

WHO Is Delaying Release of Iraqi Birth Defect Data?

By [Kelley B. Vlahos](#)

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Observers say they are on the cusp of getting the hard evidence needed to prove Iraqis are suffering from a disproportionate rate of birth defects and cancers, likely due to massive pollution caused by the war.

So what's the problem? Or should we say, WHO is the problem?

As in the World Health Organization (WHO) is the public health arm of the United Nations and is tasked with “providing leadership on global health matters, shaping the health research agenda, setting norms and standards, articulating evidence-based policy options, providing technical support to countries and monitoring and assessing health trends.” Currently, WHO is “providing technical assistance” to the Iraq Ministry of Health (MOH) in [a much anticipated study of congenital health defects](#) in 18 Iraqi districts, including Fallujah and Basra – places that have reported high rates of babies born with horrifying maladies since the war began. Basra, consequently, has reported higher incidents of cancer, too, since the first Persian Gulf War. See some of *Antiwar's* previous coverage [here](#).

The problem is, the results of the study, which began in May 2012, were expected in early 2013. Both medical and human rights advocates are wondering why they have been delayed – as of today, indefinitely. They want answers now.

“It is incredibly important for the Iraqi people that these data are published, and published in a swift and transparent manner,” said Doug Weir, Coordinator of the International Coalition to Ban Uranium Weapons. “No more delays, independent peer review is the only way to ensure public confidence in the process.”

When contacted by *Antiwar*, WHO spokesman Tarik Jasarevik said the release of the data was in the Iraqis' hands at MOH. When we reached out Dr. Mohamed Jaber, who is listed as an advisor to the Ministry of Health and deputy chair of the steering committee in charge of the study in Iraq, he said it was up to WHO to determine the release date. Upon further inquiry, Jasarevik said if MOH “ask(s) us to release it on their behalf, WHO would do it.”

That could be as early as September, Jasarevik told *Antiwar*.

A lengthy [explanation](#) on the WHO website offers one clue to the report's delay so far. After a peek at the preliminary data in June, “it was established that this large data set has a great deal of potentially valuable information and that additional analyses not originally conceived of should be done.” It will also be peer reviewed. “A team of independent scientists is now being recruited,” and key findings will be released by the government of

Iraq once “these steps are completed.”

Critics say that time is of the essence (Fallujah, which was the scene of two massive U.S military offensives in [2004](#) is reporting defects in 144 of all 1,000 babies born; Basra is reporting a 60 percent increase in defects among their own live births), and suspect the delays are politically motivated.

“I believe the Iraqi government is responding to pressure from the US to keep the issue under the radar,” charged Donna Mulhearn, an Australian antiwar activist who has traveled repeatedly to Fallujah and interviewed doctors as well as Iraq families affected. The degree of the physical horrors she and others have reported over the last several years is staggering: babies born with parts of their skulls missing, various tumors, missing genitalia, limbs and eyes, severe brain damage, unusual rates of paralyzing spina bifida (marked by the gruesome holes found in the tiny infants’ backs), Encephalocele (a neural tube defect marked by swollen sac-like protrusions from the head), and more.

Doctors have been crying out for help since at least 2010, when the BBC’s John Simpson [was handed a photograph](#) of a baby born in Fallujah with two heads. Women there were being told to stop getting pregnant. A 2010 study published in the International Journal of Environmental Research and Public Health [declared](#) that some kind of congenital malformation was found in 15 percent of all births in Fallujah – heart defects being the most common, followed by neural tube defects.

In 2011, Fallujah doctors were reporting two birth defects a day, compared to two every two weeks in 2008. More recently [in front of BBC cameras](#), Dr. Mushin Sabbak who works at Basra Maternity Hospital, said he believed that “mercury, lead, uranium” from the war are responsible for what his hospital is claiming to be a 60 percent increase in birth defects there. “We have no other explanation than this,” he said.

When Mulhearn visited Iraq [this year](#), too, she said the situation remained unchanged. If anything it was worse. “There were about five babies born that we met – two of them died. It’s ongoing,” she told us in April.

“When I was in Iraq earlier this year there was a definite feeling of fear and intimidation among Doctors who felt pressure from the Government to stay quiet about increasing levels of cancer and birth defects,” Mulhearn recalled *Antiwar* last week in an email exchange.

“One cancer specialist in Basra was removed from his senior position in a hospital because he has been outspoken on the issue of radiation caused by depleted uranium pollution and what he believes is it’s terrible impact of the health of Iraqis in the Basra region. He was nervous about giving us an on-camera interview because of possible ramifications.”

Meanwhile, Dr. Mozghan Savabieasfahani, a Michigan-based environmental toxicologist who has been doggedly studying and speaking out about what she believes are defects caused by the pollution of war, wrote this in an [August 11 op-ed](#) for *Al Jazeera*:

In Iraq, war debris continues to wear away and erode populated cities. Such debris includes the wreckage of tanks and armoured vehicles, trucks and abandoned military ammunitions, as well as the remains of bombs and bullets. Left unabated, the debris will act as dangerous toxic reservoirs; releasing harmful chemicals into the environment and poisoning people who live nearby.

Today, increasing numbers of birth defects are surfacing in many [Iraqi cities](#), including Mosul, Najaf, Fallujah, Basra, Hawijah, Nineveh, and Baghdad. In some provinces, the rate of cancers is also increasing. Sterility, repeated miscarriages, stillbirths and severe birth defects – some [never described](#) in any medical books – are weighing heavily on Iraqi families.

