At this point I would like to comment briefly on several aspects of the resolution that you mentioned earlier, H. Res. 501. We believe it would be helpful for the Congress to put on record its concern about the reports that poison gas is being used.

With regard to subparagraph (c) of the resolution—and this may relate to H. Res. 451, I am not sure about H. Res. 501, we should check this in any event—there is the suggestion that we raise the issue in the Committee on Disarmament in Geneva. We would have no difficulty with pointing to the reports of the use of gas in Southeast Asia as providing more evidence of the need to prohibit chemical weapons.

However, we do not believe it would be productive to bring a formal complaint in this negotiating body. Raising the issue in that way might tend to divert the committee from its objective of negotiating of a convention to prohibit chemical weapons.

We can agree with subparagraphs (d) and (e), and we would welcome congressional support for intensification of the bilateral chemical weapons negotiations, and would be happy to report to you in 6 months the steps that have been taken.

In concluding, I want to emphasize the concern of the Arms Control and Disarmament Agency about these reports that you have just been listening to here. We strongly support the efforts underway to obtain more definitive information, and to communicate U.S. concerns to other governments. At the same time we are working hard to negotiate a convention which would ban chemical weapons completely. In our view, such a prohibition is the most effective way to insure that chemical warfare does not recur.

Central Intelligence Agency Paper: Chemical Warfare in Laos, December 12, 1979

Key judgments

Strong circumstantial evidence suggests that chemical warfare (CW) agents have been used in Laos by Laotian and Vietnamese forces against dissident Meo tribesmen. The agents evidently were delivered by aircraft bombs or rockets.

The characteristics of the agents and the physical symptoms suggest that at least two types of CW agents have been used; a lung irritant such as chlorine or phosgene and a blister agent such as mustard.

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1. H. Res. 501, a revision of H. Res. 451, became H. Res. 512, which was passed by the House on Dec. 20 and is printed below.
3. A footnote in the original stated that neither Laos nor Vietnam had signed the Geneva Protocol of 1925 prohibiting the use of chemical and biological agents in war. Subsequently, on Sept. 23, 1969, Vietnam adhered to the protocol, though with reservations and a declaration. The protocol may be found in Documents on Disarmament, 1969, pp. 764–765.
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Asia Since the Vietnam War: Hearing Before
Affairs of the Committee on Foreign Affairs,
Congress, First Session, pp. 4–5.
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Discussion

Since late 1978 several Asian newspaper articles have cited
numerous refugee reports that alleged the use of chemical warfare
agents by Laotian and Vietnamese forces against the Meo tribesmen.
The first alleged use of CW was in 1976, and attacks reportedly in-
creased in frequency in early 1978 and continued throughout the
year. Although the newspaper accounts probably exaggerated the
casualty figures, several thousand people reportedly have died as a
result of these attacks, which the Meo describe as “medicine from the
sky.”

The attacks have covered a large area of northern Laos, but the
most concentrated effort has been against the Meo stronghold
around Phou Bia mountain south of the Plain of Jars. The attacks ap-
parently have consisted of both isolated incidents and large-scale
operations. In the worst case reported, a village blockaded inside a
Laotian troop cordon received 20 CW attacks over a 15-day period.
The refugees consistently have stated that the chemical agent or
agents were delivered by aircraft, predominantly L-19’s, using
rockets or bombs. Most of the refugees have described the agent(s) as
green, red, or white vapor or smoke, although pink, yellow, and blue
colors also have been reported. Because of the large number of colors
seen, we believe that the colors simply indicate that smoke was used
or that dye was added to the agent(s) so that areas covered could be
observed. In some cases the agent was described as a dust-like gas
that burned through leaves of trees and poisoned water.

Various physical symptoms and agent characteristics have been
reported as a result of contact with the agents. Symptoms range from
skin pallor, puffy eyes and face, bloodshot eyes, headaches, and poor
cordination to severe coughing, uncontrollable vomiting, hemorrhage
from the nose and mouth, blindness, convulsions, and death.
The time to death reportedly ranges from instantaneous to over a
period of days or weeks. A nonlethal dose reportedly produces a pro-
longed period of suffering. In the case of the dust-like gas, the symp-
toms were essentially the same. Victims reportedly died usually
within 30 minutes to an hour after the appearance of symptoms,
which began almost immediately after drinking contaminated water.
One refugee examined claimed that he had been in an air attack about
10 days earlier. His skin showed pallor and was puffy, especially
around the eyes and face; his eyes were bloodshot and yellowed, his
appetite was diminished, and he had lost weight. He stated that he
had been blinded for several days and that he had trouble with coor-
dination of physical movements.

Foreign medical personnel reportedly have treated refugees for
skin burns or lesions that may have been caused by chemical attacks.
Without a medical examination by specialists, however, the exact
causes of these burns or lesions cannot be determined. A doctor in a
refugee camp reportedly has treated a number of refugees for what he
believed to be “gas burns” and some signs of chemical poisoning.
Another doctor has described injuries he treated as superficial burns and said that many patients showed allergic symptoms such as coughing and mucous membrane ailments. A third doctor believes that the burns/lesions could be attributed to causes other than a chemical agent.

Medical diagnosis is made more difficult by the fact that most of the refugees seen in Thailand were those least affected by the attacks. Those that were heavily exposed would have had severe respiratory problems and blistering. Since the trip to Thailand takes about two weeks over rough terrain, it is likely that those severely affected could not complete the trip. Those that were not severely affected, especially with agents such as chlorine or phosgene, probably would have recovered to the point where there were no observable symptoms and would require a comprehensive medical examination to determine lung damage. The passage of two weeks, however, would not lessen the effects of a blister agent. By that time, the blisters would have formed and become weeping sores. (These sores would be difficult to distinguish from burns, but the refugees have not stated that they were victims of napalm attacks.)

Based on the reports of physical symptoms and characteristics of the agents, at least two types of CW agents probably have been used: a nonpersistent agent such as chlorine or phosgene and a blister agent, presumably a mustard type. Chlorine or phosgene would produce most of the symptoms described and could result in death via necrosis of the mucous membrane in the respiratory tract. Both chlorine and phosgene are nonpersistent gases, however, and their known effects are not the same as some of those reported. These agents would not produce skin burns. Skin burns or blisters are characteristic of blister agents, which, however, are primarily casualty agents.

Chlorine and phosgene are basic industrial chemicals and could be easily obtained from domestic industry. They also could be supplied by any country that has a chemical production capability. A blister agent such as mustard, on the other hand, has no industrial use and would be prepared specifically for CW use.

Communique of a Special Meeting of Foreign and Defense Ministers of NATO: Theater Nuclear Forces [Extract], December 12, 1979

6. Ministers noted that these recent developments require concrete actions on the part of the Alliance if NATO's strategy of flexible response is to remain credible. After intensive considerations, including the merits of alternative approaches, and after taking note of the

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