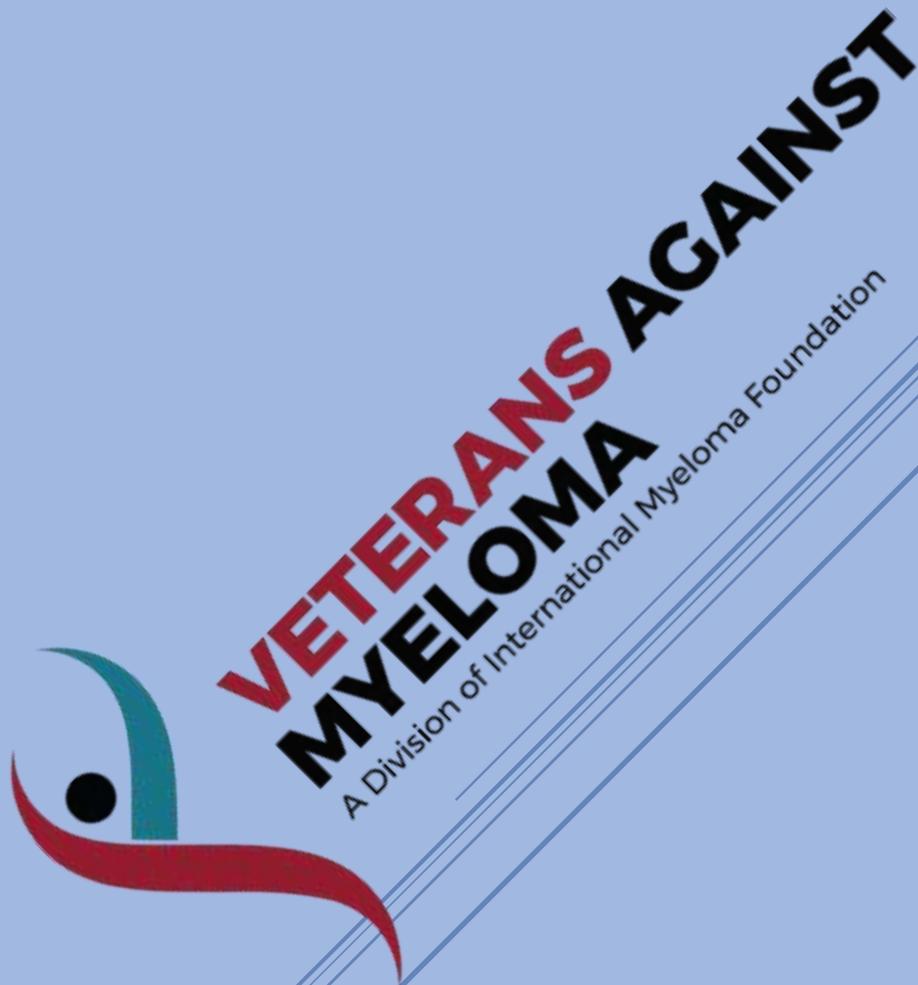


MYELOMA AND MILITARY SERVICE

2020



Updated April 2020



MYELOMA AND MILITARY SERVICE

This information booklet is intended to help veterans with myeloma, their caregivers and family better understand their disease in relation to the veteran’s military service. The information provided is taken from the Department of Veterans Affairs (VA) and reassembled into one cohesive narrative specific to multiple myeloma. If you find any of this information to be out of date, or inaccurate please notify us immediately so that we may update this booklet for all our Veterans Against Myeloma (VAM) members.

The International Myeloma Foundation (IMF) is here to help with your questions about myeloma. Contact our Infoline at 800-452 CURE (2873). A live operator will answer your questions Monday through Friday, 0900 – 1630 pacific standard time.

Please note that only a veteran service officer or organization accredited by the VA can help you prepare, present or prosecute claims for veterans’ benefits. The IMF and VAM do not currently have such an accreditation and this booklet is intended only as an informational resource. [Contact a VSO](#) to determine eligibility for benefits or start the claims process.

The IMF or it’s VAM initiative is not a law firm or a legal service provider, and it is not affiliated with any such group. We do not provide legal advice. No response to inquiries about cases or legal services will be provided. IMF and VAM do not endorse any position advocated in any of the materials it cites and does not take any responsibility for the accuracy of any of the materials cited.

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What Causes Myeloma?

