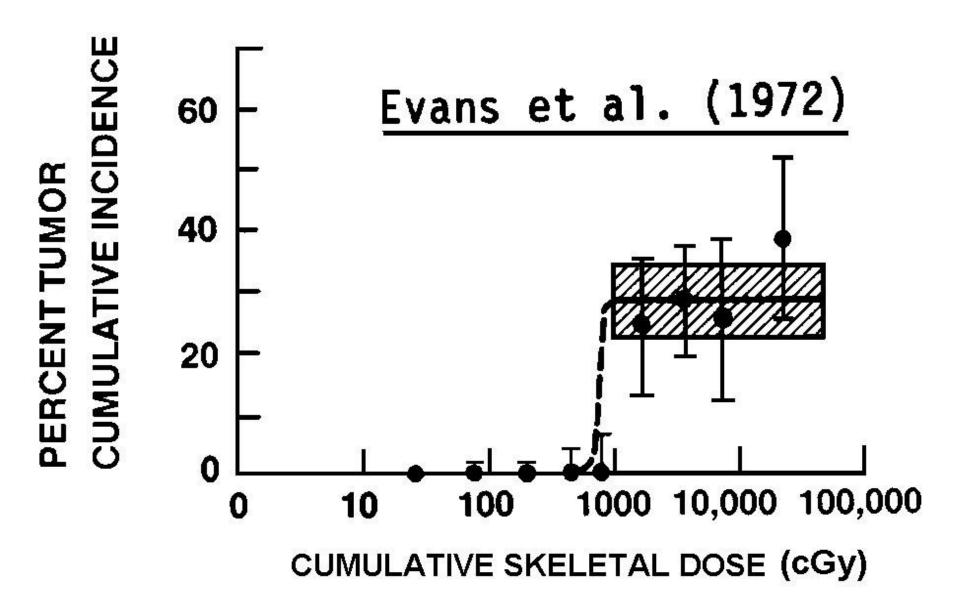
A New Look At Radiation Carcinogenesis

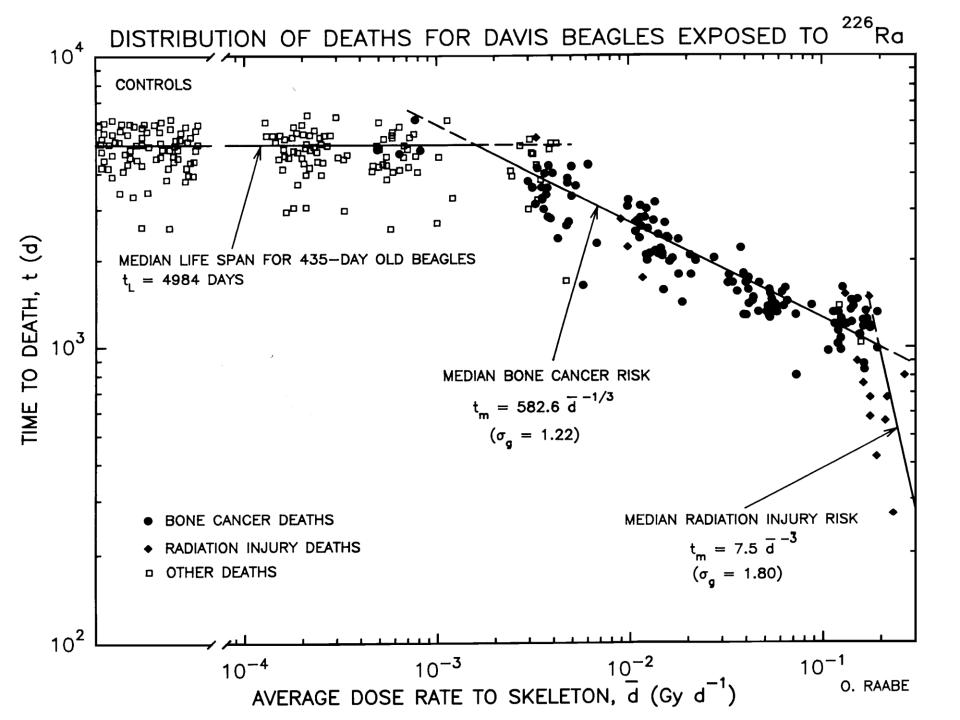
IRPA -13 May 2012

