

Vietnam Veterans of America

Chapter 324 - PO Box 18631 - Milwaukee, WI 53218

In Service to America



Meeting Notice

15 June, 2022

5555 W. Good Hope Rd.
Board Meeting 6:30 p.m.
Chapter Meeting 7 - 8 p.m.

20 July 2022

Future Meetings

17 August, 21 September, 19 October,
16 November

Chapter web page: www.vietnamvetschapter324.com

National web page: www.vva.org

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John is listed in the phone book - good luck finding one



VVA324 Fundraising – Your Help is Needed

You've seen guys out distributing poppies and getting donations. We distribute orange blossoms in the stadium parking lot. The more people we have the more donations we can generate.

We will set up a table near home plate around the iron workers statues.

We will reimburse you for your parking. We will have water. If you want to bring a sandwich we will have a cooler available.

Hope to see you at the game.

Brewer Fundraiser Dates

Sunday July 24th Brewers vs Rockies starts at 1:10 – lot opens at 9am

Monday July 25th Brewers vs Rockies starts at 7:10 – lot opens at 3pm

Free Brewers Tickets

The Milwaukee Brewers are (again) offering military members and veterans free tickets to Sunday home games. It's an easy process. Show proof of military/veteran status at any ticket window starting at 10 am on the day of the game to receive up to two tickets in terrace level seating.

VIETNAM VETERANS OF AMERICA

Milwaukee Chapter 324

June 15, 2022

Meeting called to Order at 7:00 pm by President Pat Ciofani

Minutes of May 18, 2022 meeting reviewed and accepted

Treasurer's Report – Pat Moore - \$3085.36 balance in our checking account

COMMITTEE REPORTS

Allied Veterans Meeting Update – Pat Ciofani
Fund Raising - \$441.00 raised at our first Brewer's date – Join us July 24 and 25 for our next dates

VA Life

New VA Benefit Will Sell Insurance to Most Veterans

Rebecca Kheel Military.com May 31, 2022

A new Department of Veterans Affairs life insurance policy for veterans of any level of disability rating is just six months away from launching. In a blog post 30 MAY, the VA reminded veterans it will begin offering Veterans Affairs Life Insurance, or VALife, on Jan. 1, 2023, in line with a law passed last year, with applications opening that day.

VALife will be open to all veterans 80 years old or younger who have a disability rating of 0 to 100. Older veterans will also be eligible if they applied for VA disability compensation before age 81 but did not receive the disability rating until after turning 81, and if they apply for the life insurance within two years of getting the rating. "The new program meets the needs of service-connected veterans who may not have previously qualified for life insurance with VA," the blog post said.

VALife is what's known as guaranteed acceptance whole life insurance. That means no medical exams or health questions are required to be approved, with the VA in its blog post saying the plan will have "fully automated online enrollment with instant approvals." But guaranteed acceptance plans often have lower benefits and higher premiums than other life insurance policies. VALife will offer beneficiaries payouts of up to \$40,000, with lesser coverage available in increments of \$10,000.

The cost of the insurance varies based on age and the amount of coverage, but could run as low as \$11 per month for an 18-year-old with \$10,000 of coverage or as high as \$1,768 per month for a 95-year-

Website – Contact Pat Moore to post items of interest for the chapter

NEW BUSINESS

June 18th Stand Down was canceled

Tosa July 4th Parade – 9 am

NO AUGUST MEETING

Adjournment 7:30 pm

old with \$40,000 of coverage, according to the VA website, which noted rates may change before the policy launches. The premiums are fixed for the life of policy, meaning veterans will pay the amount for the age they were when they enrolled even as they get older.

The new insurance policy was created by a bill signed into law in January 2021 called the Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act. The start date, eligibility criteria and coverage amounts were all stipulated in the law. The law allowed the department to set premium rates based on what is "generally charged for guaranteed acceptance life insurance policies by private life insurance companies."

