

Congressional Hearings

Anthrax Vaccination Immunization Program

House Government Reform and

Oversight Committee

Chairman Shays Presiding

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Written Statement by:

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Mr. Chairman and members of the committee, I sincerely thank you for your interest in the Anthrax Vaccine Immunization Program and for allowing me to testify to you today on the effects and obstacles I have faced since I have started the vaccine program. Please note that any opinions I express are my own and in no way reflect the opinions of the Michigan Air National Guard or those of my superior officers.

I am currently a Technical Sergeant and a civil service GS-9, Management and Systems Analysis assigned to the 110th Logistics Squadron, Battle Creek, Michigan. I received my first of the anthrax series on the 18th of September in preparation for a possible deployment to Qatar. The deployment was voluntary and the vaccine was a prerequisite to the deployment. To my knowledge, the 110th Fighter Wing has yet to be notified of the implementation date for mass inoculations. Prior to volunteering for the deployment I had no knowledge of the anthrax vaccine pro or con. I acted on blind faith in the Department of Defense, my superiors and trusted in the individuals I felt were qualified to administer the vaccine. I considered this vaccine as safe as all other vaccines that I have received in the line of duty. Following the first two shots of the series I noticed that I was extremely fatigued and nauseous. However, during the same period of time I was working numerous hours of over time in preparation of an upcoming operation readiness inspection. I attributed these symptoms to the extra hours and stress, not to the vaccine. On October 16, 1998, I received number 3 of the inoculation series. Coincidentally this inoculation coincided with the start of our ORI-operational readiness inspection. The third inoculation not only enhanced the same symptoms but I also noticed that I was becoming increasingly short tempered, emotional, nauseous, experienced loss of appetite, and achy joints. Once again, I attributed this to the stress and long hours of our inspection. For the following month, my health continued to become progressively worse until I finally sought medical attention on November 12, 1998. During my first visit I was placed on antibiotics for bronchitis and had blood drawn for possible thyroid problems. During my follow up visit the following week, my test had returned negative to thyroid problems. At this time my physician and I discussed other possibilities including the possibility of Chronic Fatigue Syndrome. Being that I was also a smoker with a chronic cough we (my physician and I) decided upon a treatment of Wellbutrin. She felt it would serve two causes: one assists me to quit smoking, two it is an antidepressant used to treat Chronic Fatigue. During the following two weeks my symptoms appeared to decrease however I developed an allergic reaction to the antidepressant Wellbutrin and was placed on Prozac. The following month my nausea, and cough subsided however I was still fatigued, experiencing achy joints and moodiness.

On March 14, 1999 at approximately 3:15 p.m., I was notified by our acting commander that the clinic was waiting for our group to report to the clinic for our 4th anthrax vaccine. Upon our arrival at the clinic the medical personnel were quite agitated and appeared unorganized. For the first time I felt apprehensive about receiving this or any other vaccine. We questioned the medical staff as to why we were receiving our shot early. We were told that it was ok as long as we received it within a 24-hour window. One of the individuals in front of me, the nurse actually had the needle up to his arm when MAJ Jermeay yelled "don't inject him" he's not due until Friday. We were then all put into a "holding pattern" while MAJ Jermeay instructed the medical staff not to inject anyone else until he personally approved the injection. The others and myself were then given our inoculations and sent to the holding area. While waiting to be released I noticed that my shot record indicated the date of inoculation as 16 March 99, as opposed to 14 March 99. I compared my records with the other individuals present and there's also reflected the 16th. SSG Martin questioned MAJ Jermeay on why the date read the 16th. He appeared upset collected our shot records and disappeared. When he returned with our shot records, the dates had been changed to reflect the date of inoculation as the 15th of March. We once again questioned him on this and were told that the date was within the 24-hour window so that it was ok. That evening I started to feel ill, chills, fever, and nausea.

My workweek consists of 4 ten-hour days with Monday being the off day. I stayed home all day and could hardly get out of bed to take my son to school. Tuesday, March 16, 1999, I went to work and barely made it through the day. My symptoms had increased to include headache, dizziness, diarrhea, and slight abdominal pain.

On Wednesday, March 17, 1999 as Non Commissioned Officer In charge of the Base Honor Guard, I rendered honors at a memorial service for a former member of the Michigan Air National Guard and United States Air Force. During the service I developed tremors and dizziness. I went home immediately following the service. The next few days were spent in bed. By Friday, March 19, 1999 my symptoms had increased to a severe tremor in my right arm and shortness of breath I finally sought medical attention. During the medical evaluation I stated that I had received my 4th anthrax inoculation on Sunday, March 14, 1999. My physician ordered blood work, urinalysis and referred me to an infectious disease and pulmonary specialist. Upon my consultation with him on March 23, 1999, he in turn referred me to a neurologist for the tremor. He further advised me that I was having an adverse reaction to the vaccine, and that I needed to inform my superiors so that they could complete the necessary paperwork. He also advised me not to receive any further shots. Later that day I informed my supervisor (the first link in my chain of command) of what I had been told by the doctor. He in turn passed it up the chain of command. The following day March 24, 1999, I received a phone call at home from my supervisor stating that the information had been passed along to the Chief of Supply, the Group Commander, LTC Thomas Allen and also to the Senior Medical Technician, SMS Kate Keller. He further requested that I call SMS Keller, as he indicated that she was confused to why the clinic needed to complete the VAERS form. He also informed me that they needed to have Randi Martin and myself sign a release letter authorizing our doctors to send the clinic their findings on our illnesses. We also discussed the issue of leave during this conversation. He further stated that I should not have to use my leave for this illness since it was related to the military and that the clinic in his opinion should be completing an LOD- line of duty.