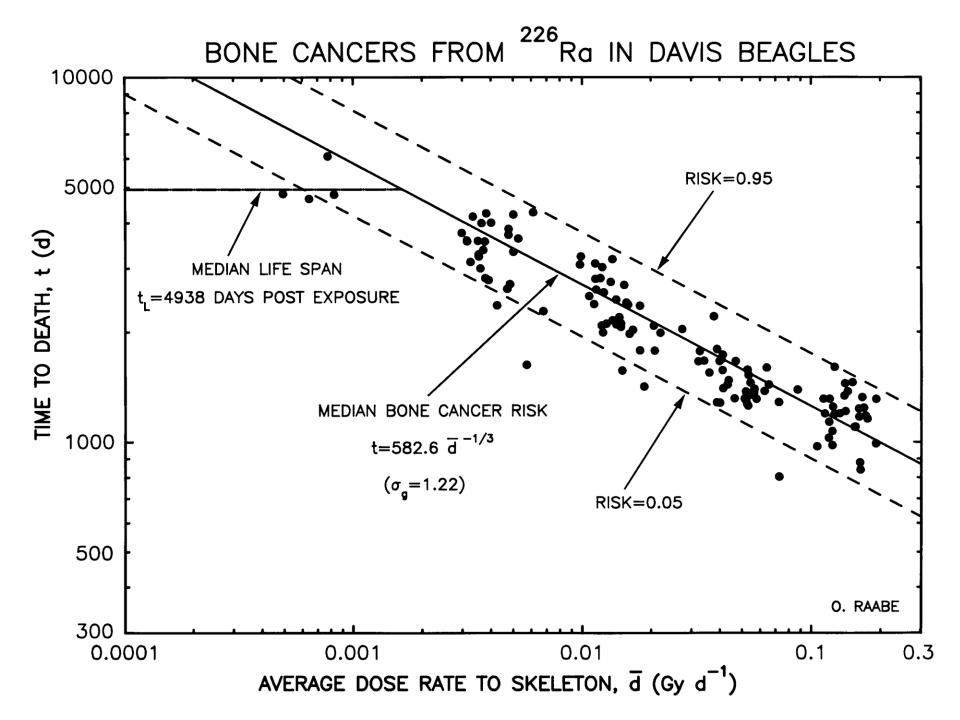
Prof. Otto G. Raabe
Center for Health & the Environment
University of California, Davis

