

The Impact of UK Government Targets for Smoking Cessation on the Effectiveness of the Radon Remediation Programme.

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Introduction

- Tobacco Smoking is the major risk factor for lung cancer, as well as a wide range of other respiratory and cardiac problems
- Radon is also a risk factor for lung cancer, second only to tobacco smoking
- Radon gas can concentrate in the built environment including domestic housing
- Radon has a variable geographic distribution
- Levels in existing homes can be reduced by fitting a sump and extract fan; in new homes by installing a radon-proof membrane as the house is being built



Radon Remediation Programmes

- Radon levels in existing houses need to be measured to find those with high radon levels
- Householders who find high levels should then fit a sump/fan system
- However, in Radon Affected Areas in UK only around 40% of householders have tested their houses; and only 15% with raised levels have remediated
- Research show that those who smoke are less likely to remediate, as are those who are younger and have larger families

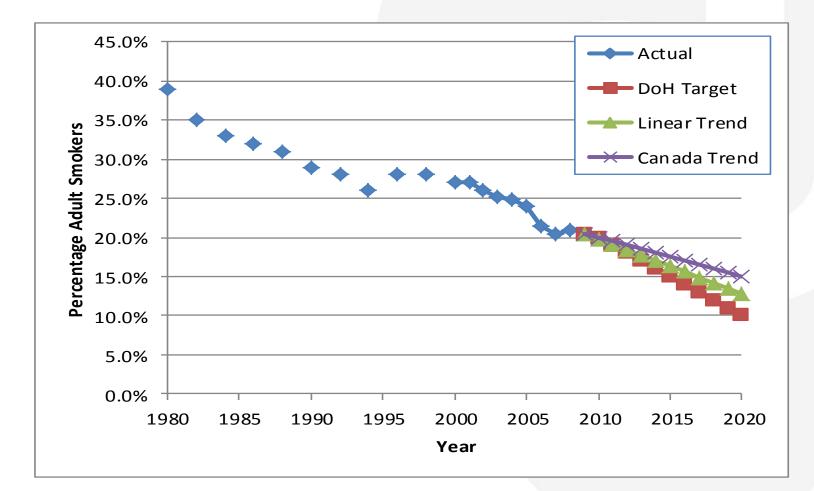


Lung Cancer Risks

- The combination of smoking and radon is sub-multiplicative
- Nearly all radon-induced cancers are in smokers
- Initiatives to reduce tobacco smoking prevalence will impact on the number of radon-induced lung cancers
- This will impact on the effectiveness of any radon remediation campaign
- The UK Government is current introducing a number of major initiatives to reduce smoking levels further



Smoking Prevalence – England





Impact on Radon Remediation Programmes

- The continuing drop in smoking will result in fewer radoninduced lung cancers being averted in these programmes
- NEW HOMES
 - Radon-proof membranes required by Building Regulations
 - Should this only in Radon Affected Areas, or throughout England and Wales ?
- EXISTING HOUSES
 - Encourage measurements and then remediation if required
 - Should this be limited to high radon areas ?

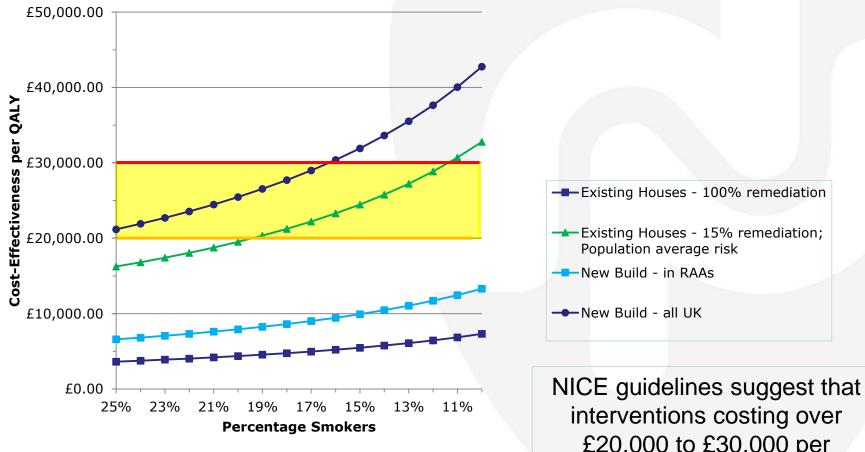


Cost-Effectiveness

- For EXISTING HOMES, costs include
 - Initial Testing of a group of houses
 - Fitting the sump/pump system if levels raised
 - Test of Levels after remediation
 - Running Costs
- For NEW HOMES, the cost is the extra cost of the radonproof membrane
- Benefits reduction in lung cancers saving 13.5 years of life on average, treatment costs



Cost- Effectiveness and Smoking Prevalence



Transforming lives, inspiring change

£20,000 to £30,000 per Quality-Adjusted Life Year (QALY) are poor value



Conclusions (1)

- The extensive initiatives to reduce smoking also have the benefit of reducing radon-induced lung cancers significantly.
- Whilst radon remediation programmes in both existing and new houses will reduce additional lung cancers, the number will fall as smoking prevalence drops, which reduces the cost-effectiveness of such programmes.
- The modest public response to radon remediation programmes in existing houses, where fewer smokers respond, reduces cost-effectiveness.
- The cost-effectiveness of radon protection in all new homes is suspect, as smoking prevalence drops.



Conclusions (2)

 There is a need for an integrated strategy to tackle smoking and radon, to acknowledge the major role that smoking cessation programmes play in reducing radon-induced lung cancers, and initiate radon remediation programmes with care to ensure that limited resources are targeted where there is greatest benefit.