Let's Ask Dr. Durie

Several toxic chemicals are known to cause myeloma. Multiple studies provide the “proof of principle” that chemicals are involved:

The dioxins in Agent Orange, a powerful herbicide used by the U.S. military to destroy foliage and crops during the war in Vietnam, are well studied. A 2015 [study](#) linked the levels of the toxic chemical in the blood of exposed Vietnam veterans to the likelihood of developing myeloma.

Another example is [benzene](#), one of the 20 most widely used chemicals in this country. Studies linking benzene to myeloma go back to 1897. Two recent meta-analyses, in [2015](#) and in [2011](#), have confirmed the association of benzene exposure with the development of myeloma. The 1965 [Bradford Hill criteria](#), established by British scientist Sir Bradford Hill, are used to make the connection between benzene and myeloma. This approach has been endorsed by the Occupational Safety and Health Administration (OSHA), the National Toxicology Program (NTP), and the National Cancer Institute (NCI) President’s Panel in the U.S, and by the International Agency for Research on Cancer (IARC) in France. Other countries have researched and published data on the topic as well. The Occupational Diseases Medical Advisory Board in Germany published a [study](#) showing a connection between benzene exposure and myeloma in 2009. South Korean studies appeared in [2014](#) and [2015](#).

Exposure to the herbicide glyphosate has been implicated in the development of myeloma in agriculture workers. Glyphosate is the primary ingredient in the popular weed killer Roundup, and is widely used in agriculture, especially on GMO (genetically modified organism) crops. Several years ago, a World Health Organization group, the International Agency for Research on Cancer, issued a controversial [report](#) indicating that glyphosate “probably” causes cancer, a perspective supported recently by the [state of California](#).

Other Causal Factors

In addition to workplace exposures, other factors have been shown to be important. There are more than 100,000 chemicals in widespread use, with more than 1,000 new ones added annually. Unfortunately, regulations for these chemicals are weak to nonexistent. Exposures can occur in a variety of ways. For example, [widespread](#)

[pollution and toxic exposures](#) have occurred in the aftermath of hurricane Harvey in Houston, with particular concern about possible exposures to benzene. The New York Times [reports](#) that more than 2,500 sites in the U.S. handle toxic chemicals and are located in flood-prone areas. In addition, toxic exposures to benzene and POPs (persistent organic pollutants), which occurred during and after the events of 9/11, have been linked to the subsequent development of myeloma.

Dangers of Processed Foods

I have frequently emphasized the benefits of eating “[real food.](#)” In a new [study from France](#), “ultra-processed” foods are linked to an increased risk of cancer. The culprits are industrially processed foods, including pastries, biscuits, juices, and processed fruits, vegetables, and meats. Risk factors for cancer include a high glycemic response linked to obesity, and the presence of specific contaminants, such as titanium dioxide, bisphenol A, and phthalates. [Another study](#) recently linked cumulative phthalate exposures to dining out, which was shown to [increase the levels of plastic-based chemicals](#) in the body.

And a [new study](#) reveals that microplastic contamination is found in most bottled water. We can add this to previous observations of [micro and nanoplastics in food](#), especially seafood.

The Impact of Plastics is Twofold

First, their presence disturbs the immune system, triggering T lymphocytes and activating macrophages, white blood cells that engulf and digest cellular debris and foreign substances. In mouse models, [Dr. Michael Potter](#) showed that this type of activation triggers the development of myeloma. The highest likelihood of myeloma, he found, occurred with the injection of mineral oil containing pristane (a chemical known to be in diesel exhaust fumes) and tiny particles of plastic into the peritoneal cavities of mice. This is the most replicable model ever developed to lead to the production of myeloma.

Second, plastics are contaminated with a variety of toxic chemicals, including fire retardants, dioxins, polychlorinated biphenyls (PCBs), and polybrominated diphenyl ethers (PBDEs)—all of which are cancer-causing chemicals. Thus, there is a doubly serious concern.

Contaminated Drinking Water

As part of its responsibility to evaluate health hazards at specific superfund (toxic) sites, the Agency for Toxic Substances and Disease Registry (ATSDR) has assessed drinking water contamination at Camp Lejeune in North Carolina. The agency [concluded](#) that the evidence linking benzene exposure to the development of myeloma was sufficient to allow the Department of Veterans Affairs to consider a presumptive service connection based upon causal evidence.

Multiple Myeloma Service Connections

In most cases, a veteran with myeloma must show a causal link between the disease and their time in service, usually through exposure to a known cancer-causing chemical or agent, as well as showing a link between that exposure and their disease.

