



**Presumptive Cancers Due to  
Agent Orange Exposure  
&  
Cholangiocarcinoma  
(Bile Duct - Liver Fluke Cancer)**



# Presumptive Cancers Due to Agent Orange Exposure

# Cancers Considered Presumptive From Exposure To Agent Orange

- **Prostate Cancer**
  - Cancer of the prostate; one of the most common cancers among men.
- **Respiratory Cancers** (includes lung cancer)
  - Cancers of the lung, larynx, trachea, and bronchus.
- **Soft Tissue Sarcomas** (other than osteosarcoma, chondrosarcoma, Kaposi's sarcoma, or mesothelioma)
  - A group of different types of cancers in body tissues such as muscle, fat, blood and lymph vessels, and connective tissues.

# Cancers Considered Presumptive From Exposure To Agent Orange

- **Multiple Myeloma**
  - A cancer of plasma cells, a type of white blood cell in bone marrow.
- **Non-Hodgkin's Lymphoma**
  - A group of cancers that affect the lymph glands and other lymphatic tissue.
- **Chronic B-cell Leukemias**
  - A type of cancer which affects white blood cells.

# Cancers Considered Presumptive From Exposure To Agent Orange

- **Hodgkin's Disease**

- A malignant lymphoma (cancer) characterized by progressive enlargement of the lymph nodes, liver, and spleen, and by progressive anemia.

# Cancers Considered Presumptive From Exposure To Agent Orange

- **Exposure to Agent Orange in Vietnam**
  - For the purposes of VA compensation benefits, Veterans who served anywhere in Vietnam between January 9, 1962 and May 7, 1975 are presumed to have been exposed to herbicides, as specified in the Agent Orange Act of 1991. These Veterans do not need to show that they were exposed to Agent Orange or other herbicides in order to get disability compensation for diseases related to Agent Orange exposure.

# Cancers Considered Presumptive From Exposure To Agent Orange

- **Service in Vietnam**

- Means service on land in Vietnam or on the inland waterways of Vietnam. This includes Veterans who:

- **Set foot in Vietnam**

- This includes brief visits ashore, such as when a ship docked to the shore of Vietnam or when a ship operated in Vietnam's close coastal waters for extended periods and crew members went ashore, or smaller vessels from the ship went ashore with supplies or personnel. The Veteran further must provide a statement of personally going ashore.

- Served on a ship while it operated on the **inland waterways of Vietnam**

# Cancers Considered Presumptive From Exposure To Agent Orange

- **Blue Water Veterans**
  - Are **not presumed** to have been exposed to Agent Orange or other herbicides **unless** they set foot in Vietnam or served aboard ships that operated on the inland waterways of Vietnam anytime between January 9, 1962 and May 7, 1975.
  - Evidence **confirmed through military records** must show that the Veteran was aboard one of these ships.



# Cancers Considered Presumptive From Exposure To Agent Orange

- **Exception:**
  - Blue Water Veterans with non-Hodgkin's lymphoma may be granted service-connection without showing inland waterway service or that they set foot in Vietnam. This is because VA also recognizes non-Hodgkin's lymphoma as related to service in Vietnam or the **waters offshore of Vietnam** during the Vietnam Era.

# Cancers Considered Presumptive From Exposure To Agent Orange

- **Korean Demilitarized Zone and Agent Orange Exposure**
  - Veterans who served in a unit in or near the Korean demilitarized zone (DMZ) anytime between April 1, 1968 and August 31, 1971 and who have a disease VA recognizes as associated with Agent Orange exposure are presumed to have been exposed to herbicides. These Veterans do not have to show they were exposed to Agent Orange to be eligible for disability compensation for these diseases.

# Cancers Considered Presumptive From Exposure To Agent Orange

- VA and the Department of Defense must determine the Veteran's unit operated in the DMZ area and the Veteran was physically there.
- VA's final regulation presuming herbicide exposure for these Veterans took effect on February 24, 2011.

# Cancers Considered Presumptive From Exposure To Agent Orange

- Thailand Military Bases and Agent Orange Exposure
  - Vietnam-era Veterans whose service involved duty on or near the perimeters of military bases in Thailand anytime between February 28, 1961 and May 7, 1975 may have been exposed to herbicides and may qualify for VA benefits.

# Cancers Considered Presumptive From Exposure To Agent Orange

- The following Veterans may have been exposed to herbicides:
  - **U.S. 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.
  - **U.S. Army Veterans** who provided perimeter security on RTAF bases in Thailand anytime between February 28, 1961 and May 7, 1975.

## Cancers Considered Presumptive From Exposure To Agent Orange

- **U.S. Army Veterans** who were stationed on some small Army installations in Thailand anytime between February 28, 1961 and May 7, 1975. However, the Army Veteran must have been a member of a military police (MP) unit or was assigned an MP military occupational specialty whose duty **placed him/her at or near the base perimeter.**

# Cancers Considered Presumptive From Exposure To Agent Orange

- **Herbicide Tests and Storage in the U.S.**

- Agent Orange and other herbicides used in Vietnam were tested or stored elsewhere, including many military bases in the United States.

\*\*\* The link below gives a complete listing of where Agent Orange was tested and stored in the U.S. \*\*\*

[http://www.publichealth.va.gov/exposures/agentorange/outside\\_vietnam\\_usa.asp](http://www.publichealth.va.gov/exposures/agentorange/outside_vietnam_usa.asp)

# Cancers Considered Presumptive From Exposure To Agent Orange

- **Herbicide Tests and Storage Outside the U.S.**

- Agent Orange and other herbicides used in Vietnam were tested or stored elsewhere, including in countries outside of the U.S.