SMS Watkins also informed me at this time that he had discussed the situation with LTC Allen and that he would have our Squadron Commander, MAJ Karen Dvorak research the issue once she returned from Texas on March 30th. I feel it's important to recognize at this time that we as a group were placed on Annual training orders for each inoculation with the exception of the 4th shot which we were in UTA- Unit Training Assembly status. We were told originally that we needed to be in military status to receive the anthrax vaccine. In case we had an adverse reaction to the inoculation the military would be responsible for our medical care. March 25, 1999 I called SMS Keller to inquire what type of documentation if any she may need. I was informed that she needed me to sign a medical release form. I inquired if this was for the LOD and she replied yes and that we would be scheduled to see one of our military physicians the next drill weekend. She also appeared to be unaware of the VAERS form when questioned.

March 30, 1999, I went to work for the first time since March 17th, 1999. We met with our squadron commander at 2:00 p.m. We gave her all our information to include medical questionnaires, copies of Immunizations records indicating the date change and also that we had been given an expired vaccine. She questioned us as to why the medical squadron hadn't initiated a line of duty investigation yet.

March 31, 1999, I was notified by SSG Randi Martin and TSG Dave Churchill that MAJ Dvorak had a meeting with everyone to conclude her findings. They were as follows:

1. The immunization clinic had made an administrative error in our immunization records that we had not received FAV 030, but had actually received FAV 036. We were all instructed to turn in our records so that the clinic could correct this error.
2. We were to all complete the VAERS form and turn into SMS Keller for placement in our medical records.
3. Get any lab results from our civilian physicians and turn those into SMS Keller.
4. Sign a medical release form; give this in turn to SMS Keller.

It was relayed to me that it was made apparent by MAJ Dvorak that concern for our health or providing us any assistance was no longer the issue. I found this to not only be disturbing but totally unacceptable. TSG Churchill and myself scheduled a 5:00 p.m. meeting with COL Roger Siedel, Vice Wing Commander. During the meeting with COL Siedel he was very concerned and distraught over the events that had transpired following Drill weekend. The impression was that he was unaware of many of our concerns. He assured us that our concerns were his top priority and would investigate what was happening.

On Friday, April 2, 1999, COL Siedel called a meeting with the individuals that had received their 4th inoculation. Several of us were still off work but attended anyway. The meeting consisted of COL Siedel, Vice Wing Commander, MAJ Dvorak, Logistics Squadron Commander, MAJ Donna Kowalski, 110 FW/Comptroller, SMS Keller, MSG Mary Moross, Medical squadron, and CPT Alice Neidergall, 110FW/JAG. During the meeting COL Siedel expressed his main concern was our health. He had put the above team together to determine the legality issues regarding technician versus military status, financial issues, etc. He continued to state that SMS Keller was working the issue of having us be seen by a military allergist at Wright Patterson Air Force Base. The first possible date they had open was April 23, 1999; they were nevertheless working all angles to have us examined earlier. He further stated that at this time they unfortunately would have to send us in an active duty non pay status. Monday April 5, 1999 I received a call at home from MAJ Dvorak. She stated that the clinic was able to secure 4 appointments on Wednesday, April 7, 1999 with the allergist from WPAFB for TSG Dave Churchill, SSG Randi Martin, SMS Harold Stewart and myself. She further informed me that MSG John Zink would be driving us down in a military vehicle. I asked her several questions regarding what status we were going to be traveling in, also would we be spending the night, who were we going to be seeing etc. She was short with me stating that I would find out these answers when I arrived at the base in the morning and to be there at 7:30 a.m.