However, there are certain circumstances that exist where a veteran is either presumed to have been exposed to a known disease-causing agent through their time in a certain area and the later development of said disease is assumed to have been caused by their exposure, or exposure to a certain agent is presumed to have resulted in the development of a later disease, but proof is required to show such an exposure. If you believe you may be eligible for benefits, please [contact a VSO](#) or the VA to determine eligibility.

The following information is a list of instances where there may be presumed causation or exposure related to multiple myeloma. The information is presented in chronological order.

Atomic Veterans (1945 - 1992)

For Veterans who participated in a [radiation-risk activity](#) during service (including "Atomic Veterans"), VA assumes that certain cancers are related to their exposure, including myeloma.

"Atomic Veterans" is an unofficial term that refers to Veterans who:

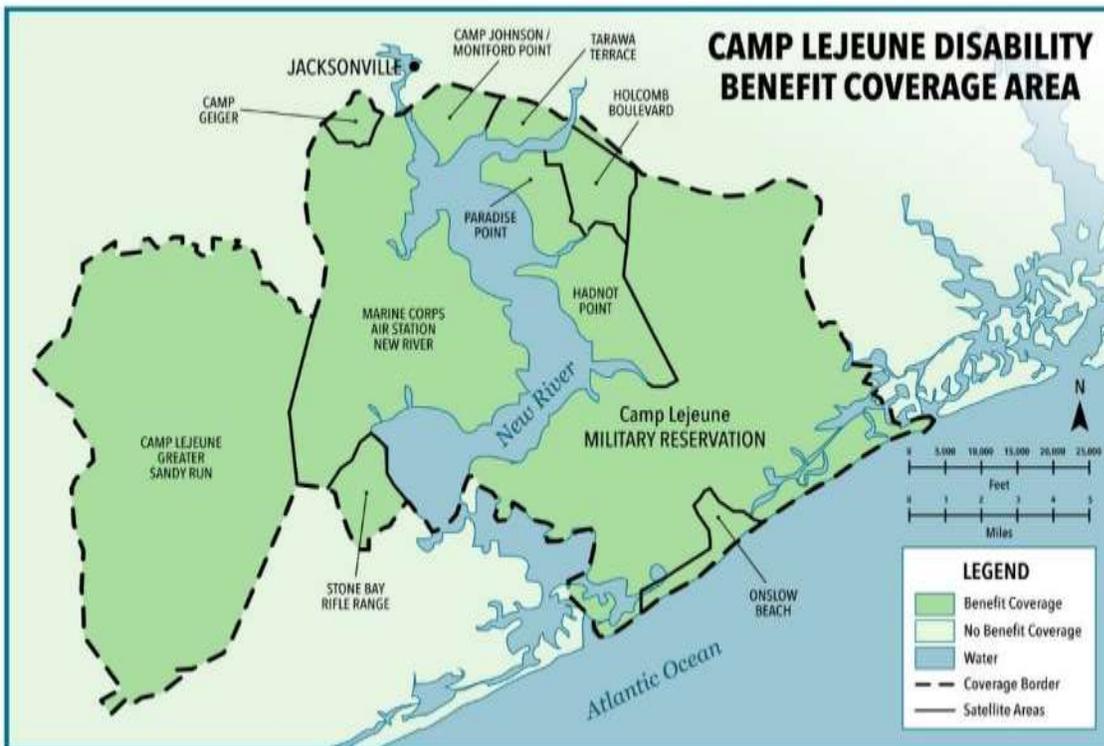
- Participated in the occupation of Hiroshima and Nagasaki, Japan between Aug. 6, 1945 and July 1, 1946;
- Were prisoners of war in Japan during World War II; or
- Participated in atmospheric nuclear weapons tests conducted primarily in Nevada and the Pacific Ocean between 1945 and 1962
([Read fact sheets on the tests](#) from the Nuclear Test Personnel Review office.)

Presumption of exposure is also extended to Veterans who participated in underground nuclear weapons testing at:

- Amchitka Island, Alaska before Jan. 1, 1974; or
- One of the following gaseous diffusion plants for at least 250 days before Feb. 1, 1992: Paducah, Kentucky; Portsmouth, Ohio; or K25 in Oak Ridge, Tennessee.

Camp Lejeune, North Carolina (1953 - 1987)

As Dr. Durie mentioned previously, the VA has established a presumptive service connection for veterans, reservists, and National Guard members and their families exposed to contaminants in the water supply at Camp Lejeune from August 1, 1953 through December 31, 1987 who later developed myeloma.



