

Is Depleted Uranium the suspect behind Military Suicides?

By [Greg Mitchell](#)

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Global Research Editorial Note

Post-traumatic stress disorder (PTSD) has become an epidemic amongst soldiers/sailors serving and veterans who have returned from the war zones in Iraq and Afghanistan. The reasons are being depicted as purely psychological, but this seems to be very misleading.

The general public in the United States, Britain, and the rest of the world, including much of the Arab World, are unaware of one of the greatest war crimes and criminal acts against humanity that has been unfolding since the Gulf War from the Balkans to the Middle East and Afghanistan. Depleted uranium has been used for military use from Bosnia-Herzegovina, Montenegro, and Serbia to the Gaza Strip, Lebanon, Kuwait, Iraq, and Afghanistan.

The use of depleted uranium (D.U.)—more properly nuclear waste—and other substances in Iraq and Afghanistan cannot be ruled out as a cause of post-traumatic stress disorder (PTSD) reported by U.S., Coalition, and NATO veterans. Veterans who have served in Anglo-American occupied Iraq and NATO-garrisoned Afghanistan are coming back in sizeable numbers with medical, stress, and psychological problems, but there are undoubtedly more factors involved than just the theatre of military service or the war zone.

It is now known that Gulf War Syndrome was caused by the large-scale use of depleted uranium against Iraq in 1991. Additionally, about 70% (even possibly more) of Gulf War Veterans have had children born after the Gulf War with mutations, deformities, genetic disorders, and severe medical illnesses.

Causal analysis of the increasing rates of mutation, medical problems, and cancer in both foreign troops and local populations alike in Iraq and Afghanistan indicates that it is the military application of nuclear waste (D.U.) being used against civilian populations and resistance movements that is the cause.

There have been omissions to this such as the use of dosimeters by troops in Afghanistan. Dosimeters are measuring devices worn around soldiers' necks that record exposure to radioactivity.

Although it replicates the U.S. and NATO claims that depleted uranium (D.U.) is safe and poses no health hazards to human beings, the *Toronto Star*, the newspaper with the largest number of circulations in Canada, published a revealing piece by [Bruce Campion-Smith](#) that

gives an indirect omission of the horrors that foreign troops and local populations alike have been exposed to in the war zone.

Although the rudimentary causes of Jeanne Michel's PTSD are not known, there is no doubt these causes at a minimum can be attributed to the war in Iraq, warfare, and the occupation of Iraq by American troops.

The article writes that "Iraq killed her just as certainly," meaning it was because of the occupation of Iraq that Jeanne Michel died. This statement should proceed deeper—the regressive foreign policy of the United States dictated by interest groups concerned with their own profiteering and luxury is what killed Jeanne Michel and thousands of others.

In both Iraq and Afghanistan, the citizens of the United States, Britain, Iraq, and Afghanistan paradoxically suffer together because of war criminals in Washington D.C. and London.

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She Survived Iraq—Then Shot Herself at Home

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Her name doesn't show on any official list of American military deaths in the Iraq war, by hostile or non-hostile fire, who died in that country or in hospitals in Europe or back home in the USA. But Iraq killed her just as certainly.

She is Jeanne "Linda" Michel, a Navy medic. She came home last month to her husband and three kids (ages 11, 5, and 4), delighted to be back in her suburban home of Clifton Park in upstate New York. Michel, 33, would be discharged from the Navy in a few weeks, finishing her five years of duty.

Two weeks after she got home, she shot and killed herself.

"She had come through a lot and she had always risen to challenges," her husband, Frantz Michel, who has also served in Iraq, lamented last week. Now he asks why the Navy didn't do more to help her.

Michel's story has now been probed by reporter Kate Gurnett in today's Albany Times-Union. It's headlined, "A casualty far from the battlefield."

And yet, in many ways, not far at all.

Why did it happen? "Like thousands of others returning from Iraq, her mental state was fractured," Gurnett explains. "And it went untreated. Within two weeks, Linda Michel would become a private casualty of war. Re-entry into the world of peace can be harder than deployment, experts say. Picking up where you left off doesn't just happen. ...

"Women experience stronger forms of post-traumatic stress disorder and have higher PTSD

rates, experts say. In response, the Veterans Affairs Department launched a \$6 million study of female veterans.

Seeking treatment — seen by some as a weakness — may be even tougher for women, who still feel the need to prove themselves to men in military service.”

In fact, this past August, three veterans in New York’s Adirondack region committed suicide within three weeks, according to Helena Davis, deputy director of the Mental Health Association in New York.

Michel has served under extremely stressful conditions at Camp Bucca in southern Iraq, a U.S-run prison where guards shot four inmates dead in a 2005 riot — and an episode of female mudwrestling drew headlines. Michel was treated for depression and prescribed Paxil, but they took her off that medicine when she returned home. Her husband was not informed.

“I just wish the Navy would have done some more follow-up, instead of just letting her come home,” Frantz, who is on the division staff of the Army National Guard, told the reporter. “If somebody needs Paxil in a combat zone, then that’s not the place for them to be. You either send them to a hospital or you send them home and then make sure that the family members know and that they get follow-up care.”

He has pressed the Navy for answers: “Why wasn’t she sent to a facility to resolve the issues? Not keep her in Iraq and give her some antidepressant medication and then just send her home. So those are the answers that I don’t have. Which makes me a little angry because I know what is supposed to occur.”

The Times Union carried another lengthy story on Sunday, by Dennis Yusko, on post-traumatic stress syndrome (PTSD) and Iraq veterans. “The number of Iraq and Afghanistan veterans getting treatment for PTSD at VA hospitals and counseling centers increased 87 percent from September 2005 to June 2006 — to 38,144, according to the U.S. Department of Veterans Affairs,” Yusko revealed.

“At least 30 percent of those who fought in Iraq or Afghanistan are now diagnosed with PTSD, up from 16 percent to 18 percent in 2004, said Charlie Kennedy, PTSD program director and lead psychologist at the Stratton Veterans Affairs Medical Center. Of the 400 Capital Region vets in the program, 81 served in Iraq or Afghanistan, Kennedy said, and that number is growing. ‘This kind of warfare is devastating,’ Kennedy said. ‘You don’t know who is your friend and who is your enemy.’”

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