

Gulf War Syndrome (GWS)

(aka. Gulf War Illness, Persian Gulf War Syndrome)

The Research Advisory Committee on Gulf War Veterans' Illness (RAC-GWVI) in Washington DC published, 17th November 2008, its second full report on the illness suffered by veterans of the First Gulf War (GW-1) in 1991. This, long awaited report, runs to over 450 pages and contains more than 1,800 references. This is a large amount of material to go through and assimilate. The Executive Summary alone is 15 pages long. Today's busy GP's will probably not have time to go through all this information. This summary lists the most important findings provided by clinicians and scientists in **the National Gulf War Veterans and Families Association**.

- The illnesses suffered by veterans were a result of **unique** circumstances in which they were exposed to a considerable number of toxic insults in GW-1. The most important of these were:
 1. Receiving multiple vaccines, some experimental.
 2. Pyridostigmine bromide, also experimental, in Nerve Agent Pre-treatment Set (NAPS) tablets – causally linked to GWI.
 3. Pesticides, especially organophosphates, causally linked to GWI.
 4. Exposure to low levels of chemical warfare agents in the form of Nerve Agents.
 5. Known toxins are still under consideration, Depleted Uranium, Oil and Smoke

The report states that GWS/I has the following features:

- It is a complex, chronic, organic, multi-system illness with a coherent pattern of symptoms affecting ~30% of veterans.
- Many veterans show evidence of physical brain injury in the form of neuropsychological impairment which cannot be detected by routine tests.
- It is NOT a stress related condition or due to PTSD.
- The following features have been demonstrated by extensive investigations including advanced brain imaging and animal and human studies.
 1. Abnormalities of brain structure including cancer
 2. Impaired function of the autonomic including nervous system
 3. Cardiovascular and respiratory dysfunction and disease.
 4. Neuroendocrine abnormalities resulting in serious physical impairment, Parkinson's Disease, Multiple Sclerosis, ALS-Motor Neurone Disease
 5. Altered control of cerebral blood flow
 6. Alterations in the immune system and function
 7. Genetic variation in enzyme responsible for protection against neurotoxins
 8. Damage to the skeletal system at tissue and cellular level
 9. Cancer risk and incidence is associated with the principle toxins and DU and early detection is essential, eg brain, bowel, blood, bone, bladder, and lung cancers.

Recommendations

It is recommended that ill veterans from GW1 are carefully investigated for:

- Neurological abnormalities (CT, MRI, SPECT)
- Endocrine abnormalities (TFT, serum cortisol, GTT, pituitary/glucagon stress test)
- Cardiovascular and respiratory abnormalities.
- Autoimmune screen and dysautonomia
- Bone densitometry
- Neuropsychiatric tests (clinical psychology)

Past Failures

The MoD, VAV, DWP and Medical Assessment Programme by failing to inform GPs and Consultants of these facts, which have been known at least since 2004, have done a grave disservice to the sick GW-1 veterans and placed clinicians charged with their care in an almost impossible position.