Savabieasfahani questions the delay of the WHO study as well:

Everyone knows that large-scale epidemiological studies are expensive to fund and highly competitive proposals are elicited. It is a matter of routine practice to include a detailed study time-line in such proposals from the beginning – not at the end. The timeline routinely includes an estimation of time for data analysis and re-analysis, followed by publication of findings (i.e. peer-review). This normally means there is a clear and defined timeframe in which the data is expected to be published. The originally reported release date, November 2012, is now long gone.

The repeated delays, and fresh excuses for more delays, have left many observers puzzled, and [deeper concerns](#) are being articulated. Critical faults in the design of the WHO study have now entered the spotlight, principally the study's avoidance of any inquiry into causation.

This comes to the crux of things, for sure. While it will examine the prevalence of congenital birth defects in the 18 districts identified, it “is not aiming to establishing cause-effect associations between [congenital birth defects] prevalence and environmental risk factors.” In other words, the results might very well tell us there is a disproportionate rate of abnormalities in babies born to mothers after the war in Fallujah and Basra, but it will not say whether there is a direct correlation to heavy metals – including depleted uranium – in the air or groundwater there.

This “continues to alarm many scientists and public health professionals,” wrote Savabieasfahani.

She and others note that there have been a series of studies, independent and peer reviewed, that have already made the connections. However, the authority of the World Health Organization, working directly with the Iraqi government, would give similar findings an official urgency the previous studies could not offer. These institutions’ ostensible hesitancy is fueling theories that there is some greater pressure – from the US government, perhaps – at hand here.

Example: the aforementioned BBC story [in March](#) interviewed two MOH officials – on camera – saying the MOH/WHO report will show escalated numbers of birth defects in the cities that bore heavy fighting in the war. They women (unnamed) appear to say they believe that exploded munitions were linked to the rise in birth defects in these areas. When we asked about this on Aug. 15, Dr. Jaber flatly denied any of his people said any such thing.

When the BBC asked about the womens’ claims in that March story, the Pentagon did not respond. British officials said they were waiting for the official results of the study before commenting at all.

This is in line with the way the US military has dealt with these questions from the beginning. They either reject the claims outright or ignore reporters’ calls for comment. The

consideration that depleted uranium leftover by both the first and second Gulf Wars might have a role to play (we know it was used – as I explain in my earlier *Antiwar* and [American Conservative](#) articles on the subject – but not how much) is a big one among advocates and critics. The Pentagon has strongly asserted that “no studies to date” have indicated a link between war munitions and “specific health issues” relating to what is happening in places like Fallujah today.

This isn’t true of course. There is [this examination](#), which shows an increase in cancer and child mortality rates in Fallujah (2010). Meanwhile, Savabieasfahani has been working on her own studies like [this one](#), which indicate higher levels of lead and mercury in children in Basra, where a staggering level of cancer and defects are noted (2012). But the emphasis is always on “official,” and where Pentagon spokespersons might have completely ignored this growing body of findings before, they might not be able to brush away more authoritative data from the WHO and MOH in the same way.

Maybe this is what they are afraid of.

The demand for action is growing, however. Samira Al’aani, a doctor in Fallujah who has been working “in Fallujah as a Pediatrician since 1997 but began to notice something was wrong in 2006 and began logging the cases” of birth defects, has started [a petition](#) on Change.org asking for the WHO and MOH to release the data as soon as possible. As of Aug. 16, it had reached 6,000 signatures, one of them being Hans von Sponeck, former UN Humanitarian Coordinator for Iraq, who wrote on the website last month:

The congenital defects research carried out in Fallujah is a crucial part of research in Iraq of the effects of foreign munitions illegally used against Iraq’s civilian population. WHO must be told it can not again evade its responsibilities to publish the data it has. Protection of impunity can not be the answer given by an important United Nations Agency to crimes committed.

Al’aani [told Weir in a recent interview](#) that the MOH was about to launch a similar study with the WHO in 2001 because of concerns that remnants of the first Gulf War had been causing a spike in cancer rates and deformities among Iraqi infants.

“Depleted uranium from US and UK munitions was among the environmental risk factors to be investigated,” Al’anni told Weir in the interview.

“After six months, the plans were in disarray. While Baghdad had initiated the project, after consultation the WHO had announced that any costs associated with the projects would need to be borne by Iraq itself,” she said. “The Iraqi government, convinced that the health problems had been caused by the 1991 Gulf War and were thus the fault of the US and its allies, refused to cooperate. Political concerns had trumped the needs of the Iraqi people.”

There is so much pollution in Iraq right now that those who do not want to believe that US and U.K war machines are directly responsible for the health effects can certainly suggest other culprits. The country’s infrastructure is wrecked and the Iraqi government has hardly been the model of urgency where reconstruction and environmental safety regarding clean drinking water and sewage are concerned. We can [find stories](#) dating back prewar of raw industrial sewage being dumped into the Tigris and Euphrates Rivers, the main source of water, transport and recreation for millions of Iraqis. But [after the war, especially](#), we [recognize the extent of pollution](#) is far beyond local communities’ ability to fix.

It's lucky not everyone is sick, but realistically, we really don't know how many are, and when the heartbreaking manifestations will occur over the course of a generation – or two, possibly more. That's where the public health institutions like WHO and the MOH and the babies come in. We not only need to know the extent of birth defects, but *why*.

In that regard, they hold the future of Iraq in their hands.

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