

From: Betty <betty@earthlink.net>
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Docket #PRM-35-18

DOCKETED
 USNRC

Dear Ms. Vietti-Cook,

February 6, 2006 (12:01pm)

I would like to provide patient-perspective comments regarding the petition from Mr. Peter Crane to amend regulations allowing release of patients administered radioactive iodine treatment.

OFFICE OF SECRETARY
 RULEMAKINGS AND
 ADJUDICATIONS STAFF

I was diagnosed with papillary thyroid cancer in 2000 in Fresno, California. I received the standard treatment of surgery followed by radioactive iodine treatment. At that time, I was allowed to be isolated in the facility administering the treatment because I was concerned over impacts to my pets and any visitors to my home. Since then, I have moved to Sacramento, California. I have been informed that if I require further treatments, I would be required to isolate myself in my home.

While deeply concerned over the potential contamination of my home, I believe that I can successfully complete the isolation because I am a very conscientious individual with a strong sense in responsibility to prevent contamination of my fellow human beings.

Unfortunately, I don't think that all patients are as conscientious and it is not possible for medical professionals, under significant pressure to reduce the cost of medical treatments, to identify these individuals. Many of the comments that you have received are from medical professionals that interview patients and their families, carefully describe restrictions, etc. However, these interviews do not identify individuals that are determined to "do their own thing." For example, a radiation technician told me that he knew of a case where a patient signed a release saying that he would comply with the restrictions and then immediately went to work. The restrictions include immediately going home and staying away from other people for a week. While we can only hope that this example is an exception, there is no telling how many people could have been impacted by this individual who went to work, and could have sat in an airplane or a movie theater next to you and me.

With all due respect to the medical professionals that provided comments, I think they may be exceptionally diligent in making sure patients and family members are aware of the restrictions and using anti-emetics prior to administering the radioactive iodine. Each doctor/medical facility has its own rules for how diligently he/it determines that the restrictions are understood and will be followed and whether anti-nausea medication is used. Obviously, these measures are not required under the NRC regulations.

Interestingly, since 1997, I understand that European countries have increased the period of isolation for patients undergoing radioactive iodine treatment.

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I think that most Americans are exposed to a large quantity of radiation and some might say "what's a little more ?" when referring to the amount of inadvertent exposure from a hot patient. I've been told that the amount of exposure is equivalent to a x-ray. Since x-rays are so common, I guess that this is supposed to be comforting. However, every x-ray has a cancer risk that is why x-rays are usually used when there is a benefit to the patient. So, I don't think it's comforting to think that someone has been exposed to a x-ray while receiving no benefit from the exposure.

I hope that the incremental risk to a non-target population (e.g. the family, unsuspecting members of the public in stores and workplaces, etc) is properly considered by the NRC in developing and promulgating its regulations.

Thank you for allowing me to comment on this issue.

Betty Yee
Sacramento, CA

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