

"The Torchlight Initiative is more than just an organization; it's a beacon of hope and support for our missile community veterans. Their goal is to advocate tirelessly for the health and well-being of those who have served, ensuring they receive the care, support, and recognition they rightfully deserve." - Tim Sheppard, Executive Director of the Veterans Commission, Wyoming

What an extraordinary, heartbreaking, and rewarding adventure this has been. The Torchlight Initiative began on 21 January 2023 shortly after Danny Sebeck's "Malmstrom Initiative" briefing was leaked to the press by an unknown party. While the Malmstrom Initiative focused on concerns about disproportionate non-Hodgkin Lymphoma (NHL) rates among Danny and his friends (former missileers), the Torchlight Initiative's mission quickly pivoted to include the entire missile community. We strongly suspect lymphoma is not the only disease disproportionately impacting our members. As such, we've expanded the scope of our data collection to include a broad spectrum of cancers and other diseases, illnesses and disorders potentially caused by toxic exposures in the missile field. Throughout Torchlight's evolution, we have and will continue to address health issues of vital interest to the

entire Air Force Intercontinental Ballistic Missile (ICBM) community – specifically where higher rates of cancer and associated disorders impact those that operated, maintained, supported, or protected ICBMs and associated equipment.

The Initiative has graciously received the advice and support of other military communities promoting awareness of service-related cancers. We've capitalized on their strategies, decades of hard work, and knowledge of preventable deaths to better refine our purpose and facilitate a clearer path forward. We owe a debt of gratitude to those communities who have shared with us their journeys. Ours is a small organization made up of missile community members, family members and supporters. Many of us are navigating cancer diagnoses, were vets of the missile community, or are widows of missileers. Our main objective is simple: Build awareness of cancer and other diseases, illnesses and disorders that may disproportionately impact the Air Force ICBM community. To support this objective, we maintain a self-reported Registry of our cancers/diseases/illnesses/disorders, and work to develop consistent and thorough documentation of the environmental hazards in our workplaces.

To boost awareness of and give credence to our cause, we created a website (https://torchlightinitiative.org/) containing information founding Torchlight members sought out when initially diagnosed. We believe this information will be useful to others who served, are serving, or are entering into the ICBM career field. The site contains informational mission briefings, press releases, talking papers, news article links, published research reports, official memos, and Veterans Affairs claims resources. We additionally share the personal narratives of our diagnosed and lost Airmen. These narratives provide a lessons learned catalog for our community, help us understand how and when diagnoses occur, and detail the personal sacrifices of these Airmen and their families. The main supporting tool we have to build awareness is the Torchlight Initiative Registry – a self-reporting database that tracks cancer cases and other illnesses/diseases/disorders of military members who support or supported the Air Force ICBM mission. It includes the following career fields: missileer, maintenance, security forces, and other (facility managers, etc.). It also tracks military family members whose ailments may be related to incidental toxic exposures. We intend to use this data to hold the Air Force accountable for the diseases and conditions caused due to ICBM-related toxic exposures and to hold the U.S. Department of Veterans Affairs responsible for granting service-connection and providing treatment. Past research into ICBM community health issues produced

incomplete results, and those results were accepted because there was no accountability mechanism. The self-reported Registry is our accountability mechanism.

The Registry currently tracks 650+ individuals and includes an alarmingly high number of blood cancers and disorders. An overview of the Registry Summary (CAO 16 Jul 24) can be found at the end of this article. A recent third party supported, deep-dive analysis of our data shows evidence that NHL diagnosis rates among missileers at Malmstrom Air Force Base (MAFB) are higher than NHL diagnosis rates of the general U.S. population. A preliminary draft of this research will hopefully be released in the upcoming weeks. The research concludes the number of observed NHL diagnoses among MAFB missileers is higher than the national rate and the diagnoses occur at a younger age than the national median age of diagnosis for NHL. While we know MAFB missileers have disproportionate rates of cancer, we don't know the cause nor do we know if this phenomenon expands to other bases, other career fields or other types of cancers and illnesses. We suspect it does, but further research will be required to verify these assumptions.

