



Features

Chroniques

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New clinics will help soldiers deal with aftereffects of overseas service

Nancy Robb

The armed forces have created clinics at military bases across the country to treat personnel experiencing the aftereffects of service in the Persian Gulf, Bosnia, Rwanda and Somalia. Between April 1995 and December 1997 the defence department operated a clinic in Ottawa to investigate maladies among personnel who saw service in the Persian Gulf in 1991 — illnesses that now fall under the all-inclusive term of gulf war syndrome. Last January the department broadened the clinic's scope and established 4 new ones at CFB Halifax, CFB Valcartier (Quebec), CFB Edmonton and CFB Esquimault (British Columbia).

Lieutenant-Colonel Ken Scott, an internist who serves as director of these "postdeployment clinics," says some personnel returning from Bosnia, Somalia and Rwanda have also complained of symptoms similar to those experienced by gulf war veterans. Scott says the new clinics should increase accessibility, improve follow-up and, it is hoped, encourage more personnel to report symptoms. "We wanted to expand to provide better health care to a larger group of people," he says.

The problems plaguing some of the 4500 Canadian personnel who served in the Persian Gulf include joint and stomach pain, headache, memory loss, sleep disturbance and rashes. Before it reopened as a general postdeployment clinic, Ottawa's gulf war clinic had treated 105 personnel. These patients received a history and physical, and then returned for a 2-week admission and follow-up care.

As of last summer, depression, post-traumatic stress, irritable bowels and anxiety disorder were the most common primary diagnoses made at the Ottawa clinic. Scott says the average patient presented with 7 complaints.

He says there were several factors behind the decision to create clinics across the country. Scott, who has treated soldiers who had been sent to Somalia, also received referrals for personnel who had been sent to Bosnia and Rwanda.

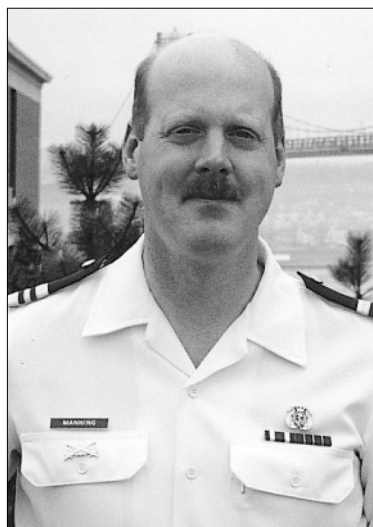
It was also believed that gulf veterans with symptoms were not coming forward — the number of gulf clinic patients eventually dwindled to 1 every 3 months — and it was difficult for patients based in other provinces to travel back and forth to Ottawa. "An important part of [patient] assessment was to speak to spouses, and people from out of town couldn't come with their spouse," Scott adds.

At CFB Halifax, Lieutenant-Commander David Manning, another internist, has seen 6 personnel, all gulf war veterans. Their symptoms include fatigue, headache, sleep disturbance and, in 1 instance, pulmonary complaints.

For each patient Manning does a typical medical consultation, paying special attention to environmental exposures experienced in the Persian Gulf. He says the clinics are important not only to ensure that patients are being treated appropriately but also "to add to the overall epidemiological base to assess whether there is any link between exposures and specific syndromes."

Symptoms among gulf veterans have been attributed to wartime exposures such as fumes from oil-well fires and smoke, pesticides, vaccines against nerve agents, chemical warfare agents and depleted uranium used in tank cannon shells.

Scott says the armed forces agree with US studies that have concluded there is no new syndrome or any correlation between exposures and illnesses, except for a protozoan infection affecting 12 Americans. He says studies acknowledge that some of the risk factors involve known carcinogens that may eventually cause cancer, but they attribute current symptoms largely to war-related stress. The defence department confirmed this finding in a study released June 29. ¶



Lt.-Cmdr. David Manning: special attention paid to environmental exposure