Risks from Internal Emitters - misuse of equivalent and effective dose



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Science / policy / regulations Health Protection Agency SAFETY SERIES No. 115 TANDARDS safety series ISSN 0146-645 ŝ International **Basic Safety Standards** > for Protection against -EFFECTS OF Ionizing Radiation ш and for the Safety of LL IONIZING RADIATION 4 **Radiation Sources** Annals of the ICRP er (*) (*) (*) (*) Volume I ot to the General Assembly Scientific Arrestee Assert D **ICRP** Publication 103 31.12.2003 Official Joseph of the European Un-COUNCE DEECTIVE 2003/122/EU The 2007 Recommendations of the International (S) INTERNATIONAL ATOMIC ENERGY AGEN Commission on Radiological Protection Boring regard to the Trony establishing the Beropean Atomic Borry Community, and in particular Articles 51(2) and 32 a group of persons apport oranities it can among Excess forems and (4) sher 2023 loss on califold in the CBR ITHEP 1 Instants Series No. 75-R.1. (7), Review, Young, 1 **UNSCEAR Reports ICRP UN, EU Basic** on doses and effects **Recommendations Safety Standards** Policy Regulations Science

Cancer risks from external radiation



Hiroshima and Nagasaki 'A' bomb survivors 44, 635 individuals, 11% solid cancer attributable Preston et al Radiation Research 2007

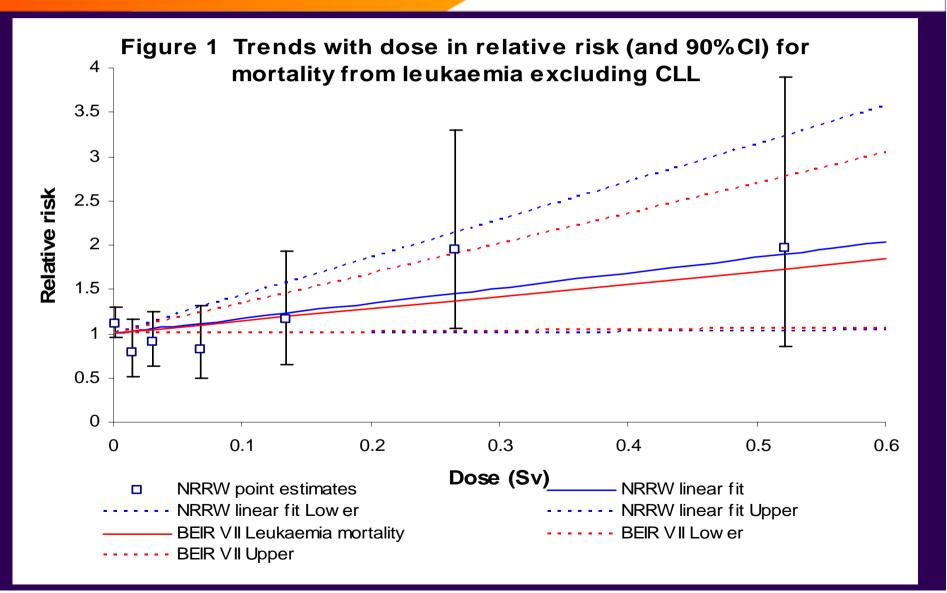
UK National Registry of Radiation Workers (NRRW)

174, 541 individuals

Muirhead et al Brit J Cancer 2008

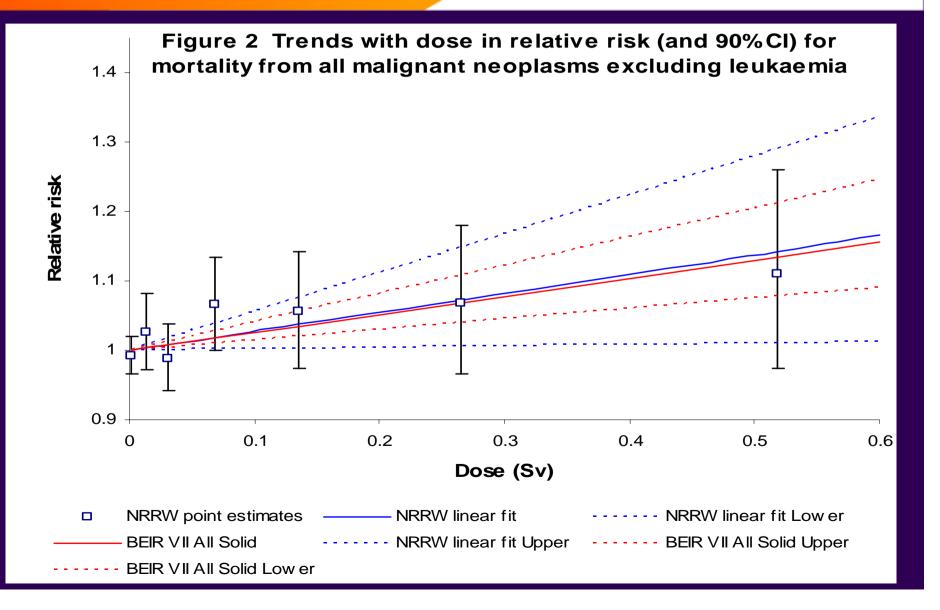
Leukaemia in the NRRW & 'A' bomb survivors

