By Thomas G. Whittle & Linda Amato

DEsert Storm Blows Back With A Fury

As another Middle East conflict dies down, veterans and doctors say the previous round's biowarfare casualties remain mysteriously ignored.
Janyce raised him with a loving heart, swelling her feelings about his problems. With only one in 28 babies in America born with some type of physical defect, odds were that their next child would be healthy. But when daughter Helen entered the world in 1997, she was multiply disabled. Asia, then 3, remained unable to talk and had trouble using his hands. Janyce loved ones.

Compounding the situation, Arvid also suffered from debilitating ailments. His symptoms had first appeared during the Persian Gulf War, while serving at the 305th Military Police Prisoner of War Camp near Hafir Al Batin in Saudi Arabia. The day he arrived there in 1986, chemical weapon alarms sounded as Scud missiles rained. By the end of his Gulf tour, Arvid's ailments included rashes, diarrhea, headaches, nausea, and vomiting. And as bad as that was, his condition deteriorated further after returning to Michigan.

“Janyce, healthy prior to marrying Arvid, developed serious physical problems similar to her husband’s. “Chemicals are not innocuous,” she said, drawing her own conclusion that biological toxins to which Arvid was exposed in the Persian Gulf must have been transmitted to her.”

Her belief was born out, among other indications, medical tests that showed all four family members had leishmaniasis, a sometimes fatal disease normally spread by sand flies in the Persian Gulf and other desert regions — one of the contagious illnesses afflicting veterans who served in the Gulf War.
Evidence of Physical Injury

In 1997, Avind Brown lost his job, physically unable to meet his employer’s standards. And he could not find a doctor able to explain his condition—or his family’s. As more and more Gulf veterans stepped forward with similar reports, Brown realized that he had contracted something communicable—a form of what he has come to see as Gulf War Illness—and passed it on unwittingly to his family.

While bureaucrats wafted about the mounting evidence of illness and doctors “studied” the matter, veterans’ problems only intensified.

In 1998, when Avind and Jeanice Brown went outside the VA system to a private clinic and all four family members tested positive for leishmaniasis, they knew they had found at least part of the answer.

Forms of leishmania—the group of parasitic microorganisms that cause the illness—were apparently suspected by UN inspectors to be in Saddam’s inventory.

Yet, to this day, more than a dozen years after Desert Storm, Avind and many other veterans have been unable to obtain adequate medical assistance for symptoms caused by biological means, including possible biological warfare agents, or by chemical agents and toxins, despite evidence of physical damage.

Studies documenting physical injury include those conducted by researchers at the University of Texas Southwestern Medical Center at Dallas, headed by Robert Haley and his team. Halsen showed conclusively that sick Gulf veterans sustained brain damage. Corresponding with the research, they subsequently found that Gulf veterans complaining of dizziness also experienced brain damage.

A Bona Fide Crisis

Today, the private appraisals of ill veterans, long suffering in hospitals and at home, contrast with what had appeared in 1991 to be a rapid victory, billed by Defense Department spokespersons as the least costly of all wars in terms of American lives. Of the 696,778 U.S. troops in the 1990-1991 Operation Desert Shield (the build-up of Persian Gulf forces beginning in August 1990) and Desert Storm (the air war against Iraq from January to February 1991, culminating in the 100-hour ground assault), 148 were killed in action and 235 died from other causes, such as accidents.

In the years after, however, the price rose. In 1999, 206,851—29 percent of those who served—filed for VA disability compensation as of May 2002. CNN has since reported the figure climbing to 209,000, with 160,000 receiving disability payments. Meanwhile, veterans’ advocates have claimed that Gulf War deaths have steadily mounted.

Documents Freedom obtained from the VA showed that as of December 1997—the most recent data provided—4,506 Gulf veterans had died. However, the Gulf War Veterans Information System website, administered by the VA, revealed that as of May 2002—the most current data—that number had risen to 8,037. The latter figure constitutes 1.15 percent of the 696,778 deployed to the Gulf—nearly double the 0.69 percent death rate among Gulf War-era veterans who were not sent there.

