

SUBCOMMITTEE ON NATIONAL SECURITY, EMERGING THREATS,
AND INTERNATIONAL RELATIONS

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Statement of Rep. Christopher Shays June 1, 2004

Last weekend, in dedicating the World War II monument and celebrating Memorial Day, we acknowledged our profound obligation to those of past generations who made noble sacrifice in the service of liberty. That same duty to remember demands our focus today on another overdue national remembrance.

The living warriors of this generation who fought in operations Desert Shield and Desert Storm need just one thing written in stone – a sustained commitment to research and treatments for the mysterious maladies and syndromes triggered by battlefield exposures. And they cannot wait sixty years for their deserved testimonial to become a reality.

This Subcommittee, with oversight purview of the Department of Veterans Affairs (VA) and the Department of Defense (DOD), today convenes our seventeenth hearing on Gulf War veterans' illnesses. Over the last decade, we've followed the hard path traveled by sick Gulf War veterans as they bore the burdens of their physical illnesses and the mental anguish caused by official skepticism and intransigence. It was their determination that overcame entrenched indifference and bureaucratic inertia. Their persistence, and a home video of chemical weapons munitions being blown up at Khamisiyah, eventually persuaded the Departments of Defense and VA that post-war illnesses are linked to wartime exposures.

But characterizing the subtle linkage between low-level toxic assaults and varied chronic health consequences remains a dauntingly complex research challenge. As we will hear in testimony today, efforts to map uncharted neurological pathways between sarin-induced brain damage and diverse manifestations of illness are made even more difficult by unreliable exposure data. The dimensions of Gulf War syndromes may be obscured by epidemiological conclusions based on unreliable exposure estimates and plume models. And, promising research hypotheses and treatment concepts still face institutional obstacles to federal support as both funding and momentum behind Gulf War illnesses research appear to be waning.

So we asked our witnesses to give us their assessment of the status and future direction of Gulf War research. As in the past, we asked veterans to testify first. Their perspectives always inform and enrich our subsequent discussion, and we appreciate the patience and forbearance of our government witnesses in agreeing to sit on our second panel.

Just as the liberation of Kuwait was an international mission, the search for post-war causes and cures has been a coalition effort as well. Over the years, we have been fortunate to be able to form a close collaboration with our counterparts in the United Kingdom. Continuing that transatlantic partnership, we are joined today by the Rt. Hon. Lord Morris of Manchester. Lord Morris is a leading advocate for Gulf War veterans in Britain, and a strong voice behind the breakthrough research needed to solve the mysteries of exposure-related diseases.

This is not the first time Lord Morris has joined us. Two years ago he and his colleague from the House of Commons, Mr. Bruce George, added invaluable insight and focus to our discussion. So much so that their obvious depth of knowledge and rhetorical flair made some of us feel a little intimidated and tongue-tied. So when we invited him this year, we commoners asked if he would be just a bit less Lordly today and he graciously agreed. He is a valued colleague of ours, and a true friend to Gulf War veterans of all nations.

Welcome Lord Morris. You honor the Subcommittee again with your presence and we look forward to your continued contributions to our work.