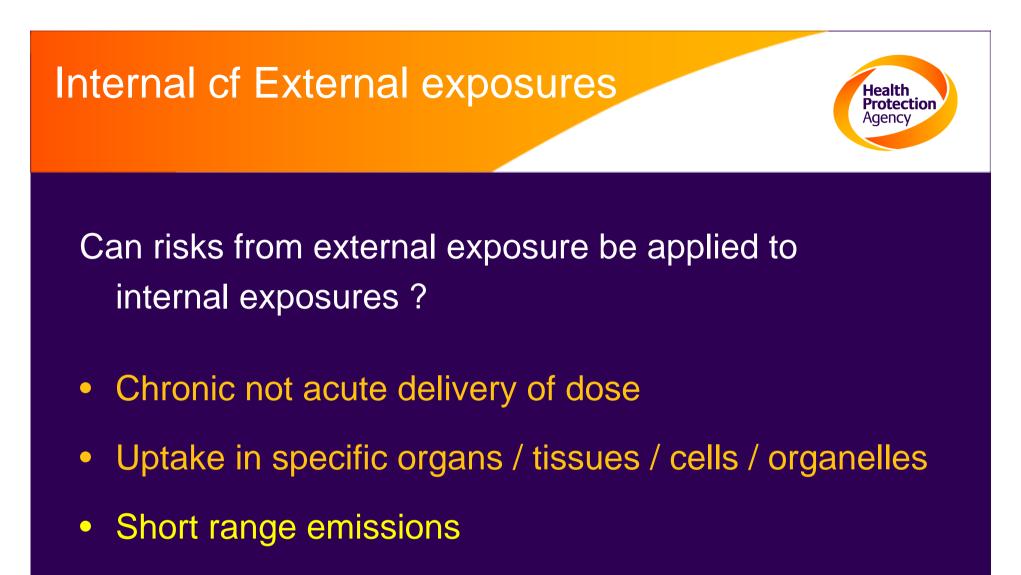




Solid cancers in the NRRW & 'A' bomb survivors



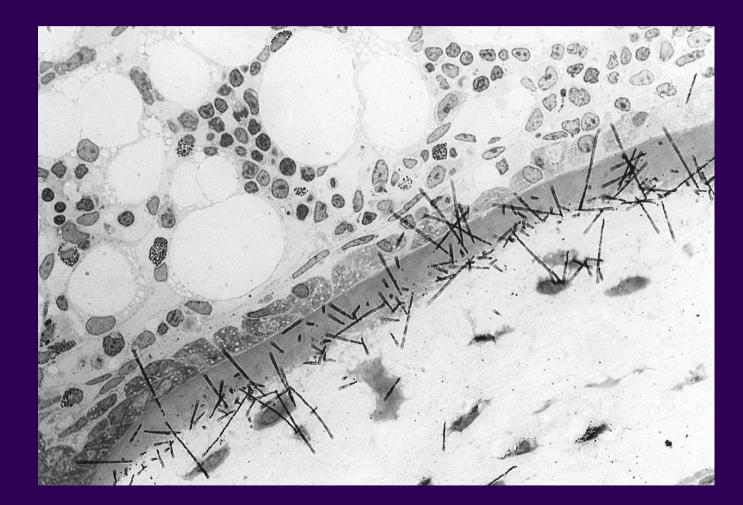




- Density of ionisation / RBE
- Dose averaging

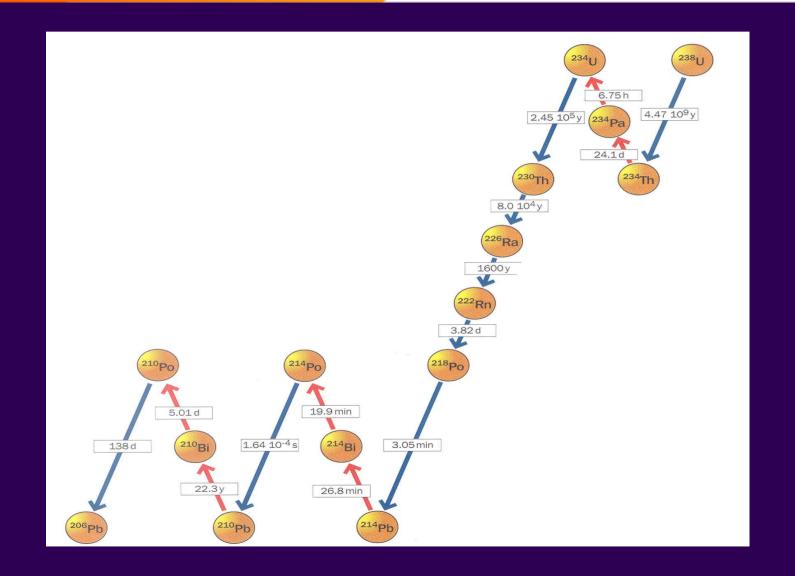
Alpha emitter on bone surface





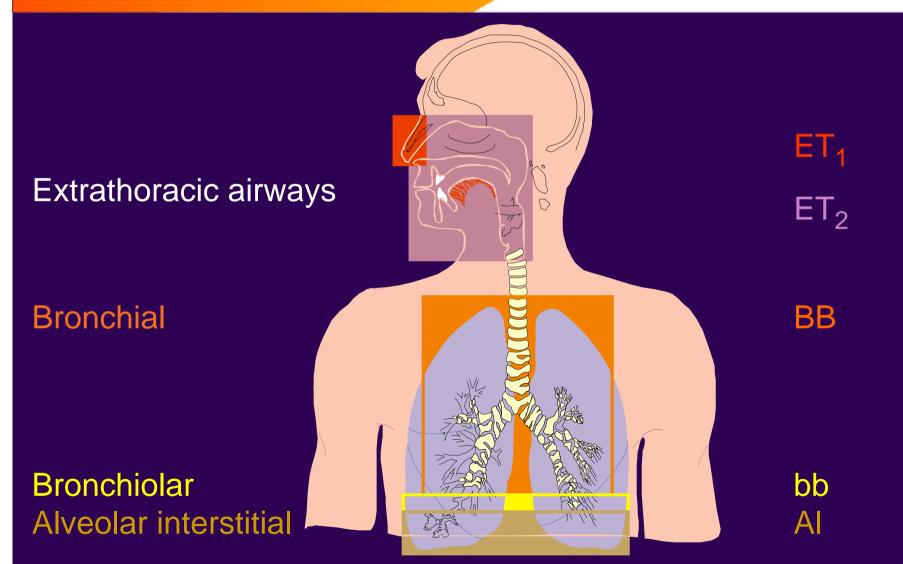
Radon-222 in the Uranium-238 decay chain

