

## **Testimony of James A. Bunker**

Before the Subcommittee on Oversight and Investigations House Committee on Veterans' Affairs

**May 19, 2009**

Mr. Chairman and members of the committee, on behalf of the National Gulf War Resource Center and myself, I would like to thank you for giving me time to address you about the issues of Gulf War illness and the problems we experience getting care and benefits from the Veterans Administration.

First, let me take a moment to briefly provide background about myself and my interest in Persian Gulf Illness.

I had a relatively normal childhood. In 1977, I completed high school in three years. In 1984 I received my Bachelor's degree in Mathematics with a minor in Psychology and Computers. Throughout my educational career, I had A and B's barely opening a book. I was able to retain most information from class lectures with ease and translate it to exams. Computers and math classes was the easiest for me. I started to play chess in the 7th grade and took part in chess tournaments.

After teaching for a few years, I applied for and was accepted to Officer Candidate School where I was commissioned as a Field Artillery Officer. I then went to Fort Sill and received training in the Officer Basic Course for Field Artillery. As one of the top graduates of the course, I was brought on to active duty and given my choice of duty stations. I chose Fort Riley in Kansas and moved there in March of 1989.

I deployed to the Persian Gulf with the Fourth Battalion – Fifth Field Artillery Regiment of the First Infantry Division commonly called “The Big Red One”. While in the war zone and right after the air war began, the M8 chemical alarms sounded. We were told it was a false alarm, an equipment malfunction. At the end of February, the Big Red One blew up a large Iraqi ammunition storage area in Safwah, about 30 kilometers from Basrah. Not long after this I became very ill. I was having problems breathing, muscle twitches, and cramps in my legs, vomiting up everything, and them convulsing. I was treated for all of the now classic symptoms of nerve agent poisoning, including convulsions. Then, I was given the antidote for the nerve agent and medically evacuated to the 410<sup>th</sup> EVAC hospital. Then back to the States arriving at Ft. Riley on May 4<sup>th</sup> 1991.

As time went on I started to have problems with my right leg. The army hospital at Fort Riley and army medical hospital at Fitzsimmons did many tests but could not find out why my leg was having the nerve problems. When my leg did not improve, I was sent before a medical evaluation board. While my records were before the board, I lost the use of my left arm, and being left handed, life became harder for me. The army did not seem to care about my arm problem as they only told me that when I got out, the VA would take care of it. I was medically discharged in June of 1992.

On 22 June of 1992, I went to the VA for help with the many problems I continued experiencing since the war. Thus began the second phase of my life – the push for answers and recovery from what's now known as Persian Gulf Illness.



Since the war, the symptoms I have experienced include:

- Numbness, weakness, and/or tingling in arms and legs
- Headaches
- Cognitive dysfunction
- Gastric reflux disease
- Fibromyalgia
- Mouth sores and skin peeling from roof of mouth
- Skin rashes
- Sinusitis

The right hip pain wakes me up every 2 hours almost every night. As I lay in bed with these problems, I have trouble with both of my arm having that “falling to sleep” numbing feeling. All of these greatly limit my activities and contribute to my desire to ensure that this issue is addressed and a cure is found.

It is hard to live a life where you can be talking to someone normally one minute and the next you cannot make a sentence to save your life. This is also true when it comes to trying to write things out. When my cognitive problem starts to set in for that day, I may be thinking I am typing one thing, but when I read it the next day, it will make no sense at all. I can no longer play chess a game I once loved. I found it hard not only to keep track of my third and fourth moves to come, but even what I was just about to play

I, along with many other veterans, have sensitivity to smells like perfume, cologne, hairspray, etc. Often when I went in for tests at the clinic, some of the workers had so much on it made me and other veterans sick. In January of this year, I had my bedroom painted. I forgot to tell them that I needed them to use low odor paint. The fumes of the paint made me sick for the next few weeks; I had to stay in my basement so as to be as far from the new paint smell as I could.

