

# Illness taking grim toll at nation's boot camps

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Army recruit Dale Patterson lost consciousness less than a mile into a required run and collapsed on a dusty road at Fort Sill, Okla. When he came to, he was cradled in the arms of another recruit.

"I don't know what's wrong with me," Patterson managed to whisper. Then he stopped breathing.

Within an hour, Patterson, 25, a former college runner in his third week of boot camp, was declared dead.

"He had just entered boot camp," said Patterson's widow, Stacey, of Tucson, Ariz. "I thought it would be the safest place on earth."

Army investigators found no explanation for the November 2003 tragedy. They promptly closed the case, terming it a natural death, "cause unknown" — even though the base was plagued by a respiratory virus and Patterson recently had sought treatment for flulike symptoms.

Patterson's death and its swift closure is an example of broad, deep-rooted health-care problems inside the nation's boot camps, a Seattle Times investigation found.

At a time when the Iraq war puts each recruit in high demand, at least 1 in 9 are treated for acute pneumonia, adenovirus or other respiratory diseases during their short but intense training stints, according to a Times analysis of military records.

Infection rates at boot camps have risen each of the past five years — often to epidemic levels, military medical-surveillance records show. Today, military boot-camp barracks dwarf nursing homes, dormitories and all other close-quarter institutional settings for the number and ferocity of such outbreaks.

## About the virus

Adenovirus is a common virus that attacks the respiratory system, causing labored breathing, sore throat and fever. Most people experience at least one attack by age 10 and recover in a few days.

Spread by cough or touch, the germ can be fatal, particularly to children or those with weak immune systems.

Up to 3,000 recruits each month are treated for acute respiratory illnesses, which flourish in overcrowded barracks where beds are stacked head-to-toe with stressed and fatigued troops.

Even so, the military often does not effectively treat recruits or inform them about these hazards, interviews and records show.

Many times the sick recruits received superficial examinations and were sent back to barracks with over-the-counter medications and told to monitor their own conditions, records show.

Defense officials said the boot-camp health-care system provides superior, prompt care and successfully treats tens of thousands of recruits each year. But the military has not revealed the full extent of these problems to the public or the victims' families.

In Spanaway, Pierce County, for instance, the grandparents of 18-year-old Army National Guard recruit Matthew Nish struggle for answers after being told their grandson died in July of heat exhaustion at Fort Jackson, S.C.

MIKE SIEGEL / THE SEATTLE TIMES

Stacey Patterson, next to her stepfather, Tom LaVoie, reads one of the last letters her husband, Army recruit Dale Patterson, wrote to her a few days before his death while training at Fort Sill, Okla. Army investigators termed the November 2003 tragedy a natural death, "cause unknown."

Guardians of Nish, they do not believe that explanation and have received few details other than a \$7,100 bill for his medical treatment.

Patterson's family also believes the Army has given it an incomplete account. What family members weren't told was that, four days before Dale Patterson collapsed, another Fort Sill recruit was hospitalized with nearly identical symptoms — coughing, sore throat and difficulty breathing, records show.

At the moment that Fort Sill commanders were telling Stacey Patterson that they had no clues to her husband's death, 18-year-old Pfc. Sean Fitzgerald clung to life. Then he died, too.

While Patterson's military autopsy was inconclusive, Fitzgerald's autopsy, overseen by civilian doctors because he died at a hospital off-base, identified what killed him: adenovirus.

At the time, adenovirus, which mimics the flu, was raging at the Oklahoma boot camp.

Most people affected by the virus are under age 10 and recover on their own within days. For some, particularly those with stressed or weakened immune systems, the virus is devastating. In rare cases, it is fatal.

For a quarter of a century, the Pentagon controlled the virus by inoculating each service member with a vaccine it developed and owned. But the Defense Department, seeing the disease under control, abandoned the vaccine in 1996 as too expensive, The Times reported in October.

The military now admits its blunder and is racing to create a new vaccine, possibly by 2006. The Pentagon cannot simply resurrect the 1972 vaccine because its manufacturing process is slightly different and clinical trials are required for safety.