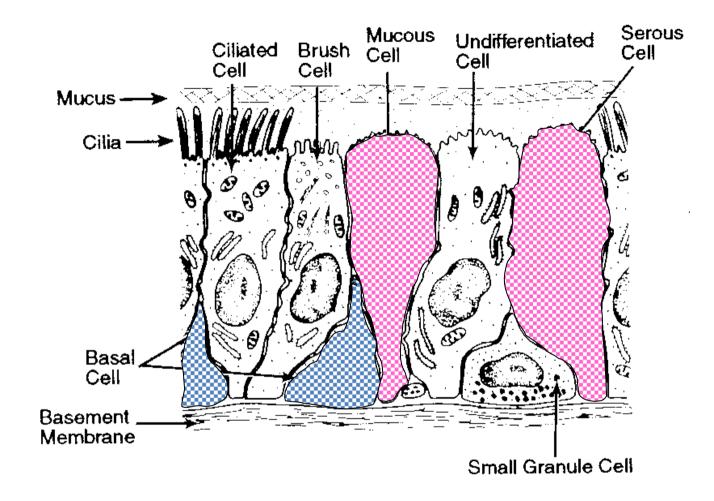




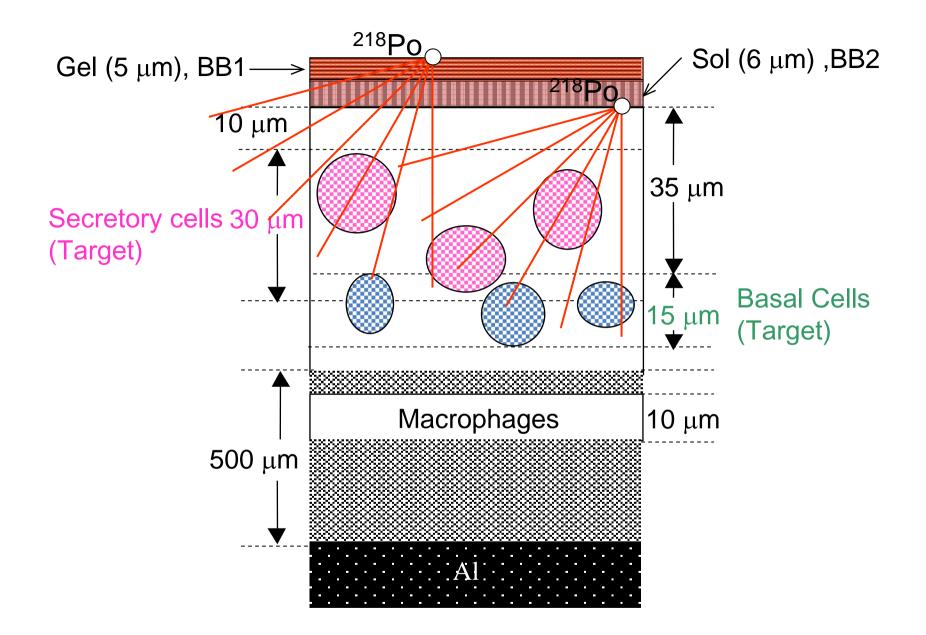
Human Respiratory Tract Model, ICRP (1994)

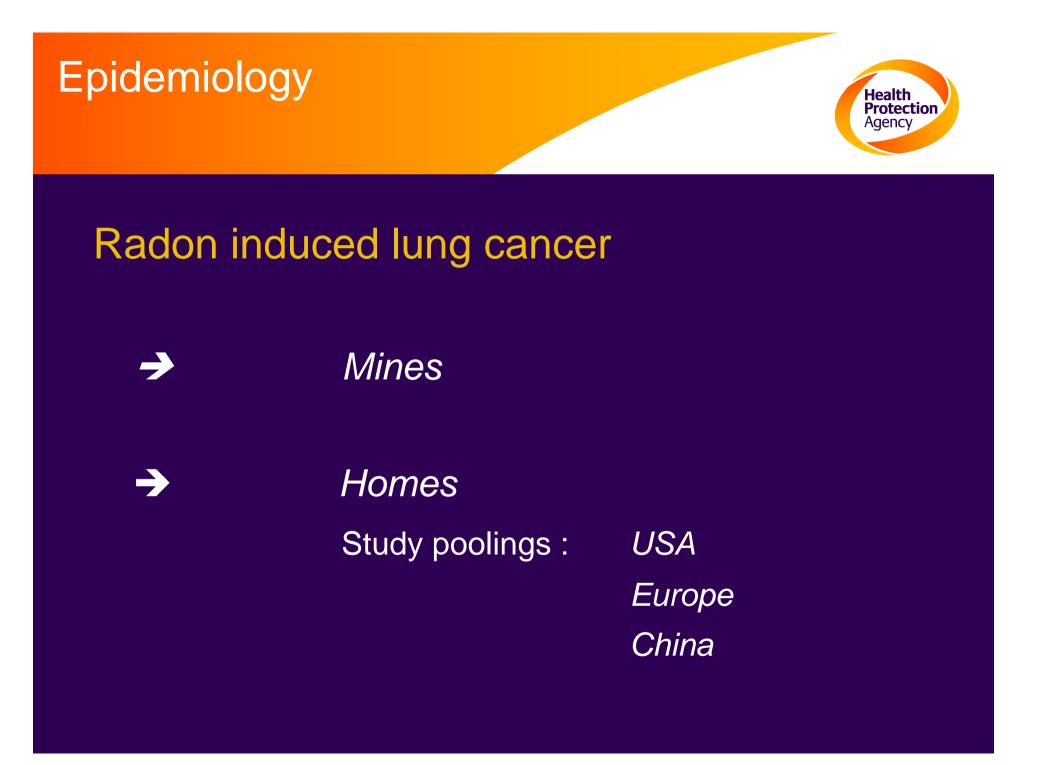






Epithelium of trachea and bronchi





Exposure — Dose conversion



ICRP Pub 65 (1993) dose conversion convention Compare lung cancer risk in miners 2.83 x 10⁻⁴ per WLM with total detriment from cancer and hereditary effects from Pub 60 (1991): Workers 5.6 x 10⁻² per Sv 5 mSv per WLM Public 7.3 x 10⁻² per Sv 4 mSv per WLM