“This is a bona fide crisis,” said Garth Nicolson. “We’re not moving fast enough to care for those already affected, he said, yet even more Americans are now in the region where they, too, are in harm’s way.”

More Deaths Predicted

A startling as the official tally may be, many think the actual toll is even higher. Nicolson believes tens of thousands of Gulf veterans have died, based on a confidential estimate of 28,000 deaths he said he received several years ago from a senior Defense Department official.

Royce Riley, an Air Force captain and flight nurse during the Gulf War who has tracked veterans and their health problems ever since, told Freedom that a source within the VA informed him that 40,000 Gulf War veterans had died—a figure contested by the VA when asked by Freedom. Riley also believes up to 400,000 Gulf veterans are now ill. And she stands by her figures. The 40,000 deaths estimate, she said, came from a national-level VA official. She predicts that unrelenting successful treatments are imminent, the bill will continue to rise. “Given the fact that there are now 400,000 sick,” she said, “in 10 years’ time I would say (there will be) 80,000 to 300,000 deaths.” (See “Desert Storm: Deadlier than Vietnam?”, page 9.)

In a January 2002 hearing before the U.S. House of Representatives’ Veterans’ Affairs Committee, Representative Bob Filner (D-CA) warned that it was “absolutely vital that we figure out what happened in the Persian Gulf War, [and] treat those who are suffering from illness. … As we all well know, there is a high probability that our troops will be in the area again.”

In an investigation that stretches back to when reports of Gulf War Illness first surfaced, Freedom interviewed scores of informed sources who echoed his concern that something must be done.

“The Iraqi Curse”

In addition to the thousands of deaths and hundreds of thousands of disability applications from among U.S. veterans and women of other nations who served in the Gulf have also experienced severe health problems.

In Great Britain, for example, Gulf veterans suffer from lymphatic cancer at nearly twice the normal rate of men of similar age. In Denmark, 40 percent of the troops that served in the Gulf War are said to have Gulf War syndrome. And in southern Iraq, the focus of Desert Storm operations, both cancer and birth defects reportedly rose sharply after the Gulf War—the former more than doubling and the latter surged nearly three times. Dean Alim A.H. Yacob of Bara Medical College said, “You have to look at what you call the Gulf War Syndrome. Here we call it the Iraqi curse.” Nonetheless, biological causes of symp-

A MOUNTING DEATH TOLL: RECALCULATING THE “LEASE COSTLY WAR”

Since then, however, Gulf veterans’ deaths have surged far beyond that of other wars. And projections for the next decade paint an even grimmer picture.

1991 Gulf War deaths, official total ..................................................383
1997 VA-reported Gulf veteran deaths .............................................4,506
2002 VA-reported Gulf veteran deaths ............................................10,324

Includes 8,013 from those in the conflict itself and 2,311 from those in the theater.

Unofficial estimate .................................................................40,000
Estimate provided by a VA source to former LUS. Air Force Captain and flight nurse Joyce Riley

2013 Projected Gulf veteran deaths ...........................................80,000-100,000

The projected death toll of 80,000-100,000 compares to an estimated 30,017 deaths projected over a 20-year span (2016-2035) in a similar group of Americans not sent to the Persian Gulf, according to demographics from the National Vital Statistics Report. (See “Desert Storm: Deadlier than Vietnam?”, page 9.)

2013 Gulf veteran deaths, official total ........................................80,000-100,000

The most recent data includes 8,013 from those in the conflict itself and 2,311 from those in the theater.
ON THE TRAIL OF TOXIC TERROR

Included in the assortment of biological weapons used by Iraq during the 1980-1988 Iran-Iraq War were a variety of mobile bioweapons delivery systems and agents. Among these were aerosol sprayers, used to deliver a range of biological agents to targets. The Iraqi forces had acquired these sprayers from various sources, including American firms. The sprayers were compact and mobile, allowing the Iraqis to effectively target enemy forces and civilian populations. The agents used by the Iraqis included aflatoxin, known to cause cancer, and various toxins that could cause birth defects and other health issues.

