The Hansens

By Jim Belshaw

Karl Hansen’s son, Adam, had been dead five years before questions about Agent Orange arose. Until then, Karl had not given the herbicide a thought in all the years that followed his Vietnam tour of duty. But after Adam’s death, he found himself reconsidering not only the tragedy that befell his son, but health problems faced by other of his children as well.

Burkitt’s lymphoma, a form of cancer so rare that only 300 cases a year are reported in the United States, led to Adam’s death. He was 25 years old. The exceptionally aggressive disease killed him so quickly that Karl had little time to investigate the rare cancer’s mystery. After Adam died, Karl needed answers and began researching Burkitt’s. It was in the course of that search that Agent Orange unexpectedly entered the discussion.

Karl served with the Army in Vietnam in 1968-69. He remembered the spraying, but thought little of it, even when he was in Vietnam.

“I didn’t have a clue,” he said. “I knew there was spraying going on, but I didn’t know if it was for mosquitoes or what it was for. I didn’t think about it at all when I was there. What caught my attention was the stuff I saw on the Internet and after I joined VVA and saw some of the articles on Agent Orange being written.”

Karl and his wife had six children — four daughters, then Adam, then another daughter, a birth order that was something of a family joke, because it was exactly the opposite of Karl’s parents. His father, a Navy veteran, also had six children. But first came four boys, then a girl, then a boy.

Karl said Adam was a “wonderful kid.” Neither a smoker or drinker, he steered clear of the trouble a boy might find growing up. He was a good student and built a reputation as a hard worker in every job he took on. At 25, he was a newlywed with a good job in Provo, Utah, managing the care of model homes for one of Utah’s largest home builders. He was in his last semester at Brigham Young University and due to graduate.

Karl was so proud of his son, who would be the first in the family to graduate from college.

Around Mother’s Day 2005, Karl heard that Adam had been sick. He went to a doctor who diagnosed some kind of parasite.

But the problem persisted. Adam’s stomach became distended, and on a visit to one of his sisters, she was shocked at the sight.

“When she saw him, she told him something was very wrong,” Karl said. “She said, ‘You’ve got something growing in you.’ ”

He went to a doctor again, and this time...
he was hospitalized immediately. A colonoscopy showed cancer in his colon. The physician identified it as Burkitt’s.

“I had never heard of it until I found out about Adam,” Karl said.

Treatment was difficult. In the first round of chemo, Adam had a pulmonary embolism. The hospital “crash cart” kept him alive, and after a week in the ICU, he showed signs of recovery. Then came the second round of chemotherapy. It would be even worse. Severe neurological problems prevented him from performing the simplest movements. His eyes began to move in different directions, and the neurologist didn’t know what was wrong. After two weeks, a nurse from a different department asked if anyone had tested for toxins in his blood. A test showed an ammonia level several hundred times higher than normal.

“There was nothing they could do for him,” Karl said. “We had to let him go.”

After Adam’s death, Karl began the search for answers. In that search, he came across Agent Orange for the first time.

“I ran across something about someone’s son who had died of Burkitt’s, and a doctor told him several first-born sons of Vietnam veterans had died of it,” Karl said. “The doctor wouldn’t document it. So I don’t know if it was someone shooting off his mouth, or if there was something to it. But it made me start thinking more about Agent Orange. I remembered at the base camps and firebases I spent time at that there was no foliage in the immediate area. There was a lot of dirt, but no foliage.”

In The VVA Veteran, he read about the daughter of a Vietnam veteran who suffered from Raynaud’s disease, which causes discoloration of the fingers and toes, primarily. It is believed the disease decreases the blood supply to the affected areas.

Two of Karl Hansen’s daughters suffer from Raynaud’s. One has had it for several years; the second was diagnosed only months ago.

“She was at her daughter’s soccer game, and it was rainy and cold,” he said. “She took off her glove, and her fingers were white, almost to the knuckle.”

Karl has been concerned about tremors in his hands. He worries that the coming years will make them only worse. He has another worry as well: One of his daughters has suffered from similar tremors for several years.

No one in his family or in his wife’s family has any history of any of the diseases that have afflicted Karl and his children.

“What makes me sick is when I think about Agent Orange possibly having something to do with this and what it did to my kids,” he said. “It just tears you up. I don’t know if any of this will be passed on to my grandchildren. I have 12 grandchildren. I think there’s a very good chance that all of this is connected to Agent Orange.”

Significant numbers of veterans have children and grandchildren with birth defects related to exposure to Agent Orange. To alert legislators and the media to this ongoing legacy of the war, we are seeking real stories about real people. If you wish to share your family’s health struggles that you believe are due to Agent Orange/dioxin, send an email to mporter@vva.org or call 301-585-4000, Ext. 146.