Exposure — Dose conversion



Updating the ICRP Pub 65 (1993) dose conversion Compare lung cancer risk in miners 5 x 10⁻⁴ per WLM with total detriment from cancer and hereditary effects from Pub 103 (2007): Workers 4.2 x 10⁻² per Sv 12 mSv per WLM Public 5.7 x 10⁻² per Sv 9 mSv per WLM

Exposure — Dose calculation



Dosimetry for exposure conditions in a typical mine:12 mSv per WLMSo:Epidemiological =Dosimetricconversioncalculation

Alternatively:

Risk per Sv for radon induced lung cancer corresponds to *risk per Sv* for lung cancer derived from the A bomb data

Cancer risk estimates for alpha emitters



- Radon
- Thorotrast
- Radium isotopes
- Plutonium-239

Lung cancer

Liver cancer & Leukaemia

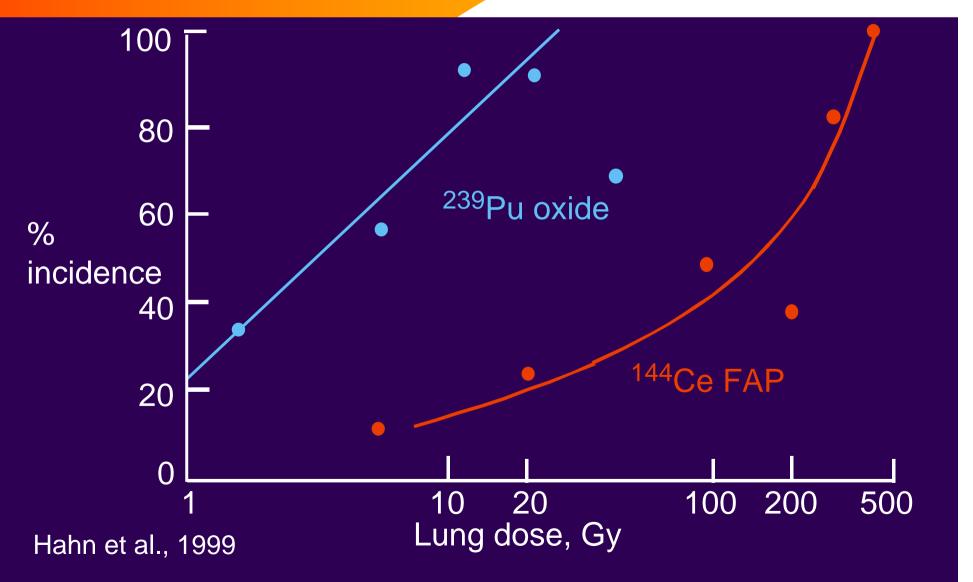
Bone cancer

Lung (liver & bone cancer)

Harrison and Muirhead J. Radiat. Biol. 79, 1-13 (2003)

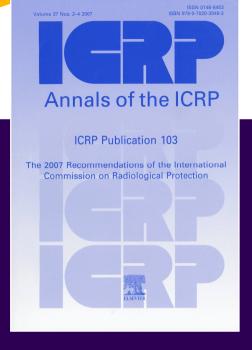
Lung Tumours in Dogs





ICRP 2007 recommendations → what's new ?

- Revised nominal risk factors
- Changes to radiation and tissue weighting factors, w_R and w_T
- Adoption of defined phantoms
- Sex-averaging in calculation of effective dose
- Clarity on intended use of ICRP quantities



ICRP 2007 recommendations → what's next ?



New dose coefficients

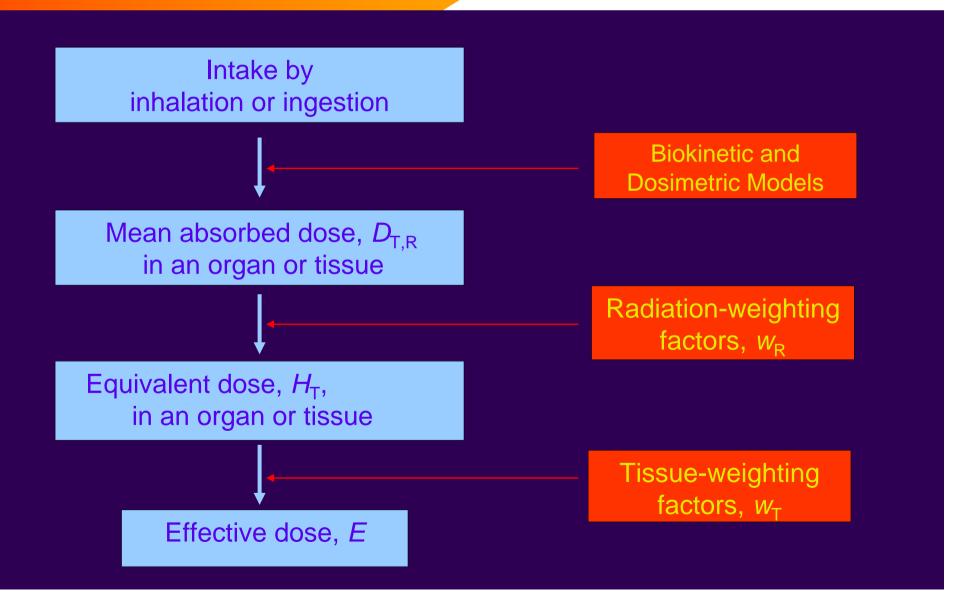
- external and internal
- workers and public

