When she was working on health care over the last two years, she kept getting letters from people all across America, saying, "Mrs. Clinton, please look into this, there's something wrong here. I love my country. I wouldn't fake an illness. I don't want anything I'm not entitled to." We've read and reread so many of these letters from veterans -- the accounts of the unexplained illnesses, of the breathing problems, of the joint and muscle pain, of the persistent headaches, of the memory loss. We received a letter from Dylan and Theresa Callahan, of Hampton, New Hampshire, who referred to Dylan's undiagnosed illness as the -- quote -- "never-ending nightmare," and added simply, "our lives may be in your hands."

From the beginning of our administration, we have listened to these veterans' messages. Working together with Democrats and Republicans in Congress, we determined the treatment for these veterans couldn't be delayed as it was for Vietnam veterans who were exposed to Agent Orange. That's why we moved to provide medical care and to compensate fully and fairly these Gulf veterans while making every effort to find the answers.

Today, as a result of these actions, Gulf War veterans are receiving comprehensive exams, and treatment at V.A. and DOD medical facilities. Those on active duty receive specialized care in military hospitals. V.A. and DOD have opened specialized care centers that focus on veterans who are especially difficult to diagnose. Tens of thousands of Gulf veterans have received free physical exams, and those who are ill are getting free medical care. V.A. and DOD have registered more than 55,000 Gulf veterans with health concerns to help avoid the kinds of problems that delayed care and compensation for those exposed to Agent Orange.

We've enlisted some of our finest scientists and more than 30 research projects aimed at determining the causes of these veterans' illnesses. Research topics include the possible impact of oil fires and diseases common in the Gulf area. The Defense Department is declassifying all documents related to the possible causes of these illnesses. And both V.A. and DOD have set up toll-free hotlines to provide Persian Gulf veterans easy access to information about care.

Still, with all this, I believe we must do more. That is why I am announcing today the creation of a presidential advisory committee to review and make recommendations to me regarding government efforts aimed at finding the causes and improving the care available to Gulf War veterans. (Applause.)

This committee will be made up of scientists, doctors, veterans and other distinguished citizens. It will work closely with the Secretaries of Veterans Affairs, Defense and Health and Human Services, and report through them to me. In the year ahead, we will also step up our treatment efforts and launch new research initiatives. The Departments of Veterans Affairs, Defense and Health and Human Services will spend up to $13 million on new research. Projects will examine the possible causes of Gulf veterans' illnesses, including the potential effects of pesticides and other environmental toxins, antitank ammunition, containing depleted uranium, and drugs used to protect against chemical and biological weapons.

V.A. will begin to survey 30,000 veterans and active duty personnel to learn more about the frequency and nature of Persian Gulf illnesses. The study will also examine whether illnesses have been transmitted to spouses and to children. Data including information regarding cancers and other serious illnesses among Gulf War veterans will continue to be made more accessible to the public. And the Defense Department will strengthen future training for troops on the risks of toxic exposure, and will follow up and document information about troops when they return from their service.

We must listen to what the veterans are telling us and respond to their concerns. Just as we relied on these men and women to fight for our country, they must now be able to rely on us to try to determine what happened to them in the Gulf and to help restore them to full health. We will leave not stone unturned. (Applause.) And we will not stop until we have done everything we possibly can who, like so many veterans throughout our history, have sacrificed so much for the United States and our freedom.

Last month at the Iwo Jima commemoration, we heard two Latin words repeated again and again: Semper Fidelis -- always faithful. The Marines' noble motto is one which serves well for a great branch of our military service, but also for our whole nation. Being faithful to one another and faithful to our traditions -- these are tied together. Being true to our tradition of leadership in the world means reaching out across the oceans to support democracy and freedom and all the benefits they bring back home to us. Being faithful to one another requires us to keep faith with our veterans as we keep faith with our future.

You know better than anyone what these bonds of reliance are. As Dan Pollock, an Iwo Jima veteran and a member of the VFW, recalled just last month -- and I quote his words -- "You never had to watch your back," he said, "because in the midst of terrible battle, you belong to" what he called, "a band of brothers." Whether it's five decades later for the World War II veterans or just four years later for the Gulf War veterans, you should know that your nation will never forget your service and will always -- always -- need your support for America's strength and leadership.

As long as I am President, the sacred tradition of protecting our veterans will continue and a strong America will march forward. You put your faith in America. America will continue to keep faith with you.

Thank you and God bless you. (Applause.)

END 11:29 A.M. EST