Often the VA likes to tell me is that it is in my head, or it is depression. I tried to talk to one of my doctor about my problems and about new studies showing that depression has nothing to do with gulf war veterans being sick; she just said I needed more medication for depression. One day I gave her the first RAC report and was going to point out some studies in it. Before I could start she told me “Jim we just need to agree that we will always disagree on this.” At that point I told her I wanted a doctor that will look at everything and not just one thing. She agreed to that. At the same time I was seeing a Psychologist for PTSD. Dr Rot saw me about once a week. Many times I felt the counseling was going no where. One day while I was there, he told me I should divorce my wife like other veterans with PTSD. I informed him that was not something I would do. I felt that his many times of saying I was not like other veterans with PTSD leads me to wonder about it. I know when I received my rating, I was asked to drop 12 issues, and all of them are now part of the gulf war illness problems.

In 1995 I was sent to the Gulf War Illness clinic in the Houston Texas VA. This was a place that was to look at everything fresh to draw its own conclusions. I saw my chart before they even started and they already listed depression as my main problem. How can we get fair treatment if before a doctor sees us they say we are depressed? This same doctor came one day to give me a report on blood tests. Some of the levels were off, but she stated to me it was to be expected



because I was a heavy alcohol user. She was a bit surprised when I told her I did not drink. So if they were looking at everything new, why was I already diagnosed as a depressed alcoholic? It's these preconceived assumptions that irritate veterans. Often irritating them to the point they stop seeking medical help.

At one point I was concerned about the number of medications I was prescribed. My wife and I worked as a team to get off some of them. I would stop them one by one, and if I got better I got rid of it. If however I got worse, I went back on it. With this I was able to get off half of the pills that I was on.

Over the last year many veterans have called me about how they could get on the gulf war registry. They informed me that when they went to their VA they could not get any information about the gulf war registry nor find any thing on the VA's website for it. Since some of the veterans were using the same VA as I, so I decided to go and see just how hard it would be for me to get the information my self. The first two places I was sent told me that they did not do them any more and sent me on to a new place. The third place told me the same thing; but a man took my information and said he would get it to the right place. When I asked who it was and their room number, he would not give it to me. I told him that I was the president for the NGWRC and was following as to why veterans felt they were getting the run around on this. He started to yell at me about how he is not giving me a run around and I better behave. My thought at that time is why a hot head like this was working in the compensation and pension exam area of the Topeka VA. I left there and went to the directors' office to complain about him and the problems with the gulf war registry.

They took my name and number and informed me someone would call me. The next week the PR office called me and gave me Ms. Strickland's name and number. I call the number for a few weeks with no return call, so I went to her office. She informed me she is no longer doing the gulf war registry any more. After asking her who is, she said that the person was in training at the time.

The next week I received a call from the director's office asking if everything was taken care of. I told her no, that the problem was still there. She assured me it would be taken care of and I would get the paperwork soon. The paperwork did come the next week; but it was the wrong paperwork. Just think how I felt when I opened it and had a form to fill out where the first line asked "when were you in Vietnam?"; this after all the asking about the gulf war registry. When I went in for the exam, I was given the right paperwork, but still wondering if the blood test were the right one for the gulf war and not for Vietnam.

I called the phone number on the paperwork to report the problem and I need them to sent me the right forms. After 2 weeks of getting no reply, I went to the VA and found out it was the same office that Ms Strickland was in and the lady doing the intake for the exam was the same person whose desk was next to hers. I told her about the problem and asked why I did not get a call back. She told me, that she did not answer the voice mail of her phone.

I felt the whole exam was a waste of my time, and thus any veteran taking it, not to say it does not gather information that would be of any help or use to any one. Most of what I was asked about was: see any one dead, any one going MIA, hand to hand combat, and a few dealing with smoke.



Why wasn't I asked about some of the symptoms of gulf war illness? Questions like:

1. Do you suffer headaches? If so how often and for how long?
2. Do you get fatigued? If so, how often and to what degree?
3. Do you have any problems involving your skin? What kinds and how often?

This list can go on for all of the others like:

- Joint pain
- Neurological signs and symptoms
- Neuropsychological signs or symptoms
- Respiratory system (upper or lower)
- Sleep disturbances
- Gastrointestinal signs or symptoms
- Cardiovascular signs or symptoms
- Abnormal weight loss
- Menstrual disorders

The registry should be set up to track these problems in the veterans along with all diagnosed illness like MS, cancers and Parkinson's. Then this information should be given in a report each year to the RAC, IOM and the Secretary of the VA.