Using :

- Revised radionuclide decay data
- Reference anatomical models
- New / revised biokinetic and dosimetric models

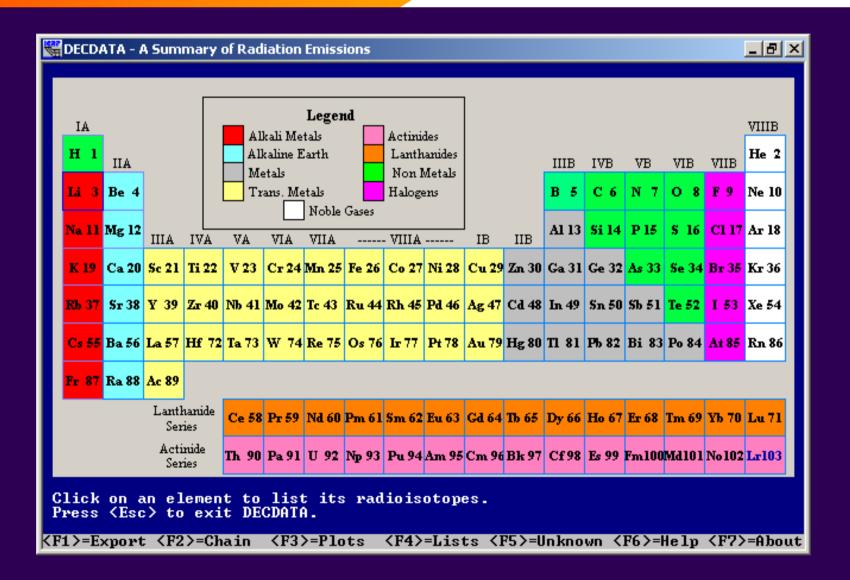
Calculation of equivalent and effective dose





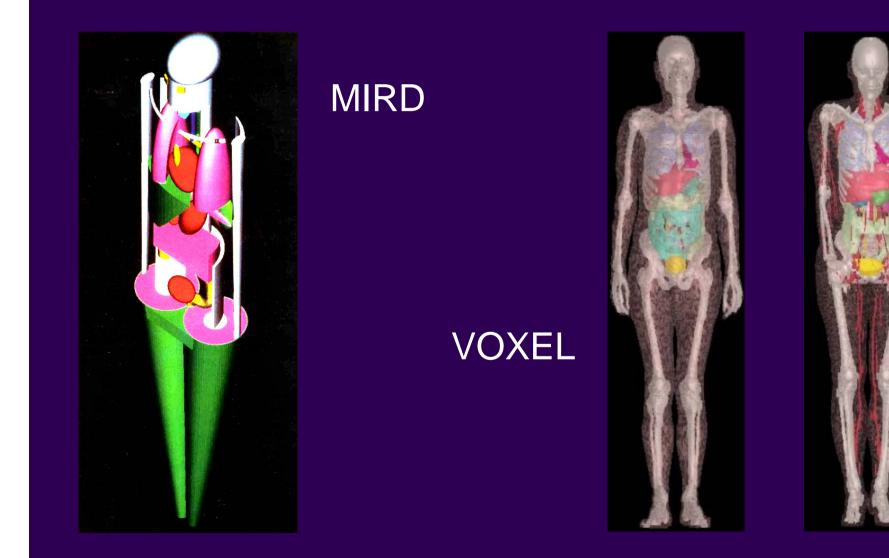
Radionuclide decay data ICRP Publication 107





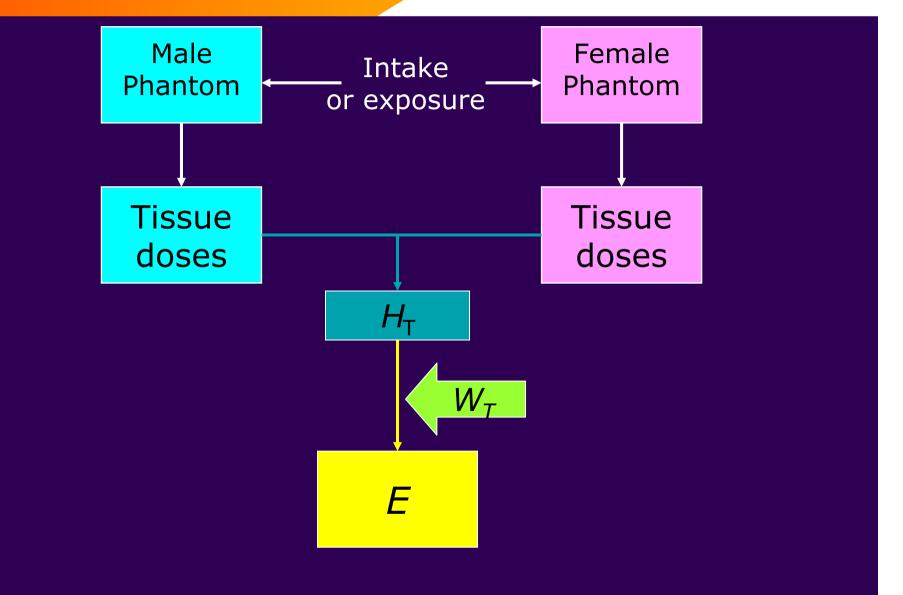
Reference Anatomical Models Publication 110

