

American consumer and business. Global Package Link is an important part of the service provided to American businesses. Freezing the program will surely hurt American businesses trying to penetrate foreign markets. It will hurt all users of the Postal Service by limiting the ability to upgrade its services.

Under the Rules of the House, the provision freezing the Global Package Link Service may not be considered on the House floor as part of the Treasury-Postal Service Appropriations bill. While it is within the authority of the Rules Committee to grant a waiver to this rule, the merits of this provision are insufficient for such special treatment. Moreover, the chairman and ranking minority member of the Committee on Government Reform and Oversight oppose a waiver for this provision.

Mr. Speaker, the House should not approve legislation to interfere with the Postal Service's efforts to provide innovative, high quality service to American mail users. Certainly, we should not bend our own rules to make in order legislation which would do just that.

ADDRESSING GULF WAR ILLNESS

HON. BERNARD SANDERS

OF VERMONT

IN THE HOUSE OF REPRESENTATIVES

Wednesday, September 10, 1997

Mr. SANDERS. Mr. Speaker, I would like to thank Chairman PORTER, Congressman BILL YOUNG, ranking member DAVE OBEY, and their staffs at the Appropriations Committee for all of the help that they have provided me in attempting to address one of the most important issues facing American veterans, and one of the great medical dilemmas facing our entire country. And that is that over 70,000 Persian Gulf veterans, including hundreds in my own State of Vermont, continue to suffer from gulf war illness, and that 6 years after that war's completion, there is still no understanding of the cause of that illness or an effective treatment.

As you know CHRIS SHAYS, the chairman of the Human Resources Subcommittee has held 10 hearings on gulf war illness since March 1996. As a member of that committee, I cannot begin to express to you the frustration that many of us feel regarding the ineptitude of the Department of Defense and the Veterans Administration in responding adequately and effectively to the needs of those veterans who continue to hurt.

Pure and simple, the bottom line is that 6 years after the end of the Persian Gulf war, the Department of Defense and the Veterans Administration still have not developed an understanding of the cause of gulf war illnesses or an effective treatment protocol. In fact, their record has been so inadequate that last week the Presidential Advisory Committee on Persian Gulf War Veterans' Illnesses indicated that it will be recommending to the President that an independent agency, outside of the Pentagon, take on responsibility for investigating the health effects of low level chemical and biological weapons exposures. According to Arthur L. Caplan, a bioethics professor at the University of Pennsylvania and a member of the panel, "the Pentagon is not credible to continue inquiries that veterans and the public do not find persuasive." And the New York Times writes, "a special White House panel

said today, that the Pentagon had lost so much credibility in its investigation of the release of Iraqi chemical weapons in the 1991 Persian Gulf War that oversight of the investigation must be taken away from the Defense Department permanently."

Mr. Speaker, I am happy to inform my colleagues that there is language in the Labor-HHS Appropriations Committee report which funds an independent scientific research program into how chemical exposures in the Persian Gulf relate to the illnesses suffered by as many as 70,000 of our veterans. This research program is to be implemented through the Secretary of Health, with the National Institute of Environmental Health Sciences as the lead agency. The committee has agreed to appropriate \$1.1 million for fiscal year 1998 for this important research, and has committed to fund this research program at a level of \$7 million over a 5-year period. What is important here is that for the first time, a governmental entity outside the Pentagon or the Veterans Administration will be looking at the role that chemicals may have played in gulf war illness—and that is a major breakthrough.

This report language is strongly supported by the American Legion, the Veterans of Foreign Wars and the National Gulf War Resource Center. Veterans and Americans all over this country are less than impressed, to say the least, about the role of the DOD and the VA in this entire process.