[Camp Lejeune Families Act of 2012](#)

In accordance with the 2012 Camp Lejeune health care law, VA provides cost-free health care for certain conditions to Veterans who served at least 30 days of active duty at Camp Lejeune from January 1, 1957 and December 31, 1987. Qualifying health conditions include myeloma.

Veterans and family members eligible for health care under the 2012 Camp Lejeune health care law may enroll in VA health care and receive medical services for the 15 covered health conditions at no cost (including copayments). [Please click here for more information.](#)

Vietnam Era Veterans (1962 - 1975)

If you are a Vietnam veteran who served in-country on the soil or inland waterways of Vietnam, then you are presumed to have been exposed to the herbicide known as Agent Orange. Veterans who qualify for presumption of herbicide exposure are not required to show they were exposed to Agent Orange or other herbicides when seeking VA compensation for diseases related to Agent Orange exposure. Myeloma is included as one such disease known to have been caused by Agent Orange.

Additionally, many veterans who served during the Vietnam Era outside of Vietnam may also be eligible for benefits for their myeloma under a presumption of causation with proof of exposure. This requires the veteran to show on a factual basis that they were exposed.

The VA offers eligible Veterans a free [Agent Orange Registry health exam](#) for possible long-term health problems related to exposure.

The VA recognizes the following dates and places for exposure to Agent Orange, please [contact a VSO](#) or the VA to determine whether your service makes you eligible for benefits:

[Exposure to Agent Orange in Vietnam](#)

Having physically set foot in Vietnam, anytime between January 9, 1962 and May 7, 1975, including brief visits ashore or service aboard a ship that operated on the inland waterways of Vietnam. This includes both [U.S. Navy and Coast Guard ships operating in Vietnam](#).

[LIST OF SHIPS KNOWN TO HAVE OPERATED IN VIETNAM DURING THE TIME PERIOD](#)

[Korean Demilitarized Zone](#) (1968-1971)

In or near the Korean demilitarized zone anytime between April 1, 1968 and August 31, 1971.

[Thailand Military Bases](#) (1961-1975)

Veterans who served on or near the perimeters of [military bases in Thailand](#) during the Vietnam Era.



Air Force veterans who served on Royal Thai Air Force (RTAF) bases at U-Tapao, Ubon, Nakhon Phanom, Udorn, Takhli, Korat, and Don Muang, near the air base perimeter anytime between February 28, 1961 and May 7, 1975.

Army Veterans who provided perimeter security on RTAF bases in Thailand anytime between February 28, 1961 and May 7, 1975.

Army Veterans who were stationed on some small Army installations in Thailand anytime between February 28, 1961 and May 7, 1975.

[Herbicide Tests and Storage Outside Vietnam](#)

Veterans who served where herbicides were tested and stored outside of Vietnam. This includes Veterans associated with DoD projects to test, dispose of, or store herbicides in the U.S.

[C-123 Airplanes and Agent Orange Residue](#) (1969-1986)

Veterans who were crew members on or around C-123 planes flown after the Vietnam War. VA has determined there is evidence of exposure to Agent Orange for Air Force and Air Force Reserve members who served during the period 1969 through 1986 and regularly and repeatedly operated, maintained, or served onboard C-123 aircraft (known to have been used to spray an herbicide agent during the Vietnam era).

This includes the following members:

Active duty personnel who served in a regular USAF unit location where a contaminated C-123 was assigned who had regular contact with the aircraft through flight, ground, or medical duties between 1969 and 1986, and who developed an Agent Orange related disability.

Reservists who were assigned to flight, ground, or medical crew duties at the following locations between 1969 and 1986, and who developed an Agent Orange related disability.

- Lockbourne/Rickenbacker Air Force Base in Ohio (906th and 907th Tactical Air Groups or 355th and 356th Tactical Airlift Squadron)
- Westover Air Force Base in Massachusetts (731st Tactical Air Squadron and 74th Aeromedical Evacuation Squadron)
- Pittsburgh, Pennsylvania, International Airport (758th Airlift Squadron)



For more information about service qualifications and other eligibility criteria, visit the [Agent Orange C-123 web page](#).