Those who served in the Gulf War know the cause is not a mental quirk. In fact, signs of a biological source or sources have increasingly emerged — including evidence that Gulf War Illness has spread from veterans to their families.

**“Something Happened Out There”**

During Desert Storm, Major Lisa Porter commanded the 410th Transportation Company, a petroleum resupply unit whose vehicles ranged through Saudi Arabia, Iraq and Kuwait. She told Freedom of uncommon experiences, such as a flock of roughly 100 dead sheep observed by the side of an Iraqi road, with no outward sign of harm to the animals and no flies around the bodies. After returning to her home in Utah, Porter served as president of the Gulf War Veterans Association of Utah, and heard stories of maladies she described as “frightening.” In 1997, she testified before the Presidential Advisory Committee on Gulf War Veterans’ Illnesses, empowered by Bill Clinton to investigate causes and possible treatment.

“I know by personally talking to many veterans,” Porter told the committee, “that the symptoms range from rashes that won’t go away to loss of memory and confusion, to headaches, dizziness, fatigue, weakness where they cannot physically do the things they used to do, a couple of instances of tumors that have grown within their bodies. With one individual, it was massive blood vessels knotted and tangled. The doctors could not give an explanation of how that could occur.”

With another young veteran, she said, “three feet of his intestines died for no reason and began rotting inside his body and [were] removed surgically.” “Soldiers across America who love this great country went in good faith and good will to support and defend our family and our loved ones,” she stated.

“We supported and defended a country that we love. That type of good will and faith and support from your countrymen deserves and I think will give an explanation of how that could occur.” Major Porter told Freedom she has “a strong feeling that something happened out there” — and that “something was biological.”

That Galaxy Surely Did Exist

“Yes, God’s name have we come so far as an Army, to now be facing this kind of threat and this kind of peril? I need a solution and I need it now.”

Those words, attributed to a senior U.S. military commander on the eve of Operation Desert Storm, reportedly came in response to learning that allied forces poised to invade Iraq were vulnerable to cocktails of biological agents possessed by Saddam Hussein’s forces — lethal mixtures of toxins dispersed by sophisticated, highly mobile sprayers.

If changes made to Freedom are true, knowledge of these little-publicized sprayers may open the door to further answers regarding Gulf War Illness — and to aid for America’s veterans.

Porto for help by Major Porter and others were echoed before the Presidential Advisory Committee on Gulf War Veterans’ Illnesses by Colonel David Irvine, an attorney and former member of Utah’s state legislature. Today a brigadier general in the Army Reserve, Irvine urged the committee to investigate links between Iraqi chemical-biological warfare systems and subsequent illness of American veterans, and to interview an expert in this regard, Colonel Gerry Schumacher.

“During the build-up for Desert Storm, Colonel Schumacher was part of a classified Army team investigating the chemical and biological potential of the Iraqi forces,” Irvine informed the committee. “Colonel Schumacher has personal, firsthand knowledge and documentation of the Iraqi chemical and biological capability and the capability of their military forces to dispense those agents.”

Irvine and I have been neutralized by superior allied firepower. And if Scud missiles were launched, most of their toxic payload would be destroyed by heat when they exploded. Consequently, he said, the sprayers “were not worried about artillery.”

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According to records Schumacher has access to while on the project, as many as 52 sprayers had been shipped from Italy to Iraq while that nation was locked in its eight-year war with Iran.

Secret Operation Obtains Sprayers

Using a U.S. agricultural firm as a front, Schumacher’s SRI team endeavored to obtain a truck-mountable aerosol sprayer from the manufacturer prior to the launch of Desert Storm.

**Did the Iraqis intentionally target allied forces with bioweapons in Desert Storm?**

While that question remains unresolved, let’s examine some relevant evidence.

