VHA Support of Atomic Veterans and Other Veterans Exposed to Ionizing Radiation



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PRINCIPLES Presumptive Diagnoses

- Leukemia and Lymphomas
 - Excludes CLL
 - Excludes Hodgkin's Disease
 - Includes Multiple Myeloma
- Solid Tumors
 - Thyroid
 - Breast
 - Pharynx
 - Esophagus
 - Stomach and small intestine
 - Pancreas and Gall bladder including bile duct
 - Liver cancer (except if cirrhosis or hepatitis B or C)
 - Salivary glands
 - Urinary tract (excludes genitalia)
- 3/26/02: 5 additional cancers added
 - Brain, Bone, Lung, Colon, & Ovary

PRINCIPLES Public Law 98-542 10/24/84 Establish guidelines for resolving claims Establish Veterans' Advisory Committee on Environmental Hazards Secretary of Defense to prescribe guidelines for preparation of radiation dose estimates

- Establish process for independent dose estimate
- 38 CFR 3.311

PROCESS

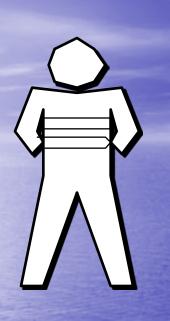
Presumptive Diagnosis

- Establish participation
- Medical evidence of diagnosis

Handled at <u>Jackson, MS VA Regional Office (VARO)</u>

Non-Presumptive

- 38 CFR 3.311
- All cancers included
- Some non-cancerous conditions included
- Any disability or disease may be considered if supported by medical or scientific evidence



Veteran files claim with the VA Regional Office (VARO) of the Veterans Benefits Administration (VBA) serving his/her area All Radiation related claims are forwarded to Jackson, MS VARO

VARO

Jackson requests documentation of participation and dose from DTRA

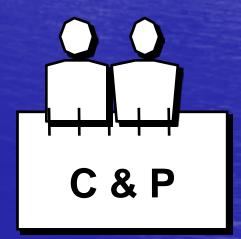


DTRA researches case and responds by letter to Jackson MS VARO with a copy to the veteran when his/her mailing address is known



If DTRA confirms' participation and provides a positive dose estimate, VARO submits case to Compensation and Pension (C&P) Service of the Veterans Benefits Administration (VBA) in VA Central Office (VACO), Washington, DC for an advisory opinion VHA OPHEH returns case with a medical opinion to the C&P Service

C&P Service refers the case to the Veterans Health Administration (VHA) Office of Public Health and Environmental Hazards (OPHEH) for a medical opinion on the likelihood that radiation was responsible

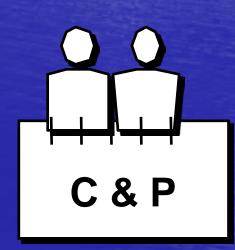


OPHEH

VARO makes compensation decision and informs veteran



C&P Service reviews the medical opinion and returns case to the VARO with an advisory opinion



PROCESS Medical Opinion

- VHA Central Office, Office of Public Health and Environmental Hazards
 - Director Radiation and Physical Exposures
 - Health Physicist
- NIOSH Interactive Radio-Epidemiologic Program
 - 99% Confidence Interval that it is as likely as not
 - Used for cancers only
 - <u>https://www.niosh-irep.com/irep_niosh/</u>
- Non-cancers or those not considered radiogenic
 No dose estimate available

PROCESS

- Skin cancers need specific site(s)
- Throat cancer need specific organ
- Cataracts only one specific type is on the radiogenic list—any other kind requires existence of medical evidence
- Tumors need specific site and evidence of malignancy or radiogenicity (except for brain and central nervous system)
- Cancers need target organ if not obvious from disease type and classification

PROCESS Determining Radiation Exposure

• DD1141 forms Veteran's service and medical records Dosimetry offices Department of Energy Individual nuclear weapons facilities Projects - Hanford Air Force: Technical Applications Center

PROCESS Determining Actual Diagnosis

Hospital discharge summaries

Operative reports

Sub-specialty consultations

Pathology reports

Death certificate

PROCESS

Determining Service Connection

- Veteran's service and medical record
- Medical reports since leaving active duty
- Professional references
 - International Agency for Research on Cancer manuals
 - Biologic Effects of Ionizing Radiation reports
 - Oncology/ medical texts
 - Subject matter expert consultation
 - Literature review

Other possible reasons for service connection

Types of Claims

- We received 195 total claims over the past 6 months
- 45% of these were occupational exposure claims
- 87 occupational exposure claims were written in the past 6 months
- 0 were opinioned favorably for the claimant

Radiation Case Medical Opinion Tracker

			Week Ending: 02/17/2010					
	11/30/2009	12/4/2009	12/11/2009	12/18/2009	12/31/2009	1/8/2010	1/15/2010	2/17/2010
Total Cases Awaiting VH		4.15	107	407	100	00	00	00
Medical Opinion	154	145	137	127	100	82	66	62
Medical Opinions completed						-		
by VHA	I Come	10	12	10	27	18	21	33
Background Data								
New cases assigned to VHA	N/A	** 1	4	0	0	0		29
New cases transferred to VHA	N/A	1	0	0	0	20	** 37	16
Stored at VHA 13A	64	55	*** 43	33	6	8	39	20
At VBA ready for medical opini	<u> </u>	90	43 94	33 94	94	ہ 74	27	29 33
A TOA ready for medical opin	90	<u> </u>	94		94	74		
* Includes 4 expedited cases sent	lest of VBA							
** expedited cases are immediate			edical Opinion					
2 cases from June completed befo				-				
***all cases from July and Octobe	r are completed							

Ionizing Radiation Registry

October 28 1986 – Public Law 99-576 Onsite participation in nuclear testing Participation in the occupation of Hiroshima/Nagasaki Internment as prisoner of war in Japan which resulted in an opportunity Other radiation risk activity

Ionizing Radiation Registry

Enrollment in registry program Health Eligibility Center - DTRA confirms Medical Examination Receives Letter with finding Follow-up examinations also available Receives updates through periodic mailings Possible Priority 6 enrollment

Ionizing Radiation Registry Naso-pharyngeal radium

November 11, 1998 – Public Law 105-398
Medical examination
Hospital care
Medical services
Nursing home care

IRR Statistics for past 3 years

	Initial Exams or Veterans			Follow-up Exams (2nd, 3rd, etc.)			Total IRR Exams		
Year	Male	Female	Total	Male	Female	Total	Male	Female	Total
2007 2008	285 174	6	291 177	<u>31</u> 23	0	31 23	316 197	6	322 200
2000	151	2	153	12	0	12	163	2	165

Current IR Registry Statistics

Number of Veterans - 24,559

• Number of Exams -

25,700

Resources

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