Protracted Exposures To Ionizing Radiation

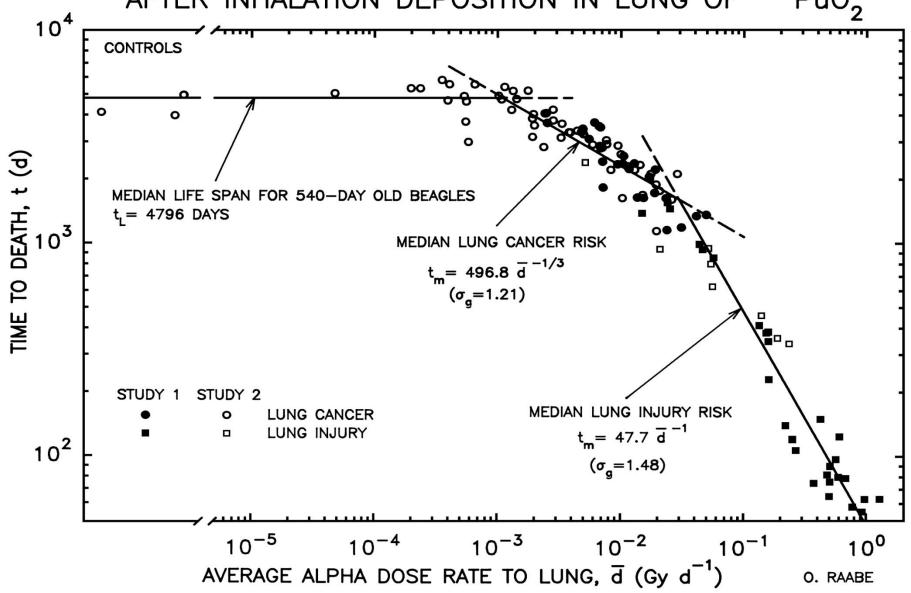


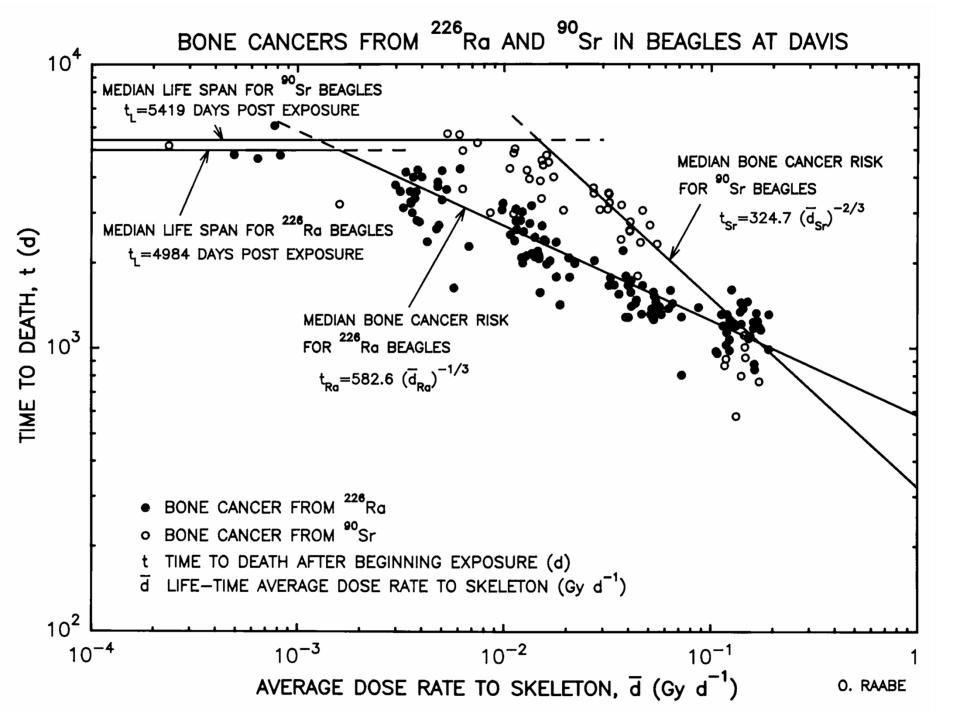


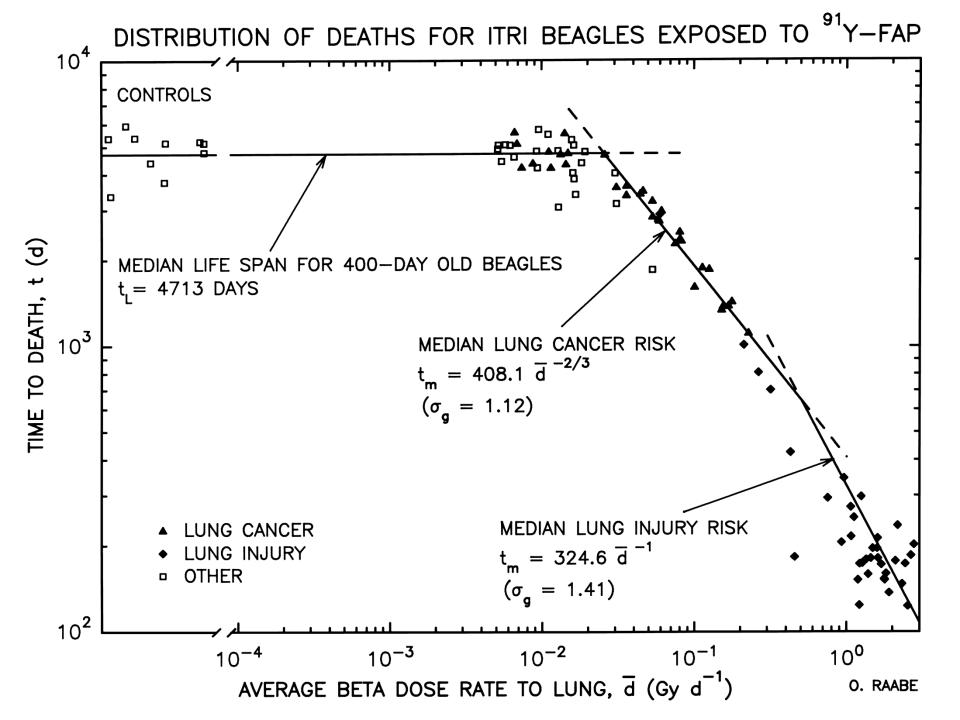


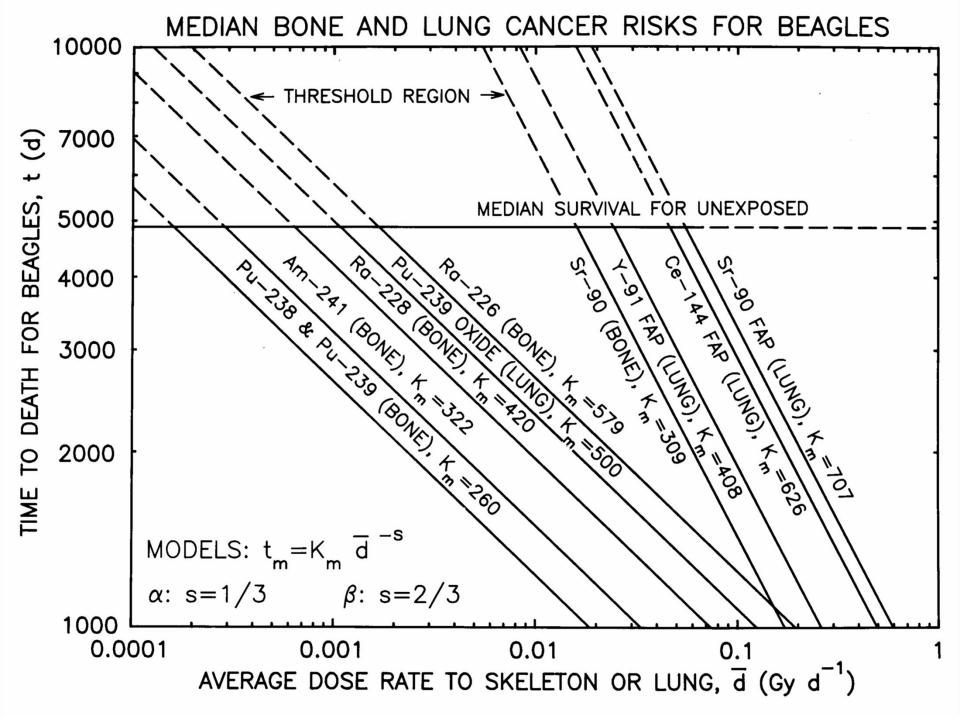