At least six recruits have died from the virus since 2000.

At Fort Sill, adenovirus gripped the base in late 2002 and early 2003, and spiked again during the month Patterson and Fitzgerald died. Fort Sill commanders never told either family about the outbreak.

Stacey Patterson said she grew suspicious during her husband's memorial service at the base. "There were dozens of recruits," she said. "Everyone was coughing."

### **"Sick as all hell"**

In one of his last letters to his wife, Army recruit Patterson wrote, "I went to sick call because I was near death." In a letter a few days later, he wrote, "I'm sick as all hell."

On the morning of his death, Nov. 4, 2003, Dale Patterson woke at 5 a.m., as required, and prepared for the morning run. He notified a drill sergeant that he wasn't feeling well.

A former competitive runner at the University of Arizona, Patterson was a muscular 175 pounds with six-pack abs, his wife says. In boot camp, he usually ran in Group A,

the fastest runners. This day he asked to run with Group D, the slowest.

A week earlier, he sought care at a base medical clinic. After a cursory exam, he returned to his barracks under the Army's "self-care program" with a small bottle of over-the-counter cough syrup and Tylenol, according to medical records.

Afterward, he wrote to his wife, Stacey, "I went to sick call because I was near death." In a letter a few days later, he wrote, "I'm sick as all hell."

He remained silent as his symptoms worsened, toughing it out in a culture that instills a fierce pride to endure and overcome. But such stoicism also makes it difficult for commanders to tell the malingerers from the truly ill, Army investigative documents show.

Not long after the run began, 17 recruits doubled over in pain. In the jaundiced eyes of drill sergeants, all of them looked at first like slackers. One of the 17 was Patterson.

More than 100,000 recruits will pass through the gates of the nation's eight largest training centers this year. On average, 10 recruits die each year from disease or accident. There have been at least 305 training deaths since 1979, a Times analysis of defense and public records shows.

Dr. William Winkenwerder Jr., assistant secretary of defense for health affairs, acknowledged the infection problems in training facilities. He said he is trying to increase hygiene at boot camps, where scores of recruits may share a single sink and are given no time to even wash their hands during their regimented days. Winkenwerder is also exploring the alternative use of antibiotics while waiting for the new vaccine.

A recent study indicates death rates are lower in boot camps than in comparable civilian age groups, a defense official said.

The big outbreaks get attention, such as the 2002 pneumonia epidemic at Camp Pendleton in San Diego that hospitalized at least 323 Marines and killed one recruit, Pvt. Miguel Zavala.

The isolated, individual cases often go unnoticed.

Marine Pfc. Bret Moran, 18, was found dead in his sleeping bag Nov. 18 at Parris Island, S.C. In his 10th week of training, he was in the last stage of a 54-hour endurance exercise called the Crucible.

A recruit told The Times that Moran had been sick but tried to tough it out.

Army officials said recruits are encouraged to immediately seek medical care. Recruits are not stigmatized, nor are their records blemished for reporting illness, the officials said.

Matthew Nish of Spanaway entered the Army at age 17, intending to use it to bootstrap himself into college.

On July 14, he collapsed about 10:30 p.m. during a 72-hour field-training exercise called Victory Forge, a rite of passage at Fort Jackson, S.C. That night, as the temperature hovered at 85 degrees, Nish died. It was only four days after his 18th birthday.

Nish's grandfather, Alvin Whipple Sr., a retired Air Force officer, doesn't believe his grandson dropped from heat exhaustion. Nish had been hospitalized with a respiratory infection a week earlier.

Whipple said the Army has not provided more details. Infection-tracking records obtained by The Times show Nish died as the respiratory-infection rate spiked to epidemic levels at Fort Jackson. Nish described his illness in a June 19 letter:

Stacey Patterson received a flag and her deceased husband's military beret from the Army.

"I have found my way to a hospital bed. I have been fighting off a fever for three days because I couldn't miss training and by the time we had a few days of non-mandatory training I had 102.1 degrees, fever, bad diarea [sic] and severe dehydration. It has taken me 24 hours of sleep and drugs to get to the point of feeling well enough to write."