Upon arrival at the base the following morning, we were all instructed to sign out our shot records from SMS Keller. I asked SMS Keller what was to transpire throughout the day. She provided me with an appointment letter and stated that MSG Zink would provide the answers to any questions we might have on the way to Wright Patterson. We departed Battle Creek at 7:45 a.m. and arrived at Wright Patterson AFB, at 12:45 p.m. I was scheduled for a 1:00 p.m. appointment with Dr. (COL) Garramone. Dr Garramone questioned me thoroughly concerning my symptoms and performed what I thought to be a thorough examination, including a pulmonary exam. I feel it's important to note that out of the 11 individuals that were examined by medical personnel at Wright Patterson AFB, was the only one COL Garramone examined. COL Garramone recommended that I be examined by a neurologist and personally escorted me to the Neurology clinic. However, due to their heavy schedule that day, they were unable to see me until the next day at 8:00 a.m. COL Garramone then phoned Battle Creek at 2:00 p.m. and talked with LTC James Barker, Support Group Commander, requesting that I be allowed to remain until the following day to be examined by the neurologist and to have further blood and urinalysis work completed. By 4:00 p.m. we had still not received an answer from Battle Creek on if we were to return to the base or stay etc. By 4:45 p.m. the others had all completed their examinations and laboratory work however we were all waiting for a decision from Battle Creek on if we were to return home. The intention of the 110 Fighter Wing was for the other individuals to return home after placing me in a hotel. Furthermore, the only information provided was that MSG Zink was to place me in a hotel. There were no answers as to what I would use for transportation, availability of meals etc. At this point due to the severity of my illness and pure frustration of my superiors incapacity to make a decision I started to cry. Between 4:45 p.m. and 5:15 p.m. COL Garramone made the decision that he was going to send me home. He prescribed a pain medication and completed an AF Form 422, physical profile indicating a possible neurologic reaction to anthrax vaccine and to also rule out fibromyalgia. He talked further with COL Seidel and informed him of his decision to send us all home and instructed him that I needed to be followed up with a neurologist possibly an IMA doctor that attends drills at the 110 Fighter Wing Clinic. We departed Wright Patterson AFB, OH at 5:30 p.m. and arrived in Battle Creek at 11:30 p.m. very exhausted. It was apparent that very little preparation had gone into this trip. The following two days I remained at home recovering. On Friday April 9, 1999, I received a call from my supervisor. He stated that even though I was on a physician's excuse that I needed to attend drill on Saturday April 9, 1999 because I was due a periodic physical, and once it was complete I would be able to return home. Reported to the base clinic at 8:00 a.m. April 9, 1999 for my physical. The military physicians performed a complete physical, recorded all of my recent symptoms and then released me at approximately 10:00 a.m. Later that evening my husband took me to the emergency room due to severe abdominal and back pain, dizziness and headaches. After 7 hours and numerous tests I was returned home with more tests and follow-ups scheduled. Once again received another diagnosis to my mystery illness. It is my experience that there is a general lack of knowledge at our installation and with several civilian physicians in our area concerning the anthrax vaccine.

The remaining few weeks consisted of more doctor visits and numerous diagnostic tests being performed. As of this writing I have worked 9 hours since March 17, 1999 and have used close to 400 hours of leave overall due to illness since October 1998. I am still suffering from chronic fatigue, shortness of breath, memory loss, weight loss, mood swings, abdominal pain, and occasional nausea and diarrhea. To date I have not been notified if or when I will be scheduled for a follow-up with a military neurologist that was recommended on April 7, 1999 by COL Garramone. On April 22, 1999 we received a letter concerning Line of Duty paperwork instructing us to complete ASAP. I find it totally appalling and unacceptable that over a month has past since our symptoms were first reported and this paperwork has just been started. I am not and would never profess to be a qualified medical individual however; I do feel as though I am in touch with my body and when something is not right. Since I have been receiving the anthrax vaccinations my system is rebelling against something and I have become seriously ill.

I've taken my career seriously devoting 14 years of my life playing a role in the defense of our great nation. Throughout my tenure with the 110th Fighter Wing I have always been amongst of the first to volunteer in support of the mission, always challenging myself to go above and beyond what is required of my position. Unceasingly devoting numerous hours to the Base Honor Guard and to other community service events. However, the events of the past few weeks have tarnished faith in my unit, and the Department of Defense. I feel as though I have been misinformed and betrayed by the same country I seek to defend. It is my impression through my own research that the Anthrax Vaccination Immunization Program belongs to and the success lies with the Line Commanders. Yet, whenever a question has been addressed to our Commander, they have repeatedly gone unanswered. Furthermore, I find it extremely disheartening that the only superior officer within our unit that has shown concern has been COL Roger Siedel. The response, lack of knowledge, and inaccurate record keeping from the Medical Squadron has been a disgrace. I consider trust, integrity, and accountability to be a vital link between all leadership and employees. Is it possible that leadership is not taking an active role in these three values? Is it possible that this is why servicemen and women are choosing to defy a lawful order and not to be inoculated with the anthrax vaccine? I was personally very hesitant to testify in this hearing for fear of reprisal. It was only through the encouragement of family and friends that I was convinced that I needed to come forward with my experiences. The reality is that numerous individuals are becoming ill following the anthrax vaccine, numerous individuals are afraid to come forward for fear of reprisal, loss of income and the ability to support their families. It is for my fellow servicemen and women that I testify before you today. I pray that others will also have the strength to come forward.

I again thank you for the honor and privilege of testifying before you today. I ask the Subcommittee seriously considers at the minimum a moratorium on the Anthrax Vaccination Immunization Program until all questions concerning the safety and health of our servicemen and women are answered.