1. **IRAQI FORCES HAVE COMBINED CHEMICAL AND BIOLOGICAL WEAPONS, AS IN 1980, WHEN THEY MISTAKENLY KILLED A LARGE POPULATION IN A CHLORINE GAS ATTACK.**

2. **ACCORDING TO COLONEL GERRY SCHUMACHER, UP TO 52 MOBILE BIOWARFARE SPRAYERS WERE SHIPPED FROM ITALY TO IRAQ DURING THAT NATION’S 1980-1989 WAR WITH IRAN.** Biological toxins were shipped to Iran from American firms between 1985 and 1989; since the days of the Iran-Iraq War, Saddam’s inventory has allegedly included biological warfare sprayers. Two were shipped from Italy to Iraq during Desert Storm.

3. **IN 1990, USING A U.S. FIRM AS A COVER, COLONEL SCHUMACHER’S CH A K N T O B E IH O R D TO A HHONTED SPECIFICATIONS IN A S H O R N I A BIOWARFARE SPRAYERS TO THE ITALIAN MANUFACTURER, SEEKING TO OBTAIN ONE OF THE DEVICES.** After this effort failed, two sprayers were extracted from Iraq in a secret operation.

4. **JOURNALIST ETHAN GUTMANN TOLD FREEDOM THAT AROUND 15 SPRAYERS, HIDDEN BY THE RETREATING IRAQIS IN 1991, WERE REPORTEDLY SHIPPED FROM ITALIA.**

5. **FIVE OF IRAQ’S BIOWARFARE SPRAYERS, RECOVERED BY ALLIED FORCES IN D E S E R T STORM, TURNED UP ON BATTLE DAMAGE ASSESSMENT REPORTS.** Colonel Schumacher later sought to learn where the sprayers were located in relation to city and military sites, but was stonewalled.

6. **TODAY: DESPITE EVIDENCE OF IRAQI BIOWARFARE CAPABILITIES, AND THE TESTIMONY OF AMERICAN VETERANS, GOVERNMENT SPOKESPERSONS CONTINUE TO DENY BIOLOGICAL WARFARE EXPOSURE.**

**BIOWARFARE SPRAYERS Are They Still a Threat?**

Compact enough to be mounted on a pickup truck or speedboat, Italian-made biowarfare sprayers posed the greatest threat to allied forces during Desert Storm, according to Colonel Schumacher. Under weather and climate conditions that existed then in the area of combat operations, Schumacher told Freedom, “we would have had an exposure in excess of 180,000 troops if just one of these sprayers was turned on.”

He hopes no sprayers were used in Operation Iraqi Freedom. Although none have yet surfaced, Schumacher believes that due to their sensitive past, even if found their existence may remain buried.

One investigation led by U.S. Senator Donald W. Riegle Jr. (above right) revealed that American firms had shipped anthrax, botulinum and other biological toxins to

A research team headed by Robert Haley, M.D. (right), documented that sick Gulf War veterans sustained brain damage.

The manufacturer insisted that it didn’t make sprayers to the specifications requested. This was simply not true, Schumacher told Freedom, adding that the SRI team had access to dates of shipments to Iraq as well as the machines’ specifications — precise descriptions that they sought in the sprayer they ordered.

After the SRI team was unable to obtain a machine directly from the manufacturer, a secret operation, reportedly under the aegis of the CIA, extracted two sprayers from Iraq, with one brought to the Army’s Dugway Proving Ground in Utah, the other to SRI. There, according to Schumacher, his team worked intensively, their mission known only to a component within the CIA, developing 12 prototype detectors for biological agents and shipping them to Riyadh, Saudi Arabia, shortly before Desert Storm.

Designed to “sniff out” multiple agents, the sprayers on the Gulf War battlefield, said Officer A, were well justified. “Every organ ... Diagnosed”

“What Some of the Experts Say

Gulf War Illness

If you have a contagious disease that is brought back from a war and it’s slowly penetrating into the population, don’t you think that’s alarming?”

“Given the fact that there are now 400,000 sick, in 30 years’ time, I would say [there will be] 80,000 to 100,000 deaths.”

