

Testimony of: Michael L. Gros M.D.

Good morning ladies and gentlemen of the committee, and thank you for inviting me to speak before you regarding the unfortunate water contamination issue involving the Marine base at Camp Lejeune, North Carolina.

My name is Michael L. Gros, M. D.

My involvement with this event spans the time period from July 1980, to July 1983, when I lived at H-57, MOQ and worked at the Naval Hospital as a staff Ob/Gyn. A brief chronology of my service dates is provided below:

B. A. 1974, Trinity University, San Antonio, TX
M.D. 1976, Baylor College of Medicine, Houston, TX, Navy Scholarship
Internship and Residency in Ob/Gyn, 1976-1980, NRMCMC, Portsmouth, VA.
Staff Ob/Gyn, July 1980-July 1983, Camp Lejeune, N. C., LCDR, MC, USNR
Private practice Ob/Gyn, 1983 to 2002, Houston, TX.
Medically retired May 2002 to present due to Non-Hodgkins Lymphoma

I come before you as a representative of many individuals and families who were adversely affected over a forty or more year time frame by contaminated water at Camp Lejeune. I am unfortunately well qualified by virtue of a harrowing and life altering experience with Non-Hodgkins lymphoma and its treatment involving a bone marrow transplant (BMT) and the unfortunate development of severe chronic graft vs. host disease (GVHD) from which I now suffer, continuously.

My family and I moved to Camp Lejeune in July 1980, after I finished my U.S. Navy internship and residency in OB/GYN at NRMCMC, Portsmouth, VA. Ironically, we desired Camp Lejeune as a duty station since it was stateside and, at the time, seemed safe for the family. Little did we know that quite the opposite was true.

Unknown to us, Camp Lejeune had ground water and well water contamination with various volatile organic compounds such as trichloroethylene (TCE) and perchloroethylene (PCE), among other chemicals, that may have originated as early as the 1950's. This was due to improper disposal of these agents used in machinery overhaul and improper location of wells in areas affected by seepage into the water table. Our house at H-57 MOQ was supplied by the Hadnot Point water system. Acceptable levels of TCE are <5ppb. Our house had at least 1,400 ppb TCE (maybe higher), and one well, #651 in the Hadnot Point field had an astounding 18,900 ppb TCE when finally taken off line 1985, two years after we left.

So for all of our three years living on base at H-57 MOQ we were ingesting and inhaling this poisonous water and its vapor from showering and bathing (worse when heated up). Our food and the baby's formula and toddler's Kool Aid were mixed with this seemingly clean water. This poisoning has no taste and no smell and so is undetectable by usual means. The cancerous effects do not appear until 10-15 years post exposure (latency period noted in ATSDR documents).

From 1980 onwards, Camp Lejeune's own documents reveal that routine water tests typically performed on chlorinated water systems (trihalomethanes, THM) showed the presence of major contamination from other organic compounds requiring further action. Levels of these contaminants were so high as to preclude THM testing. No records of any further action on Camp Lejeune's part exist. In fact, this THM testing was simply again repeated at intervals with similar results and again a shocking lack of further clarification. Where was CLNC's concern for the safety of its residents?

The technology involved in finding these poisons was readily available, but was either neglected due to incompetence or deliberately not done for unknown reasons. It is incomprehensible that this happened. Who made such bad decisions? Why was this ghoulish experiment performed on our military

volunteers and their families?

Such a failure to follow up on abnormal tests in my profession would have caused me to lose my medical license or at best, face a malpractice suit I was sure to lose. I am sorry that I think from a doctor's perspective, but I feel people in charge of the welfare of others, such as managers of public water systems, should be held to standards of conduct commensurate with the serious nature of their jobs.

In spite of multiple handwritten warning notes on repeated test reports over several years period of time, the advice of the base's own outside water consultants to further identify and quantitate the poisoning chemicals was repeatedly ignored. Amazingly, no follow up tests were ever done to even identify the nature of the interfering chemicals or their sources. Even more incredible was the Marine Corp's attempt to later justify this gross neglect with the fact that no "law" existed requiring them to exercise the good judgment and caring that any other contemporary water supplier would have had for its customers. For example, the horribly polluted well, #651, (drilled next to the dump!) was not taken off line until 1985, two years after we left Camp Lejeune. Were we all unwitting lab rats?

Since chemicals such as trichloroethylene and perchloroethylene are undetectable by the usual modes of taste and smell, when I left active duty to move to Houston, Texas, I was completely unaware that we had been systematically, unethically, and heartlessly poisoned during our three years at Camp Lejeune.

I began a private practice in OB/GYN in Houston, TX. Although I felt well, I began to show subtle lab abnormalities as early as 1993 and 1994, and definitely by 1997, these lab tests showed a marked shift in my complete bloodcount with an elevation of lymphocytes. To make a long story short, from 10-15 years removed from living at Camp Lejeune, I had developed a slowly progressive and untreatable Non-Hodgkins Lymphoma called Cutaneous T-Cell Lymphoma (CTCL), otherwise known as Mycosis Fungoides.