Be assured our intent is not to focus solely on missileers, Malmstrom, and NHL. We believe our current research into NHL is laying the groundwork for more

comprehensive study(ies) of additional diseases, illnesses, bases, and career fields.

Identifying statistical abnormalities in one group of individuals with one illness brings attention to the greater issue of toxic exposure risks community-wide and opens the door for additional funding and studies.

We remain committed to ensuring future missile community members serve under conditions that do not put their lives at unnecessary risk and that veterans and their families are afforded the benefits they deserve for their toxic exposures during military service. ICBM operations is not a casualty-free career field, but we are taking losses not from an enemy capability but due to our own environmental hazards. Through building awareness, understanding the problem, and taking real action, we can mitigate the risk and influence earlier diagnoses to support better outcomes for our people. We must do better for our Airmen.

We must bring these issues to light, talk about them, and understand the risk and casualty rates in our formations before we can make progress. The Torchlight Initiative builds awareness by forcing the tough conversations about health issues within the ICBM community. Most importantly, we're a grass-roots data collection and curation function that looks to complement broader efforts underway to understand and act accordingly. Torchlight can and will remain an independent and

unconstrained voice for the afflicted. We will do this together, and the Torchlight Initiative will be part of the solution.

The information contained in this newsletter and on our website is readily available to Veterans Affairs organizations, Air Force Global Strike Command, the U.S. Air Force School of Aerospace Medicine, the Association of AF Missileers, interested medical parties, and anyone that's interested in how/why cancer is a threat to the DoD.

Torchlight Registry Summary Highlights (CAO 16 Jul 24)

- *Registry* The Registry has 656 self-registered cases from the following career fields
 - 59.6% missileers, 20.7% maintainers, 3.8% missileers & maintainers,
 7.8% security forces, 2.0% mil family members, and 6.1% unknown
- <u>Bases</u> Registered individuals served at one or more bases with AF ICBM missions (Minuteman, Atlas, Peacekeeper, Titan)
 - Top 5 bases reported were Malmstrom, FE Warren, Minot, Grand Forks,
 Whiteman, Ellsworth
- <u>Cancer</u> 516 (78.7%) of the total 656 cases were registered as having "Cancer"
 - Top 5 cancer types reported were Prostate (151 cases), NHL (68 cases),
 Melanoma (39 cases), Colon & Rectum (28 cases), Leukemia (28 cases)

- <u>Non-Cancerous Cases</u> **140** (21.3%) of the total 656 cases are registered as non-or precancerous conditions
 - The two prominent conditions were autoimmune disorders (37 cases) and thyroid disorders (25 cases)

Overview of the Top Two Reported Cancers:

- Non-Hodgkin's Lymphoma made up 68 (13.1%) of the 516 cancer cases
 - Top 5 bases at which individuals served were Malmstrom, Whiteman,
 Minot, Ellsworth, FE Warren/Grand Forks (tied)
 - 23 of the 68 individuals with NHL served at MAFB; 20 missileers, 1
 maintainer, 1 security force member and 1 career field unknown
 - Average median age at diagnosis per the National Institutes of Health
 (NIH) is 68
 - Average median age of the 68 individuals registered with NHL is
 57.5 and the average age of the 23 individuals registered with
 NHL who served at MAFB is 42
- <u>Prostate Cancer</u> made up 151 (29.3%) of the 516 cancer cases
 - Top 5 bases at which individuals served were Malmstrom, Grand Forks,
 FE Warren, Minot, and Whiteman

- 42 of the 151 individuals with prostate cancer served at MAFB; 28 missileers, 9 maintainers, 1 missileer/maintainer, 2 security forces members, 1 military family member, and 1 unknown
- Average median age at diagnosis per the NIH is 67
 - Average median age of the 151 individuals registered with prostate cancer is 61 and the average age of the 42 individuals registered with prostate cancer who served at MAFB is 60
 - -Please see the full Registry summary for additional detail-