The department already offers what's called Veterans' Group Life Insurance (VGLI), but veterans have to apply within one year and 120 days of leaving military service in order to be eligible for that plan. The department also offers the Service-Disabled Veterans Life Insurance (SGLI) for veterans of any level of service-connected disability rating, but vets have to apply within two years of getting their rating.

The new VALife has no such time restriction on applying for veterans 80 or younger. The Service-Disabled Veterans Life Insurance plan also requires veterans to be in good health apart from their service-connected condition, unlike VALife's guaranteed acceptance. Veterans who already have the Service-Disabled Veterans Life Insurance will be able to stay in that program, but the policy will close to new applicants after Dec. 31, according to the blog post.

Troops who had genes that help metabolize sarin were less likely to develop symptom

UTSW genetic study says sarin nerve gas as cause of Gulf War illness

UTSouthwestern Medical Center Release, May 11, 2022

DALLAS – May 11, 2022 – For three decades, scientists have debated the underlying cause of Gulf War illness (GWI), a collection of unexplained and chronic symptoms affecting veterans of the Persian Gulf War. Now researchers led by Robert Haley, M.D., Professor of Internal Medicine and Director of the Division of Epidemiology at UT Southwestern, have solved the mystery, showing through a detailed genetic study that the nerve gas sarin was largely responsible for the syndrome. The findings were published in *Environmental Health Perspectives*, a peer-reviewed journal supported by the National Institute of Environmental Health Sciences, with an accompanying editorial on the paper by leading environmental epidemiologists.

Dr. Haley's research group not only discovered that veterans with exposure to sarin were more likely to develop GWI, but also found that the risk was modulated by a gene that normally allows some people's bodies to better break down the nerve gas. Gulf War veterans with a weak variant of the gene who were exposed to sarin were more likely to develop symptoms of GWI than other exposed veterans who had the strong form of the gene.

"Quite simply, our findings prove that Gulf War illness was caused by sarin, which was released when we bombed Iraqi chemical weapons storage and production facilities," said Dr. Haley, a medical epidemiologist who has been investigating GWI for 28 years. "There are still more than 100,000 Gulf War veterans who are not getting help for this illness and our hope is that these findings will accelerate the search for better treatment."

In the years immediately following the Gulf War, more than a quarter of the U.S. and coalition veterans who served in the war began reporting a range of chronic symptoms, including fatigue, fever, night sweats, memory and concentration problems, difficulty finding words, diarrhea, sexual dysfunction, and chronic body pain. Since then, both academic researchers and those within the military and Department of Veterans Affairs have studied a list of possible causes of GWI, ranging from stress, vaccinations, and burning oil wells to exposure to pesticides, nerve gas, anti-nerve gas medication, and depleted uranium.

Over the years, these studies have identified statistical associations with several of these, but no cause has been widely accepted. Most recently, Dr. Haley and a colleague reported a large study testing veterans' urine for depleted uranium that would still be present if it had caused GWI and found none.

"As far back as 1995, when we first defined Gulf War illness, the evidence was pointing toward nerve agent exposure, but it has taken many years to build an irrefutable case," said Dr. Haley, who holds the U.S. Armed Forces Veterans Distinguished Chair for Medical Research, Honoring Robert Haley, M.D., and America's Gulf War Veterans.

Sarin is a toxic man-made nerve agent, first developed as a pesticide, that has been used in chemical warfare; its production was banned in 1997. When people are exposed to either the liquid or gas form, sarin enters the body through the skin or breathing and attacks the nervous system. High-level sarin often results in death, but studies on survivors have revealed that lower-level sarin exposure can lead to long-term impairment of brain function. The U.S. military has confirmed that chemical agents, including sarin, were detected in Iraq during the Gulf War. In particular, satellite imagery documented a large debris cloud rising from an Iraqi chemical weapons storage site bombed by U.S. and coalition aircraft and transiting over U.S. ground troop positions where it set off thousands of nerve gas alarms and was confirmed to contain sarin.

