The Evolution of Radiation Protection:

From Erythema to Risks of heritable damage to Risk of cancer to?

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1915

Guidance to Physicians from German and British Societies

Why 1915?

- Roentgen, Becquerel, Curie
- Wide-spread application
- Concern about electrotherapists and other "unqualified" practitioners

Guidance

- Requires "a qualified medical practitioner experienced in x-ray work"
- X-ray tubes to be enclosed
- Tests of opacity on commercial shields
- Don't use the hand to test quality or hardness

1921

Detailed Recommendations from the British X-Ray and Radium Protection Committee

Why 1921?

Collidge Hot Cathode X-Ray Tube

Radium commerce

WW I Battlefield experience and military procurement requirements

1925

Erythema Limit ICRU Formed

Recommendations

- Codified the 1915 guidance
- Incorporated radium protection
- Introduced working conditions
- Measurements and standards organizations addressed

Erythema Limit

- Mutscheller: 1/100 erythema dose in 30 days
- Sievert: 1/10 erythema dose in 1 year
- Threshold concept

ICRU

Formed by the International Congress of Radiology (ICR)

X-Ray Units Committee

Physical measurement required

1928

"Roentgen" Defined ICRP Formed

Why 1928?

Roentgen": Proposed by the "Units" Committee in 1925

Adopted by the ICR in 1928

"the exposure when the x-ray or gamma-ray field produces 1 e.s.u. of negative charge in 0.00129 gram of air"

ICRP

ICR formed the International Advisory Committee on X-Ray and Radium Protection (ICRP)

Laurie Taylor was US representative

1929

NCRP Formed

Why 1929?

ICRP suggested in 1928 that each representative form a national group of advisors

Taylor asked presidents of relevant Medical Societies such as the American Roentgen Ray Society, and representatives of x-ray equipment manufacturers for advice

NCRP cont.

US Committee on X-Ray and Radium Protection was approved

Each society to name a radiologist and a physicist

Equipment manufacturers to elect two representatives as members

1933-1934

NCRP0.1 R/dayICRP0.2 R/day

Why 1933–1934?

- Application of the Roentgen to the erythema dose
- Erythema "dose" ~600 R
- 600 R divided by 30 day divided by 100 = 0.2 R/day

Why 0.1 for NCRP?

- Taylor suggested 0.1 R/day based on uncertainty
- Failla endorsed the 0.1 R/day but said radium work would require 5 R/day for the fingers
- Both suggestions accepted

1941

NCRP 0.1 µg Radium Body Burden

Why 1941?

Excessive radium use by the public via patent medicines

Radium dial painters exhibit damage

Robley Evans begins radium study in 1932

Robley Evans Data

27 cases reviewed
 7 cases <0.5 μg — no effect
 20 cases 1.2 - 23 μg — various degrees of injury

NCRP Committee

 \Box 0.1 µg accepted

"We would feel confident if our wife or daughter were the subject"

NBS Handbook No. 27, 1941

Merrill Eisenbud Observation

0.1 R/day and 0.1 µg of radium were available before Pearl Harbor, just after the discovery of plutonium and at the start of the Manhattan Project

1949–1954

ICRP and NCRP Introduce a New Set of Weekly Dose Limits

Why 1949-1954?

- Tripartite conferences (U.S., Canada, U.K.) evaluated all the information gained from the universities and federal labs during the war
- Meetings: 1949 1952

Tripartite Contributions

- Effects of dose and dose rate
- Depth dose
- RBE, as applied to high-LET radiation
- Radionuclide metabolism and dosimetry
- Reference Man

Weekly Limits

- 300 mR blood forming organs lens, gonads
- 600 mR skin
- 300 600 mR other organs
- □ 1,500 mR extremities (x rays)
- □ 1/10 these values for minors

NCRP Report 17 (1954

Permissible Dose "---the dose of ionizing radiation that, in the light of present knowledge, is not expected to cause appreciable bodily injury to a person at any time during his lifetime"

1957 - 1958

ICRP and NCRP Introduce New Age-Related Limits

Why 1957-1958?

- Weapons testing fallout
- Bravo Weapons Test
- Vocal scientists
- Public concern



Eisenbud on Lucky Dragon



Results of Public Concern

- National Academy of Science Biological Effects of Atomic Radiation (BEAR) Committee
- UK Medical Research Council (MRC) Committee
- United Nations Scientific Committee on the Effects of Atomic Radiation (UNSCEAR)

BEAR Recommendations

- Worker Limits
 50 R to age 30
 50 R more to age 40
- Population Limit 10 R to age 30 — all exposure minus background

MRC Recommendations

- Worker Limits
 50 R to age 30
 200 R lifetime
- Population Limit 2 x natural background

Hereditary Effects!

Genetically significant dose (GSD)

Leukemia known — not quantifiable

1957-1958 Limits

- 5 x (age 18) rem/year, 3 rem/13 weeks — head, trunk, active blood forming organs, lens, and gonads
- 10 x (age 18) rem/year,
 6 rem/13 weeks for skin
- 75 rem/year, 25 rem/13 weeks for the extremities

1957-1958 Limits Cont.

- 15 rem for internal organs
- Population limit 5 rem/30 years (170 mrem/year)
- □ Small groups 0.5 rem/year