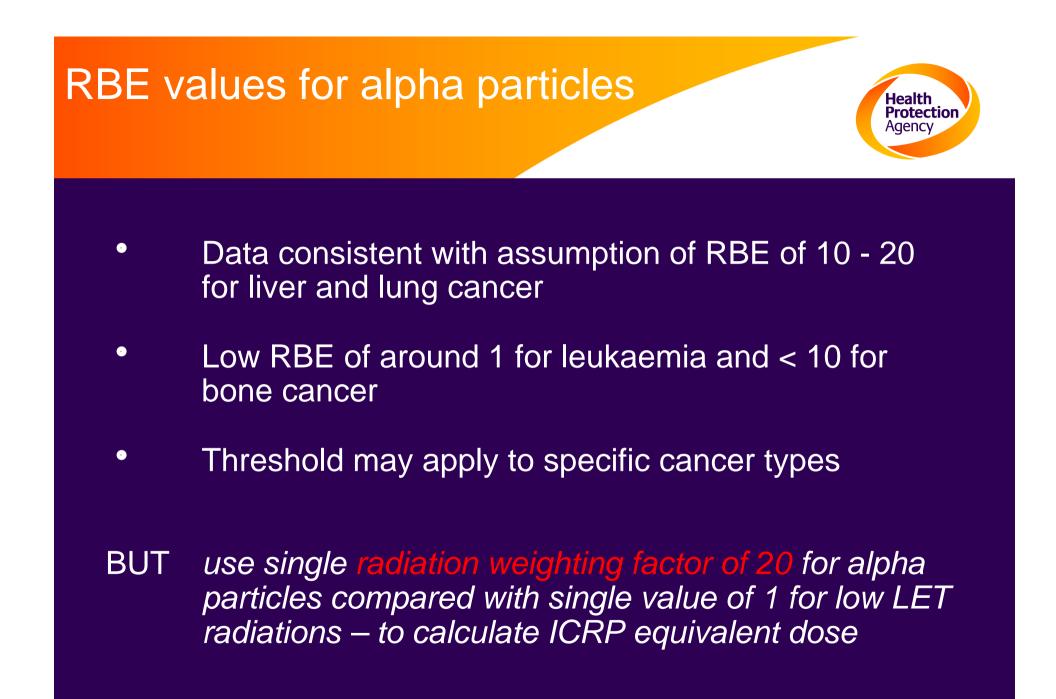




Sex averaging in calculation of Effective Dose







Age-specific cancer risks - life-time attributable risk for U.S. population



Cases per 10⁶ exposed to a single dose of 10 mGy (BEIR VII)

Cancer site		Age a	at expo	sure, ye	ears	
	N	Males		F	emales	\$
	0	20	60	0	20	60
Breast	-	-	-	1171	429	31
Colon	336	173	94	220	114	62
Liver	61	30	14	28	14	7
Lung	314	149	89	733	346	201
Thyroid	115	21	0.3	634	113	1
Leukaemia	237	96	82	185	71	57
All cancers	2563	977	489	4777	1646	586

Tissue weighting factors



- 0.01 bone surface, skin, brain, salivary glands
- 0.04 bladder, liver, oesophagus, thyroid
- 0.08 gonads
- 0.12 bone marrow, colon, lung, stomach, breast, remainder

Use of effective dose



FOR → protection purposes

Sum doses from different radionuclides and external exposures

Limits, constraints, reference levels

Reference Persons

NOT FOR → best estimates of dose and risk

Uses of dosimetry beyond effective dose



Arguable that the effort involved in improving models and dose calculations in not warranted for the calculation of equivalent and effective dose

However :

- ICRP biokinetic and dosimetric models are also used for :
 - → epidemiology
 - probability of cancer causation
- The methods used are subject to continuing scientific scrutiny