Previous studies have found an association between Gulf War veterans who self-reported exposure to sarin and GWI symptoms. However, critics have raised questions of recall bias, including whether veterans with GWI are simply more likely to remember and report exposure due to their assumption that it may be linked to their illness. "What makes this new study a game-changer is that it links GWI with a very strong gene-environment interaction that cannot be explained away by errors in recalling the environmental exposure or other biases in the data," Dr. Haley said.

In the new paper, Dr. Haley and his colleagues studied 508 deployed veterans with GWI and 508 deployed veterans who did not develop any GWI

Continued next page

Nerve Gas continued symptoms, all randomly selected from more than 8,000 representative Gulf War-era veterans who completed the U.S. Military Health Survey. They not only gauged sarin exposure – by asking whether the veterans had heard chemical nerve gas alarms sound during their deployment – but also collected blood and DNA samples from each veteran.

The researchers tested the samples for variants of a gene called PON1. There are two versions of PON1: the Q variant generates a blood enzyme that efficiently breaks down sarin while the R variant helps the body break down other chemicals but is not efficient at destroying sarin. Everyone carries two copies of PON1, either a QQ, RR or QR genotype.

For Gulf War veterans with the QQ genotype, hearing nerve agent alarms – a proxy for chemical exposure – raised their chance of developing GWI by 3.75 times. For those with the QR genotype, the alarms raised their chance of GWI by 4.43 times. And

for those with two copies of the R gene, inefficient at breaking down sarin, the chance of GWI increased by 8.91 times. Those soldiers with both the RR genotype and low-level sarin exposure were over seven times more likely to get GWI due to the interaction per se, over and above the increase in risk from both risk factors acting alone. For genetic epidemiologists, this number leads to a high degree of confidence that sarin is a causative agent of GWI.

“Your risk is going up step by step depending on your genotype, because those genes are mediating how well your body inactivates sarin,” said Dr. Haley. “It doesn’t mean you can’t get Gulf War illness if you have the QQ genotype, because even the highest-level genetic protection can be overwhelmed by higher intensity exposure.”

This kind of strong gene-environment interaction is considered a gold standard for showing that an illness like GWI was caused by a particular environmental toxic exposure, he added.

Veterans have a higher rate of erectile dysfunction, study says

By Sarah Sicard, Military Times, Jul 8

A recent Military Medicine study found that U.S. veterans are at higher risk for several physical and mental health issues, including erectile dysfunction.

According to researchers, 14% of veterans reported symptoms of erectile dysfunction. The national average is 10%, according to the Boston University School of Medicine Center for Sexual Medicine.

The study, which surveyed 921 male veterans, found that those with erectile dysfunction were typically aged 60 or older, served in combat roles or during the Vietnam War, spent less than four years in the military, and are currently unemployed.

Five comorbid physical conditions were most common among those who have erectile dysfunction: high cholesterol, high blood pressure, obesity, arthritis, and sleep disorder. As for mental health conditions, depression, probable PTSD, and generalized anxiety disorder were most common among sufferers of erectile dysfunction.

“The findings also align with research suggesting that both acute and chronic psychological stress may impact erectile function,” the study reads. “Similar to previous research, U.S. veterans with ED were significantly more likely to have been diagnosed with a number of comorbid medical conditions and

severe mental disorders.”

Similarly, a 2015 study in the *Journal of Sexual Medicine* found that male veterans with PTSD were significantly more likely than their civilian counterparts to report erectile dysfunction or other sexual problems.

It is unlikely for the Department of Veterans Affairs to offer disability ratings for erectile dysfunction, unless it’s service connected and the issue is related to the genitourinary system — typically medical conditions listed under VA Title 38.

“However, service connection for erectile dysfunction, even at 0 percent, makes veterans eligible for Special Monthly Compensation (SMC) for loss of use of a creative organ,” according legal experts. “This is known as SMC (k) and it is paid out in your monthly VA compensation check.”

Researchers from the most recent survey say additional studies are needed to determine the “directionality” of erectile dysfunction.

“Our findings support previous research indicating high rates of comorbidity between ED and physical and mental health conditions,” the study says. “In addition to this, the current study specifically addresses these concerns in U.S. veterans, a population shown to have elevated risk of physical and mental health conditions.”