It has been over a month and even though I was told I would here about what they found out, I have not heard any thing. This might have something to do with what the Topeka VA public Affairs officer said in a radio interview 2 months ago. It was along the lines of why worry about telling veterans they have gulf war illness so long as they are treated for any symptom they have. Well the problem is getting the veterans compensation for his lost of earning power.

I feel it is because the VA headquarters is telling everyone that is must be stress or depression. All of the information for the doctors caring for us veterans supports this even though stress, depression and PTSD have been ruled out by many studies over the last 10 years. Yet still my doctors seem to blow off any symptoms I see them about. From a VA press release one finds "The report found that Gulf War illness fundamentally differs from stress-related syndromes described after other wars." "Studies consistently indicate that Gulf War illness is not the result of combat or other stressors, and that Gulf War veterans have lower rates of post-traumatic stress disorder than veterans of other wars," the Committee wrote. Yet when I went to my exam the Nurse doing the exam did not know anything about the new report. Why?

When my left shoulder was giving me a lot of problems with pain, it took months before I was sent to an orthopedic doctor in December of 2008. He set me up for a rotator cup operation to fix a tear and to remove some calcium build up in that shoulder. I still try to get the VA to look at other problems I am having, but I get the brush off on many of them. The last time I tried to talk to a doctor about my pain in my lower legs, I mentioned that when I use a heating blanket, I do not feel the heat. Most of the time it just makes my leg pains worst.

It is to a point that most of the problems I have, I do not even talk to my doctors about. I have kept track of the things that make me sick during the day, and I work to avoid them the best that I



can. I also try to keep a healthy lifestyle by eating right, not drinking or smoking, and only having drugs in my system prescribed to me by the VA.

Working to help veterans over the year has resulted in many fellow gulf war veterans calling me to get understanding about their illnesses and advice with their VA claim for benefits. Many of the veterans' claims were denied for unjust causes. Some of the regional offices tell the veterans with Fibromyalgia and Chronic Fatigue Syndrome that it started outside the timeframe. The guideline set for presumptive service connection in Gulf War veterans is: onset of the signs or symptoms by December 31, 2011. That date is still two and a half years in the future.

Other veterans are being told that they do not have a combat ribbon or a 'V' device on any of their ribbons. This is not a prerequisite for Gulf War Veterans to receive compensation for gulf war illness. Yet these are tactics that many of the raters are using to deny veterans their claim. There is a new committee that was to look into these problems; but they are not. They have been doing a good job at helping the new vets, but have not been looking at the problems with gulf war vets. This might be that the chairman does not want to find or fix the problem. On two of the meetings I was at he has stated he did not like the gulf war illness law, and congress should not have passed it. This once again goes back to the "Don't look, don't find" motto.

## **Conclusion:**

While in the service, I was trained that the mission came first. I was also trained to take care of our men to make sure the mission was done.

Now that I and many like me are no longer in the service, and knowing that we were injured by our service, my personal mission is to ensure as many veterans as possible receive just and proper care and compensation for their injuries and illnesses. The mission of our government should be the care of its veteran and making sure they have the best treatment for anything that happened to them while serving our country. The mission we have can be best accomplished by:

1. Illnesses that are being diagnosed at a higher rate in gulf war veterans' will be presumptively service connected for them.
2. Track known disease groupings within the veterans' populations in correlation with civilian entities to include death rates.
3. Have all of the VA's place signs in their waiting areas telling veterans about the gulf war registry exam, and how to get on it.
4. Work to disseminate all the data on the other NBC sites we blew up and a new death rate table set by unit.
5. Update the VA education program and all other data so it reflects the facts that it is not stress, depression or PTSD causing gulf war illness.
6. Insure that all of the raters are doing the claims right, and have remedial training for those that are doing a poor job on these types of claim.



7. Work to get veteran to the follow on clinics better, this is to include those that are told it is depression, PTSD, FM and CFS.

Thank you,

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