Mr. Speaker, the military theater in the Persian Gulf was a chemical cesspool. Our troops were exposed to chemical warfare agents, leaded petroleum, widespread use of pesticides, depleted uranium, and burning oil wells. In addition, they were given a myriad of pharmaceuticals as vaccines. Further, and perhaps most importantly, as a result of waiver from the FDA, hundreds of thousands of troops were given pyridostigmine bromide. Pyridostigmine bromide, which was being used as an antinerve gas agent, had never been used in this capacity before. Under an agreement between the DOD and the FDA in regards to this waiver, the DOD was required to collect data on any use of pyridostigmine bromide. However, the DOD failed to keep this data and in many cases, there are no records to indicate who even took this investigational drug, how much they took, and under what conditions they took it.

For 5 years, the Pentagon denied that our soldiers had been exposed to any chemical warfare agents. Finally, after being forced to admit that there were exposures, they suggested that the exposures were limited. The DOD's first estimates were 400 troops exposed, then 20,000 troops. In July of this year, the DOD and CIA gave us their best estimate—that as many as 98,910 American troops could have been exposed to chemical warfare agents due to destruction of "the Pit" in Khamisyah, an Iraqi munitions facility. Mr. Chairman, I would not be surprised if this estimate is revised upward in the not too distant future, as more information is gathered regarding other incidents of chemical warfare exposure.

Mr. Speaker, an increasing number of scientists now believe that the synergistic effect of chemical exposures, plus the investigational vaccine pyridostigmine bromide, may well be a major cause of the health problems affecting our soldiers.

Dr. Robert W. Haley of the University of Texas Southwestern Medical Center con-

cludes that the gulf war syndromes are caused by low-level chemical nerve agents combined with other chemicals, including pyridostigmine bromide. Doctors Mohammed Abou-Donia and Tom Kurt, of Duke University Medical Center, in studies using hens, found that a combination of two pesticides used in the gulf war, in combination with pyridostigmine bromide causes neurological deficits in test animals, similar to those reported by some gulf war veterans. Dr. Satu Somani and Doctors Garth and Nancy Nicolson have all completed research which concludes that gulf war veterans' illnesses may be due to combinations of chemical exposures in the Persian Gulf. Dr. Claudia Miller reports that there are similarities between the gulf war veterans' symptoms and those of some civilians exposed to organophosphate pesticides, carbamate pesticides, or low levels of volatile organic chemical mixtures. Dr. William Rea concludes that neurotoxic environmental exposures and other personal exposures prior to and during deployment in the gulf may have resulted in chronically deregulated immune and nonimmune detoxification systems, resulting in multisymptom illness. In addition a number of these scientists and physicians have devised treatment protocols for gulf war illnesses and some are reporting success in their treatments. These are the types of research programs and treatment protocols which our Government should be aggressively pursuing for the sake of our veterans, and what I hope will be accelerated as a result of this language.

The National Institute of Environmental Health is eager and ready to begin research and to provide its results to Congress in an expedient manner. This research program will address three areas of which are necessary to better understand the nature of the program. These are: First, capitalizing on the existing body of knowledge of a similar disorder called multiple chemical sensitivity, second, defining individual genetic differences in the ability to metabolize environmental agents commonly encountered during Desert Storm, and third, developing a better understanding of how multiple exposures interact to exert their toxicity on an organism. Moreover, the research program is to include an investigation of treatment protocols which are being developed in the public and private sectors for illnesses resulting from chemical and other environmental exposures.

Once again, I'd like to thank Chairman PORTER and the Appropriations Committee and staff for their cooperation in this effort. I look forward to learning about the progress of this research program as it is implemented, upon enactment of this bill.

HONORING THE REVEREND HARRY J. PILSON AND THE MOUNT PLEASANT BAPTIST CHURCH

HON. THOMAS M. DAVIS

OF VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, September 10, 1997

Mr. DAVIS of Virginia. Mr. Speaker, it gives me great pleasure to rise today to pay tribute to the esteemed Pastor of the Mount Pleasant Baptist Church, the Reverend Harry J. Pilson and the Mount Pleasant Baptist Church on