It's Been 50 Years. I Am Not 'Napalm Girl' Anymore.

By Kim Phuc Phan Thi, New York Times, June 6, 2022

Ms. Phan Thi is the founder of the Kim Foundation International, which provides aid to child victims of war.

All of that changed on June 8, 1972. I have only flashes of memories of that horrific day. I was playing with my cousins in the temple courtyard. The next moment, there was a plane swooping down close and a deafening noise. Then explosions and smoke and excruciating pain. I was 9 years old.

Napalm sticks to you, no matter how fast you run, causing horrific burns and pain that last a lifetime.

I don't remember running and screaming, "Nóng quá, nóng quá!" ("Too hot, too hot!") But film footage and others' memories show that I did.

You've probably seen the photograph of me taken that day, running away from the explosions with the others — a naked child with outstretched arms, screaming in pain. Taken by the South Vietnamese photographer Nick Ut, who was working for The Associated Press, it ran on the front pages of newspapers all over the world and won a Pulitzer Prize. In time, it became one of the most famous images from the Vietnam War.

Nick changed my life forever with that remarkable photograph. But he also saved my life. After he took the photo, he put his camera down, wrapped me in a blanket and whisked me off to get medical attention. I am forever thankful.

Yet I also remember hating him at times. I grew up detesting that photo. I thought to myself, "I am a little girl. I am naked. Why did he take that picture? Why didn't my parents protect me? Why did he print that photo? Why was I the only kid naked while my brothers and cousins in the photo had their clothes on?" I felt ugly and ashamed.

Growing up, I sometimes wished to disappear not only because of my injuries — the burns scarred a third of my body and caused intense, chronic pain — but also because of the shame and embarrassment of my disfigurement. I tried to hide my scars under my clothes. I had horrific anxiety and depression. Children in school recoiled from me. I was a figure of pity to neighbors and, to some extent, my parents. As I got older, I feared that no one would ever love me.

Meanwhile, the photograph became even more famous, making it more difficult to navigate my private and emotional life. Beginning in the 1980s,

I sat through endless interviews with the press and meetings with royalty, prime ministers and other leaders, all of whom expected to find some meaning in that image and my experience. The child running down the street became a symbol of the horrors of war. The real person looked on from the shadows, fearful that I would be exposed as a damaged person.

Photographs, by definition, capture a moment in time. But the surviving people in these photographs, especially the children, must somehow go on. We are not symbols. We are human. We must find work, people to love, communities to embrace, places to learn and to be nurtured.

It was only in adulthood, after defecting to Canada, that I began to find peace and realize my mission in life, with the help of my faith, husband and friends. I helped establish a foundation and began traveling to war-torn countries to provide medical and psychological assistance to children victimized by war, offering, I hope, a sense of possibilities.

I know what it is like to have your village bombed, your home devastated, to see family members die and bodies of innocent civilians lying in the street. These are the horrors of war from Vietnam. Sadly, they are also the images of wars everywhere, of human lives being damaged and destroyed in Ukraine.

They are, in a different way, also the horrific images coming from school shootings. We may not see the bodies, as we do with foreign wars, but these attacks are the domestic equivalent of war. The thought of sharing the images of the carnage, especially of children, may seem unbearable — but we should confront them. It is easier to hide from the realities of war if we don't see the consequences.

I cannot speak for the families in Uvalde, Texas, but I think that showing the world what the aftermath of a gun rampage truly looks like can deliver the awful reality. We must face this violence head-on, and the first step is to look at it.

That picture will always serve as a reminder of the unspeakable evil of which humanity is capable. Still, I believe that peace, love, hope and forgiveness will always be more powerful than any kind of weapon.

Showing the world what the aftermath of a gun rampage truly looks like can deliver the awful reality.



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Life Membership for all veterans \$50:

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Anyone Else:

- Associate Member - 1 year \$20 • Associate Member 3 year \$50 • Associate Life Member \$250
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