[Blue Water Navy Vietnam Veterans](#) (1962-1975)

On Tuesday, January 29, 2019 the U.S. Court of Appeals for the Federal Circuit in Washington, D.C. [decided a case](#) that restored a presumption of exposure to the chemicals collectively known as Agent Orange for veterans who served off the coast of Vietnam during the war. The case, *Procopio v. Wilkie*, reverses the courts own ruling from 2006 in *Haas v. Peake* that erroneously excluded Blue Water Navy Vietnam Veterans from the *Agent Orange Act of 1991*. That case sided with a Department of Veteran Affairs (VA) reading of the Act by interpreting “service in the Republic of Vietnam” to narrowly mean only on the land mass of the country or its inland waterways. *Procopio* holds that it was the intent of Congress to include Blue Water Veterans under the *Agent Orange Act* and that the VA erred in its interpretation.

On June 25th, 2019 the President of the United States signed H.R. 299, the *Blue Water Navy Vietnam Veterans Act of 2019*, into law.

The law, which took effect January 1, 2020, extends disability benefits to veterans who served between Jan. 9, 1962, and May 7, 1975, within 12 nautical miles of the coast of Vietnam and Cambodia, along a line of demarcation spelled out in the bill. The President’s signature signals the end of a decades-long fight for these former sailors and Marines to receive compensation for diseases presumed to be caused by exposure to the chemicals known as Agent Orange used during the Vietnam War.

The law will also extend disability compensation to personnel who served in or near the Korean Demilitarized Zone (DMZ), during the period beginning on September 1, 1967, and ending on August 31, 1971, as well as benefits for children suffering from spina bifida whose parent served in Thailand during the period beginning on January 9, 1962, and ending on May 7, 1975.

Blue Water Navy Vietnam Veterans will now have the same presumption of exposure as any other Vietnam veteran who served between January 9, 1962 and May 7, 1975. The presumption of exposure makes it much easier for veterans to make a claim for benefits, as they no longer must definitively prove they came into contact with Agent Orange if they developed one of the diseases recognized to be caused by exposure. Myeloma is one of those [recognized diseases](#).



Gulf War Veterans (1990 – Present)

Includes Operations Desert Shield and Desert Storm, Operation Iraqi Freedom and Operation New Dawn

There are currently no presumptive service-connected exposures for Gulf War veterans. Gulf War veterans who wish to make a claim for benefits with the VA may be required to provide a documented case of exposure to a harmful agent that likely resulted in the later development of myeloma. A list of exposures for Gulf War veterans can be [found here](#).

In order to help the VA make better assessments for benefit compensation, please consider joining the [Gulf War Registry](#) and the [Airborne Hazards and Open Burn Pit Registry](#) to document your exposures and health concerns.

To get involved with this issue, contact your legislator and support the [Burn Pits Accountability Act](#).

Afghanistan War Veterans (2001 – Present)

Operation Enduring Freedom

Like Gulf War veterans, there are currently no presumptive service-connected exposures for Afghanistan War veterans. Afghanistan War veterans who wish to make a claim for benefits with the VA may be required to provide a documented case of exposure to a harmful agent that likely resulted in the later development of myeloma. A list of exposures for Afghanistan War veterans can be [found here](#).

Please consider joining the [Airborne Hazards and Open Burn Pit Registry](#) to document your exposures and health concerns. These registries make it easier for researchers to trace the cause of these ailments and connect them to a person's time in service.

To get involved with this issue, contact your legislator and support the [Burn Pits Accountability Act](#).

Occupational Hazard Exposure

Even if you were never deployed, your military service could have brought you into contact with dangerous chemicals or agents while painting vehicles, working around a nuclear submarine or storing weapons. Please explore the [“exposures” page of the VA website](#) for more information. Here are some recent issue areas related to occupational hazard exposure which are garnering attention.

[Perfluoroalkyl and polyfluoroalkyl substances \(PFAS\)](#)

Perfluoroalkyl and polyfluoroalkyl substances (PFAS) are synthetic chemicals found in many products, such as clothing, carpets, fabrics for furniture, adhesives, paper packaging for food, and heat-resistant/non-stick cookware. They are also present in fire-fighting foams (or aqueous film forming foam; AFFF) used by both civilian and military firefighters. They are persistent (i.e., they do not break down) in the environment, and since they are used in the manufacturing of so many products, they are widespread internationally.