A month ago, the Whipples received a medical bill for \$7,100 for their grandson. "I couldn't believe it," Joan Whipple said. She prayed that the Army would take responsibility.

The Army told The Times that the bill had been sent in error by a subcontractor and that Nish's grandparents owed nothing. The Army apologized to them.

An Army training manual summarizes, "As week three begins, the recruits must rely on sheer determination to meet the mounting physical and mental challenges of the simulated combat scenarios."

### **Acting incoherently**

Dale Patterson was about three-quarters of a mile into the 2-mile run when he dropped to the back of the D group, jogging at a slow 11-minute-mile pace. He told

Spc. Kristopher Rodgers that he felt lightheaded.

“He asked me to stay with him if he fell out,” Rodgers told Army investigators. “This was my first major clue that he had a problem, because he was one of the hardest-working soldiers in 2nd platoon. He never slacked no matter what we were doing.”

Head down, chest heaving, Patterson began to walk.

Sixteen stragglers also stopped running, but they were corralled, berated and ushered back to the pack, military interview records show. Senior Drill Sgt. Clinton Chandler encouraged Patterson to keep running.

Patterson staggered 50 feet and fell.

“I then encouraged Spc. Patterson to get back on his feet,” Chandler told investigators. “Approximately 10 seconds later he sat down on the railing and I again encouraged him to keep running.”

“Spc. Patterson began walking again. Two or three steps later Spc. Patterson fell to the ground and rolled off the road and under a guard railing. Patterson was acting incoherently. He was moving his arms and not responding to commands. His eyes rolled back. Short choppy breaths.”

As he promised, Rodgers did try to stay with Patterson when he first fell. Rodgers held his friend, softly calling his name, his statement said. After about 30 seconds, Patterson opened his eyes and whispered repeatedly that he didn't know what was wrong with him.

Then a drill sergeant stopped and told Rodgers he had fallen too far behind the pack.

He was ordered to leave and continue running, records show.

“That was the last time I saw and spoke to Spc. Patterson,” Rodgers wrote.

By all accounts, Patterson was promptly transported to the medical clinic, where emergency procedures failed. He was pronounced dead.

“Some of the medics were shaken because this was their first death experience,” reported Maj. Bruce Lovins, a base doctor.

Pfc. Ryan Johnson, a fellow recruit, explained to investigators why Patterson tried to tough it out. “He didn't want to be stigmatized by drill sergeants and he didn't feel he

received good treatment” from the medical clinic.

Stacey Patterson, 26, opened a cardboard box and spread records of her husband's life onto the living-room floor at her Tucson, Ariz., apartment: love letters, a posthumous recognition from college, snapshots of family and the memorial service, the American flag that draped his coffin.

Her mother and stepfather, Sue and Tom LaVoie, contacted The Times after reading an Oct. 13 article that detailed, for the first time, the fatal swath of adenovirus in boot camps. They believe the virus killed Dale, too.

Midway through an interview, Tom LaVoie got so emotional he left the room, saying, “How can one little girl lose the two most significant men in her life?”

Stacey Patterson's father died in 1981 in a fighter-jet crash near Las Vegas, her mother explained.

Joan and Alvin Whipple Sr. of Spanaway mistakenly were billed \$7,100 for medical care for their grandson Matthew Nish, 18, after he died in a boot camp in South Carolina. They do not believe he died of heat exhaustion, as the Army explained.

“She's watched me my whole life and that's what has given her hope now,” Sue LaVoie said.

Stacey Patterson wants to move on, too. But she also wants to shine a spotlight on those who volunteered to serve but never made it to the battlefield.

“I'm hoping that public awareness of the infection problem can help save just one other life,” she said.

After her husband's memorial service, base commanders allowed her to retrace his final day — the road where he fell, his barracks and bunk. In his locker she found a note to her on a ruled yellow tablet, apparently written the night before he died.

“Another end to a boring day. Tomorrow is a running day. An injury could cost so much. 44 days left, baby. Until tomorrow, I love you.”

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