“I found [a Gulf veteran] in a psychiatric ward. No wonder he was upset. He had so many medical problems that he wasn’t being dealt with. They ignored his blood count and his internal bleeding. It was pathetic.”

“American Investigator.”

“Stonewalled in Every Direction”

The death of another young Army officer, Major Williams* — a member of the 1995 inventory detail — was pivotal in a series of events that caused Schumacher to believe that fears of the biological warfare capabilities of the Iraqis, aided by the sprayers on the Gulf War battlefield, were well justified.

Schumacher knew the young officer, who died in 1996 in California. “Every organ in his body was infected,” Schumacher said. “Liver, pancreas, stomach ...”

* In respect for the wishes of personnel on the detail and their families, real names are not used.

Something different had arisen in the American military, increasing alarm as the numbers grew. For nearly two years, Schumacher pursued avenues within the government, seeking to get information about the biological sprayers into the hands of those responsible for helping veterans that might have been exposed to pathogens.

Five of Iraq’s biological sprayers, recovered by allied forces after Desert Storm, turned up on battle damage assessment reports, according to Schumacher. Even if Saddam had never ordered the sprayers used, he said, aircraft strafing or other damage might have released their lethal contents into the atmosphere to poison allied forces that passed by.

“I wanted to know what the status of those five were,” he said. “Where were they in relationship to sick people?”

His simple question found no easy answer. “I was stonewalled in every direction,” he said. “When I began asking questions about where the sprayers were in relationship to the troops, that is when the answers didn’t exist. Nobody heard of the sprayers.”

Then, in July 1995, Williams, a member of the 1989 inventory detail — and who had later served on Schumacher’s staff — entered a hospital, seriously ill, and died there. He was 26. An analysis of the nine-page autopsy report found his physical condition to be “not unlike others that had Gulf War illness that progressed.”

Not long after Williams’ death, Colonel Innis talked with Schumacher by telephone, informing him that when Williams had served under his command, he had been part of the detail that inventoried equipment brought back from the Persian Gulf, and that a number of people had become sick.

As Schumacher watched evidence of illness mount, he wrestled over what to do. In late 1996, following his conversation with Irvine and believing he had no alternative if he wanted to help fellow soldiers now sick or dying, Schumacher took his information to the public, granting interviews to reporter Ethan Gutmann for use on the television program, “American Investigator.”

Gutmann, currently a visiting fellow at the Project for the New American Century, a nonprofit educational organization based in Washington, D.C., broke the story of the sprayers in late 1996 while chief investigator for NET, a conservative television network. In an interview with Freedom, Gutmann said he only moved forward with the story after the sprayers’ existence had been confirmed by other sources, including another member of the SRI project to develop real-time detectors.

Yes, he had informed Gutmann that approximately 15 sprayers, hidden by the retreating Iraqis, had been found by allied forces.

The fact that they were buried in the sand was interesting,” Gutmann said, “because it indicated that even they [the Iraqis] left lots of equipment just lying around, including these, something they did attempt to hide.”

Devy and Delay

Evidence pointing to chemical and biological warfare — and to communicable illness stemming from the Gulf War, when generated by sprayers or not — has long since warranted urgent attention. “If you have a contagious disease that is brought back from a war and it’s slowly penetrating into the population, don’t you think that’s alarming?” asked Garth Nicolson.

U.S. Representative Chris Shays (R-CT), vice chair of the House Committee on Government Reform, is among those who believe that government officials
A Family Battles for Survival

Did Bob Jones bring home a horrible curse

During the Gulf War, Bob Jones served with the 1st Armored Division in Saudi Arabia, Kuwait and Iraq. Soon after arriving in America, Jones' health, as well as his wife's, began to decline. A five-page memorandum, a copy of which was obtained by Freedom, said nothing.1

While they wanted it to be a mental prob-

"The question is," said Love, "what's in all of those documents?"2

"TheDeployment Health Support

"What Were They Doing with These Insect Cages?"

A research for funds for MFI treatments by outside specialists, according to Bob Jones, was turned down by the Army’s surgeon general, and their conditions worsened.