Concerns have recently been raised from communities surrounding bases about whether PFAS-contaminated ground water on military bases may be affecting off-base water supplies. The Department of Defense is currently investigating the extent of PFAS contamination on its bases by:

- Sampling all on-installation drinking water systems
- Testing nearby water systems that may be affected and providing alternative safe drinking water when the water exceeds the U.S. Environmental Protection Agency (EPA) lifetime health advisory level
- Initiating a cleanup program
- Discontinuing the use of AFFF that contain PFAS with documented toxicity, such as perfluorooctane sulfonate (PFOS) and perfluorooctanoic acid (PFOA), and identifying safer alternatives

The Environmental Working Group [maintains a map](#), developed in collaboration with the PFAS Project Lab at Northeastern University's Social Science Environmental Health Research Institute, as well as lists of the military installations and sites with known PFAS contamination. According to EWG, of the 100 most contaminated sites, 64 had groundwater contamination exceeding 100,000 parts per trillion. The highest known contamination was seen at the former England Air Force Base, near



Alexandria, Louisiana, that measured 20.7 million parts per trillion of a PFAS chemical known as PFHxS.

Military Firefighters - Aqueous Film Forming Foam (AFFF)

In the 1970s, the Department of Defense began using AFFF to fight fuel fires. The release of these chemicals into the environment during training and emergency responses is a major source of PFAS contamination of ground water on military bases. It also has an effect on the bodies of firefighters who were exposed to these chemicals on a regular basis. The DoD is in process to discontinue the use of these AFFFs with PFAS.

The VA does not often recognize the service connection between firefighting and cancer as a "presumptive service-connected disability" more than a year after active duty.

There is a bill to extend that presumption of service connection and a 15-year post-service timeframe for certain cancers, including myeloma, to military firefighters. If you would like to support the [Michael Lecik Military Firefighters Protection Act](#), click the link to contact your legislators.

Recently Enacted Laws Impactful for Veterans

The Veterans Appeals Improvement and Modernization Act of 2017

What was in H.R. 2288, The Veterans Appeals Improvement and Modernization Act of 2017?

Brief Overview: The Veterans Appeals Improvement and Modernization Act of 2017 became law on August 23, 2017 with the goal of modernizing the VA appeals process. The bill specifics are below:

According to the VA the law:

- Modernizes the current claims and appeals process
- Includes three review options for disagreements with decisions
- Requires improved notification of VA decisions
- Provides earlier claim resolution
- Ensures you receive the earliest effective date possible

Details on **the Three Review Options for Veterans' Appeals:**

1. The "Local Higher-Level Review Lane" in which a more senior adjudicator reviews the same evidence considered by the original claims processor.
2. The "New Evidence Lane," in which the veteran could submit new and relevant evidence for review and have a hearing.
3. "Board Lane," in which jurisdiction for the appeal would transfer immediately to the Board of Veterans' Appeals.

Maintaining Internal Systems and Strengthening Integrated Outside Networks Act of 2018 (MISSION ACT)

What does the VA Mission Act do?

President Trump signed the *VA Mission Act* into law on Wednesday, June 6th, 2018 during a ceremony in the Rose Garden. The bill was written with the intention of improving veterans' access to care and expanding benefits for caregivers.



Changes to Community Care: The Act replaced the Veterans Choice Program and expanded private health options for Department of Veterans Affairs (VA) patients. These changes were made with the goal of expanding patient access to non-VA providers. This was looked at with the goal of assisting rural patients or patients needing certain types of service not provided by the VA.

Caregiver benefits: Caregiver benefits have been hailed as the highlight of the bill by Sen. Patty Murray (D-WA), who has been a champion for the issue. Originally, benefits first enacted in 2010 have been available only to caregivers of severely injured Post-9/11 veterans. That said, the VA

To learn more about how this bill is being implemented and how it could impact you [click here](#).

Veterans Against Myeloma

Understanding Authoritative Bodies

[Title 38 of the Code of Federal Regulations](#)

Pensions, Bonuses, and Veterans' Relief

Title 38 of the Code of Federal Regulations (CFR) is the principal set of rules and regulations issued by federal agencies of the United States regarding pensions, bonuses, and veterans' relief. In particular, 38 CFR 3.307 codifies the rules on what is considered a presumptive service connection (either presumptive exposure or causation) for all service members who served on or after January 1, 1947, as well as any time limitations on disease manifestation.

To help understand regulations such as these, we will run through how this part of the CFR provides for Vietnam Era Veterans to receive benefits through the VA. Specifically Vietnam Veterans who served in Vietnam, Korea, or who operated, maintained or crewed a C123. Notes in red are VAM annotations meant to help explain this section and should not be taken as legal advice. Yellow highlights are for emphasis on important portions. This section is intended as reference only and should not be used in developing a claim for veteran benefits.