Phantoms for children



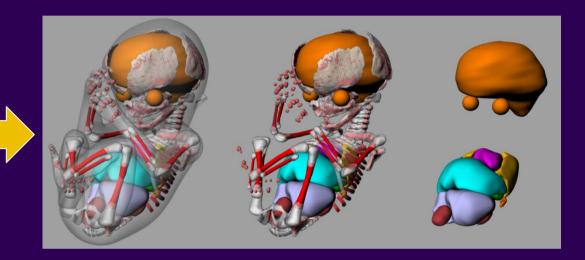


Fetal Model Development for Techa Dosimetry

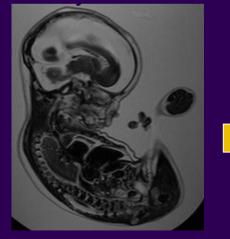




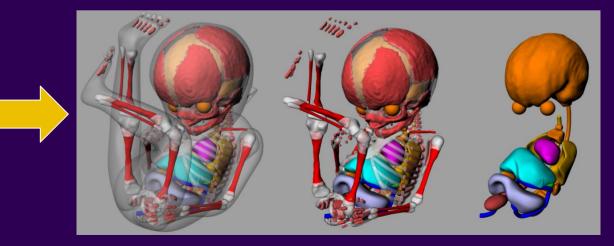
4.7 T NMR Image – 11.5 week



Two Specimen-Specific Fetal Models



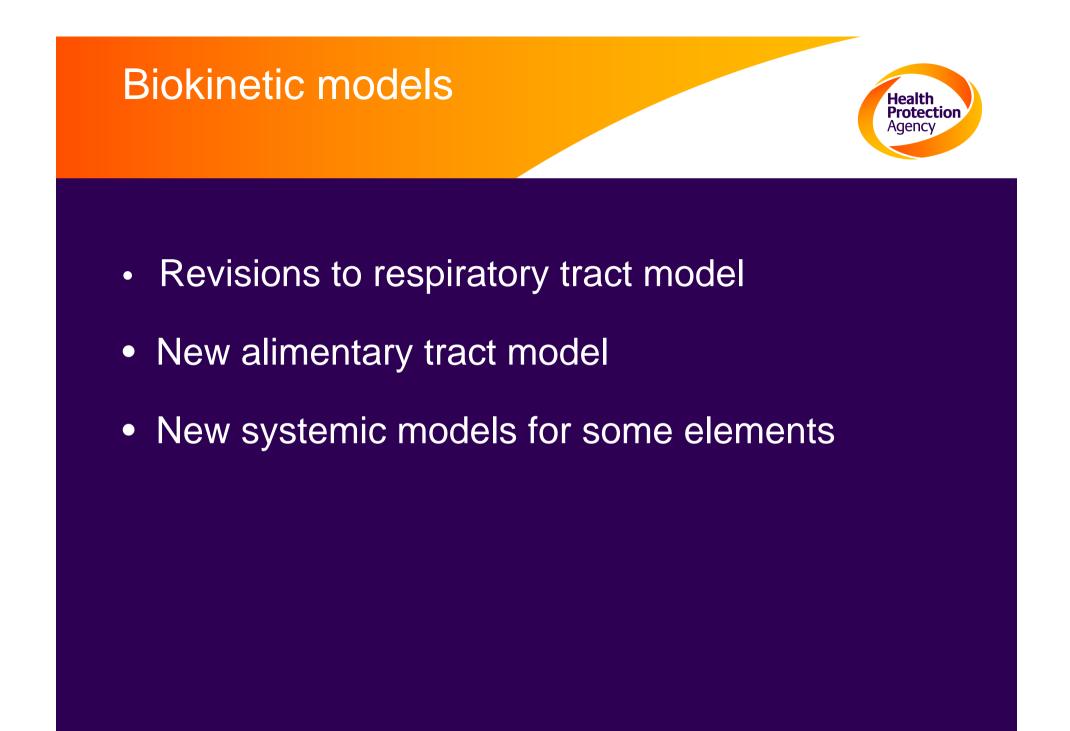




Bone dosimetry

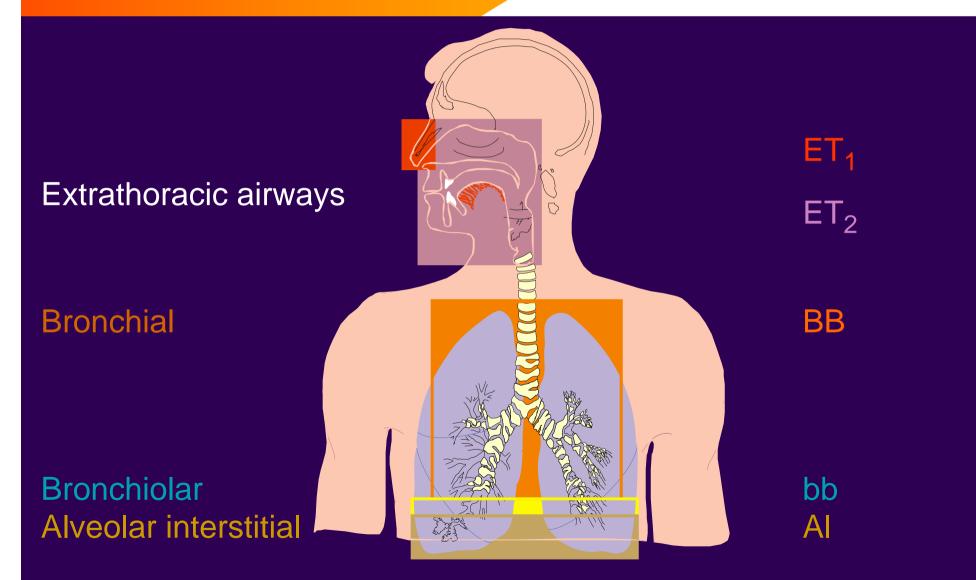


BIST (Chord-Based I	<u>nfinite Spongiosa Transport)</u>	<u>VBIST (Voxel-Based</u>	Infinite Spongiosa Transport)		
Macrostructure:		Macrostructure:			
None Infinite spongiosa		None Infinite spongiosa			
Microstructure: Chord-length distributions	Boneulae robertulae Nerrow Corres Nerrow Corres	<i>Microstructure:</i> <i>MicroCT imaging</i> 3D image of skeletal spongiosa			
RST (Voxel-Based Restricted Spongiosa Transport)		PIRT (Paired-Image Radiation Transport)			
			hage Radiation Transport		
Macrostructure: Stylized Model Representation of cortical bone cortex	Sixty Radius	Macrostructure: Ex-vivo CT imaging Contour of true skeletal structure	hage Radiation Transport		
Macrostructure: Stylized Model Representation of		<i>Macrostructure:</i> <i>Ex-vivo CT imaging</i> Contour of true	hage Radiation Transport		



Human Respiratory Tract Model, Pub 66 (1994)





Updates to HRTM



Particle transport

Nasal passage Bronchial tree (slow phase) Alveolar region

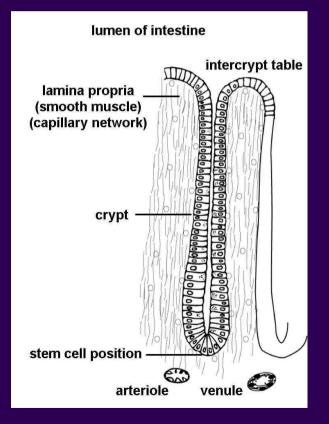
Absorption to blood

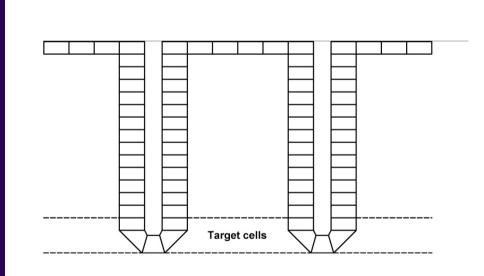
Material specific parameter values for 20-30 materials (mainly H, Th, U, Pu, Am)
Default Type F, M, S parameter values, based on experimental data
Element-specific values of rapid dissolution