\*\*\* The link below gives a complete listing of where Agent Orange was tested and stored outside of the U.S. \*\*\*

[http://www.publichealth.va.gov/exposures/agentorange/outside\\_vietnam.asp](http://www.publichealth.va.gov/exposures/agentorange/outside_vietnam.asp)



# Cancers Considered Presumptive From Exposure To Agent Orange

## ■ Facts About Herbicides (Agent Orange)

- Agent Orange is a blend of tactical herbicides the U.S. military sprayed from 1962 to 1971 during Operation Ranch Hand in the Vietnam War to remove trees and dense tropical foliage that provided enemy cover.
- More than 19 million gallons of various “rainbow” herbicide combinations were sprayed, but Agent Orange was the combination the U.S. military used most often. The name “Agent Orange” came from the orange identifying stripe used on the 55-gallon drums in which it was stored.

## Cancers Considered Presumptive From Exposure To Agent Orange

- **Heavy sprayed areas included** forests near the demarcation zone, forests at the junction of the borders of Cambodia, Laos, and South Vietnam, and mangroves on the southernmost peninsula of Vietnam and along shipping channels southeast of Saigon.
- The U.S. Department of Defense developed these tactical herbicides specifically to be used in “combat operations.” They were **not commercial grade herbicides** purchased from chemical companies and sent to Vietnam. Tactical herbicides also were used, tested, and stored in areas outside of Vietnam.

# Cancers Considered Presumptive From Exposure To Agent Orange

- Things To Remember When Writing A Claim

- If the veteran was in one of the areas considered presumptive for exposure to Agent Orange, all we need to show is a diagnosis of one of the previously mentioned cancers. **NO NEXUS IS NEEDED.**

- Remember to include all secondary disabilities as a result of the cancer, treatment, & medications.



# **Cholangiocarcinoma**

## **(Bile Duct - Liver Fluke Cancer)**



# Cholangiocarcinoma (Bile Duct - Liver Fluke Cancer)

- **Cholangiocarcinoma** is a cancerous (malignant) growth in one of the ducts that carries bile from the liver to the small intestine.
- **Causes, incidence, and risk factors**
  - Cancerous tumors of the bile ducts are usually slow-growing and do not spread (metastasize) quickly. However, many of these tumors are already advanced by the time they are found.
  - A cholangiocarcinoma may start anywhere along the bile ducts. These tumors block off the bile ducts.

# Cholangiocarcinoma (Bile Duct - Liver Fluke Cancer)

- They affect both men and women. Most patients are older than 65.
- **Risks for this condition include:**
  - Bile duct (choledochal) cysts
  - Chronic biliary and liver inflammation
  - **History of infection with the parasitic worm, liver flukes**
  - Primary sclerosing cholangitis
  - Ulcerative colitis
- Cholangiocarcinoma is rare. It occurs in approximately 2 out of 100,000 people.


# Cholangiocarcinoma (Bile Duct - Liver Fluke Cancer)

- Cholangiocarcinoma (CCA) is a major public health problem in **South East Asia** where the prevalence of this cancer is highest in the world.
- Liver flukes, such as *Clonorchis sinensis* or *Opisthorchis viverrini*, usually enter human's gastrointestinal tract after ingestion of raw fish or drinking of contaminated water. Parasites travel via the duodenum into the host's intrahepatic or extrahepatic biliary ducts. Liver flukes cause bile stasis, inflammation, periductal fibrosis and hyperplasia, with the subsequent development of cholangiocarcinoma.

# Cholangiocarcinoma (Bile Duct - Liver Fluke Cancer)


- Prominent signs and symptoms of cholangiocarcinoma
  - Abnormal liver function tests, abdominal pain, jaundice, and weight loss.
  - Generalized itching, fever, and changes in color of stool, or urine may also occur.
  - The disease is diagnosed through a combination of blood tests, imaging, endoscopy, and sometimes surgical exploration, with confirmation obtained after a pathologist examines cells from the tumor under a microscope.






# Cholangiocarcinoma (Bile Duct - Liver Fluke Cancer)

- Cholangiocarcinoma is considered to be an incurable and rapidly lethal malignancy unless both the primary tumor and any metastases can be fully resected (removed surgically). No potentially curative treatment yet exists except surgery, but most patients have advanced stage disease at presentation and are inoperable at the time of diagnosis. Patients with cholangiocarcinoma are generally managed - though never cured - with chemotherapy, radiation therapy, and other palliative care measures.




# Cholangiocarcinoma (Bile Duct - Liver Fluke Cancer)


- Cholangiocarcinoma is not considered presumptive for veterans who served in South East Asia, but with the proper medical opinion and verification of service in South East Asia, service connection may be granted.
  - It is very important to make sure the veterans primary care physician knows the veteran served in South East Asia, and was exposed to the liver fluke through the consumption of the fish and water.
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# Cholangiocarcinoma (Bile Duct - Liver Fluke Cancer)

- When requesting a medical opinion make sure the veterans primary care physician states that it is “more likely than not” that the veterans Cholangiocarcinoma is due to his military service in South East Asia, and that his rationale for the medical opinion includes the fact that the occurrence of Cholangiocarcinoma in South East Asia is 10 times higher than anywhere else in the world.




# Cholangiocarcinoma (Bile Duct - Liver Fluke Cancer)

- Most cases diagnosed are done so when the cancer has progressed to the stage where it is incurable, so please make sure to give the veteran a **Disability Benefit Questionnaire** that his primary care physician can fill out, and also remember to request that the claim be expedited due to hardship through the Department of Veterans Affairs.
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# Cholangiocarcinoma (Bile Duct - Liver Fluke Cancer)

- When writing the claim also make sure to include any areas where the Cholangiocarcinoma has spread to, as those will be considered as secondary issues. Also, make sure to list all other secondary issues caused by treatments or medications.
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QUESTIONS ?