DISTRIBUTION OF DEATHS FOR PNL BEAGLES AFTER INHALATION DEPOSITION IN LUNG OF 239 PuO2

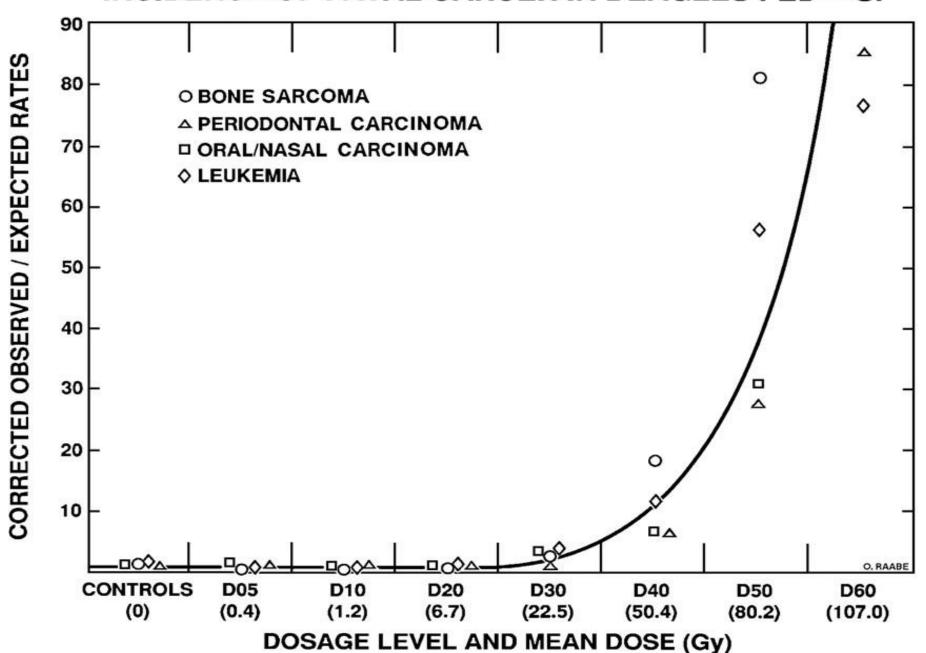








INCIDENCE OF FATAL CANCER IN BEAGLES FED 90Sr



RADIATION INDUCED CANCER