Target cells in the alimentary tract



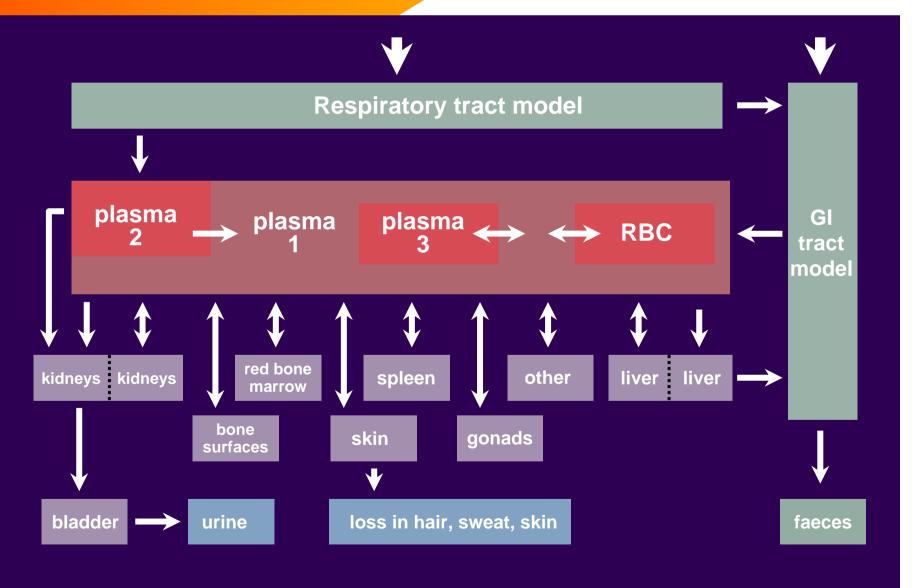
Colon





Leggett and Eckerman (2000) systemic model for Po





Research priorities



Epidemiological studies

- Occupational : Radon, Plutonium, Uranium, Tritium
- Environmental : Strontium, Iodine

Experimental studies

- > RBE, biokinetics
- Target evaluation : stem cells, microenvironment, bystander effects

Model development

- Physiologically based biokinetic models
- MRI / CT based anatomical models, macro- and micro-Uncertainties



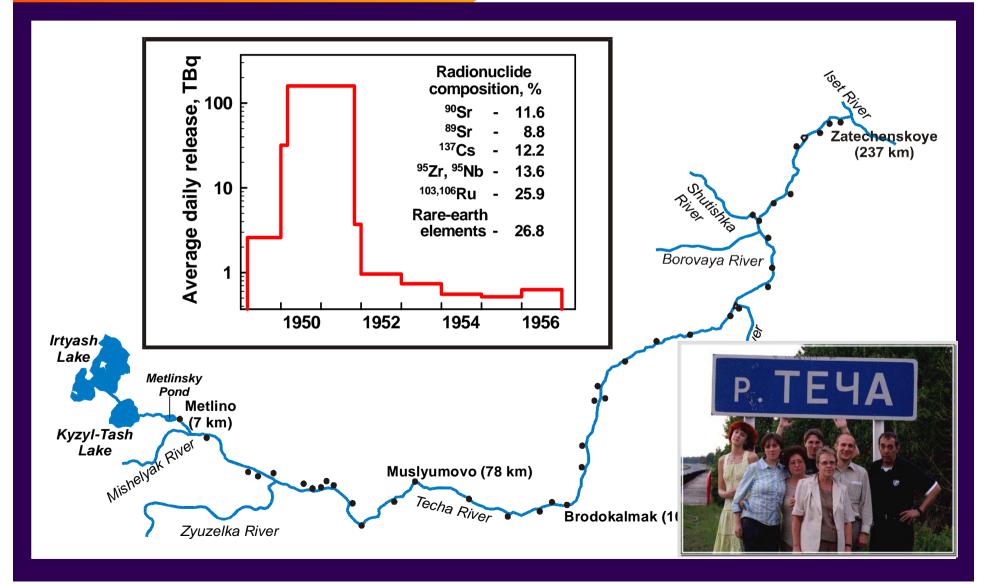
Mayak Pu production





Techa River





Mayak and Techa Cohorts



Mayak workers

- > Around 19,000 first employed between 1948 and 1972
- Lower doses to later employees
- Plutonium as well as external exposures
- Extended Techa River Cohort (ETRC)
 - Around 30,000 people born before 1950, resident at any time during 1950 – 1960
 - > Strontium as well as external exposures
 - Techa River Offspring Cohort
 - Around 24,000 people born 1950 or later, having an ETRC parent; 6,000 exposed in utero

SOLO





Supported by the EC 7th Framework Programme (Euratom) 2010 - 2013Total value 9 M \in - 5 M \in from the EC

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- : Svetlana Carr
- : Anne Dempsey

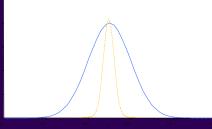
9 Contract Partners: HPA, SUBI (RF), URCRM (RF), Helmholtz Zentrum München (D), Univ Central Lancashire (UK), Danish Cancer Society, ISS (I), LUMC (NL), Univ Florida (USA)

Uncertainties in dose estimates



ICRP dose coefficients

- Reference values BUT
- > Underlying data subject to uncertainty
- Important to understand the reliability of protection
- **Epidemiological studies**
 - Uncertainties on organ / tissue doses for individuals



Implications for policy



- Evidence that current methodology of dose estimation for internal emitters provides adequate assessment of risk
- ICRP strong on model development for internal dosimetry
- ICRP protection quantities are not intended as best estimates of dose and risk BUT
- ICRP models are used for other purposes including individual risk estimation and epidemiological studies
- Future research findings will help in model development, strengthening the reliability of dose and risk estimation and of the ICRP quantities