

U.S. Medicine photo

Dr. John A. Gronvall

District officer... thanked for their service

and continue monitoring for drug resistance, the earlier use of AZT (below the previous 500-cell CD-4 lymphocyte break point) is a reasonable and appropriate therapy, an expert committee advised.

Assessing the latest clinical data from NIAID trials as well as recent Food and Drug Administration labeling action, approving the indication for expanded use in patients with less than 500 CD-4 lymphocyte counts, a panel of experts concurred with initiation of earlier therapy in HIV-positive persons who are asymptomatic, concluding there is no laboratory marker other than the CD-4 count that is necessary to decide when to initiate therapy.

Such CD-4 lymphocyte counts should be monitored every six months in HIV-positive individuals with CD-4 counts greater than 600, with testing every three to four months when AZT therapy or PCP prophylaxis begins, the panel said.

In those at CD-4 counts of 500, AZT dose should be a total of 500 mg daily regardless of whether the patient is symptomatic or not, the panel said.

Blood counts should be taken monthly for the first three months of AZT therapy, then quarterly. Hemoglobin less than 8 grams and granulocytopenia less than 750 mm³ are indications of more serious hematologic toxicity and require dose interruption with reinstitution of a lower dose or dose reduction alone," the panel said.

Patients receiving drugs for treatment of opportunistic infections or malignancies clearly require more frequent monitoring for toxicity, the panel said.

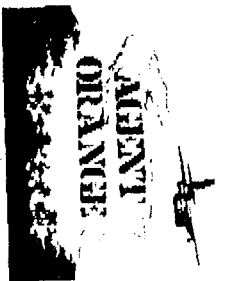
CDC: Time To Close The Book On Agent Orange

WASHINGTON—The Centers for Disease Control, urging an end to major new agent orange studies, carefully is defending its negative conclusions about the jungle defoliant's role in elevated cancer rates.

The Veterans Affairs Department nonetheless moved to service-connect Vietnam veterans suffering with the non-Hodgkin's lymphoma family of cancers because of the increased statistical risk demonstrated in the new CDC study for those who served in Vietnam.

VA cited a duty to resolve equivocal evidence by giving the veteran reasonable doubt that a disease was incurred in service. Scientific understanding of what chemical or environmental influence during that service is responsible for the association is secondary, VA said.

One congressional agency, the Office of Technology Assessment, said there was a very real possibility that the case-control lymphoma odds ratio—a relative risk of 1.47 compared



to men who did not serve in Vietnam—"is due to chance, bias or confounding." An OTA health program senior associate said additional study data provide "strong evidence that agent orange is not an important cause."

VA said its finding of a relationship between Vietnam service and non-Hodgkin's lymphoma was a policy determination but not a scientific finding. Of the 36,000 veterans whose previously rejected medical claims allege an agent orange relationship, approximately 1,600 to 1,700 involve non-Hodgkin's lymphoma, VA said, and will be reevaluated under the new rules. With administration estimates of 300 of those afflicted veterans dying each year, coupled with an estimated 450 new diagnoses becoming service-connected each year, the initial \$20 million to \$22 million annual benefit cost to VA probably will rise an additional \$2 million per year for an undetermined period, VA estimated.

Some congressional leaders said CDC's study reaffirmed their concerns that the agent orange issue is popular "chemophobia"

(Continued on page 38)

looking for a vulnerable target, such as an agent that blocks binding, reverse transcriptase or viral budding.

Dr. Fauci told the business group that examination of both structural and regulatory elements of the HIV genome may help develop mutants of the virus that could become dominant, but cannot

(Continued on page 32)

Soldiers With HIV Soon To Pose Key Disability Question

By Bernie Ankoey

WASHINGTON—The Department of Defense soon must decide what to do with HIV-infected soldiers who have been on the temporary disability retired list (TDRL) for five years, the maximum allowed by law.

The services began putting infected soldiers who were unfit for duty on TDRL in late 1985—meaning some soldiers are just months away from the maximum time allowed.