§3.307 Presumptive service connection for chronic, tropical, or prisoner-of-war related disease, disease associated with exposure to certain herbicide agents, or disease associated with exposure to contaminants in the water supply at Camp Lejeune; wartime and service on or after January 1, 1947.

(a) *General.* A chronic, tropical, or prisoner of war related disease, a disease associated with exposure to certain herbicide agents, or a disease associated with exposure to contaminants in the water supply at Camp Lejeune listed in §3.309 will be considered to have been incurred in or aggravated by service under the circumstances outlined in this section even though there is no evidence of such disease during the period of service. No condition other than one listed in §3.309(a) will be considered chronic.

This creates the service connection to the described exposure instances, including exposure to certain herbicides.

(1) *Service.* The veteran must have served 90 days or more during a war period or after December 31, 1946. The requirement of 90 days' service means active, continuous service within or extending into or beyond a war period, or which began

before and extended beyond December 31, 1946, or began after that date. Any period of service is sufficient for the purpose of establishing the presumptive service connection of a specified disease under the conditions listed in §3.309(c) and (e). Any period of service is sufficient for the purpose of establishing the presumptive service connection of a specified disease under the conditions listed in §3.309(f), as long as the period of service also satisfies the requirements to establish a presumption of exposure to contaminants in the water supply at Camp Lejeune under paragraph (a)(7)(iii) of this section.

(2) *Separation from service.* For the purpose of paragraph (a)(3) and (4) of this section the date of separation from wartime service will be the date of discharge or release during a war period, or if service continued after the war, the end of the war period. In claims based on service on or after January 1, 1947, the date of separation will be the date of discharge or release from the period of service on which the claim is based.

Both paragraphs (1) and (2) set the rules regarding eligibility through service under this section, which includes the timeframe for those exposed to Agent Orange and other herbicides.

(6) *Diseases associated with exposure to certain herbicide agents.* (i) For the purposes of this section, the term “herbicide agent” means a chemical in an herbicide used in support of the United States and allied military operations in the Republic of Vietnam during the period beginning on January 9, 1962, and ending on May 7, 1975, specifically: 2,4-D; 2,4,5-T and its contaminant TCDD; cacodylic acid; and picloram.

This is the beginning of the definitions section. Legal documents such as the CFR contain these sections to very narrowly specify what is and what is not being discussed in the rest of the code. This portion defines herbicide agent.

(Authority: 38 U.S.C. 1116(a)(4))

(ii) The diseases listed at §3.309(e) shall have become manifest to a degree of 10 percent or more at any time after service, except that chloracne or other acneform disease consistent with chloracne, porphyria cutanea tarda, and early-onset peripheral neuropathy shall have become manifest to a degree of 10 percent or more within a year after the last date on which the veteran was exposed to an herbicide agent during active military, naval, or air service.

This defines the timeframe for minimal disease manifestation. For myeloma, there is no time limitation.

(iii) A veteran who, during active military, naval, or air service, served in the Republic of Vietnam during the period beginning on January 9, 1962, and ending on May 7, 1975, shall be presumed to have been exposed during such service to an herbicide agent, unless there is affirmative evidence to establish that the veteran was not exposed to any such agent during that service. The last date on which such a veteran shall be presumed to have been exposed to an herbicide agent shall be the last date on which he or she served in the Republic of Vietnam during the period beginning on January 9, 1962, and ending on May 7, 1975. "Service in the Republic of Vietnam" includes service in the waters offshore and service in other locations if the conditions of service involved duty or visitation in the Republic of Vietnam.

This paragraph provides a presumption of exposure for those who served in the Republic of Vietnam, as well as defines that term to include those who served in the waterways of the country. This description has been interpreted by the VA to mean those who have set foot in the Republic of Vietnam or traversed the inland waterways of the country. See [Gray v. McDonald](#) for more information.

(iv) A veteran who, during active military, naval, or air service, served between April 1, 1968, and August 31, 1971, in a unit that, as determined by the Department of Defense, operated in or near the Korean DMZ in an area in which herbicides are known to have been applied during that period, shall be presumed to have been exposed during such service to an herbicide agent, unless there is affirmative evidence to establish that the veteran was not exposed to any such agent during that service. See *also* 38 CFR 3.814(c)(2).

This paragraph provides a presumption of exposure for Veterans who served in Korea during the specified timeframe.