"I was in great pain," Deborah said. "I was bleeding from both ends. I begged them [a Walter Reed Medical Center team headed by psychiatrist Charles Engel]. I told them we were dying. They just looked at us and said nothing."

"It had to have been some kind of bug."

"Stop funds for projects when clinical efficacy data is not submitted," Murphy referred to a memo from Riley, who said, "There is a group of Gulf War veterans who do have very serious, debilitating illnesses which we have difficulty diagnosing... And, of course, if they’re difficult to diagnose, then, of course, they’re difficult to treat."

"We have wanted it to be a mental prob-

"I think it’s a mental problem, and in some cases it is, without recognizing that there’s a physical cause for that mental challenge," he said. Studies have shown physical changes in the brain common to Gulf War veterans, he said. "That’s not post-traumatic stress disorder. This is literally a change in the chemical makeup of the brain unique to Gulf War veterans who have serious physical symptoms..."

"It is literally a change in the chemical makeup of the brain..."

"Thank you for your answers, Dr. Leslie. I encountered what she condemned as a "stone wall or iron curtain erected by the VA Environmental Agents Service, the Deployment Health Support Directorate — regarding the Gulf War, many of them dealing with leishmaniasis. "The question is," said Love, "what’s in all of those documents?"

"In the interview with Offi

"My Life Basically Flipped Upside Down"

According to sources, leishmaniasis is much more prevalent among Gulf veterans than has been admitted by the Department — something Riley said discouraged him from talking to one of the department’s own doctors.

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"The Deployment Health Support

"Keep veterans’ claims lost in limbo for years until Gulf veterans develop crippling fatigue, dementia, die of disease, or die from suicide or accidents."

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problems escalated as vets fell into the clutches of the psychiatric industry. As is a routine failing in psychiatric diagnosis, results of possible exposures were either not done or their results ignored. Tests were performed that added confusion, their results failing to describe any specific illness because the veterans had such a panoply of symptoms.

According to William Baumzweiger, M.D., Gulf veterans he examined while working at the VA from 1993 to 1997 exhibits conflicting and mutually exclusive symptoms. “Nobody asked how come they were showing so many contrary manifestations all at once,” he said. VA psychiatrists and other doctors, he added, “threw every diagnosis in the book at them, rather than get to the bottom of the problem,” adding that he believes that psychiatric diagnosis is a complete failure as a means of treating Gulf War Illness.

As a trained neurologist, he said, “I knew this didn’t fit, and I said so from 1994 on.” He was told that at the VA center in West Los Angeles that it was VA policy that there was no such thing as Gulf War Syndrome. It came from the central VA in Washington, I was told [that] by Dr. Dean Norman, who was the head of the hospital. I told him I didn’t know that disease had anything to do with administrative policies. He got mad at me. … These are political positions. It isn’t real medicine.”

Psychiatrist Joyce Lashof

Colonel David Irvine

The Defense Department has since admitted that 100,752 troops were possibly exposed to chemical toxins when Iraqi bunkers were blown up. As evidence of Gulf War Illness mounted, for example in May 1994 then Chief of Staff John Shalikashvili and then Defense Secretary William Perry issued a statement to news media. “There have been reports in the press of the possibility that some of you were exposed to biological weapons agents. There is no information, classified or unclassified, that indicates that chemical or biological weapons were used in the Persian Gulf.”

The result, he said, is that sick veterans do not get properly examined or diagnosed, do not have access to the full range of treatment methods available, and hence, in too many cases, do not recover or, even worse, get sicker.

Drug “Treatments” Exacerbate Problems

According to Billiam Baunmagwe, M.D., a former VA neurologist, and other VA doctors were told that many Gulf War soldiers were not good to begin with, whereas, in Baunmagwe’s words, “the truth is they were fine soldiers.” Veterans reporting chronic illnesses, he said, were labeled “malingerers,” “weak sisters” or PPPs — “poor patients.”