Soldiers on TDRL are paid 50 to 75 per cent of their base salary—depending on their physician evaluation board disability rating—and are eligible for space available health care at military facilities.

Pentagon officials estimate 1,300 soldiers are on TDRL, but say the great majority of them have several years of time left.

The number of HIV-positive soldiers who finish their five years this year is probably not going to be that big, related Col. Ernest Takatui, MC, USA, a disease control consultant to the Army surgeon general. But unless the military issues a policy soon the situation will become a bigger problem in 1991 and 1992, he said.

(Continued on page 33)

35 6/23/92

CDC Discounts Link Of Lymphoma, Dioxin

(Continued from page 31)

and no basis for public policy. "I will not let media hype affect my or this committee's decisions on any issue," House Veterans Affairs Committee chairman Rep. G.V. (Sonny) Montgomery (D., Miss.) said.

However, other members of Congress were not ready to let the Centers for Disease Control (CDC) off the hook in its quick dismissal of agent orange as a causative factor for elevated risk of non-Hodgkin's lymphoma (NHL) in the selected cancers study.

At a hearing of Rep. Montgomery's panel, CDC director Dr. William L. Roper encountered criticism for CDC conclusions drawn from a lymphoma distribution pattern it deemed to be different from the pattern of agent orange use in Vietnam.

"These data, along with evidence from other studies regarding the likelihood of Vietnam veterans' exposure to agent orange, make it quite unlikely that the increased risk of NHL among Vietnam veterans results from exposure to herbicides," Dr. Roper said.

The Vietnam veterans selected cancers study was one of the first CDC issues tackled by Dr. Roper, who had officially been in the director's job only a matter of weeks. He previously has held a variety of high-profile health policy jobs under the Reagan and Bush administrations.

It is time to begin wrapping up the agent orange issue, he told Congress, maintaining that future funds could better be spent on the other types of programs authorized under Rep. Montgomery's committee than on new major health studies focusing on an agent orange premise.

However, some House members were troubled by the administration's use of this absence of statistical association to discount an agent orange hypothesis. They cited earlier CDC conclusions that agent orange exposure indices are so inadequate that the premier agent orange epidemiological study of ground troops could not be done in the way Congress ordered.

The selected cancers study methodology in part relied on telephone survey questions, such as what chemicals the soldiers recalled handling 15 or 20 years ago. Some congressmen were unhappy that general troop location records were deemed an adequate alternative to blood tests for current body burden of dioxin.

Dr. Roper responded that CDC did not directly examine patients in the selected cancers study, and while it asked physicians taking care of the cancer patients if they would draw blood for such a test, CDC scrapped the idea because the physicians' positive response was low.

"A pint of blood is required, he noted, and these are weakened cancer patients. 'Their doctors just weren't willing to help us do this new study,'" Dr. Roper asserted.

Rep. Robert C. Smith (R., N.H.) challenged him on the data use. Even though CDC is saying this is not an agent orange study, the agency is implying it vindicates the herbicide from health effects, Rep. Smith declared.

"It's close to that, congressman," Dr. Roper replied. He said CDC found it could not explain any of the increased NHL risk by agent orange assessments.

"How can you conclude that if you didn't study it?" Rep. Smith asked. "I think we are playing word games," Dr. Roper said.

Rep. Smith asked why CDC did not directly study agent orange in the selected



U.S. Medicine photo
Dr. William L. Roper
"Their doctors just weren't willing to help."

cancers study. "Because," Dr. Roper replied, "Congress and the VA asked us to do a range of studies and today we're reporting on one of them."

Although CDC did not examine the cancer patients as its contractors did in the general ground troops study of the Vietnam experience, it did request pathology slides for each of the study subjects, asking an expert panel to confirm the diagnosis.

A CDC memo described the selected cancers research as "one of several studies undertaken to assess effects of military service in Vietnam and exposure to herbicides," but it also stated, "We only indirectly evaluated agent orange exposure."