 Cancer Induction depends of lifetime average dose rate to the target organ.

 Cancer induction risk is not proportional to cumulative dose.

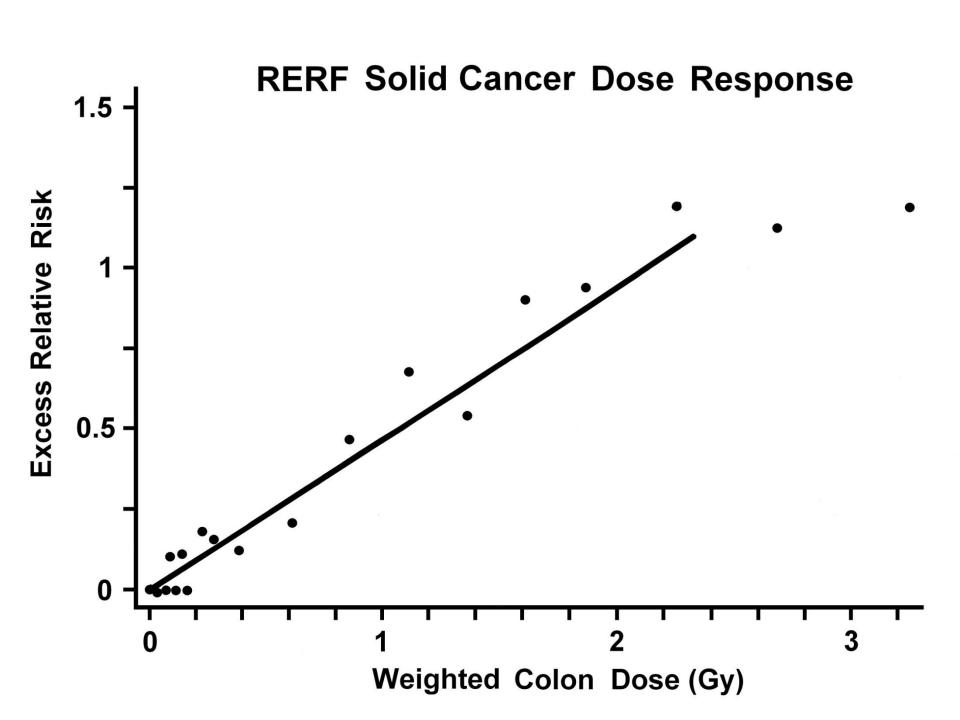
 Low dose rates yield a life span virtual threshold (cumulative doses <10 Sv).