Once these veterans’ physical complaints were invalidated, the thrust became to put them on psychiatric drugs. According to veterans’ advocate Joyce Riley, as many as 90 percent of those complaining of physical ailments have not received help in diagnosing or treating physical symptoms, but were instead administered such substances as Prozac, Zoloft and Paxil.

The predominance of psychiatric practitioners in VA facilities contributed to the problem. (See “The Psychiatric ‘Funnel System,’” page 19.) Actual physical disease among Gulf veterans was something psychiatric interests within the system had little interest in acknowledging. Claims by vets of physical pain — often hard to diagnose due to the unknowns of toxic effects, coupled with the ambiguity of the stress factor — could be more expediently (and profitably) answered by a pill.

Psychiatric drugs can also induce or exacerbate acts of hostility and violence, including suicide. A grassroots veterans’ group based in the United Kingdom, the National Gulf Veterans and Families Association, calculated that two-thirds of that nation’s 540 Gulf veteran deaths as of June 2002 had been suicides.

John Callaghan, for example, returned to England “with glowing references from the Royal Medical Engineers,” but a body that deteriorated rapidly. Afflicted by headaches and other chronic pain, muscle spasms, rashes, blackouts and memory loss, among other problems, he was seen by a psychiatrist and diagnosed with Gulf War Syndrome and post-traumatic stress disorder. Although he had avoided drugs prior to the Gulf War, he used them in efforts to assuage his post-war pain. After being sent to prison in Manchester on drug charges, he hanged himself.

Here in the U.S., Joseph H. Ludlam Jr., was hardly somebody to be labeled a “PPP.” Valedictorian of his high school, he graduated from the U.S. Naval Academy in 1986 and became a combat pilot. Like so many other Gulf veterans, Ludlam’s life began to unravel in the aftermath of Desert Storm. Treatment for his problems included powerful psychiatric drugs known to increase aggression and hostility. On November 8, 2001, he killed his former employer, Timothy O’Shaughnessy, with a golf club and pistol; in January 2001, he received a 40-year prison sentence.

Andrid Brown was one of the many interviewed by Freedman who was told “it’s all in your head.” When he turned to the VA for help, Cooperating at every step with VA doctors, he accepted and took the psychiatric drugs prescribed for him, including Depakote, Prozac and Elaxil. After Brown became so disoriented that he tried to step out of an upper-story window and a moving car, janyce took the pills away. He was put on Panexor, which made him hallucinate.

“When we complained that the drugs were making him hallucinate,” said Janyce, “they upped them.” On another visit, a psychiatrist persisted in demanding that Brown be treated for anxiety before anything could be done for him.

Copies of medical records in Brown’s possession confirm an effort by VA doctors from the outset to label his symptoms “anxiety attacks” or “post-traumatic stress syndrome” — in other words, psychological in nature — and to pressure him into taking psychiatric drugs. Brown alleged that the VA lost some of his records and falsified others. And he has told that neither he, nor his wife nor his two children — born after his Gulf service with serious birth defects — would receive any treatment until he and his wife submitted to psychiatric examinations.

Andrid received chemotherapy treatments at a civilian hospital and continues to take antidepressives. Both he and Janyce believe their family’s multiple health problems stem from Andrid’s exposure to chemical and biological weapons and other toxins.

In whose Closet Lies the Skewer?

“I have always felt that there was a real cover-up of what happened to a whole lot of people in Saudi Arabia.” General David Irvine said. “And that anything that you can do to bring light to that particular pile of dirt that has been swept under a rug so very carefully, I will surely applaud. Because I have seen some lives that have been tragically affected by something.”

To admit that veterans were injured by chemical or biological warfare toxins in the Persian Gulf and that Gulf War Illness exists opens the door to treat sick veterans, affected family members and even the general public. As Kirt Love told Freedman, owning up to potential liabilities at this late date could bear stiff costs — “as much as $200 billion, if not more, all said and done if everything was admitted.”

Failure to do so, according to Freedman sources, will be even more costly — in terms of human life, continued suffering and spreading disease.

Steven F. Ayre contributed to this article in

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