Among the exposure criteria used were: Service on ocean-going vessels during the Vietnam war versus veterans whose tours literally included being based on Vietnam soil.

Service in III Corps, which the CDC memo called "the region of heaviest agent orange use," but which Rep. Lane Evans (D., Ill.) noted also included such areas as downtown Saigon.

The telephone survey asking if the soldier recalled handling equipment or containers involved in herbicide spraying, or recalled being in a defoliated area or any involvement in such spraying.

"It is unlikely that most Vietnam veterans absorbed measurable amounts of dioxin and agent orange, unless they handled or sprayed herbicides as part of their job in the military," Dr. Roper said.

VA secretary Edward J. Derwinski said he consulted with President Bush upon learning of the elevated risk of non-Hodgkin's lymphoma and they reached a policy decision he hoped would "help begin to mend the divisiveness and controversy" surrounding the issue.

"I want to make clear that my decision is not a scientific decision and should not be seen as that by anyone."

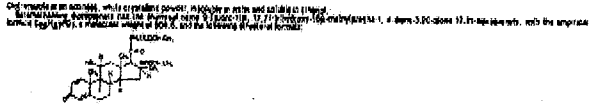
"I am instructing that regulations be immediately drafted to establish that the disease is service-connected for the purpose of disability compensation, and we will extend as much latitude as possible in awarding retroactive benefits and in assisting the widows and children of those veterans whose deaths were due to NHL."

Derwinski told a press conference that "the exact application of this ruling" will be explained in a forthcoming regulation which the agency hoped to publish late last month.



12141033
LOTIRISONE®
brand of aloxiimazole and bismethoxan dipropionate
Cream, USP
For Dermatologic Use Only
Not for Ophthalmic Use

DESCRIPTION: LOTIRISONE Cream contains a combination of aloxiimazole, USP, a synthetic steroidal agent, and bismethoxan dipropionate, USP, a synthetic corticosteroid. The combination is formulated in a white, waxy, cream base, with the empirical formula C₂₈H₄₂O₆, a molecular weight of 466.6, and the following structure:



How to Use: Apply a thin layer of cream to the affected area 2 to 4 times daily. Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet. Do not use on the hands. Do not use on the feet.

Warnings: Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

Directions: Apply a thin layer of cream to the affected area 2 to 4 times daily. Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

How to Use: Apply a thin layer of cream to the affected area 2 to 4 times daily. Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

Warnings: Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

Directions: Apply a thin layer of cream to the affected area 2 to 4 times daily. Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

How to Use: Apply a thin layer of cream to the affected area 2 to 4 times daily. Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

Warnings: Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

Directions: Apply a thin layer of cream to the affected area 2 to 4 times daily. Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

How to Use: Apply a thin layer of cream to the affected area 2 to 4 times daily. Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

Warnings: Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

Directions: Apply a thin layer of cream to the affected area 2 to 4 times daily. Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

How to Use: Apply a thin layer of cream to the affected area 2 to 4 times daily. Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

Warnings: Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

Directions: Apply a thin layer of cream to the affected area 2 to 4 times daily. Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

How to Use: Apply a thin layer of cream to the affected area 2 to 4 times daily. Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

Warnings: Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

Directions: Apply a thin layer of cream to the affected area 2 to 4 times daily. Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

How to Use: Apply a thin layer of cream to the affected area 2 to 4 times daily. Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

Warnings: Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

Directions: Apply a thin layer of cream to the affected area 2 to 4 times daily. Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

How to Use: Apply a thin layer of cream to the affected area 2 to 4 times daily. Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

Warnings: Do not use on the face, in the eyes, or on the mucous membranes. Do not use on the scalp. Do not use on the hands or feet. Do not use on the groin. Do not use on the perineum. Do not use on the chest. Do not use on the back. Do not use on the neck. Do not use on the arms. Do not use on the legs. Do not use on the feet. Do not use on the hands. Do not use on the feet.

