

EIGHTY-EIGHTH NATIONAL CONVENTION  
OF  
THE AMERICAN LEGION  
SALT LAKE CITY, UTAH  
AUGUST 29, 30, 31, 2006

**RESOLUTION NO.:** 64

**SUBJECT:** Support Presumption of Service  
Connection for Hepatitis C

Origin: Michigan

Submitted by: Veterans Affairs and Rehabilitation

WHEREAS, Hepatitis C is an easily transmittable blood-borne virus, which can result in long-term, potentially fatal health problems; and

WHEREAS, Because of the exposure risk factors directly related to military service, veterans have a much higher incidence of hepatitis C than the general population; and

WHEREAS, The Department of Veterans Affairs (VA) estimates 10 to 20 percent of veterans currently have hepatitis C, compared to under 2 percent for the general population; and

WHEREAS, Vietnam veterans are the group most directly affected by the hepatitis C virus; and

WHEREAS, Many veterans who contracted hepatitis C 25 or 30 years ago or more in service are now showing signs of severe liver disease and 52 percent of the liver transplants done by VA are for veterans with hepatitis C; and

WHEREAS, In 85 percent of cases, no acute symptoms would have shown up at the time of infection with hepatitis C; and

WHEREAS, Military training and combat situations offer many opportunities for transmitting the blood-borne hepatitis virus through blood to blood contact; and

WHEREAS, No effective blood test for hepatitis C was available until 1992; and

WHEREAS, Veterans with hepatitis C who were treated for acute hepatitis during military service and who now claim service connection are generally denied by VA, because they cannot prove the current hepatitis C is related to the hepatitis noted in service; and

WHEREAS, The Board of Veterans' Appeals often rejects claims for service connection for hepatitis C, because the veteran's medical records do not show the presence of hepatitis C at time of discharge from service; and

WHEREAS, Because of the nature of this disease and the long latency period, veterans who experience certain exposure risk factors in service, such as: blood transfusion prior to 1992; exposure to blood on or through the skin or mucous membrane; hemodialysis; experience of a needle-stick accident or medical event involving a needle, not due to the veteran's willful misconduct; a diagnosis of unexplained liver disease in service; experience of an unexplained liver dysfunction or abnormal liver test; or duty as a health-care position or specialty as prescribed by the Secretary of Veterans Affairs; should be accorded a statutory presumption for the purpose of establishing entitlement to service connection for hepatitis C; and

WHEREAS, Service connection for hepatitis C is important to veterans and their families, since it entitles the veteran to compensation for any disability related to the disease as well as necessary medical care; now, therefore, be it

**RESOLVED, By The American Legion in National Convention assembled in Salt Lake City, Utah, August 29, 30, 31, 2006, That The American Legion strongly urge the Department of Veterans Affairs to expeditiously promulgate regulations providing for presumptive service connection for hepatitis C; and, be it further**

**RESOLVED, That The American Legion support legislation to provide for a statutory presumption of service**

connection for hepatitis C under certain conditions in service; and, be it finally

RESOLVED, That the Department of Veterans Affairs provide regular notification to Congress, the veterans service organizations, and veterans on new treatment modalities for hepatitis C.