My only treatment option would eventually be a bone marrow transplant when the disease reached such a point that my resistance to infection would be so low that I could no longer see patients.

As I was a seeing patients one day in November 1999, I was contacted out of the blue by Marie Sochia from the Agency for the Toxic Substance and Disease Registry (ATSDR). She informed me that my younger son, Tom, conceived and born at Camp Lejeune, was to be studied as part of an "in utero" study, due to his chemical exposure at Camp Lejeune. This was my first knowledge of any toxic water at my former base.

It was then that I made the connection between my disease and TCE and PCE exposure, which I had suffered during three years of continuous exposure at Camp Lejeune, North Carolina. My son seemed fine. However, I had progressive lymphoma. I was happy to know that an infant study was to be done, but I was shocked to learn that no studies were felt by ATSDR to be warranted on the thousands of exposed adults. I vigorously dispute this conclusion.

In May 2002, my disease had progressed to the point where I had dangerously low immunity with the lymphoma replacing fifty percent of my bone marrow. I had to abruptly abandon my practice and be admitted for my only remaining chance at a cure, a bone marrow transplant (BMT).

As many of you know, this is not a walk in the park. BMT carries a significant mortality risk related to acute and long-term complications. Thankfully, the procedure rather quickly put the lymphoma in remission, but, unfortunately, has left me with severe chronic graft versus host disease. The quality of my life has really degenerated as a result. Most of my ability to recreate and travel has been largely destroyed. I can no longer tolerate much sun exposure or outside activity. But at least I am still alive and kicking and am finally here at long last to present this story to you all.

Here is a list of most of the major medical setbacks I have endured over the last five years:

Graft versus host disease of liver, lungs, skin, eyes, gastrointestinal tract

Pneumonia-bacterial
Pneumonia-Pneumocystis carinii
Cellulitis
Acute and chronic renal failure
Cataracts-both eyes
Diabetes
Heart failure
Gastroenteritis
Toxoplasmosis of the brain
Squamous cell carcinoma of the skin
Osteopenia
Baldness
Depression
Hearing loss secondary to medications
Anemia
Fatigue
Septicemia from a central line

My battle to stay healthy and out of the hospital has easily exceeded 4.5 million dollars at this point in time. No telling what my total medical bills will amount to, but while I lay in bed in the aphaeresis unit for four hours getting my blood circulated in the photophaeresis apparatus, I have plenty of time to worry about how I am going to stay alive and still avoid bankruptcy.

I was awarded 100% service connected disability for my disease, but have found funding help for anything other than pharmacy items to be very difficult to access at the V.A. hospital in Houston, TX.

I was forced to give away my practice at a great financial loss. Because of my need for chronic immune suppression, I will probably never be able to see patients again. All of the dedication and years of training I invested from the seventh grade onward have been wasted by a career cut short in its prime by this debacle.

My wife and I now have new full time careers...just staying alive and figuring out how to pay for it all.

I am here today to urge you to compel ATSDR, or preferably another truly impartial agency, to investigate the fates of those adults exposed as I was. I continually receive phone calls from adults similarly exposed, suffering from lymphomas, yet just now finding out about this event. I am certain most of the hapless victims of this silent disaster are either dead or unaware why they are sick at an early age with cancer. They need help with their medical expenses and monitoring for future medical and possible developmental problems in their progeny.

In my opinion, there is an ongoing coverup involving this disaster, and ATSDR may well be "running the point" for the responsible governmental agencies or chemical manufacturers. The absence of relevant documents showing any reasonable chain of responsibility, combined with the trumped up and utterly unbelievable attempts at public relations put out by the Marine Corps, are very telling in this regard. Instead of wisely spending the tax payors money finding and assisting all those exposed to this chemical cocktail, the Marine Corp has seen fit to hire a public relations and strategy firm (Booze Allen Hamilton) to arrange misleading town meetings, whose predetermined exculpatory findings insult our intelligence. It seems no one is responsible for any of this man-made disaster. Ladies and gentlemen, I do not believe any of this rubbish.

This is not a faceless disaster. There were many people undoubtedly involved in the initial mismanagement and subsequent cover up of this entire event. There certainly has to be some creditable explanation for at least the period in which my family was involved from 1980 to 1983. There is a chain of command in the Navy and Marine Corps. Decisions surrounding management of a public water system on a Marine base are not made in a vacuum.

A complete investigation needs to be initiated with congressional oversight and congressional subpoena power as needed. Some victims even feel that possible criminal activity may have been involved. The criminal investigation begun several years ago at the request of a number of the victims and their families needs to be reopened. We also need to make sure this is not something akin to a version of the infamous Tuskegee experiment.

Members of the committee, I thank you for allowing me to speak before you today.

I would be happy to answer any questions you might have.