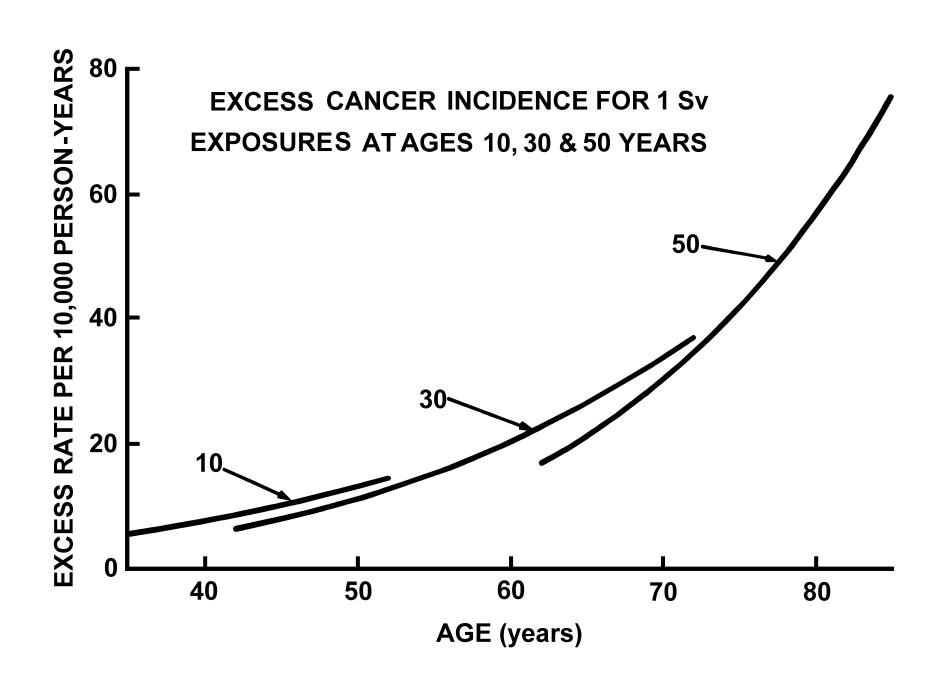
Acute Exposures To Ionizing Radiation

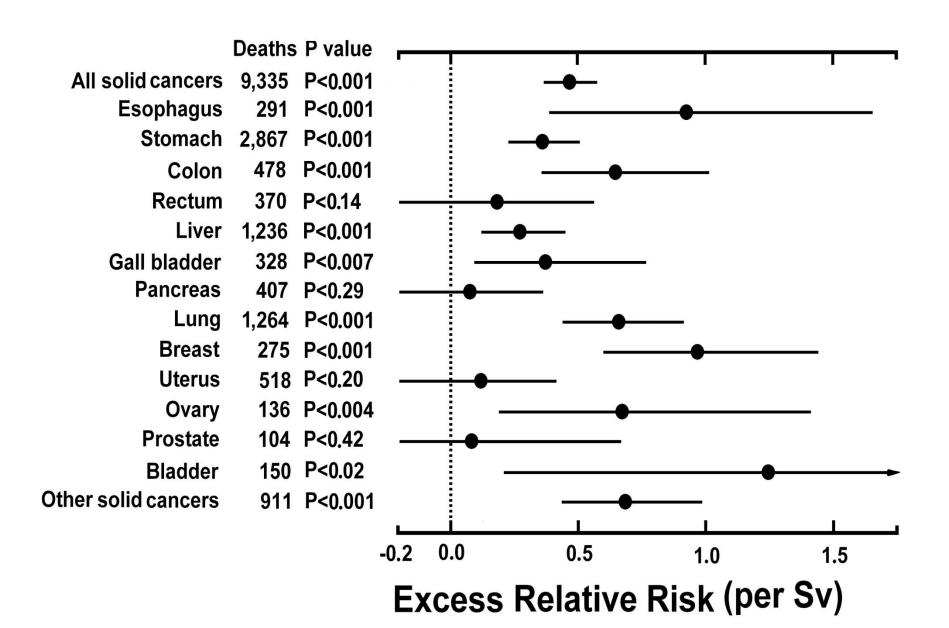
Atomic Bomb Survivor Studies

- Radiation Effects Research Foundation, RERF
- 79,972 survivors with calculated rad doses
- 44,636 survivors with doses > 0.005 Sv

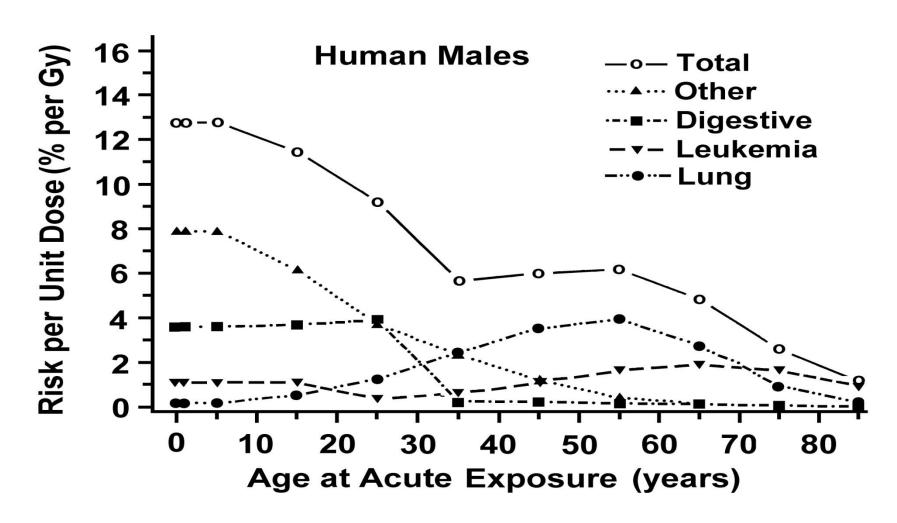
Solid Cancer Incidence in Atomic Bomb Survivors: 1958-1998, Preston, Ron, Tokuoka, Funamoto, Nishi, Soda, Mabuchi, Kodama, Radiat. Res. 168, 1-64 (2007).







- A-Bomb Survivor Risk for 1 Gy Exposure
- Age 5: 13%/80 y; Age 25: 9.5%/60 y;
- Age 45: 6.5%/40 y. ALL = 0.16% per year



CANCER INDUCTION IS NOT PROPORTIONAL TO DOSE

- A-Bomb cancer promotion data for a very high dose-rate instantaneous exposure cannot be used to estimate cancer induction risk from protracted exposures to ionizing radiation.
- Liner models to currently used by the International Commission on Radiological Protection and the U.S. Environmental Protection Agency are not valid.

References

 Raabe, OG: Concerning the Health Effects of Internally Deposited Radionuclides, Health Phys. 98: 515-536; 2010.

 Raabe, OG: Toward Improved Ionizing Radiation Safety Standards, Health Phys. 101: 84 -93; 2011.