(v) An individual who performed service in the Air Force or Air Force Reserve under circumstances in which the individual concerned regularly and repeatedly operated, maintained, or served onboard C-123 aircraft known to have been used to spray an herbicide agent during the Vietnam era shall be presumed to have been exposed during such service to an herbicide agent. For purposes of this paragraph, "regularly and repeatedly operated, maintained, or served onboard C-123 aircraft" means that the individual was assigned to an Air Force or Air Force Reserve squadron when the squadron was permanently assigned one of the affected aircraft



and the individual had an Air Force Specialty Code indicating duties as a flight, ground maintenance, or medical crew member on such aircraft. Such exposure constitutes an injury under 38 U.S.C. 101(24)(B) and (C). If an individual described in this paragraph develops a disease listed in 38 CFR 3.309(e) as specified in paragraph (a)(6)(ii) of this section, it will be presumed that the individual concerned became disabled during that service for purposes of establishing that the individual served in the active military, naval, or air service.

This paragraph provides a presumption of exposure for Veterans who served in or around C-123's that were used to spray herbicide agents during the Vietnam Era.

A VA accredited attorney can help you navigate these laws in order to develop a claim for benefits with the VA. [Click here](#) to search the VA database for accredited attorneys, claims agents or VSOs.

Veterans Against Myeloma

VSOs and VA Claims

[Click here](#) to find out how to file a claim for disability compensation or increased disability compensation. Working with an accredited veteran service organization who can help you prepare and file your claim is a helpful tool in navigating the process. VSOs do not usually charge for their services.

Veteran Service Organizations (VSOs)

VSOs are accredited by the VA and can help you in developing, filing and advocating for your claim. [Click here](#) to search the VA directory for accredited organizations. Here are direct links to several.

[The American Legion
AMVETS](#)

[Disabled American Veterans \(DAV\)](#)

[Veterans of Foreign Wars](#)

[Vietnam Veterans of America](#)

[National Association of American Veterans \(NAAV\)](#)

[Iraq Afghanistan Veterans of America \(IAVA\)](#)

[National Veterans Legal Services Program](#)

[Military Officers Association of America \(MOAA\)](#)

[VA Regional Locations](#)

Board of Veterans' Appeals

The Board of Veterans' Appeals ("the Board") makes decisions on appeals on behalf of the Secretary of Veterans Affairs. Although it is not required, a veteran's service organization, an agent, or an attorney may represent a claimant. Appellants may present their cases in person to a member of the Board at a hearing in Washington, D.C., at a VA regional office or by videoconference.



Decisions made by the Board can be found at www.index.va.gov/search/va/bva.html. The pamphlet, "Understanding the Appeal Process," is available on the website or may be requested by writing: Mail Process Section (014), Board of Veterans' Appeals, 810 Vermont Avenue, NW, Washington, DC 20420.

U.S. Court of Appeals for Veterans Claims

A final Board of Veterans' Appeals decision that does not grant a claimant the benefits desired may be appealed to the U.S. Court of Appeals for Veterans Claims. The court is an independent body, not part of the Department of Veterans Affairs.

Appellants may represent themselves before the court or have lawyers or approved agents as representatives. Oral argument is held only at the direction of the court. Either party may appeal a decision of the court to the U.S. Court of Appeals for the Federal Circuit and may seek review in the Supreme Court of the United States.

Published decisions, case status information, rules and procedures, and other special announcements can be found at <http://www.uscourts.cavc.gov/>. The court's decisions can also be found in West's Veterans Appeals Reporter, and on the Westlaw and LEXIS online services. For questions, write the Clerk of the Court, 625 Indiana Ave. NW, Suite 900, Washington, DC 20004, or call (202) 501-5970.

Veteran Spouse and Children Benefits

Upon the passing of a veteran who is currently receiving disability compensation, the spouse will not continue to receive those payments as they will cease. That does not mean the spouse is no longer able to receive any benefits at all, but rather that they need to now apply for [Dependency and Indemnity Compensation \(DIC\)](#). DIC is a tax-free monetary benefit generally payable to a surviving spouse or child of veterans who died from their service-connected disabilities.

For a spouse to qualify for DIC benefits, the veteran must have passed away due to a service-connected condition or the veteran's death was not service-related, but the veteran was entitled to receive VA disability compensation for a totally disabling condition (or TDIU).

[Click here](#) for more information.

Resources and Further Reading

Veterans Law Library

<http://www.veteranslawlibrary.com/index.htm>

Directory of Veterans Service Organizations

<https://www.va.gov/vso/>